



The Global Language of Business

GS1 Healthcare Provider Advisory Council Webinar

How Scan4Safety helps to support patient
safety - An outstanding experience to
every patient, Salisbury Hospitals journey

Rob Drag and Lorna Wilkinson
May 10th, 2017



Welcome and thank you for attending!



- Welcome to our May 2017 webinar. Thank you to our guest speakers – Rob Drag, Scan4Safety Programme manager and Lorna Wilkinson, Director of Nursing from Salisbury NHS Foundation Trust, UK
- 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**

**Identification of
projects and case
studies**

**A source of expertise
and advice**

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

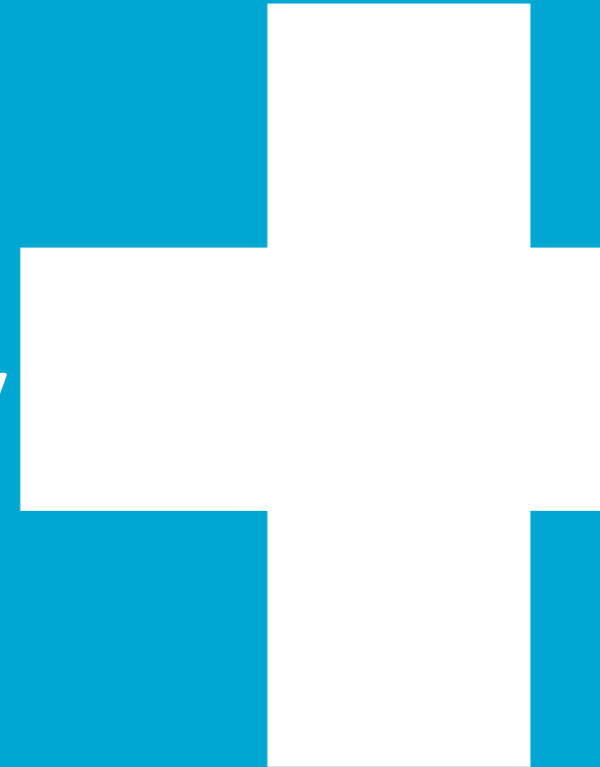
- Monthly webinars open to all stakeholders interested in learning about GS1 standards implementation in the care giving environment.
- http://www.gs1.org/healthcare/hpac_webinars

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>

GS1 Healthcare also holds two global conferences per year. The next conference will be in Chicago from October 17-19, 2017, with significant Healthcare Provider participation on the agenda.

Scan4Safety Supporting Patient Safety – Our Journey



Welcome



**Rob Drag, Scan4Safety Programme
Manager, Salisbury NHS Foundation Trust, UK**



**Lorna Wilkinson, Director of Nursing,
Salisbury NHS Foundation Trust, UK**

Scan4Safety Objectives



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.

Background – barcoding in retail

- Stock contamination identified
- Traceability
- Speed



Background – not currently in healthcare



2010 MHRA safety alert: PIP silicone implants

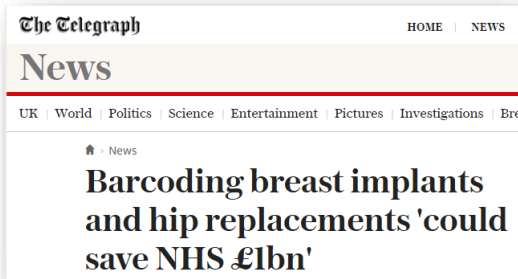


Barcoding has transformed the retail sector. We believe it can do the same for the NHS.

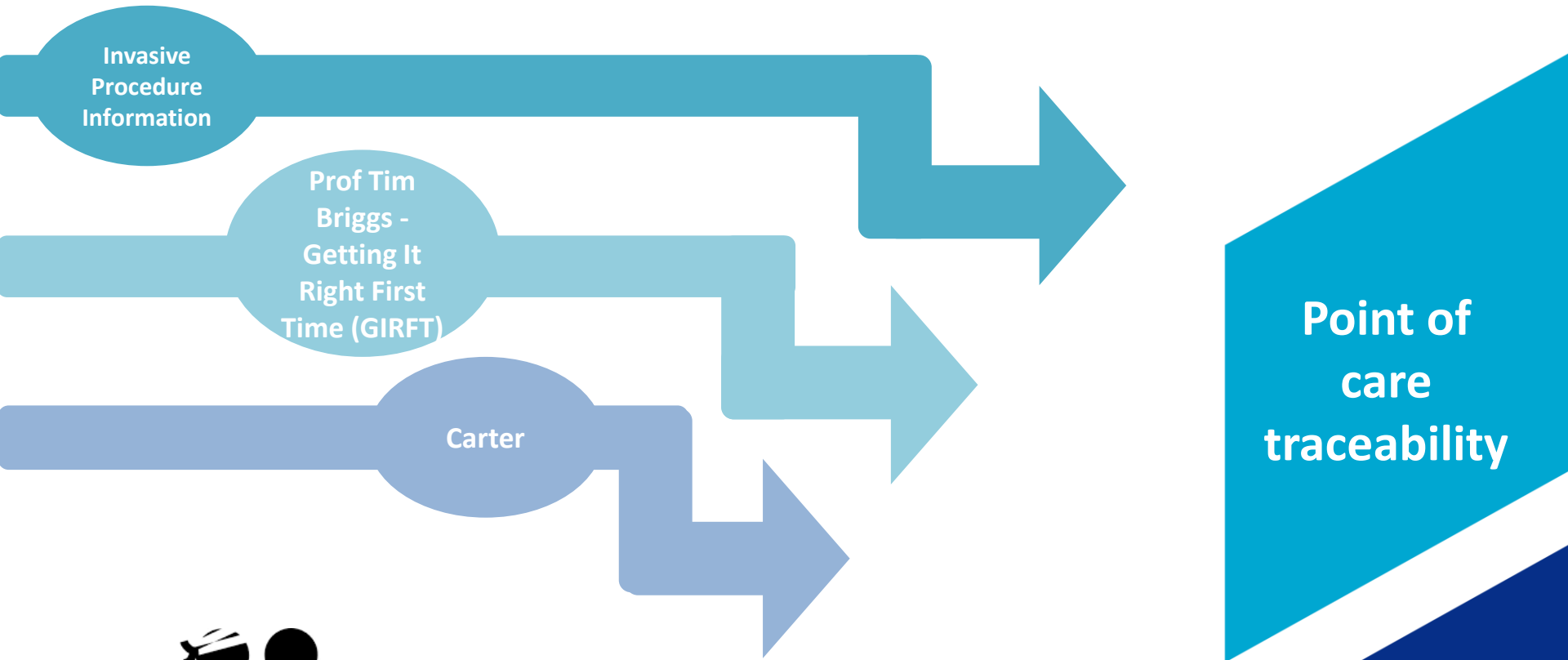
“The introduction of GS1 standards will allow every NHS hospital in England to save on average up to £3 million each year while improving patient care.”

Carter Report, February 2016

Media Coverage

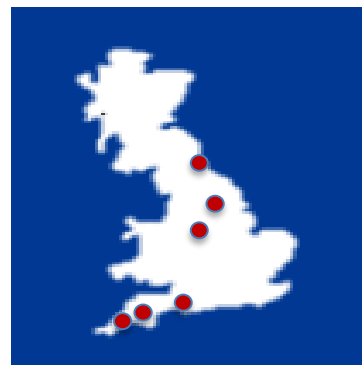


Other drivers for change



Six Demonstrator sites

TRUST
DERBY TEACHING HOSPITALS NHS FOUNDATION TRUST
LEEDS TEACHING HOSPITALS NHS TRUST
NORTH TEES AND HARTLEPOOL NHS FOUNDATION TRUST
PLYMOUTH HOSPITALS NHS TRUST
ROYAL CORNWALL HOSPITALS NHS TRUST
SALISBURY NHS FOUNDATION TRUST



About Salisbury

Salisbury **NHS**
NHS Foundation Trust



Maternity &
Childrens
Services



Diagnostics

Emergency
Department



Surgery

- Local area
- Regional area
- Spinal special area

Medicine



Genetics



Burns &
Plastic
Surgery



Cleft Lip & Palate



Importance of engagement



Why is clinical engagement so important?

“Scan4Safety isn’t another large-scale system change, this is about making modifications to our existing processes and systems to ensure they speak a common language – GS1 standards” Rob Webb, Director of Procurement and Commercial Services, Salisbury NHS Foundation Trust and Great Western Hospitals

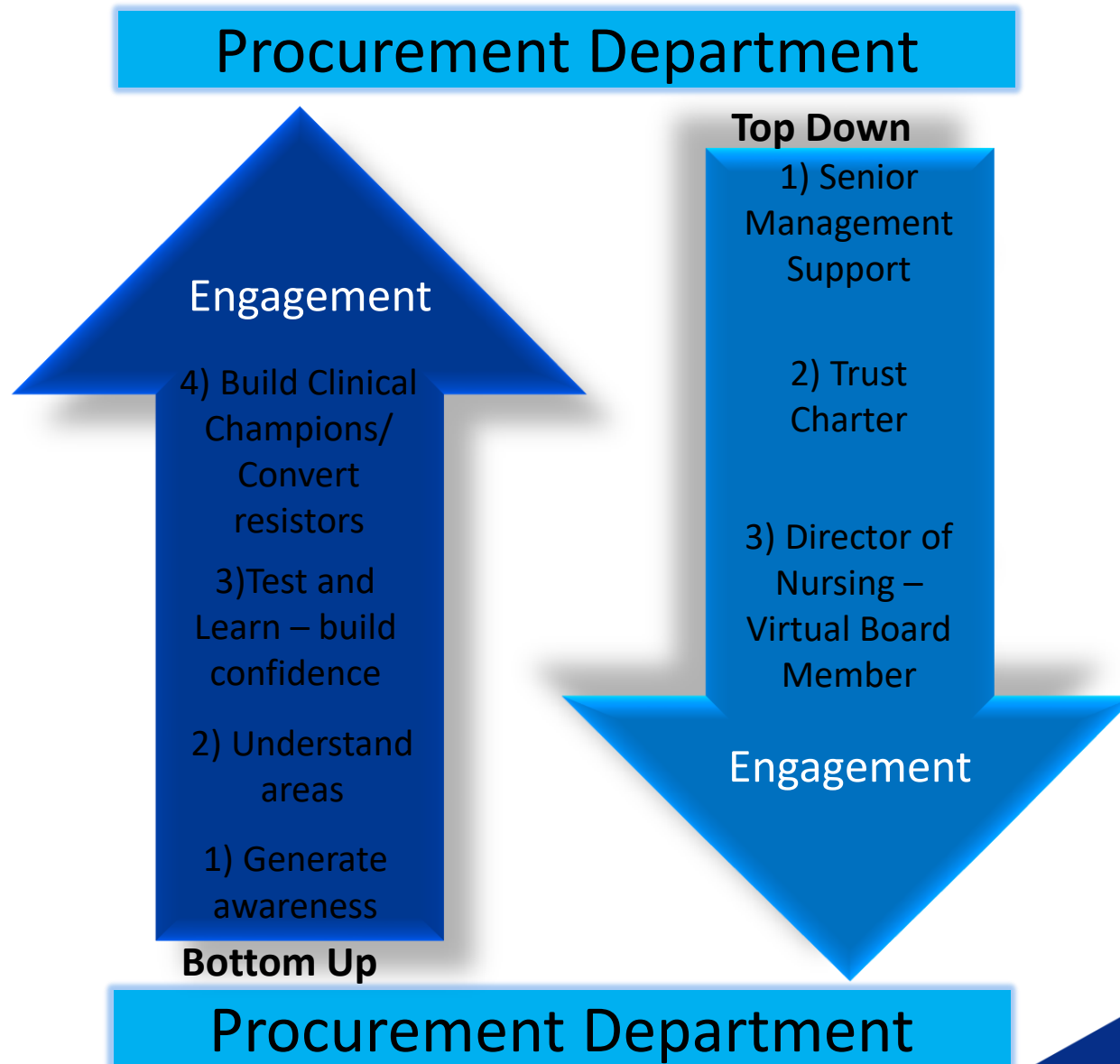
- People ensure change is successful.
- People only change their behaviour if they’re engaged.

What's in a name?

- NHS eProcurement Strategy
- GS1 and PEPPOL programme

SCAN  SAFETY

Our approach



Our approach

GS1 and PEPPOL Charter

Laurence Arnold
Director of Corporate Development

Lorna Wilkinson
Director of Nursing

Malcolm Cassells
Director of Finance & Procurement

Christine Blanshard
Medical Director

Andy Hyett
Chief Operating Officer

Alison Kingscott
Director of HR & Organisation Development

Nick Marsden
Chairman

Peter Hill
Chief Executive

Dr Lydia Brown
Non-Executive Vice Chairman

Andrew Freemantle
Non-Executive Director

Ian Downie
Non-Executive Director

Paul Kerhp
Non-Executive Director

Stephen Long
Non-Executive Director

The Rev Dame Sarah Mullally
Non-Executive Director

We, the Board of Salisbury NHS Foundation Trust approved the OBC at the 2 November 2015 board meeting and,

fully support our application to become a GS1 & PEPPOL demonstrator site

We firmly believe that GS1 and PEPPOL will contribute significantly to the Foundation Trust's strategy of Choice, Care, Staff and Value in patient safety, patient flow, productivity and financial stability and that, as a demonstrator site, we will be able to make a significant contribution to the adoption and support of the standards throughout the NHS.

We are fully committed to the programme and will provide active input into our own implementation, as we have for the OBC, and to promoting the benefits of GS1 and PEPPOL regionally and nationally.

Patient-Centred & Safe Professional Responsive Friendly

Basic engagement principles

Keep it simple, avoid technical jargon



GLNs
GSRNs
GTINs
Datapools
Use Cases
PEPPOL
Core Enablers
4 Corner
Model
GDSN



Traceability
Patient Safety
Standards
Common ways
of working
Patient
Product
Place
Process

Basic engagement principles

Reinforce the message

Messages need to be repeated 3-6 times before they are heard.

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Basic engagement principles

Personalise the message

***How will I benefit
from this change?***

What hooked me in



Patient Safety



Making sure we have
the **right** patient



Product Tracking/Product Recall

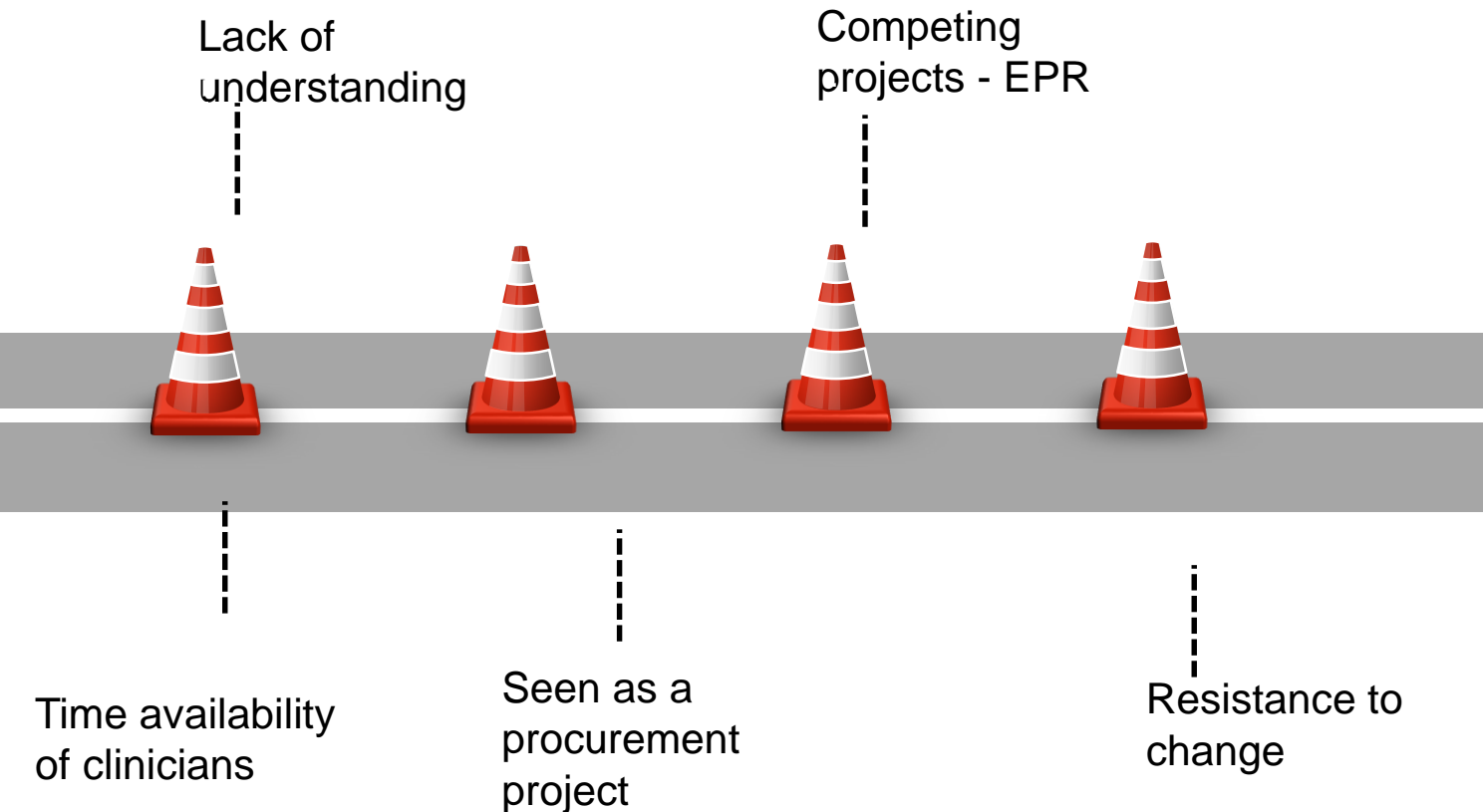


Making sure we know
what was used with
which patient, **when**

What hooked me in



Barriers to engagement

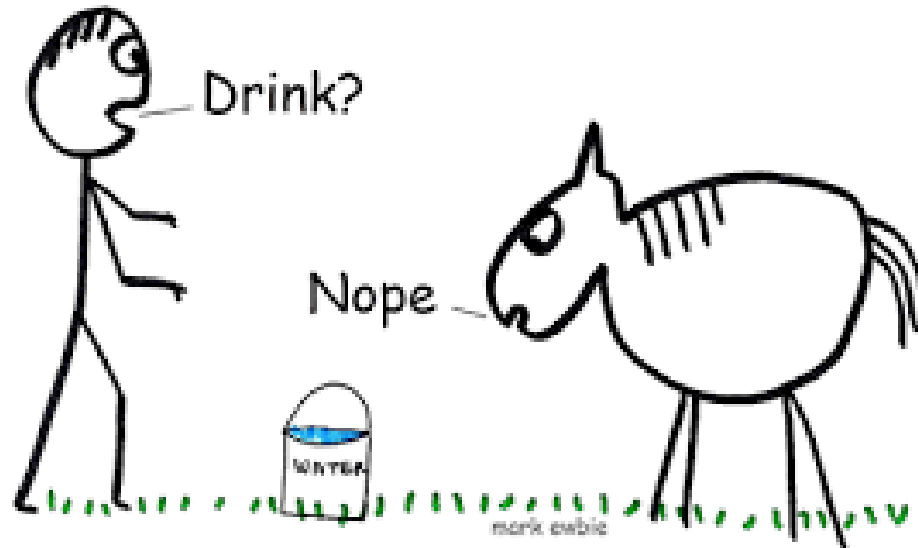


Credibility - Use the resources available

- Videos
- Website www.scan4safety.nhs.uk
- Benefits figures
- Case studies
- Facts and figures
- Peer testimonials
- DH Workspace



Converting resistors



- Face-to-face engagement
- Credible, factual evidence – hard to dispute
- Appeal to their competitive side!

Success Stories

- Orthopaedic Consultant resistant to scanning. *'My team always check'*
- Challenging trend towards use of highly expensive product. *Presented with the data, clinicians challenged their own practices.*
- Consultants now proactively seeking meetings with Procurement to discuss data.

North Tees – Champion Programme

There are now **126** multidisciplinary Clinical Champions across the Trust:

- To be knowledgeable about the programme
- Attend bespoke training sessions
- Act as a resource/advocate within their departments
- Work closely with project team members on the continuous review of the success of the training programme
- Rollout awareness and point of care training
- Troubleshooting, sharing lessons learnt and experience with other Clinical Champions and project leads



Making sure we have
the **right** patient

Where we started from

What is Positive Patient Identification?

- Maximising patient safety by implementing wristband scanning functionality

Patient wristband compliance

- Prior to 2016 wristbands were GS1 compliant. Following launch of New Electronic Patient record in October 16, wristbands no longer compliant.

Scanning capability

- AIDC device supported systems in Trust identified:
 - POET (patient observations)
 - Blood Tracking

Both used the MIO handheld device, but no scanning functionality on these.

- BM Testing

Scanning functionality, linear barcodes only



Our approach

Safe Care Workshops

- Nursing representation, and Systems Leads

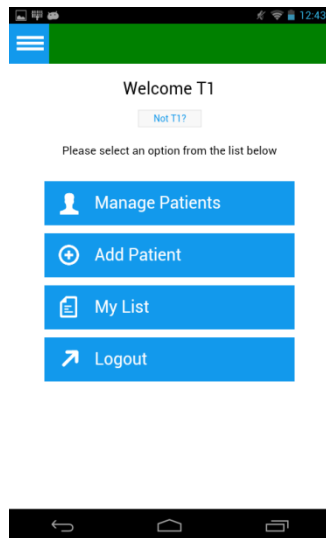
Roll-out plan

- Areas prioritised:
 - Patient observations
 - Blood products
 - BM testing
 - Next areas – Catheters and Cannulae
- Scanning functionality enabled and tested.
- Two exemplar wards selected. Phased roll-out approach.
- Wristband audit completed prior to full roll-out, providing key learnings.
- Testing of new wristband from CSC.

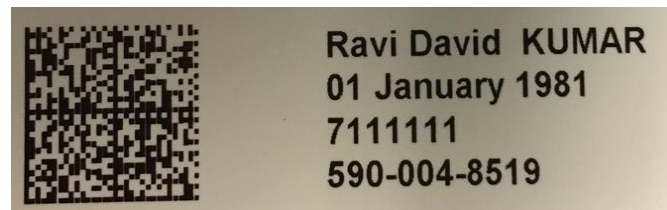


Our approach - demo

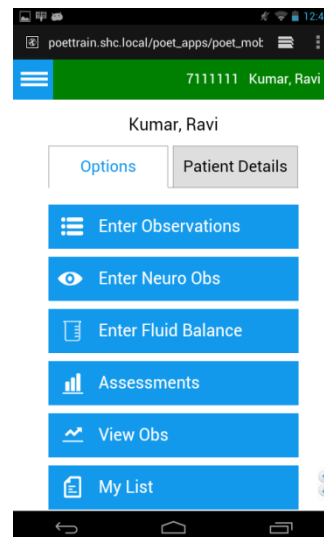
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2



3



Our approach – enabling scanning

Device brightness

- Brightness of scanner flagged as an issue.
- Firmware installed to reduce brightness.
- However if too dim, barcodes won't scan.
- Test, test, test again!

Wristband Requirements

- Neonates – softness.
- Plastic coated wristbands – wouldn't scan. Changing wristband printers – Zebra Technologies/Dakota.



Our approach – the importance of the wristband audit

Patient safety and clinical engagement

- First **baseline** clinical audit of positive patient ID - pre scan4safety
- Agile **quality improvement** – address any wristband or patient safety issues at source prior to rollout
- **Feedback** and **benchmark** with other demonstrator sites – evaluate progress & share learning
- **Promote** the benefits of scan4safety with **clinical teams**



Our approach – wristband audit scope, methodology and results

Scope and methodology

- 28 in-patient areas
- Included Spinal unit, Hospice, ITU, CCU, ED, Labour ward, NICU, general and specialist wards
- Audit standards taken from the patient identification policy

Results

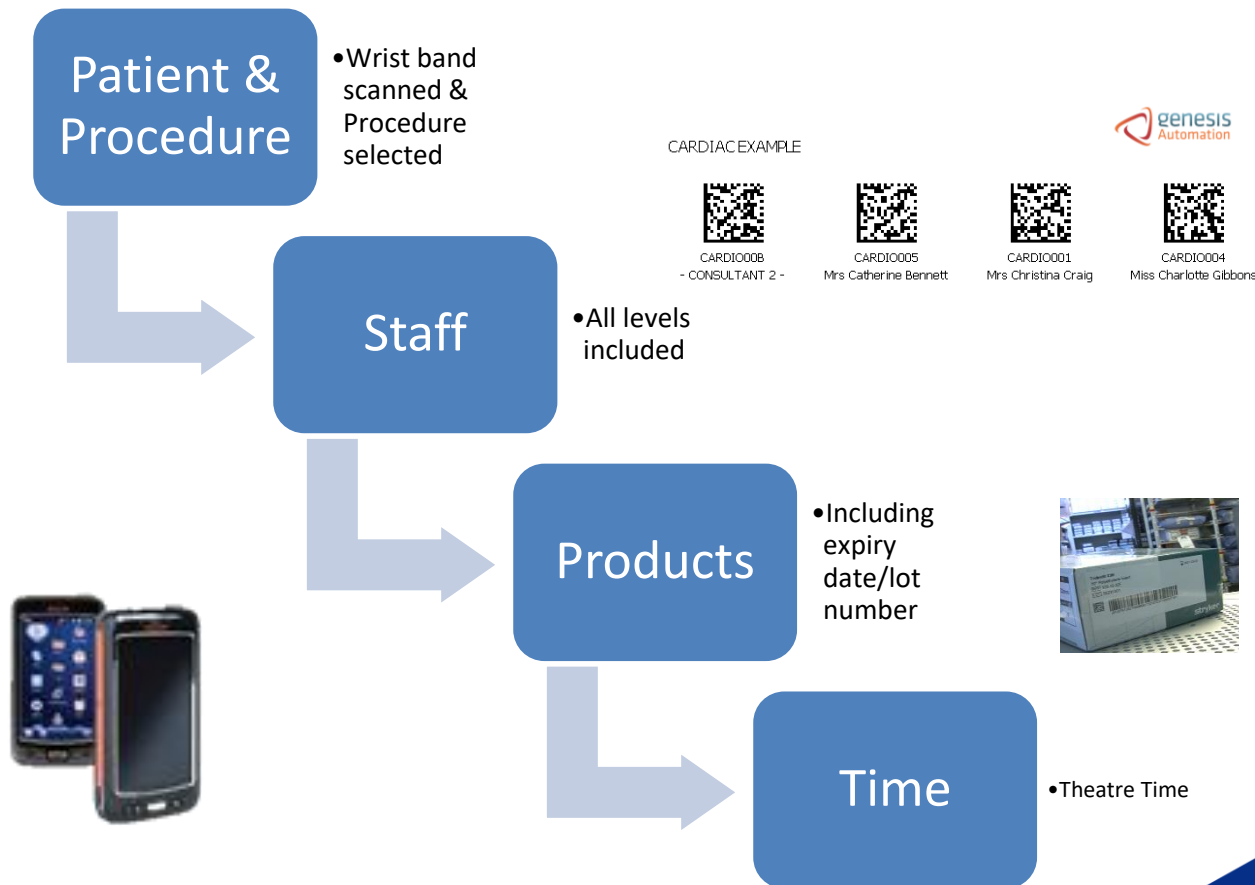
- 305 patients audited in total, average of 11 patients in each area
- 92% wearing a wristband
- 76% would scan enabling positive patient identification
- Similar findings to other demonstrator sites





Making sure we know
what was used with
which patient, **when**

Product – Data Capture Process

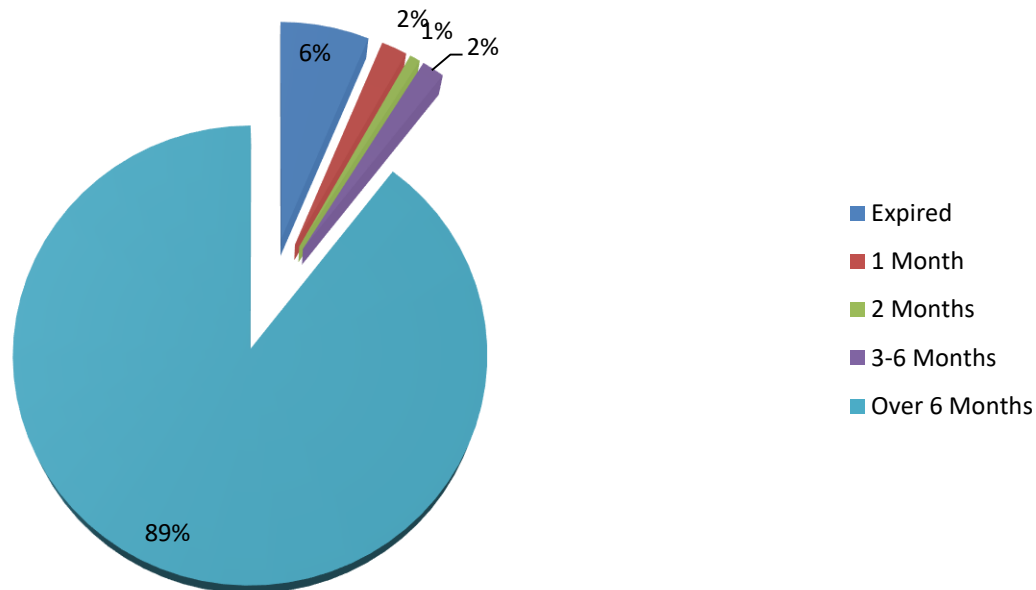


“My team always check”

What is the risk out of date products are used in Procedures ?

10,019 Products (Individuals) on shelf in Orthopaedics ?

Orthopaedic Implants March 2017



Outdated stock – **indemnification stops** once product exceeds expiry date – 8 % Risk ?

Product Recall Link

- Improving Product Recall processes by directly linking patients to products at point-of-use.
- Allowing revision of policies and process maps to reflect new capabilities.

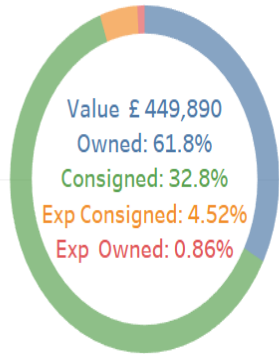
Future Developments

- Expand Surgery implementation to perpetually improve product traceability.
- Continue working with MHRA/GS1 Healthcare User Group to improve national processes and create further guidance documents.

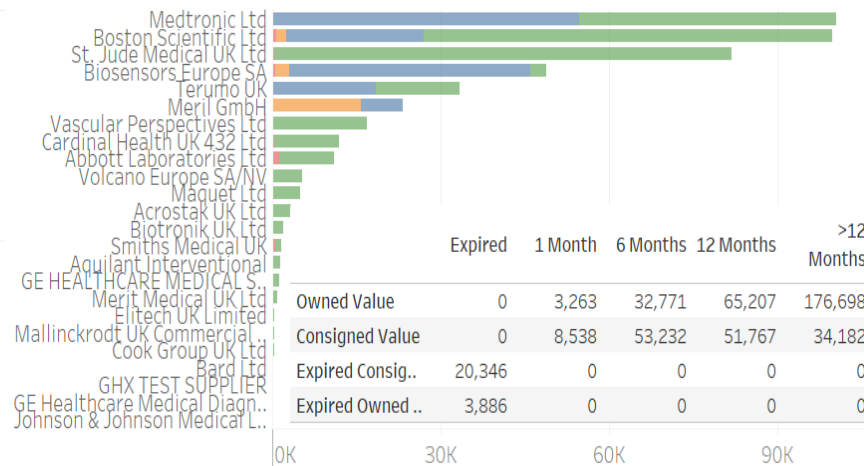


Information is now building

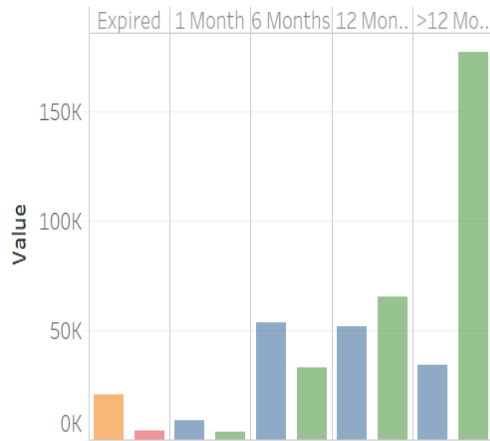
% Expired, Owned, Consigned



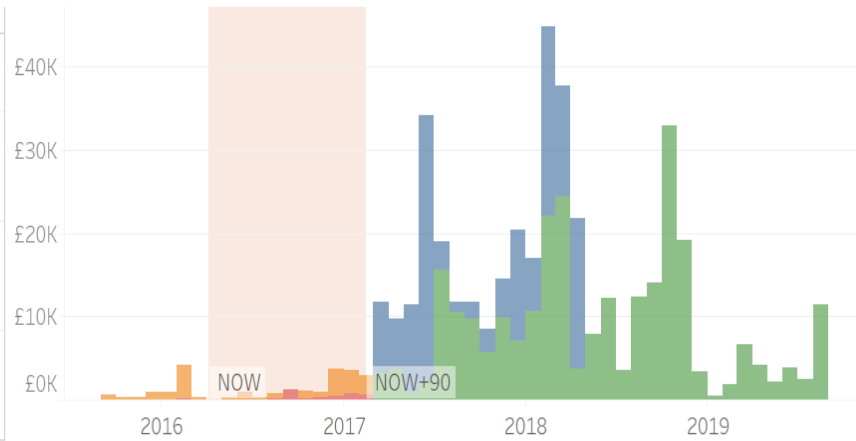
by Supplier



Expiry Window: Consigned / Owned



Expiry by Date











Clinical staff feedback

“The recent implementation of the Scan4Safety project in Cardiology provides us for the very first time complete traceability of products such as implantable medical devices used with our patients.

Knowledge is power – not only does this provide us with a level of data and insight that can be used to better challenge clinical practice and variation, helping us to reduce inefficiencies and improve patient experience and outcomes – more importantly it ultimately helps to safeguard our patients from avoidable harm. In the event of a product recall, we can now easily and quickly track an affected product to the right patient.”

Tim Wells, Consultant Cardiologist, Salisbury NHS Foundation Trust

Key Benefits

Reduced stock wastage 	Reduced stock levels 	Automated stock ordering 	Cash releasing 
Positive patient identification 	Released clinical time to care 	Improved product traceability 	Increased efficiencies 

Hard Benefits

Salisbury NHS Trust

Reduction:



- Stock:
 - Pharmacy: **£329,296**, which equate to a 23.06% of stock holding reduction from 15/16 to 16/17
 - Theatres: **£65,676** in MT, DSU and Anaesthetic
 - Cardiology: **£39,000** through stock management, reducing over-stocking

Cash Releasing:

- Cost Avoidance:
 - Orthopaedic: **£51,893** for Stryker for the exchange of out-of-date stocks
- Staff Releasing:
 - Estates: **£11,000** for 1 FTE released
- Contract Negotiation:
 - Procurement: **£9,100** for software renegotiation



Other Imminent Benefits To Follow:

- Cash Releasing:
 - Loan Kit Reduction: **£12,833**
 - Standardisation:
 - Scorpio Swap: **£70,000**



Total Financial Benefit (Cumulative): **£522,799**

£511,799 – One off Benefit

£11,000 – Reoccurring

Overview of Benefits

Based on the initial findings from the six demonstrator sites, it is estimated that for a typical NHS Hospital Trust, the benefits could be:



Reduction of inventory

- Averaging **£1.5 million** per Trust, or **£216 million** across the NHS
- *Derby: £1.2M annually through reduced consumption in theatres*



Reduction of stock holdings

- *Leeds: £812K reducing the amount of stock holdings*



Ongoing operational efficiencies

- **£2.4 million** per Trust annually, or **£365 million** across the NHS

Scan4Safety has the potential to save lives and up to £1 billion for the NHS over the next 7 years.

Questions?

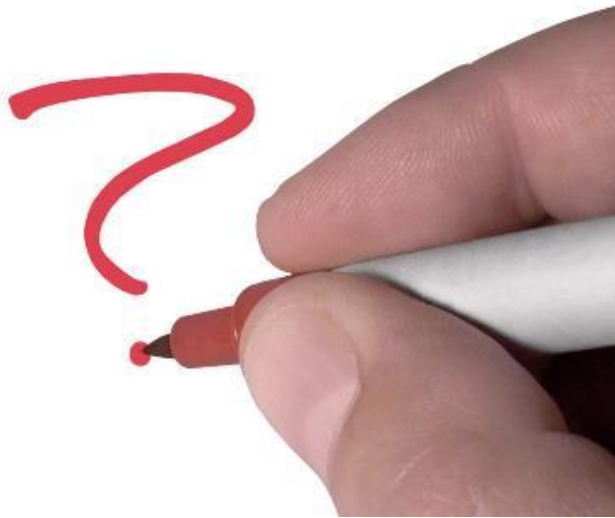


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HPAC Questions and contact details



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