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Cross-Department Successes in Specimen Handling Improvement with the Lab, ED, ICUs and Hem/Onc Clinic at

Fletcher Allen Healthcare

Lab Quality Confab
October 1-2, 2013

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Fletcher Allen Health Care

At a Glance

Fletcher Allen Health Care

Vermont's university hospital and medical center, located in Burlington, Vermont.

- Level 1 Trauma Center and a regional referral center for approximately 1 million people in Vermont and northern New York

- 562 licensed beds

- Over 30 patient care sites and more than 100 outreach clinics, programs and services throughout Vermont and northern New York

FAHC: Our People

- Approx. 7,150 employees

- More than 1750 registered nurses

- Medical staff of nearly 800 physicians

FAHC: Laboratory

The department comprises 30 full-time pathologists with a full range of specialties including, Dermatology, Cytogenetic, Pulmonology, Autopsy, Breast cancer and Neuropathology.

- Performs annually :
  - over 2.7 million Clinical tests
  - over 37,000 surgical cases
  - 1,400 consults each year.

FAHC – Quality Institute

- The James M. Jeffords Institute for Quality and Operational Effectiveness at Fletcher Allen is dedicated to supporting the organization's efforts to achieve our vision

- The Jeffords institute provided a Quality consultant to participate in this initiative.

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Fletcher Allen Health Care

To learn more, please visit FletcherAllen.org

or call us at
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Fletcher Allen Health Care
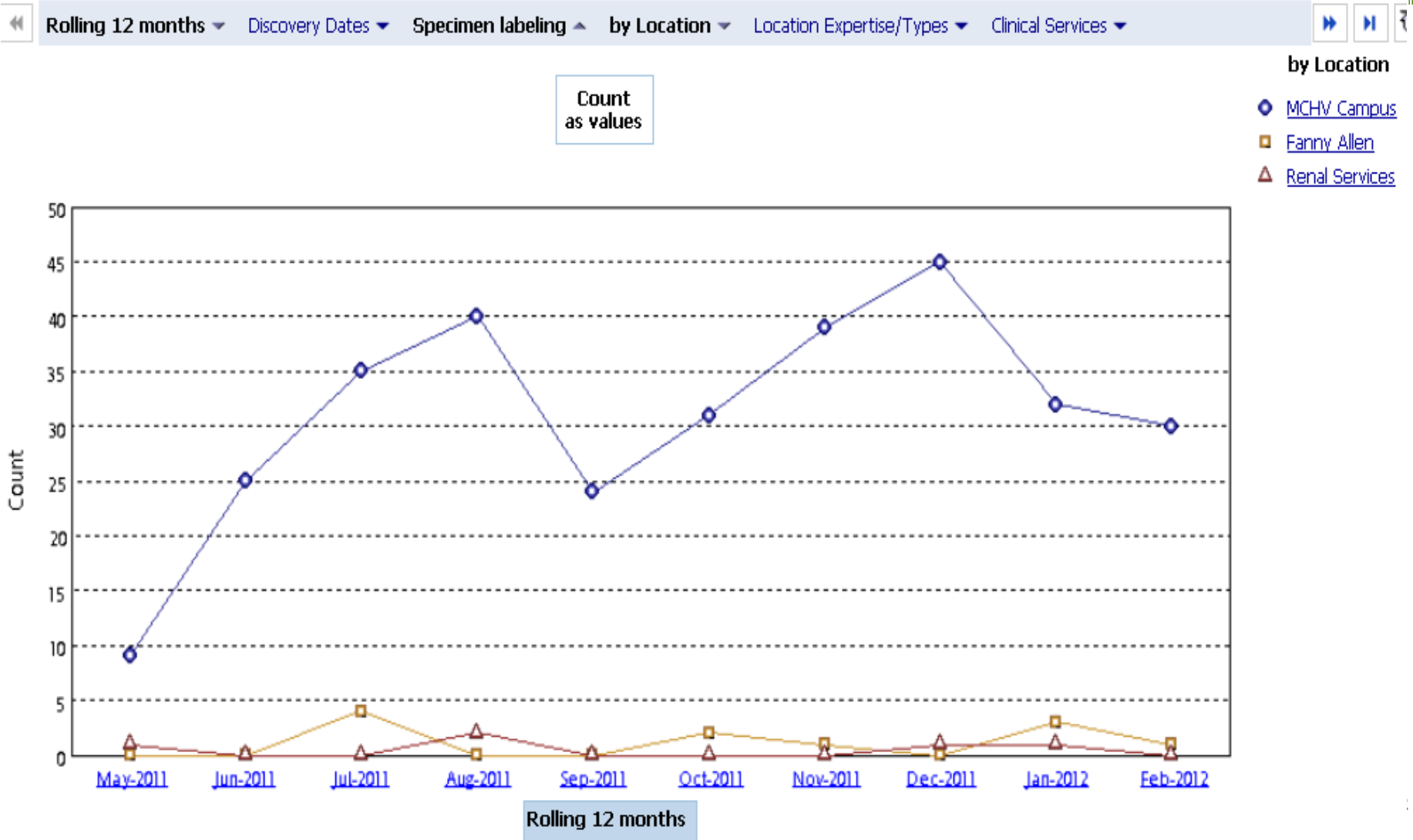
Specimen Labeling Initiative

Initiative Launched in April 2012 with desired outcome of a decrease in Specimen Labeling errors in the ICU's

Initiative

A Rapid redesign team was tasked by Senior Management at FAHC to improve Patient safety by implementing lab specimens labels at the bedside.

PROJECT GOALS

- Printing at bedside with correct number of labels
- Identify appropriate tube types
- Eliminating re-labeling of specimens in Laboratory (contains CID#)
- Close the loop with PRISM ordering

Baseline: Specimen labeling events

Team

Team pulled together to determine best way to achieve goal

- **Cross Departmental Makeup**

- **LEADERSHIP SUPPORT**

Options

- **Collection Manager (CLM) – already here in use in ED and IP Phleb – met all criteria**

- **PRISM solution – patient id labels an option but no test information and not instrument ready**

- **Black Box – looked at developing an in-house option**

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Collection Manager (CLM)

- **Proven solution**

- **Used by IP Phleb for approx. 5 years w/ 30 phlebs, using handhelds**

- **In use in ED since EPIC go-live**

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Deployment

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In alliance with
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Evaluated deployment options

- **Handheld devices (like IP Phleb)**

- **Thin Client devices currently used in patient rooms and on some mobile carts**

- **PC workstations**

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Scope Change

2 new variables introduced

- **EPIC Hot Button --- CLM/EPIC integration**

- **VDI – Virtual Desktop**

Epic Hot Button

This is worth calling out !

- Sunquest and Epic collaborated in developing an integration point between CLM and EPIC. It allows an EPIC user to launch CLM from a "hot" button that Epic analysts paint onto the required windows.

- Epic user is ported over into Sunquest. Staff does not need to log into CLM separately nor do they need to be predefined in SQ

Epic Hot Button

The following EPIC resources are available to you and your EPIC TS to assist in setting up the CLM hot button.

- The whitepaper "Integrating Web Pages with hyperspace" contains a section on creating a redirector activity to launch an external application.

- The patient agent galaxy document highlights the record used to communicate between Epic and Sunquest.

- Activity Link Print Group – This can be used to create a print group to launch your activity (instead of from a button in hyperspace). This is what FAHC is currently doing

Deployment – round 2

- **Infrastructure**
  - **Retrofit space: Data, Power, mounts**
    - > Infrastructure present significant challenges.
    - > Monitor arms not stable
    - > Bays not cabled
    - > Bays not designed for individual workstations
    - > Power needs
    - > Space limitations

Training

- **Simulation Lab**
  - Designed to mimic "real" workflow
- **Education**
  - **One on one training of the Nurse Educators**
  - **Nurse Educators then worked one on one with the staff**

Support

- **Support during rollout**
- **Nurse educators**
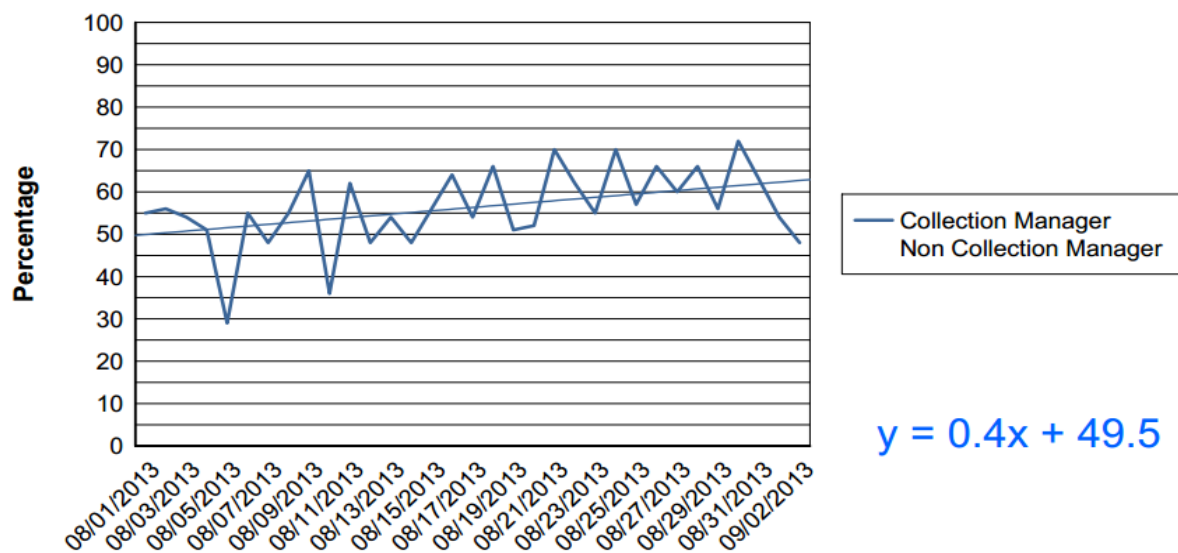- **IS staff**

Reporting: Sunquest Adhoc report

Fletcher Allen Health Care

M003 and M004 Epic Integration
Trend Report

From Collect Date: 08/01/2013   To Collect Date: 09/02/2013

M003

Percent Utilization of CLM Workflow

— Collection Manager
Non Collection Manager

$y = 0.4x + 49.5$

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Results

Initial review is very positive.

- **Routine Monitoring - Compliance on the rise**

- **Decreased safe reports**

- **Continuing to monitor and evaluate**

Results

ICU Label events – Rolling 6 month

Count as values	Feb-2013	Mar-2013	Apr-2013	May-2013	Jun-2013	Jul-2013	Rolling 6 months
Specimen labeling	6	5	9	11	4	4	39
Specimen labeling	6	5	9	11	4	4	39

Count as values	Feb-2013	Mar-2013	Apr-2013	May-2013	Jun-2013	Jul-2013	Rolling 6 months
Specimen labeling	1	9	2	11	5	1	29
Specimen labeling	1	9	2	11	5	1	29

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New Equipment

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What worked?

- Multi-Disciplinary Team
- Clear communication
- Maintained focus on goals
- At the elbow support
- Management backing

Lessons Learned?

- **Improve Change management**
  - Introduce concept, need to target population before implementation

  - Too much new tech all at once.
    - > VDI, Collection Manager

HemOnc – a success story

- HemOnc was totally on board before the CLM project initiated

- They recognized the need to improve their Patient process.

- All Staff were fully aware of what was going to be implemented

- This is a work in progress but we are already seeing a positive return with a perceived decrease in labeling events.

Fin

- Questions?

Thank you for attending

My Contact information

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Acknowledgments