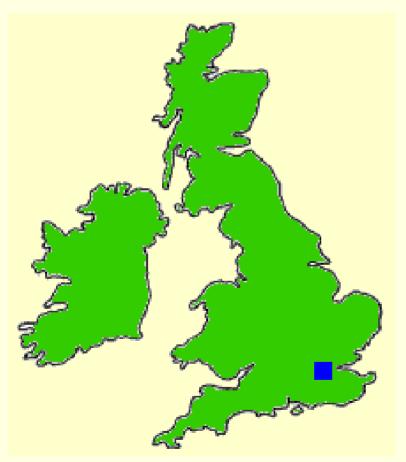
RFID in Hospital



INDIA HARDY

B.Pharm MRPharmS







OVERVIEW

- Patient Safety concerns Why do we want to adopt RFID?
- Electronic Inpatient Prescribing Project What are we doing?
- GS1 HUG How does my participation help the hospital?
- Questions & Answers



Chelsea & Westminster Hospital



DIRECTORATES

- Anaesthesia & Imaging
- HIV & Sexual Health
- Medical
- Surgery
- Women's & Children's Service









- Clinical Governance and Safety to improve continuously patient outcomes and assure patient safety.
- Patient Experience improve all aspects of the patient's experience, make the patient the centre of everything we do through a focus on customer care, and consequently to be the provider of choice.
- **Service Line Reporting** to develop a service portfolio and business model based on a clear understanding of our income and cost base through service line reporting.
- **Teaching and Research** to provide excellent undergraduate and multi-professional teaching.
- **Specialist Services** to maintain and develop our specialist services.
- Strategic Partnerships to develop effective partnerships with all stakeholders, including the Members' Council.
- Workforce to ensure we have a highly skilled, motivated, diverse, productive and customer focused workforce.
- Modern Infrastructure to ensure clinical care is supported and enabled by effective, modern support services.
- Innovation to be innovative with our clinical services and business models, in particular by using our new Foundation Trust freedoms.
- **Integrated Governance** to develop further the Trust's framework for integrated governance.



Patient Safety Reporting



National Patient Safety Agency

National Reporting and Learning System (NRLS)



Local Risk Management Systems (LRMS)

Germany

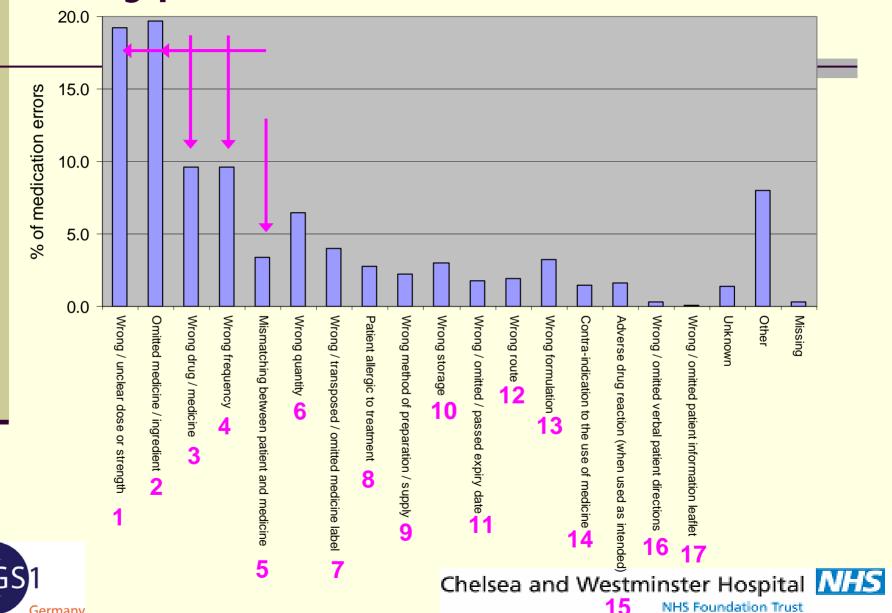
Local Risk Management Systems (LRMS)

Local Risk Management Systems (LRMS)

'any unintended or unexpected incident that could of or did lead to harm for one or more patients receiving NHS-funded healthcare'

Chelsea and Westminster Hospital WHS

Type of Medication Errors



Electronic Patient Record (EPR)

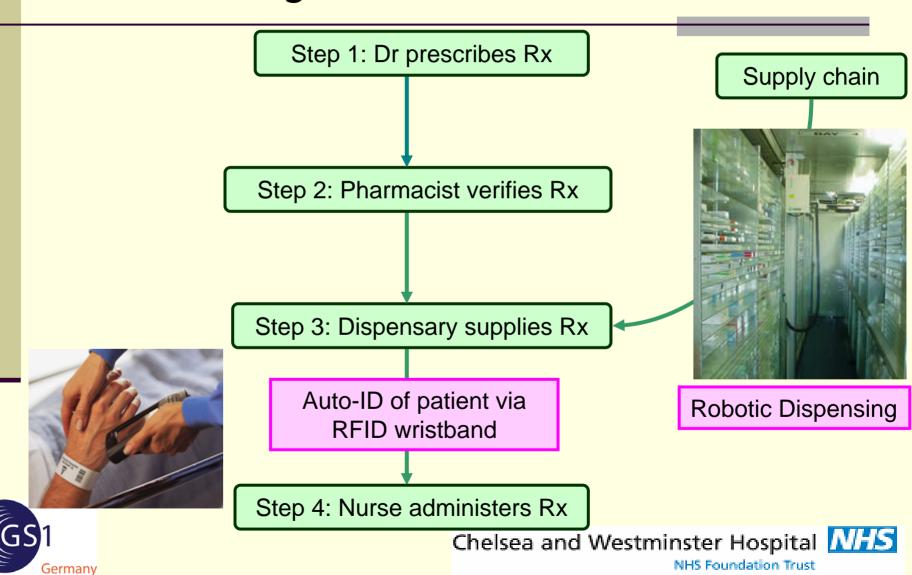




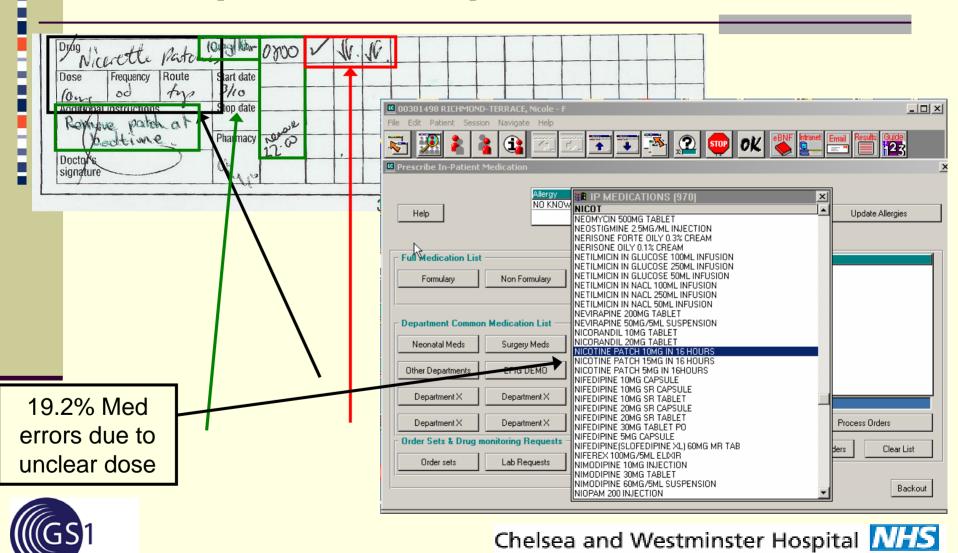


© 00301371 REALISATION, Benefit - F	_ X
File Edit Patient Session Navigate Help	
Patient Information Requests/Results Allergies Inpatient Functions Outpetient Functions Of Other O	
Clinical Data - Height/Weight & Allergies/Intolerances (Last reviewed by: HARDY, INDIA 2 Enter Height and Weight	2May2006)
or Height (feet): 5 ft 5 in or Weight (lb): 110 lb 4 oz Body Surface Area (m2): 1 Medication (Allergy or Intolerance) Reaction Update/Delete Reason Update	53 e Delete
PENICILLINS VAnaphylaxis V V V V V V V V V V V V V	
Food Intolerance Update/Delete Reason Update/Delete HELP-	
Contrast Media Intolerance	lp
Other Intolerances	
View Allergy/ Intolerance Audit O Food O Medication View Admission Observations Backout All Data Reviewed and	Saved✓
Allergies reviewed! HARDY, If CW F	REGCLIN1

Project Workflow

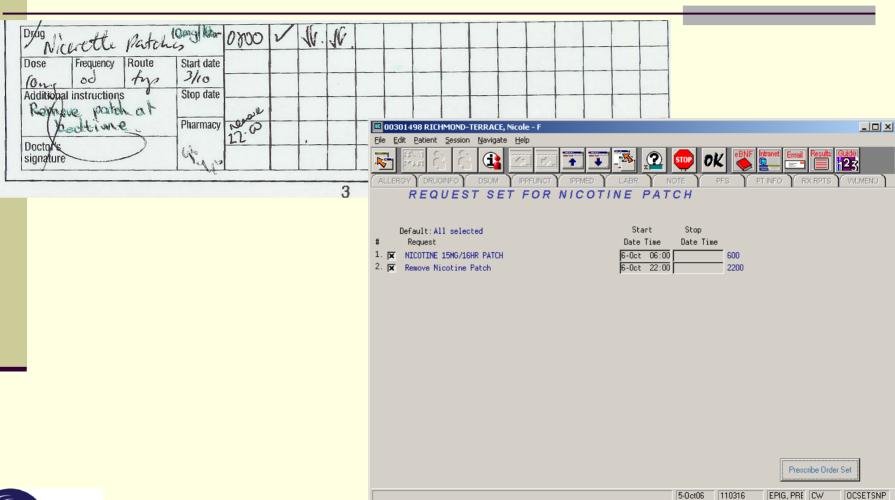


Step 1: Dr prescribes Rx



Germany

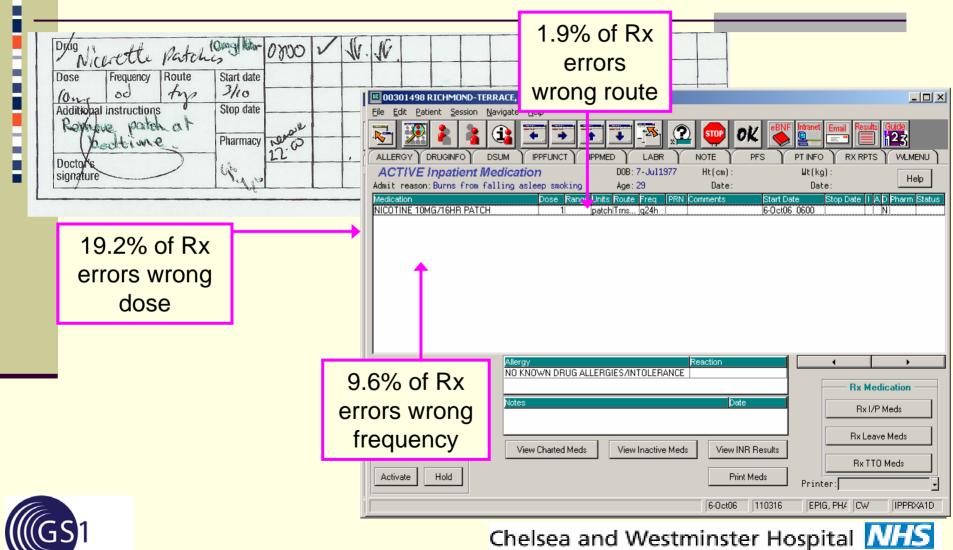
Order Sets







Default dosing



Germany

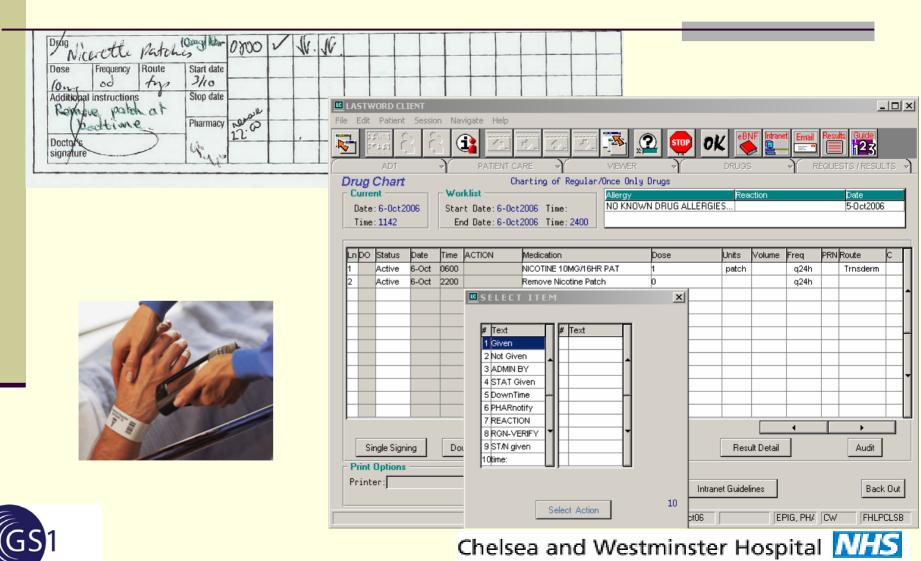
Step 3: Dispensing of Rx



- Dispensary is technician lead to free pharmacist up for clinical duties
- over 80% of lines are dispensed automatically from robot
- robot picks over 100,000 pack per month



Step 4: Nurse Charting



Germany

Why RFID?

- Non contact data transmission
 - Improved infection control
- No direct line of sight required
 - Can scan through bed sheets etc...
- Less read failures
 - saves nursing time





Error Reduction

Medication Errors	How Reduced?
1. Wrong / unclear dose or strength	FDB Compendium
2. Omitted medicine / ingredient	Order Sets
3. Wrong drug / medicine	FDB Compendium; Robotic Dispensing
4. Wrong frequency	Default Dosing
5. Mismatching between patient and medicine	Auto-ID using RFID wristband
6. Wrong quantity	FDB Compendium; Robotic Dispensing
7. Wrong / transposed / omitted medicine label	No transcription
8. Patient allergic to treatment	Allergy checking
9. Wrong method of preparation / supply	2.2%
10. Wrong storage	3.0%
11. Wrong / omitted / passed expiry date	1.8%
12. Wrong route	Default Dosing
13. Wrong formulation	FDB Compendium
14. Contra-indication to the use in relation to drugs or condition	Allergy/Interaction Checking
15. Adverse drug reaction (when used as intended)	1.6%
16. Wrong / omitted verbal patient directions	0.3%
17. Wrong / omitted patient information leaflet	0.1%
Total Not addressed by project	9%





Why is it important for Chelsea & Westminster Hospital to be part of HUG?



5 RIGHTS of the PATIENT

- right PERSON
- right MEDICINE
- right DOSAGE
- right TIME
- right ROUTE of ADMINISTRATION

AUTHENTICITY

TRACEABILITY





Why is it important for Chelsea & Westminster Hospital to be part of HUG?



interface with manufacturers, wholesalers, other hospitals

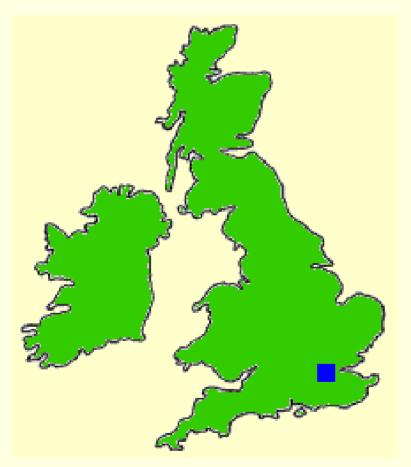
assists process planning, horizon scanning, workflow design and project direction

timeline and decision making





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