

Avondale Family Health Centre

PHO and Facilitator: Alliance Health
Plus.

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Organisational “Buy - In”

Aim: To improve the monitoring of patient’s Warfarin doses and prescribing advice from the clinic. Also to identify any negative aspects of our INR process.

Buy-in

We informed the clinical staff at our staff meeting and discussed the process of how best to manage these patient’s warfarin. Also discussed the use of the INR template in Medtech.

Change Ideas

We have looked at ways that are inefficient in our processes for managing INR patients.

We wanted to better use time and eliminate waste. Our INR list has greatly reduced both.

We also wanted autonomy within our staff's approach to managing INR patients, which has been the biggest challenge and we are continuing to work on it.

What Changes have you tested?

	Change Tested	Outcome
1	Being the first quarter for this yearly SiP, we are more concerned with identifying the problems if any within our process and then discussing how we can better manage and what changes need to take place.	Most patients are managed very well and many by our pharmacy next door. The ones that are not so compliant are often not contacted as regularly as they should.
2	Through doing this SiP we are compiling a list of all of our INR patients with contact details so we can have a quick look at the list and see who is over due.	Management of these patients is becoming a lot more efficient and easier to identify problem patients.
3		

Most Successful PDSA Cycles?

Since we are still in our first cycle we don't as of yet have anything for comparison. But so far we are identifying problem areas and working towards making them more efficient.

Measures Summary

Briefly describe what you are measuring and how and why? Include Dashboard

- We are measuring if the last dose of warfarin was taken as prescribed and on time.
- Administration of treatment is clearly documented in Medtech.
- Has INR been taken within 7 days of the planned date.
- Has the patient had education about warfarin and other options for their INR management.
- We want to develop a more controlled and monitored process for looking after ALL our INR patients, so their results fall as much as possible within the therapeutic range and contacted within an acceptable time frame.

Highlights and Lowlights

- So far the lowlights have been the highlights, in that being able to identify problems in our process at the beginning, we are able to make changes to benefit the efficiency of managing INR patients.
- One lowlight though is that not all GPs are willing to advise on warfarin doses and fill in the template.

Achievements to date

- We are working on our change package with data gained.
- We have made our INR patient list to help better manage their needs.
- We also now have better processes in effect when receiving INR results.