

### Order comms for Blood Components- is it worth it?

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#### Order comms

- Order comms is known to reduce the burden of laboratory admin of putting what tests are required into the LIMS!
- Blood Sciences have been a priority because of work load
  - Especially from Primary services (GP practices)
- Use in Transfusion has been somewhat limited
  - Some Trusts have only used order comms for group and saves
  - What about requests for blood components/products ?

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#### History in Oxford

- 2011 Trust began to use Cerner Millenium as their Electronic Patient Record
  - Piloted in 1 of the Hospitals (NOC)
- 2012
  - The Transfusion team asked to help develop order comms for group and save samples
  - We insisted that we also wanted to develop order comms for component ordering
- 2013
  - Pilot of order comms on Haem Ward
  - Roll out begins
- 2015
  - Roll out completed



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Step 1: Product required selected



**Step 3**: Order and prescription placed and received in laboratory

Reconciliation - | 🔈 Check Interactions

A V Component

🗹 🖄

⊿ Patient Care

Remote issue red cells PowerPlan (Initiated)

ፋ 😧 🚫 🕂 Add to Phase - Start: 01/Mar/2018 11:37 Stop: None

ast updated on: 01/Mar/2018 12:05 by: ORH-Consultant, Test

Red cells issue (XM

🕈 🖀 🖿 1 ≈ • \*Date/Time Required: \*\*/\*\*/\*\*\*\* -\*Diagnostic Group: \*Clinical Details: Haem-AML Haem-Anaemia of chronic disorders Haem-Aplastic anaemia Haemodi Haem-B12/folate deficiency Pregnant: Haem-Chronic leukaemia Haem-Congenital platelet disorder × \*Red Cell Transfusion Criteria: Haem-DIC Haem-Haemolysis acquired \*Special Transfusion Requirements: Haem-Haemolysis congenital Haem-HPC Donor Haem-Iron deficiency Remote issue: <= oug/1 with acute coronary syndrome a=80g/l in haematology inpatients \*Red Cells - no. of units: er (provide specific clinical details \*Location of patient at time of transfusion: \*Bleep/Telephone Number: 2 0 minutes ag **Reconciliation Status** 🕒 Meds History 🕒 Admission 🕒 Discharge Status Details The **brdes** tentry for and clinical details Status Ordered (Completed) 02/Mar/18 11:55:00 , Trauma, bleedi for the patient are mandatory. Remote Issue order completed auto. Ordered Dose: 1 unit(s) - intravENous - every 4 hours - Number of Units: 1 dose(s)

✓ Details for Red cells issue

**Step 2**: Order entry form completed with details of transfusion

📸 🔀 Details 📴 Order Comments 🕼 Offset Details 🗋 🕼 Diagnoses





# All components and products?•YES!

- We wanted order comms to be the standard way to order
- The only way to do this was to include all components and products!



#### Word of Caution

- Need to agree a process for urgent requests
- Must minimise delays for the provision of products for bleeding patients
- OUH MHP only activated by phone. Need to know the request is being dealt with
- Urgent requests are placed on order comms and the lab is then phoned so they are aware





#### What did we hope to see?

- Reduction in work requesting
- Reduction in errors made at requesting
  - Better information
  - Patient demographics
  - Clinical information
- Less phone calls
- Streamline lab work flow The paperless lab ?





#### NO request card! - controversial!

- Think about what do you use the request card for?
  - Checking sample against
  - When making a work sheet
  - For knowing what you have outstanding
- We went through this
  - We now don't miss request cards!
  - we redesigned your processes to use an electronic record
  - This MUST be led by the laboratory senior staff



#### Redesign

- THEN
- Check sample against request card
- Use request cards to make a worksheet
- Check request cards to know what red cells are needed and when
- Knowing when 'specialist products' are ordered

• NOW

 Check sample against electronic order

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- Use samples to make the work sheet
- Use outstanding work lists on LIMS
- Introduction of a ordered units 'white board'





#### Has it been a success?

Yes – all our requests apart from very urgent requests are now via order comms







#### Whats been good?

- Requesting both group and saves /product issues is quicker
- Much less 'typos' as the orders appear electronically
- Better information!
- Different issue sets for different sites works well (based on the patient location)
- Seeing out standing work is quick and easy
- Less phone calls





#### Better information!

- Request audit (Jan 2015)
- 100 paper and 100 electronic requests
- Examined to determine what information was available for each request

	Paper requests	Electronic			
Name	100%	100%			
MRN	99%	100%			
DOB	100%	100%			
NHS Number	24%	100%			
Consultant	22%	100%			
Location	69%	100%			
Diagnosis	55%	100%			
Special Requirements	1% (1/100 expected)	100% (47/47 expected)			
Contact number	88%	100%			





#### Other advantages

- We know what is coming in before the sample arrives
  - Allows us to order phenotyped units earlier
  - Allows us to 'spot' when we may need to order additional units
  - Alerts us to HLA matched platelets being required before the clinical team phone us!
- No longer need to scan request cards!
- Less confidential waste



#### Problems encountered

• Knowing what requests are coming in?

• • •	1011201200 1 01	•••							~			
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	Outstanding orders for BBS											
lqqq	.qqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqqq											
×	Patient	Name	Loc'n.	Order	ST	Req.	Date	Timex				
x 1)	10310362		ED	259108945	в	CI	03042016	0654x				
x 2)	10196763		WYW	260044024	в	CM	05042016	1135x				
к З)	4549555		L2	260048844	в	CM	05042016	1145x				
x 4)	614083		HAEMW	260071030	в	CM	05042016	1218x				
x 5)	3900		JAU	260075748	в	CM	05042016	1225x				
x 6)	846527		ONCLS	260081706	в	CM	05042016	1233x				

- This refreshes every 5 minutes
- Urgent requests are phoned to be lab



#### Other problems

- Clinical staff not putting in the correct date:time products are required
  - They tend to just press return and then wonder why there is no product available when they needed it (its been returned!)
- Clinical staff ordering and prescribing different amounts of units!
  - Causes confusion on the ward
  - System currently unable to copy from 1 set to another





#### Getting clinical engagement

- Order comms was rolled out through the trust
- Blood product ordering was rolled out with the medicines management – which worked well
- We encouraged initially when people called wanting to order products
- Now we are strict!

Compliance with agreed transfusion triggers in haematology improved from <50% to >90%

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#### **Number of Blood Products**







#### Encourages 1 unit transfusions!





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#### Conclusion

- The advantages of using order comms to order blood components and products are
  - Many and variable
  - Lab advantages are
    - Accuracy of information received on the request
    - Reduces staff time per request
    - Allows you to see requests as soon as they are made not just when it arrives
  - Clinical
    - Everything is done on EPR filling in a paper request feels wrong
    - Helps compliance with clinical guidelines
    - Better PBM!
- It was hard work and time consuming but it was worth it



## Thank you Any questions...?