

# The Leeds ACS Transformation Journey.

“Are we nearly there yet?”

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# Here we go...

- \* A “quick” recap of my presentation in October 2014
- \* Leeds ACS Transition Project Overview
- \* Timeline
- \* Achievements and Issues
- \* Lessons Learned

# A Recap...

- \* Leeds Anticoagulant Service redesign
- \* 2011
  - \* New leadership. Consultant, Pharmacist, BMS
- \* 2012
  - \* Stakeholder meetings with Leeds PCT
  - \* Internal improvement projects
  - \* Introduction of capillary PoCT to Hospital clinics
  - \* PCT risk assessment

# A Recap...

- \* 2013

- \* Visits to other sites (thank you Wansbeck, Blackpool and others)
- \* Service model appraisals

- \* 2014

- \* Investigation of alternative technologies
- \* DOAC clinics
- \* Meeting with Leeds West CCG

# A Recap...

- \* April 2014
  - \* Initiation of project
  - \* Working with Leeds West CCG, Quintiles project management, Bayer, Boehringer-Ingelheim, Pfizer
  - \* 12 month project plan
  - \* PRINCE2 principles
  - \* Project board and working groups

# Leeds ACS Transition Project

- \* Old Model
  - \* Venous sampling
  - \* Laboratory testing
  - \* Remote dosing
  - \* Contact by telephone
  - \* Posting results / doses

# Leeds ACS Transition Project

- \* New (Current) Model
  - \* Hub and Spoke model
  - \* PoCT testing
  - \* Near patient dosing
  - \* Face-to-face clinics
  - \* Hand back dose

# Leeds ACS Transition Project

- \* Clinical intervention
- \* Reduced Admissions
- \* Total connectivity\*
- \* Patient Self Testing
- \* Electronic dose advice

\*we're working on it

# Workstreams

- \* Staffing and Delivery
- \* Facilities and Estate
- \* Costing and Tariff
- \* Domiciliary Visits
- \* IT and Connectivity
- \* Engagement and Communications
- \* Training and Education
- \* Service Management



# A Brief History

- \* May 2014
  - \* First meeting of Project Board
- \* June 2014
  - \* Workstreams established
- \* July 2014
  - \* First meeting to discuss community site locations
- \* September 2014
  - \* Visits to potential pilot sites
- \* November 2014
  - \* Service protocol validation
  - \* No agreement on sites

# A Brief History

- \* February 2015
  - \* Sign off of Pathology MSC
  - \* Still no agreement on sites
- \* March 2015
  - \* Nurse Manager Interview (Hi Karen)
- \* June 2015
  - \* Project board disbanded
  - \* Nurse Manager Started
- \* July 2015
  - \* Hub site location opened
  - \* Refurbed spoke clinic at WGH
- \* August 2015
  - \* Additional staffing – nurse, BMS and clerical
  - \* Still no final agreement on sites

# A Brief History

- \* February 2016

- \* First community site with new model – VPN access

- \* March 2016

- \* Patient information leaflets designed
- \* Small number printed

- \* April 2016

- \* Purchase of laptops and portable printers
- \* Patient engagement to begin
- \* Still no final agreement on sites

# A Brief History

- \* May 2016

- \* Communication to patients regarding new service design and relocation of some services
- \* *Still no final agreement on sites*

- \* June 2016

- \* Sites finalised (?)
- \* Some confusion over days / times

- \* July 2016

- \* “Big Bang”. Sites and services transitioned
- \* Huge influx of calls and PALS

# A Brief History

- \* July 2016

- \* Issues with VPN connections – unworkable
- \* VPN concentrators tested and purchased

- \* August 2016

- \* PoCT rolled out for all HVs

- \* October 2016

- \* Made it! - almost

# What have we Achieved?

- \* Hub and Spoke model
- \* PoCT testing
- \* Near patient dosing
- \* Face-to-face clinics
- \* Hand back dose
- \* Clinical intervention
- \* Reduced Admissions
- \* Total connectivity\*
- \* Patient Self Testing
- \* Electronic dose advice

# What have we Achieved?

- \* Hub and Spoke model
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# Issues

- \* Staffing
- \* IT and connectivity
- \* Obtaining estate
- \* Patient (dis)satisfaction
- \* Synchronising a large project
- \* Communications

# What have we learned?

- \* Communication!!!
- \* Patients do not like changing venues!
- \* Outside agencies are difficult to manage
- \* I.T. may take longer than you think
- \* VPN concentrators are sent from heaven

# What have we learned?

- \* Phlebotomists move on very quickly
- \* Band 6 BMS = Hen's Teeth!
- \* Use your suppliers
- \* Inventorise your equipment
- \* Portable equipment is not robust

# What have we learned?

- \* Take baseline measurements and review
- \* Nurses rule!
- \* Some things are just outside of your control
- \* ALWAYS have a plan B