Anticoagulation Clinics within the RCSI Hospital Group and CHO Area

Sarah Carberry, Nicola McMahon, Robert Lawrence, Patricia McDermott & Siobhán Byrne

RCSI DEVELOPING HEALTHCARE LEADERS WHO MAKE A DIFFERENCE WORLDWIDE

RCSI INSTITUTE OF LEADERSHIP

Feidhmeannacht na Seirbhíse Sláinte Health Service Executive

CHO DNCC

RCSI HOSPITALS OSPIDÉIL RCSI

Aim

To make recommendations that improve current practice for patients attending anticoagulation clinics across acute and non acute settings

Context

Currently there is no national model of care for anticoagulation management throughout the different community and hospital based services.[1]

Many of the large volumes of patients attending the acute services could be managed in a community setting.

There is a lack of integrated ICT system between acute and community settings.

What are we trying to accomplish?

Identify current work practices across acute and non acute settings and examine what is currently inhibiting the delivery of services and how these services could be developed.

How:

- Site visits & liaised with staff throughout RCSI/CHO completed by July 2017.
- Obtained feedback from service users. June 2017.
- Review current literature and best practices recommendations by June 2017.[2]

What We Did

Initial scoping of services in Lusk Community Unit and Beaumont Hospital then widened the scope to include: Cavan/Monaghan, Our Lady of Lourdes Hospital Drogheda, Connolly Hospital Blanchardstown, Louth County Hospital, Dundalk, Mater Hospital and St James Hospital.

Networked with:

GP Unit and Primary Care Network Manager in Cavan & Monaghan.

HSE Drugs Management Programme regarding the drugs survey of national INR coverage within acute hospitals.

PCRS guidelines for the prescribing of NOACS drug therapy.

Identified/reviewed the Warfarin management system for patient self management.

Examined the process for the implementation of a national framework for purchasing Warfarin ICT applications.

What We Achieved

- Gained an understanding of work practices across the areas.
- Identified the potential to reduce risk to patients by investing in a computerised dosing system.
- Identified the potential cost saving for the HSE with the expansion of Point of Care & self management systems.
- Provided feedback to the programme sponsor.
- Identified patient turnaround time in the community is faster than hospital setting when using Point of Care.
- Identified the variations of care provided.
- Networking and personal development.

Key Learning

Findings:

- Consistency with INR Results from Point of Care system versus Venous sample (Lusk & Beaumont).
- Community ease of access improved patient experience without compromising quality of services.
- A computerised assisted dosing system is required.[1]
- Publication of findings from the Warfarin Clinic Survey, (2012) has not been implemented.
- High dependency on manual recording systems.
- Appointment structuring system is not user friendly as numerous patients are in receipt of the same appointment time.

Recommendations:

- Investments into Point of Care and self monitoring systems to be considered as these are preferable to unnecessary invasive blood sampling procedures.
- Publication of findings from the Warfarin Clinic Survey, (2012) be implemented.
- Undertake a National census of GP practices to establish the number providing anticoagulation services to patients and possible inclusion in future GP contracts.
- Anticoagulation clinics having access to computerised dosing systems compliment the Point of Care system and venous samples.
- Appointment scheduling systems to be reviewed.

Team

References

1. Warfarin Clinic Survey, National stroke programme, HSE Clinical Strategy & programme direct. (2012)
2. Anticoagulants, including non-vitamin K antagonist oral anticoagulants (NOACS) National Institute for Health and Care Excellence. www.nice.org.uk (2017)

Acknowledgements

Rachel Simon, DON & Glorietta, Lusk Nursing Unit
Joanne Martin, Our Lady of Lourdes
Mary Keogh, Hospital Manager SJH, Patricia Ferrins & Patrick Clerkin, Beaumont Hospital
Anne O'Sullivan, CNM, St James Hospital
Cathal Hand, Cavan/Monaghan Primary Care
Emma Scanlon, NDNP
Laura Leonard PCRS Pharmacist