



**Seddon
Medical**

WARFARIN MANAGEMENT





Team members:

Doctors: Dr Rohit Santram, Dr Vispi Buhariwalla, Dr Junaid Qureshi

Nurses: Jill Fennell, Tasha Meldrum, Chantal Basson

Receptionists: Magy, Helen, Tania, Annita

PHO and Facilitator:

Alliance Health Plus (Vanita & Philippa)

ORGANISATIONAL “Buy - In”

Aim: To make an overall improvement in our management of patients on Warfarin.

Buy-in: Our practice was not part of the Safety in Practice – Year 1 Programme. After being approached by Vanita of AH+ with regards to the advantages of participating in this programme - our Clinical Director proposed and obtained a commitment from all clinical staff after highlighting the benefit that could be derived for our patients and the practice.

SWOT ANALYSIS

Strengths	Weaknesses	Opportunities	Threats
Dedicated clinical team with excellent clinical acumen	Absence of CME in Warfarin management	Patient Education Patient Resources	Time constraints for patient education
Practice Policies and Guidelines	None	To review and update Policies and Guidelines	Change concept - moving from manual to electronic monitoring and recording of results and management of care

CHANGE IDEAS

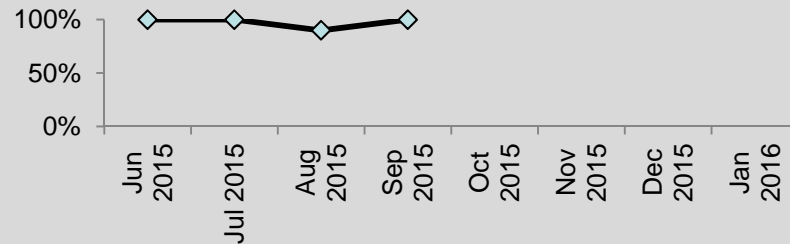
- Vigilant monitoring of incoming INR results whether received by Fax or by Electronic Mail.
- Effective follow through from receipt of result to communication with patient on management protocol as per doctor's orders.
- Implementation of electronic recording of INR results on MyPractice for continuity of patient care and monitoring by all doctors in the practice.

WHAT CHANGES HAVE WE TESTED?

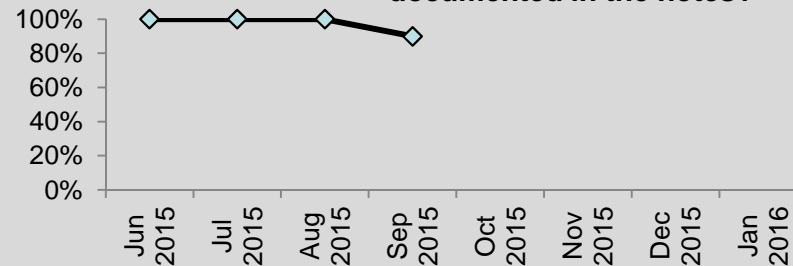
	Change Tested	Outcome
1	Vigilant monitoring of incoming INR results whether received by Fax or by Electronic Mail.	Achieved – Reception Staff and Nurses are more alert to incoming results for actioning.
2	Effective follow through from receipt of result to communication with patient on management protocol as per doctor's orders.	Achieved – All INR results requiring action are attended to by the close of business daily.
3	Implementation of electronic recording of INR results on MyPractice for continuity of patient care and monitoring by all doctors in the practice.	Work- in-Progress as staff get acquainted with the electronic recording of results on MyPractice and understand the benefits for continuity of care

AUDITS - RESULTS/ TRENDS

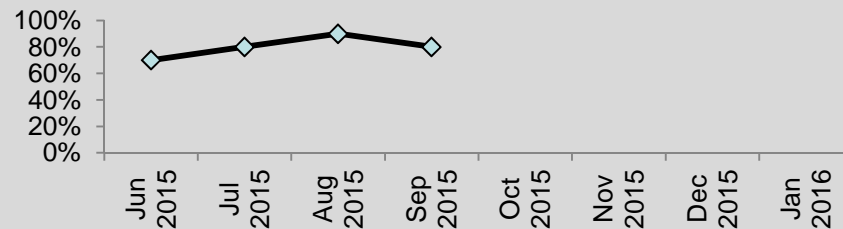
Is there evidence that the last advice on Warfarin dosing given to patient followed current local guidelines or used computer assisted decision making?



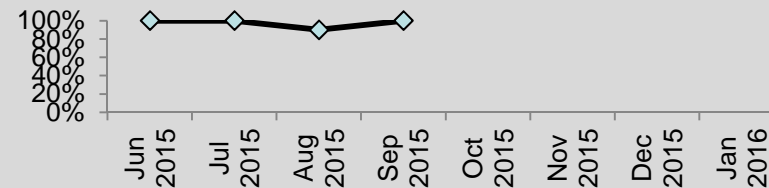
Is the target INR and duration of treatment clearly documented in the notes?



Has the INR been taken within 7 days of the planned date?



Is it recorded that the patient has received education about warfarin in the last 12 months?



ANALYSIS OF RESULTS/ TRENDS

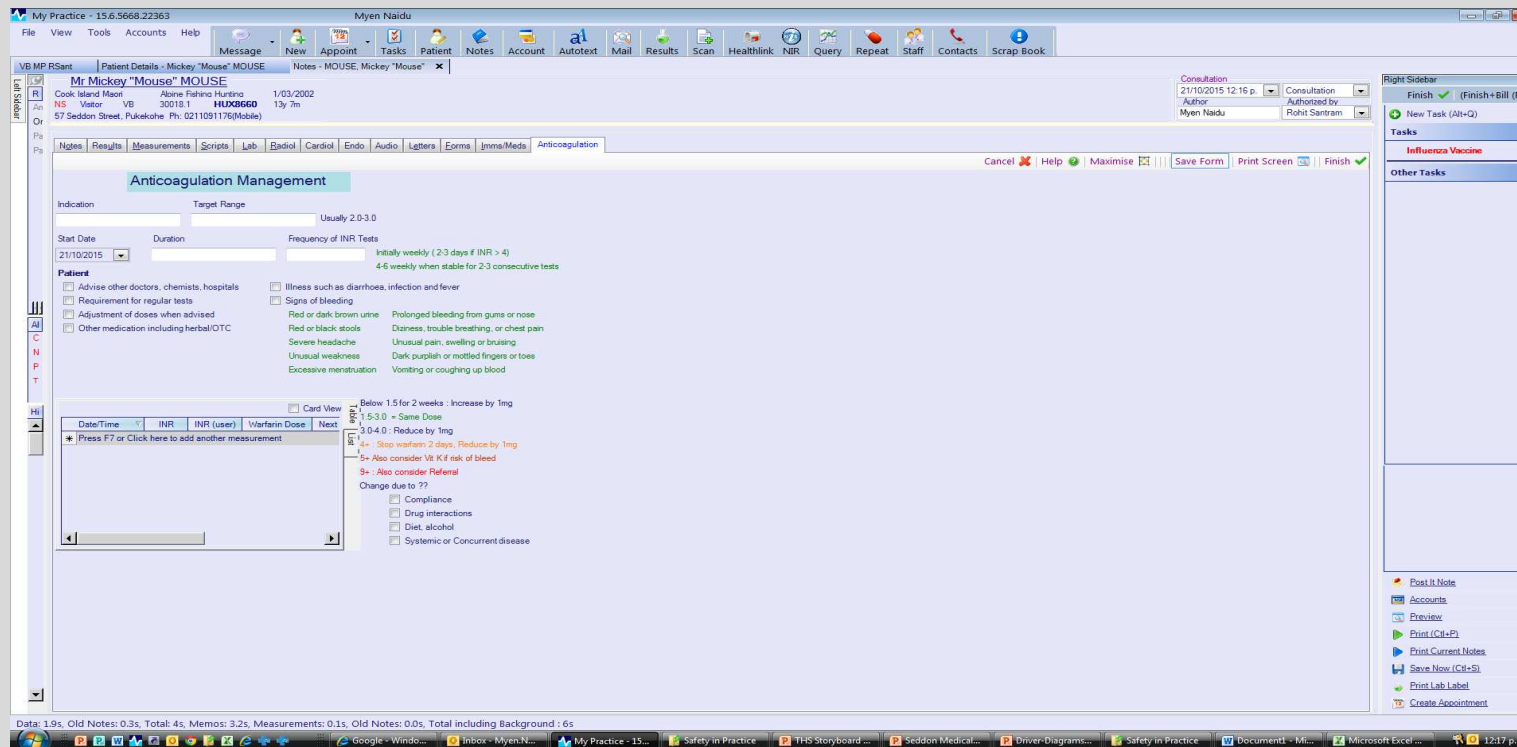
Overall, our Warfarin Management measures since embarking on the Safety in Practice Programme has improved and has seen positive outcomes as per our audits.

The following issues arose from the audits:

1. Effective recognition of patient non-compliance to clinical orders of increasing or decreasing medication.
2. Barriers to patients having regular testing done...example transport issues.

MOST SUCCESSFUL PDSA CYCLE?

Introduction of recording of results into MyPractice Anticoagulation electronic form.



The screenshot shows the MyPractice software interface for Anticoagulation Management. The patient is identified as Mr Mickey "Mouse" MOUSE, born 1/03/2002, residing at 57 Seddon Street, Pukekohe. The form includes fields for Indication, Target Range (Usually 2.0-3.0), Start Date (21/10/2015), and Frequency of INR Tests (Initially weekly (2-3 days if INR > 4), 4-6 weekly when stable for 2-3 consecutive tests). A list of symptoms and signs is provided, such as "Illness such as diarrhoea, infection and fever" and "Signs of bleeding". A table for INR and Warfarin Dose is visible, with a note: "Below 1.5 for 2 weeks - Increase by 1mg". The interface also features a "Right Sidebar" with options like "Finish", "New Task (Alt+Q)", and "Influenza Vaccine". The bottom status bar shows "Data: 1.9s, Old Notes: 0.3s, Total: 4s, Memos: 3.2s, Measurements: 0.1s, Old Docs: 0.0s, Total including Background: 6s".

CHANGES GOING FORWARD

- Patients being booked in for Warfarin education. Practice to access external resources such as educational pamphlets for patients to take home.
- To exclude barriers such as travel for testing, the practice is agreeable to authorise Pharmacies closer to the patient's homes to perform INR testing



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**SAFETY IN PRACTICE
WARFARIN MANAGEMENT
OCTOBER 2015**