

Point of Care Testing Committee Meeting

Minutes of Meeting held at 1:30 pm on 13.06.17
NICU Seminar Room

(All actions to be completed by next meeting unless otherwise stated)

Present

Name	Title	Initials
Jo Hodson (Chair)	ANNP/ Lead Nurse Neonates	JHo
Amanda Speed (minutes)	Biochemistry Laboratory Manager	AS
Annette Hall	Chief Biomedical Scientist (Bio)	AH
Bettina Deacon	Medical Equipment Manager	BD
Diane Dorrington	Practice Development Nurse	DD
Dr Daniel McKenzie	Consultant Cardiologist	DM
Mitchell Reed	Chief BMS Microbiology	MR
Nicola Hodges	Senior Biomedical Scientist (Bio)	NH
Sarah Goodwin	Sister, NICU	SG

		Action
1.	<p>Apologies</p> <p>Lesley Shipway, Pathology Quality Manager Leon Massie, Diabetes Specialist Nurse (apologies received by secretary during the meeting)</p>	
2.	<p>Overview</p> <p>2.1: Equipment</p> <ul style="list-style-type: none"> <u>Radiometer, blood gas analyser, Respiratory ward:</u> Ongoing concerns relating to poor potassium (K⁺) performance highlighted by poor external quality assurance (EQA) results. Geraldine O'Connell Ramsay (Respiratory) is investigating resolution to the ongoing issues. Assurance is required that the K⁺ results are NOT used for patient treatment. Can the K⁺ channel be disabled? Radiometer should be contacted to advise on this. JHo to contact GOR (respiratory). <u>Instrument connectivity to LIMS:</u> The meeting discussed the importance of electronic result transmission to patient result files. This should be from all PoCT instrumentation but particularly high usage equipment such as gas analysers and glucose meters. 	JHo

There was concern that many results are not recorded (manually transcribed or print out secured) in patient notes. It is particularly important for patients on repeat hospital appointments, e.g. Respiratory department, that access to previous results is available in their entirety. Risk from transcription errors was highlighted. Results may be recorded on inpatient charts rather than directly into patient notes. Not all staff appear to have access to historical/previous patient results on ICE. AS to investigate.

AS (Done – see post meeting note)

Post meeting note: In ICE historic patient data is archived/filed. To access historical results (currently any result older than 2015) 'click' the 'file' symbol at the top right hand corner of the ICE screen. A message will display. Wait approx. 30 seconds. Re-access the patient and older results will then be displayed.

- Upgrade to Glucose meters from PXP's to FPPS:
Gradual roll out of new meters across the Trust is ongoing. New FPP meters will have wireless connectivity to the upgraded central server (held in Pathology). The new server (UniPoCT) should be installed in early July 2017.
Glucose monthly meter training by Abbott includes the changes to the FPP meters. These changes are minimal and the old and new meters look very similar.
- PoCT Equipment register:
Is held on QPulse management system within Pathology. *Please note:* Pathology does not own PoCT equipment. This equipment must also be registered on local equipment inventories. AS to send copy of QPulse PoCT equipment register to JHo.
- Blood gas analysers:
Roche analysers are on A&E, MAU, NICU, BBC and Cath lab. Laboratory also has Roche BGA, ITU and Respiratory have Radiometer BGAs.

AS

2.2: UKAS Accreditation (ISO 22870:2006)

- JHo had a meeting with LS. A quality co-ordinator is required to allow accreditation to progress in a timely and appropriately supported manner. JHo has had meetings with RUH executives to discuss both accreditation and PoCT co-ordinator post. The business case for the PoCT co-ordinator post will be

	<p>taken to surgical board meeting at the end of June.</p> <p>2.3: Quality Management Systems See ISO Accreditation (above + below)</p> <p>2.4: Quality Board</p> <ul style="list-style-type: none"> JHo has met with the board to discuss the importance and benefits of UKAS accreditation for PoCT services. The RUH Trust PoCT Policy has been updated and needs to be ratified. JHo to progress <p>2.5: Progress with POCT BC</p> <ul style="list-style-type: none"> PoCT co-ordinator business case has been reviewed by Dr Wexler, Clinical Director of Pathology, L. Payne-Johns, Business Manager of Pathology, and Laura McDonald, Surgery Finance Manager. This was left off the agenda at the April surgical board meeting. Scheduled May meeting was cancelled. To be presented at surgical board meeting at end of June. Currently being re-written in Foundation Trust template (See also 2.2 above) 	<p>AS</p> <p>JHo</p> <p>AS</p>
<p>3.</p>	<p>Staff Training</p> <ul style="list-style-type: none"> <u>Internal:</u> Refresher training for use of pregnancy/HCG sticks has been done on several wards recently (by Biochemistry). This followed audits or poor EQA returns that prompted actions. <u>External:</u> Pregnancy EQA (External Quality Assessment) samples continue to cause concern with incorrect results (Pos v. Neg) being reported for HCG levels significantly greater than the sensitivity of the pregnancy sticks (25 iU/L = sensitivity). <u>NB:</u> the business case for automatic readers (?2010) was refused by the Trust. AS to locate this business case, update and re-present. <u>Staff competencies (for PoCT):</u> A copy of completed competency sheets for PoCT equipment should be kept on the relevant ward by the ward manager(s) and be available for audit. A copy should also be kept by the member of staff for their own CPD records. 	<p>AS</p>

	<ul style="list-style-type: none"> • <u>Electronic / on-line competency testing:</u> Is the way forward. Many companies (e.g. Abbott, Roche) have some facilities/support for this but RUH ESR/Star database has firewalls that prevent connectivity to some of these resources. Amanda Gunning, Education Centre, will be contacted in the future to progress this. • <u>Pegasus:</u> Is the medical equipment database that includes competency recording for RUH staff for medical equipment. Pegasus highlights in red competencies overdue for renewal but does not lock out/prevent staff from continuing to use the equipment. (Abbott glucose meters and Roche BGAs will lock out users with expired competencies. Please note glucose meters and BG analysers are defined as PoCT not medical equipment) • Abbott Diagnostics have been including FPP glucose meter update training in their regular RUH training sessions. (Co-ordinated by Diabetes Team.) • Blood ketone training using the PXP/FPP meters will be scheduled with Abbott prior to roll out of blood ketone usage to the 4 wards identified as priority by the Diabetes Team. 	AS
4.	<p>Significant Incidence/Datix</p> <ul style="list-style-type: none"> • <u>Datix incidents:</u> There are many overdue daitx investigations relating to poor EQA results or non-return of EQA results. AS to close any reports still open prior to April 2017. (This has been discussed with risk management). • <u>Patient Safety:</u> Concerns relating to poor performance with current pregnancy sticks already discussed (see above). 	AS
5.	<p>Audit</p> <ul style="list-style-type: none"> • Blood sciences to produce audit report for this meeting. There has been insufficient time to do this for today. • Audit on use of emergency numbers – attached. Higher than expected use of emergency numbers for patient identification on BGA and glucose meters servers 	

	<p>(servers are located within Biochemistry. Future audits which highlight persistent offenders who consistently use emergency numbers will be notified to ward managers. There are specific issues on NICU where a new-born baby cannot be pre-registered on the 'spine' which may cause higher use of emergency numbers than expected. Biochemistry to discuss allowing use of names where MRN number not known/not available.</p>	Bio
6.	<p>AOB</p> <ul style="list-style-type: none"> Bilirubinometers (transcutaneous) on NICU and birthing centres have raised concerns about data/result capture/recording. Each meter stores about 250 patient results which are 'wiped' when the meters become full. The company have advised on download of results to another database so these results will be unavailable if they are not recorded in patient notes. 	

Date and time of next meeting: 12 October 2017 3:00pm NICU Seminar Room