



Results Handling Audit

Our experiences

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Why Results Handling?

- Identified area or risk - couple of incidents involving test results, “feeling” that this could be improved
- Fitted well with working towards Cornerstone Accreditation re Test Results Management Policy
- High workload for nurses re phone calls and contacts about results – how could we do this better?

Changes made

- All tests results to have comment that included
 - Interpretation of result (normal / abnormal but acceptable etc)
 - What actions (or not)required
 - Set up quick keys for standardised comments
 - Tell patient results through system in 1 week

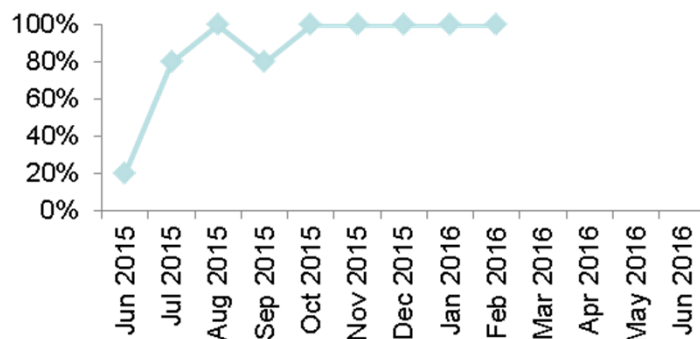
Initial GP hesitance

Immediate improvement in communication for nurses

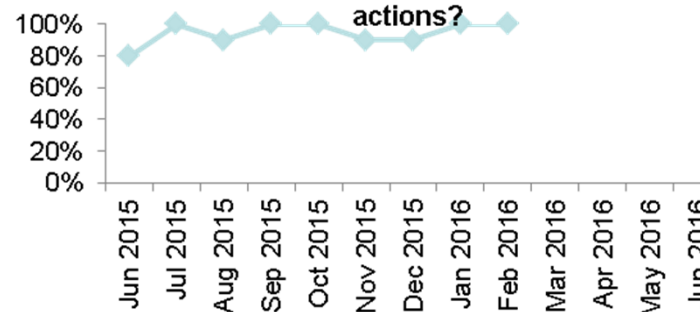
Better acceptance by patients about actions (having been seen by a doctor)

Graph of progress

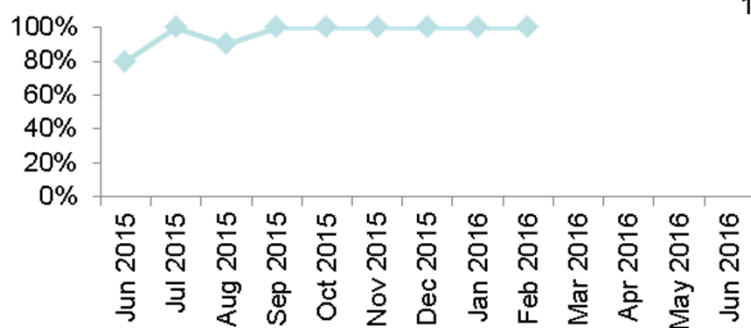
Was a definitive decision recorded by a clinician on EACH test result within 7 calendar days of being received?



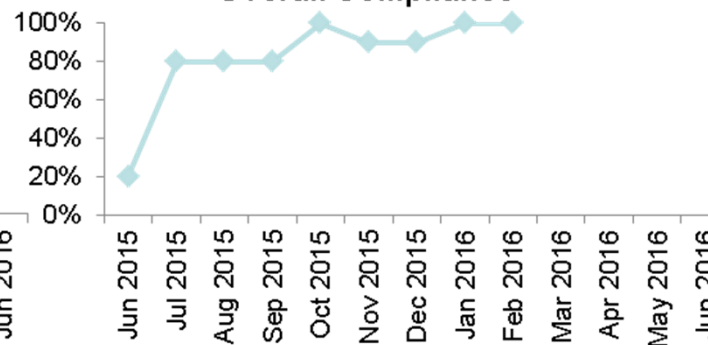
Have the decisions for EACH test result been 'actioned' by the practice including appropriate recalls and tracking of the actions?



Was the patient informed as instructed?



Results Handling Overall Compliance



Contacting patients

- Nurses difficulty in actioning results within time frame when short staffed
(although were still actioning time sensitive results safely)
- Ways to reduce NURSES INBOX (unnecessary work)
 - Doctors to text patient where possible directly from computer (standardised texts and letters set up)
 - Reduce number of results that need further information to decide appropriate management (throat swabs, screening STI swabs re symptoms e.g. BV)
 - Review and standardise process for nurse contacting patient (phone call, text, letter – file)



Highlights

Patient safety:

- Contacted more quickly
- Better information on meaning of results + what actions are / are not recommended

Nurses:

- More confident in communicating information about results
 - better context around information
- Easier to manage results INBOX
 - reduced unnecessary TASKS

GP's:

- Embraced processes willingly
 - together fine tuning the “quick keys “for comments
- Benefits “down stream” quickly outweighed any initial concerns
 - re increase time required to implement

Highlights

General:

- **Enhanced collaboration among staff** - working together for
 - better communication with patients
 - more efficient workflow processes for all staff
- **Reduced unnecessary communication contacts**
 - between nurses, doctors and patients to clarify details about results and actions required
- **Led to other quality improvement focus**
 - Processes for contacting patients
- **Complemented progress towards using patient portals and Cornerstone Accreditation**

NO LOW LIGHTS ...