

# Beachlands Medical Centre

PHO and Facilitator: East Health  
Michael Clarke GP

Bridgit Underwood Nurse

Christine Jones Admin

# Organisational “Buy - In”

## Aim:

For all lab results to be actioned and coded within 7 days.

## Buy-in

- We had several examples of abnormal results not being properly managed leading to adverse outcomes that were preventable.
- Nurses were left having to assume results were “normal” and having to chase GP’s to check this.

## Organisational “Buy - In”

- Mildly “abnormal” results were being filed without GP comment.
- After peer review and nurse meetings an agreement was made that a clear decision needs to be in place for all results.
- Year one has heightened our safety in practice awareness.

# Change Ideas

- To standardise our coding for incoming blood results.
- To ensure if a GP is absent that the responsibility is handed over to another GP.

# What Changes have you tested?

	Change Tested	Outcome
1	Standardised coding results.	More abnormal results have a GP comment. 60-80% Agreement that normal results may be filed without comment.
2	GP handover.	GP's are better at handing over responsibility. Nurses are aware of who the handover GP is. This is now written on the whiteboard in the nurses station.
3		

# Most Successful PDSA Cycles?

After the initial audit we found our results coding was very inconsistent and with GP variability.

Plan: GP's met and agreed on a standard system for coding all results.

GP's talking to the nurses about expectations and results when they are relaying information to patients.

## Most Successful PDSA Cycles?

Do: GP's to code/comment on all abnormal results.  
GP's to agree that all normal results may be filed without comment.

Carry out random monthly audit on 10 patients across all GP's.

Ignore all patients blood tests ordered by specialists or external providers.

## Most Successful PDSA Cycles?

Study: Steady improvement over 4 audits.  
60 to 80% compliance.

10 patients not enough to audit.

Act: Increase patients to 20 monthly.

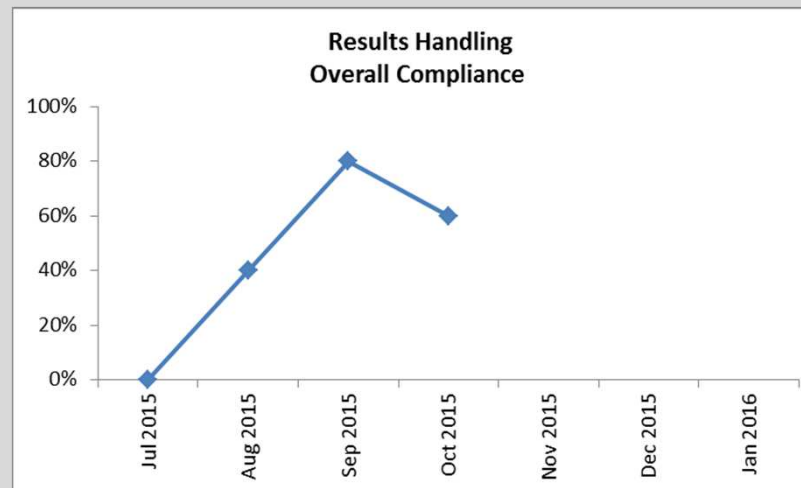
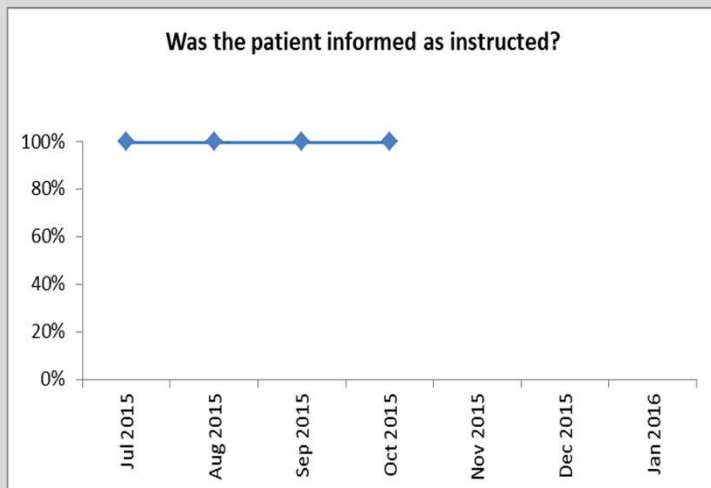
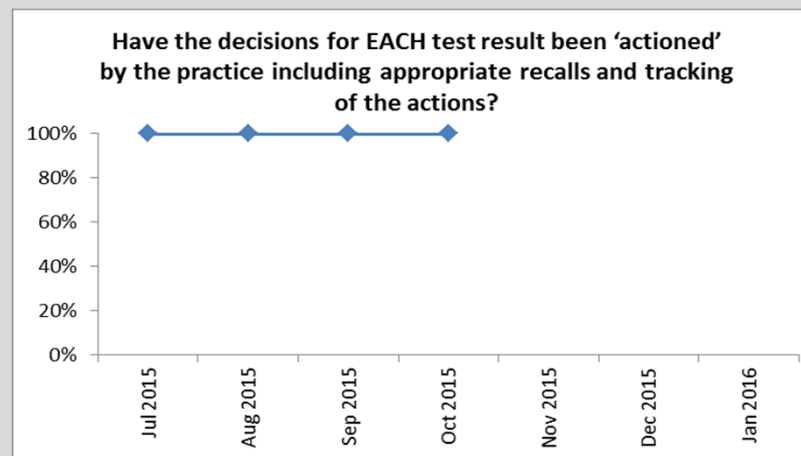
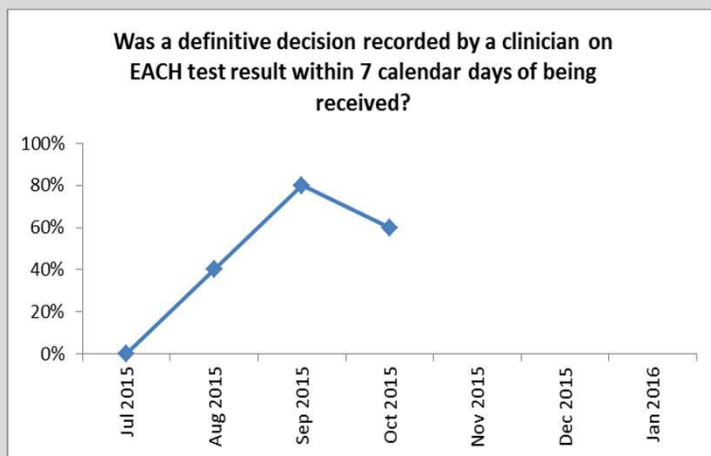
Only audit patients that have an abnormal result.  
i.e ignore all patients with no abnormal results.



# Measures Summary

Month	Number of records audited
1/07/2015	10
1/08/2015	10
1/09/2015	20
1/10/2015	20
1/11/2015	0
1/12/2015	0
1/01/2016	0

# Measures Summary



## Highlights and Lowlights

- Nurses now have a far more complete system of coding results that they can discuss with patients, reducing unnecessary time spent chasing what the plan is.
- Handover is now a priority for GP's.
- PMS does not easily enable us to check whether results have been viewed within 24 hours.

## Achievements to date

We broadened the audit to include all blood results for each patient, and we extended the audit to 20 patients and ignored all patients with no abnormal results.

Overall compliance with GP's coding and handover is improving and nurses are therefore better equipped to safely discuss results with patients.

This has allowed the nurses to attempt to cope with the ever increasing expectations of their role.