GS1 Healthcare Provider Advisory Council Webinar

Patient identification at Leeds Teaching Hospitals NHS Trust, UK

Mr David Berridge, Deputy Chief Medical Officer, Medical Director – Operations, Consultant Vascular Surgeon

June 14th, 2018
Welcome and thank you for attending!

• Welcome to our June 2018 webinar.
• Thank you to our guest speaker – Mr David Berridge, Deputy Chief Medical Officer, Medical Director – Operations, Consultant Vascular Surgeon from Leeds Teaching Hospital, UK. And a thank you to Zebra.
• Some housekeeping for today:
  - All attendees will be on mute
  - If you have questions during the presentation, please type them into the questions area and these will be monitored then answered at the end of the call
• After the webinar:
  - Within a week, the recording will be posted to: http://www.gs1.org/healthcare/hpac_webinars
  - All previous webinars are also posted to this location, so please feel free to use this resource and share the link
The GS1 Healthcare Provider Advisory Council (HPAC)

**Focus is on thought leaders and adopters of GS1 Healthcare Standards from the global clinical provider environment. Their final goal is to improve patient safety, cost efficiency and staff productivity through implementation of GS1 standards.**

- A forum for sharing and discussion
  - About the practical realities of implementation of GS1 Standards in the care giving environment in regards to the impact on clinical care and patient interaction

- Identification of projects and case studies
  - That support the adoption of GS1 Standards in healthcare providers and retail pharmacies
  - For publication, presentation and sharing

- A source of expertise and advice
  - To those involved in GS1 standards development, the wider Healthcare stakeholder community and senior executives/decision-makers to gain their buy-in and support for implementation of GS1 Standards
## HPAC Activities

### Webinars

- Monthly webinars open to all stakeholders interested in learning about GS1 standards implementation in the care giving environment.
- [http://www.gs1.org/healthcare/hpac_webinars](http://www.gs1.org/healthcare/hpac_webinars)

### Awards

- Twice per year
- Provider Best Case Study Award
- Provider Recognition Award
- The prize is travel / accommodation to attend the next GS1 Healthcare conference
- [http://www.gs1.org/healthcare/hpac](http://www.gs1.org/healthcare/hpac)

*GS1 Healthcare also holds two global conferences per year. The next conference will be in Bangkok, Thailand from October 30st November 1st, 2018, with significant Healthcare Provider participation on the agenda.*
David Berridge
Deputy Chief Medical Officer
Medical Director – Operations
Consultant Vascular Surgeon
About Us
About Leeds Teaching Hospitals NHS Trust

- Over 1,100,000 Outpatients
- Over 263,000 A&E Attendances
- Over 117,000 Inpatients
- Over 108,000 Day Cases
- 9,844 Babies born

- Over 17,000 staff
- Turnover £1.17 billion
About Leeds Teaching Hospitals NHS Trust

175 Buildings
Covering 574,234m² gross internal area which houses

114 wards

135 Departments & Clinical areas

And 69 Operating Theatres

Providing 120 specialist services
82 Adult Specialities
28 Paediatric Specialities
5 Pathology Services
5 Medicines Management and Pharmacy Services

Bar coding
22,017 Global Location Numbers
Specialist Services
Robotic Surgery
Vision

We want the ability to track:

• Our patients
• The products
• The place
• Our involved staff
• The procedure
• The surgical trays & instruments
Patient Safety

- Making sure you have the Right Patient

- Making sure you (always) know What Product was used with Which Patient, When

- Making sure you have What You Need, When You Need it and Where You Need it

- Real time tracking of patients and bed state management 24/7

- Product recall

- Preventing the use of expired stock
Hierarchy of Waste in Supply Chain

“Any activity that adds **COST** but no **VALUE** to the customer”

- **Inventory** – How much, handling, capital employed, stock take costs, insurance
- **Defects** – obsolescence from product or technology changes, out of date, incorrectly opened goods, damaged goods, incorrect orders
- **Motion & Transport** – walking and delivering, expediting, chasing, delivery charges and urgent deliveries
- **Over Processing:**
  - **Purchase orders and Invoices** – How many, cost, average value per, frequency
  - **Paperwork** – Delivery notes, requisitions, pick lists and NJR data collection
  - **Admin** – time to place orders, order approval, stock management, stock take costs, receipting, goods inwards checking
Board Level Support
100 Day Plan
Digital Ward & Digital Pathway

Identify areas by consulting with CSUs
Invitation out to CSUs, with an outline of ambition & requirements to become the exemplar Digital Ward & Digital Clinical Pathway
Engage & assess the current state, identify requirements, develop plan with team, identify resource within informatics to support/exploit existing PM+ functionality and core clinical systems fully by July.
Our work
Patient identification

All our wristbands are GS1 compliant
Patient ID

- Wristbands Printers in situ across all 7 hospitals in 140 clinical areas
- 163 wristband printers rolled out
- 100% of all inpatients have Scan4Safety wristband
- New neonates wristbands developed and in place
- New softer more flexible wristbands introduced for patient comfort
- Saving £8,000 pa on new wristbands.
Out of Date Stock from initial visit
Stock Cupboard

Before

Product

After
Inventory Management
Patient Tracking

First of the demonstrator sites to label down to bed space level and start unlocking the potential

<table>
<thead>
<tr>
<th>Patient</th>
<th>Room</th>
<th>Consultant</th>
<th>Specialty</th>
<th>On Ward</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rump</td>
<td>3</td>
<td>AA</td>
<td>General Medicine</td>
<td>15</td>
<td>This is next to last carrel.</td>
</tr>
<tr>
<td>Henry</td>
<td>4</td>
<td>AOUJ</td>
<td>Urology</td>
<td>6d</td>
<td></td>
</tr>
<tr>
<td>Fenwick</td>
<td>7</td>
<td>MRM</td>
<td>Anaesthesiology</td>
<td>3d</td>
<td></td>
</tr>
<tr>
<td>Melia</td>
<td>5</td>
<td>AOUJ</td>
<td>Urology</td>
<td>6d</td>
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</tr>
<tr>
<td>George</td>
<td>6</td>
<td>AA</td>
<td>General Medicine</td>
<td>21d</td>
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<tr>
<td>Peter</td>
<td>7</td>
<td>MRM</td>
<td>Anaesthesiology</td>
<td>19d</td>
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<td>Adriano</td>
<td>8</td>
<td>AOUJ</td>
<td>Urology</td>
<td>19d</td>
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</tr>
<tr>
<td>James</td>
<td>9</td>
<td>JHS</td>
<td>General Medicine</td>
<td>19d</td>
<td></td>
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</tbody>
</table>

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**4 Patient 4 Place**
Patient Tracking
Theatre Tray Rationalisation Programme removed

£94,064.49 per annum of sterilisation costs.
Ophthalmology Product Recall Test

Nursing Time (Old System)
Minimum of £173 and 8.33 hours

Inventory Time (New System)
Maximum of £9 and 35 minutes
Benefits realised PCI Procedures

Leeds Carried out 4,180 PCI Procedures
September 2016 – August 2017

<table>
<thead>
<tr>
<th>Process</th>
<th>Mean Time Taken</th>
<th>Mean Time Released</th>
<th>Annual Effect of time Released</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer Scanning of Products</td>
<td>6 min 23 sec</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scan4Safety Handheld</td>
<td>1 min 53 sec</td>
<td>4 min 30 sec</td>
<td>42 Days</td>
</tr>
</tbody>
</table>

Monetary Equivalent at midpoint of Band 5 = £4,095
Perfect Week – identifying potential

- Portering Service spent 12.82 man days on wasted tasks with an annual value of £39,698.41 over the 07:00 – 23:00 on seven days
- Implementing Scan4Safety could return 3.14 man days of the above time over a year this would return £9,723
## Benefits realised

<table>
<thead>
<tr>
<th>Area</th>
<th>Benefit</th>
</tr>
</thead>
<tbody>
<tr>
<td>Product Recall Staff Time</td>
<td>£84,411</td>
</tr>
<tr>
<td>Inventory Reduction</td>
<td>£1,781,634</td>
</tr>
<tr>
<td>Returned Stock</td>
<td>£159,082</td>
</tr>
<tr>
<td>Efficiency Benefits</td>
<td>£157,645</td>
</tr>
<tr>
<td>Tray Rationalisation</td>
<td>£133,564</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>£2,316,336</strong></td>
</tr>
</tbody>
</table>
SCAN4SAFETY

Our future
The future
Right Patient
Setting standards to make sure we always have the right patient and know what product was used with which patient, when.

Right Product
Setting standards to make sure our staff have what they need, when they need it.

Right Place
Setting standards to make sure that patients and products are in the right place.

Right Process
Setting standards and implementing common ways of working to deliver better and more easily repeatable patient care.

Every time!

@LTHScan4Safety (#BetterCareAsStandard)
lth.scan4safety@nhs.net
Thank-you for your attention

The Leeds way...
GS1 Healthcare Webinar
Questions and contact details

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