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 10\textsuperscript{th}, 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

- 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 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

Barcoding breast implants and hip replacements 'could save NHS £1bn'

NHS trials barcode system to reduce mistakes during treatments

Hospital in pioneering pilot with barcodes for breast implants, replacement hips and medication

Breast implants and other medical items get safety barcodes
Other drivers for change

Invasive Procedure Information

Prof Tim Briggs - Getting It Right First Time (GIRFT)

Carter

Point of care traceability
Six Demonstrator sites

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<td>SALISBURY NHS FOUNDATION TRUST</td>
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About Salisbury

Maternity & Childrens Services

Diagnostics

Emergency Department

Surgery

Burns & Plastic Surgery

Medicine

Genetics

Cleft Lip & Palate

About Salisbury
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
Our approach

Procurement Department

**Bottom Up**
- 1) Generate awareness
- 2) Understand areas
- 3) Test and Learn – build confidence
- 4) Build Clinical Champions/Convert resistors

**Top Down**
- 1) Senior Management Support
- 2) Trust Charter
- 3) Director of Nursing – Virtual Board Member

Engagement
Our approach
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

- Lack of understanding
- Competing projects - EPR
- Time availability of clinicians
- Seen as a procurement project
- Resistance to change
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.
Other demo sites approaches

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
Patient safety

Positive Patient Identification

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 Cannulaes
• Scanning functionality enabled and tested.
• Two examplar 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

1. Welcome T1
   - Manage Patients
   - Add Patient
   - My List
   - Logout

2. Ravi David KUMAR
   - 01 January 1981
   - 7111111
   - 590-004-8519

3. Kumar, Ravi
   - Options
   - Patient Details
   - Enter Observations
   - Enter Neuro Obs
   - Enter Fluid Balance
   - Assessments
   - View Obs
   - My List
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.
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
Patient safety

Making sure we know what was used with which patient, when
Product – Data Capture Process

- **Patient & Procedure**
  - Wrist band scanned & Procedure selected

- **Staff**
  - All levels included

- **Products**
  - Including expiry date/lot number

- **Time**
  - Theatre Time
“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
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

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<tr>
<th>Reduced stock wastage</th>
<th>Reduced stock levels</th>
<th>Automated stock ordering</th>
<th>Cash releasing</th>
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<tr>
<td><img src="image1.png" alt="Graph" /></td>
<td><img src="image2.png" alt="Shopping Cart" /></td>
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<tr>
<th>Positive patient identification</th>
<th>Released clinical time to care</th>
<th>Improved product traceability</th>
<th>Increased efficiencies</th>
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<td><img src="image4.png" alt="Medicine Box" /></td>
<td><img src="image5.png" alt="Doctor" /></td>
<td><img src="image6.png" alt="Injection" /></td>
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## 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.
HPAC Questions and contact details

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