Change Management in POCT

Marion Fokkert

POCT Manager / Customer Care Coordinator
Clinical Chemistry Laboratory

Isala klinieken Zwolle, the Netherlands

Prague 2012
Sorry.........Dutch
A moment please😊
Take Home Message

1. Adjust to surroundings / customers
Change management is an approach to shifting/transitioning individuals, teams, and organizations from a current state to a desired future state.
Kotter (Authority on leadership and change) defines change management as the utilization of basic structures and tools to control any organizational change effort. Change management's goal is to *minimize the change impacts on workers and avoid distractions*.
Fokkert 2001

Get the job done!
POCT in Hospital
POCT:

Lab testing performed by a nurse near to or at the site of patient care!!

Big change for lab technicians, nurses and doctors
Challenge!

1. Increase stat-glucose samples
2. Increase 3-hour glucose sampling: actrapid infusions
3. Evening/Night shifts: difficult to handle peaks in sampling

→ Clinical chemist:
   Create POCT-coordinator job!
   I had a dream: let her implement POCT!
Create POC-coordinator job!
To induce changes!

- Naturally skilled focused POC-coordinator or trained by education
- Lab-manager: coach POC-coordinator, don’t do it yourself!
- POC-coordinator decides where what information is needed and provided!
POC-Coordinator personality

- Diplomatic, conflict resolution
- Approachable, empathetic and objective
- Multi-discipline team working
- Calm and collected
- Stubborn
- Tolerance
- Patience
- Understanding
- Calmness under fire
- Non threatening

Humor!!!!!!!!!!
POC-Coordinator

• Communication skills
  Communicate with physicians, lab directors, nurses, technicians, companies, IT-employees

• Technically well grounded
  Solve challenges like unexpected high/low results

• Knowledge of IT
  Connection HIS/LIS/EMR; standardized connection protocols

• Combine those in optimal way

• Not just an extra task (24/7 job!)
  Too much workload, too many different aspects, focus is lost etc.

• Specialized knowledge of diseases e.g. diabetes
  Know the consequences of errors in order to react accurate
Implementing POCT
Lab supports POCT

- If it is better for patients
- Physician or patient requests POCT and medical question solved rapidly
- Minimal quality criteria are met
- Lab checks the quality
- Lab has authority to exclude end-users
- As long as lab is able to support POCT in the hospital
- All POC-data collected in LIS or Electronic Health Record
Who shall I approach at start?

- Internist
- Head Clinical Departments
- Board of Directors
- Financial Department
- IT Department
- Manufacturer
Questions to be raised?

• Diabetologists: Requirements glucose instruments?
• Head Clinical Departments: Many advantages, shall we implement?
• Board of Directors: Nurses will do lab handlings bedside!
<table>
<thead>
<tr>
<th>Questions to be raised?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Financial Department:</strong></td>
</tr>
<tr>
<td><strong>IT-department:</strong></td>
</tr>
<tr>
<td><strong>Manufacturer:</strong></td>
</tr>
</tbody>
</table>
Acceptance POC by Nurses

- Lab “always” late
- Wake-up patients
- Patient not present for 3-points glucose curve measurements

Minimize actions nurses:
- Sufficient supply of teststrips etc.
- Performance internal QC
- Special things: call lab (24/7-lab)

Do you have a better idea?
Acceptance POC by Nurses

- 1 lotnumber in clinic: lab changes lotnumber
- Internal QC bottles: lab changes bottles
- Same configuration all meters
- Spare meters
- POC-contact nurse on every ward
POC in GP-OFFICE
POC General Physicians Office

- TAT is important
- Less patient transport needed
- Patient friendliness is important
- Reduce cost: only on indication referral to hospital
- Less consults
- Less unnecessary worry for patient
Challenges POC in GP-office

- Cost POCT
- Maintenance POCT?
- Ad-hoc decisions
- More questions
- Overabundance testing?
- Responsibility for POC diagnostics?
- Time saving patient and GP?
Change management GP-office

• Guideline acute coughing
• Creates a need for POC-CRP in GP-office
• Successful pilot: shows advantages of POC under guidance lab
• Colleague GPs are enthusiastic
• Wish for more under the guidance of lab
• Lab organises: analyser, protocols, quality control, IT (as less as possible handling by GP-employees)!
Conclusion

Make aware that point-of-care needs employees with customer care skills!
- Custom made action regarding nurses, physicians, departments
- Reduce unnecessary handlings
- Help end-users to stay focussed on the patient!
- Make it a team effort!
Take Home Message

1. Adjust to surroundings / customers
Very impressing colleague, does it work in theory?