

CHI Learning & Development (CHILD) System

Project Title

Achieve 95% reduction of patient recall at Laboratory in 6 months

Project Lead and Members

Project lead: Jonathan C. Gatab and Leow Chai Hong

Project members: Ellen Reandino, Sharda Rai, Wong Li Jean, Nur'Amira Binte Abdul

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Organisation(s) Involved

National Healthcare Group Diagnostics

Healthcare Family Group(s) Involved in this Project

Allied Health, Ancillary Care

Applicable Specialty or Discipline

Diagnostics Laboratory

Project Period

Start date: January 2019

Completed date: January 2020

Aims

To achieve 95% reduction of patient recall at Geylang laboratory by identifying the different groups of patients who requires special preparations prior to blood collection.

Project Attachment

See poster attached/below



CHI Learning & Development (CHILD) System

Background

See poster attached/below

Methods

See poster attached/below

Results

See poster attached/below

Conclusion

See poster attached/below

Additional Information

Accorded the NHG Quality Day 2021 (Category B: Service Redesign & Delivery) Merit Award

Project Category

Care & Process Redesign

Quality Improvement, Clinical Practice Improvement

Productivity, Manhour Saving

Keywords

Patient Recall, Phlebotomy

Name and Email of Project Contact Person(s)

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Achieve 95% reduction of patient recall at

Laboratory in 6 months

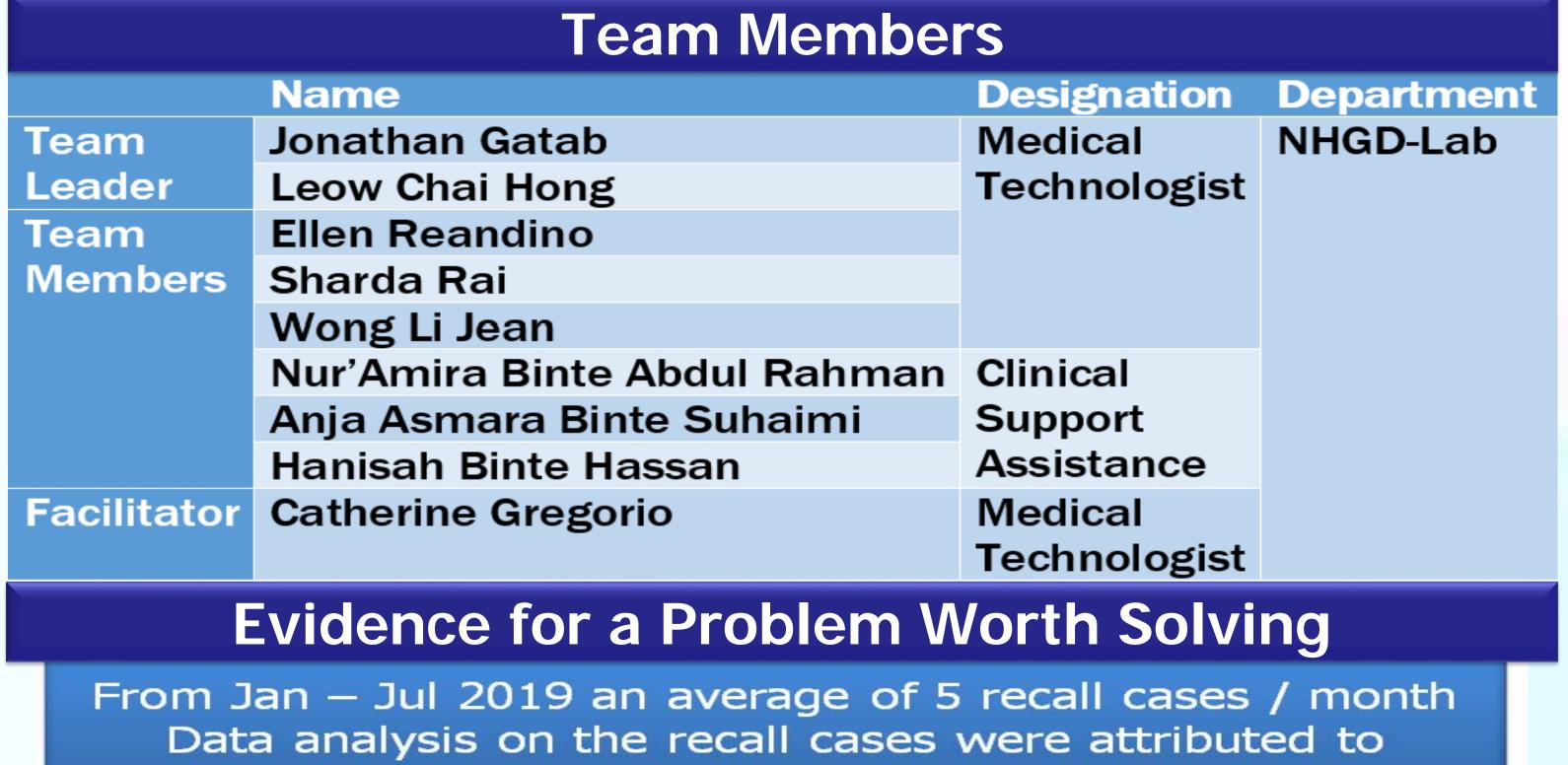




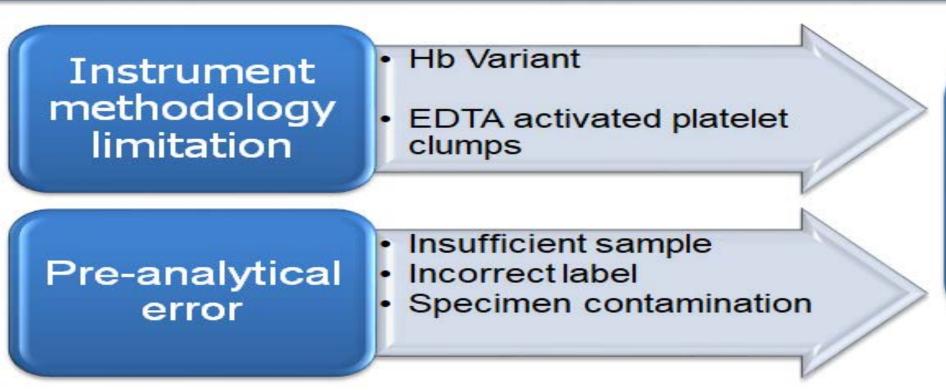
Adding years of healthy life

Mission Statement

To achieve 95% reduction of patient recall at Geylang laboratory by identifying the different groups of patients who requires special preparations prior to blood collection.



2 main areas of concern

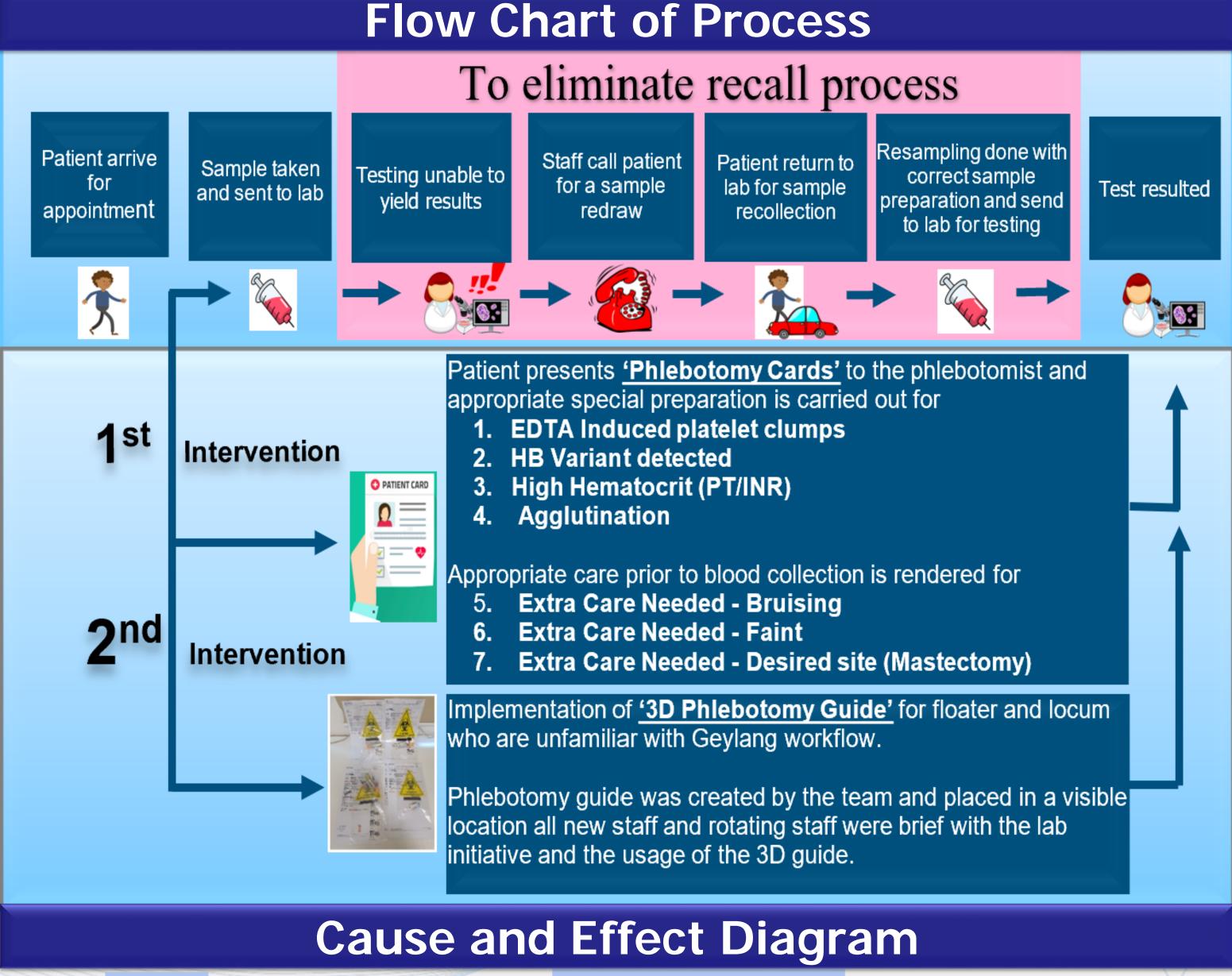


Pre-analytical error

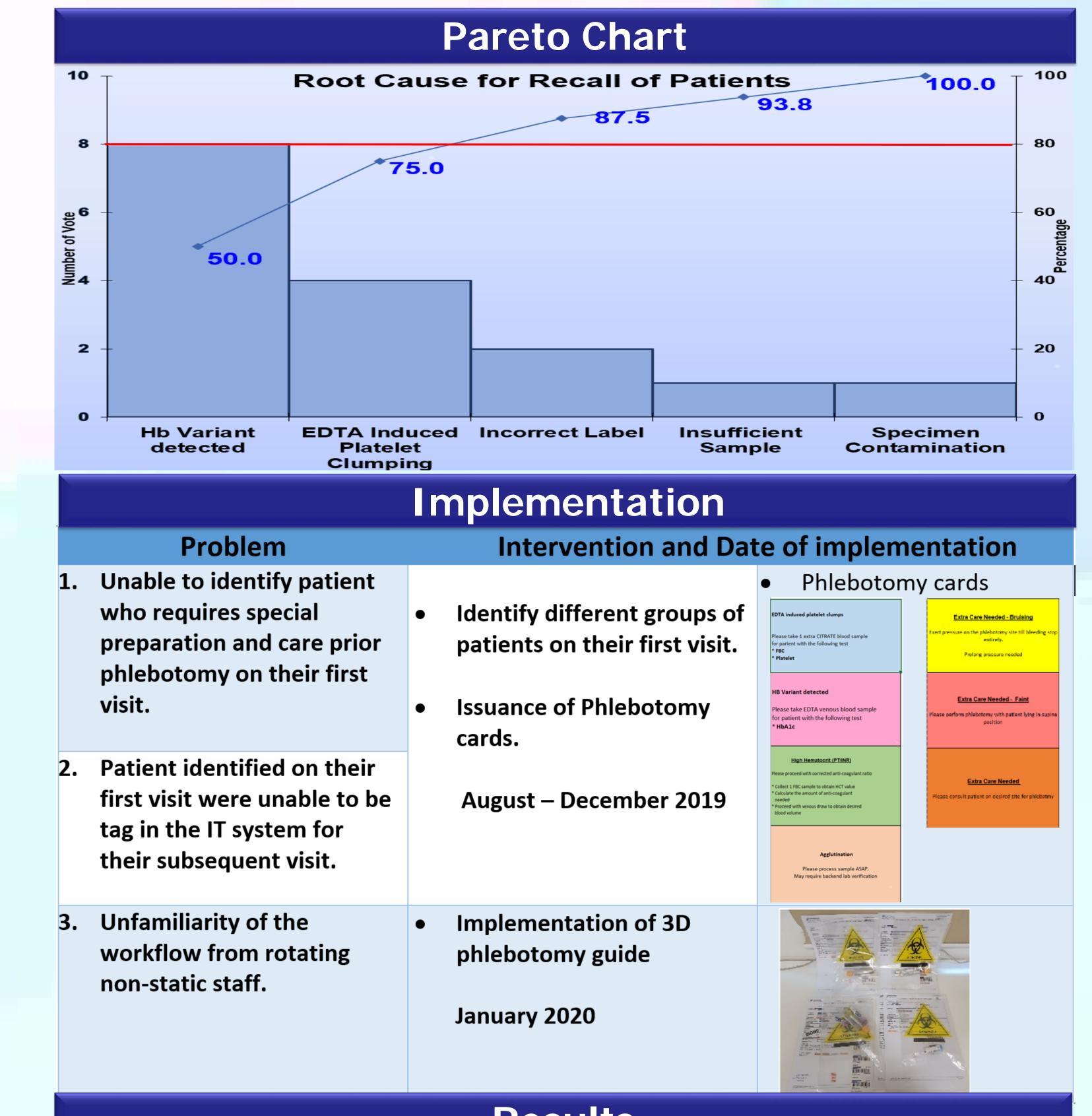
Total of 23 patient recall cases

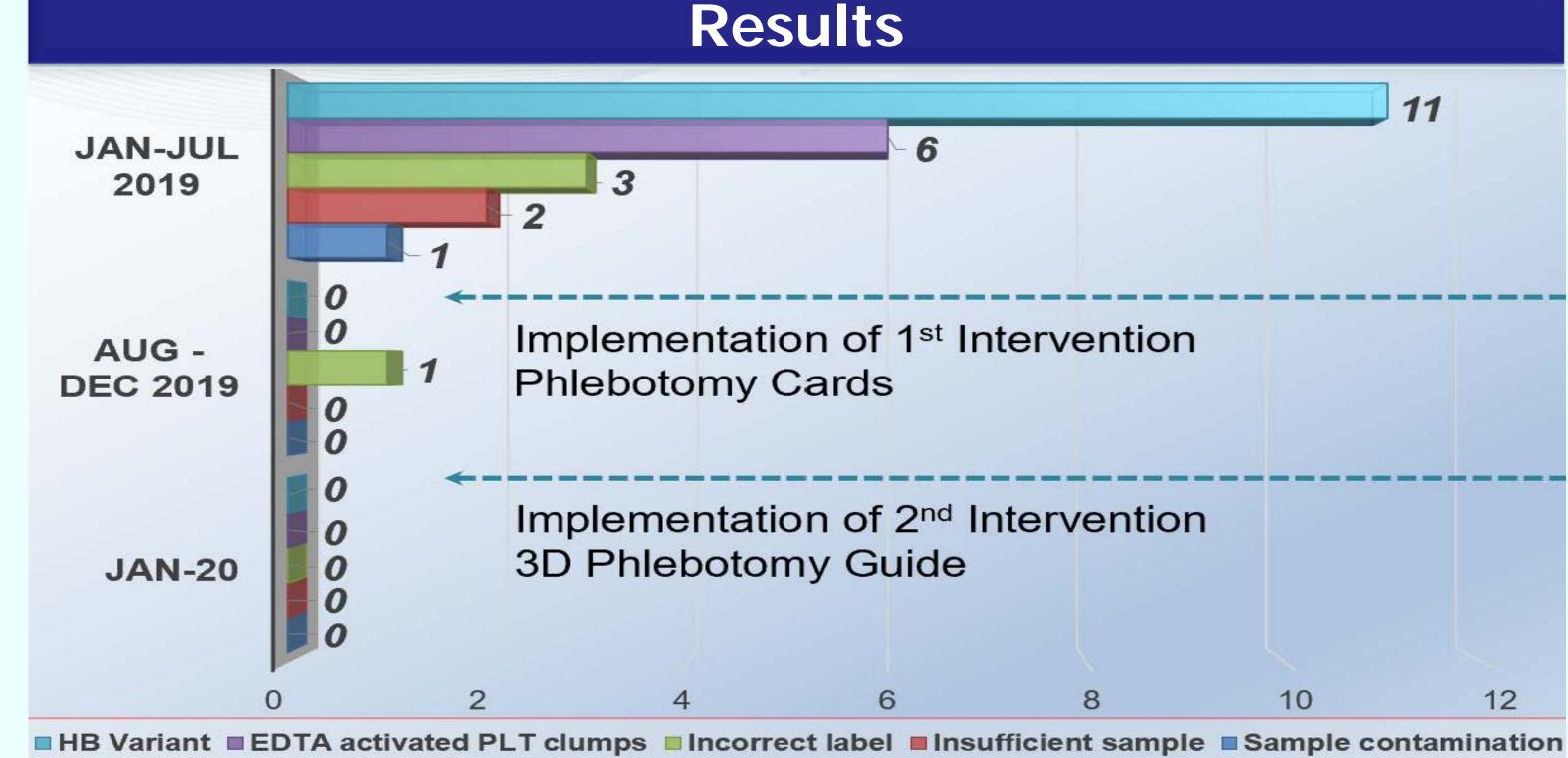
Current Performance of a Process Jan – Jul 2019 recall cases **Specimen** contamination **Incorrect label** Insufficient specimen **EDTA** activated platelet clumping **Hb Variant** Incorrect label **Hb Variant** specimen contamination platelet clumping Pre-analytical error Instrument limitation

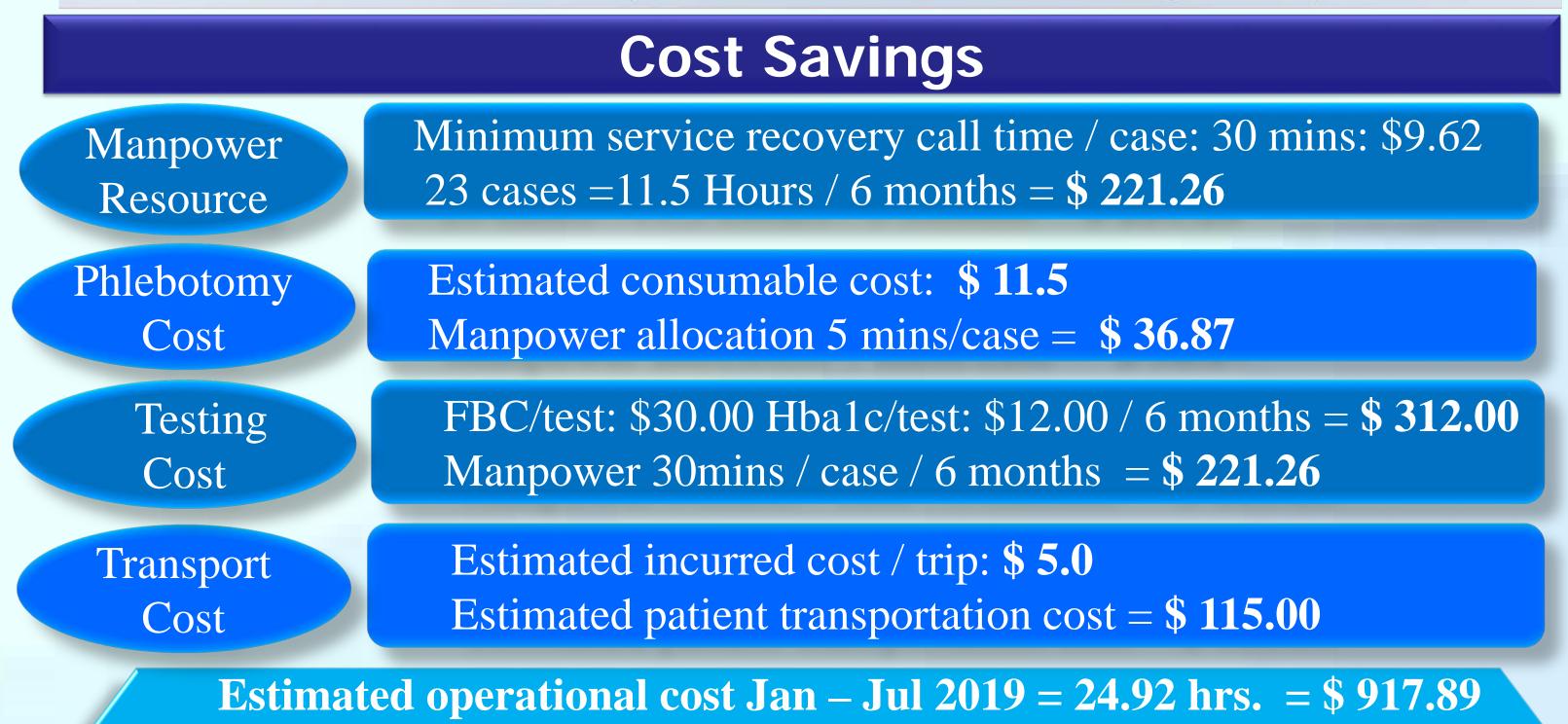
■ Instrument limitation



Lab equipments / Staff Lysed Specimen IT system Insufficient Staff phlebotomy specimen Technique Primary analyzer limitations - Unable to release result for HB variant case, to Specimen Staff missed Staff paste perform test in an alternative methodology contamination to collect specimen (Wrong order specimen of draw) Staff missed out to draw Analyzer methodology Sufficient specimen Analyzer spoilt - unable to IT system Incorrect Patient recalled Proceed with test (come back limitation Unfamiliar with workflow patient Another time when machine is up identification unable to tag locum or floater staff patients Seldom comes to Geylang Lab Re-draw <u>specimen</u> Patient has difficult vein Accession numbers specimen tend to be indication Cannot combine for all lysed, tendency to bruise on request biochemistry test Patient unaware of condition and faint, undergone e.g. DM panel cannot combine (e.g. thalassemia) mastectomy For special with thyroid test sensitivity to tube additives, precaution Patient condition for patient. Corrective action e.g. anemia, From previous underlying Elderly patient tend to be forgetful. Non-conformance hereditary Not followed condition etc. Process/ Measurement **Procedures Patient** (inspection/audits)







Problems Encountered

Estimated savings per year = 49.83 hrs. = \$ 1835.78

Being the first to adopt the initiative, time is needed for staff to adapt into the workflow. Non-static staff added on the challenge on keeping the workflow consistent through the first month of implementation.

The core team is constantly ensuring that the workflow is adhered to through briefing and reminders.

Strategies to Sustain

Sustainability Data Year 2019 to 2021

25 2019 2021

Patient visit presenting Phlebo cards

Recall cases with known history

New Identified cases

- Orientation for new staff and rotating non-static staff of the workflow.
- Audits and data collation. Sustainability data till 2021 shows a significant increase in patient returning with phlebotomy cards which shows patient adherence.
- Recall cases till 2021 shows a sustainable 95% decrease since the implementation of the initiative.