Excerpt from ‘eBlood BloodNet Interface Project Summary 19 August 2013’

Benefits

Time Savings

Laboratory Inventory management of Blood Components & Products prior to implementation of the e-Blood/BloodNet Interface included a number of processes:

1. Counting of Inventory

2. Creating a New Stock Order in BloodNet

3. Receipting Inventory in BloodNet

4. Receipting Inventory in e-Blood

5. Fating of Inventory in BloodNet

The only process not affected by the interface is Process 3. Receipting Inventory in BloodNet. The implementation of the interface has resulted in significant Time Savings for All other processes in Inventory Management. The size of the savings is related firstly to the volume of Inventory managed & secondly to the range of Inventory managed.

Therefore Laboratories with the largest volume & range of Inventory have experienced the largest Time Savings.

Hunter Area Pathology Service (HAPS)

|  |  |  |  |
| --- | --- | --- | --- |
| John Hunter Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 45 | 2 | 43 |
| Create New Stock Order inBloodNet | 10 | 1 | 9 |
| Enter New Stock into e-Blood | 45 | 0 | 45 |
| Fate Inventory in BloodNet | 10 | 0 | 10 |
| TOTAL | 110 | 3 | 107 |
|  |  |  | 97% |

6 days per week

Pacific Laboratory Medicine Services (PaLMS)

|  |  |  |  |
| --- | --- | --- | --- |
| Hornsby and Ku-Ring-GaiHospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface(min) | Savings |
| Count Inventory | 10 | 2 | 8 |
| Create New Stock Order | 10 | 2 | 8 |
| Enter New Stock into e-Blood | 30 | 0 | 30 |
| Fate Inventory in BloodNet | 5 | 0 | 5 |
| TOTAL | 55 | 4 | 51 |
|  |  |  | 93% |

4-5 days per week, 1-2 times per day

|  |  |  |  |
| --- | --- | --- | --- |
| Manly District Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 0 | 10 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 10 | 0 | 10 |
| Fate Inventory in BloodNet | 2 | 0 | 2 |
| TOTAL | 27 | 1 | 26 |
|  |  |  | 96% |

 3-5 days per week

|  |  |  |  |
| --- | --- | --- | --- |
| Mona Vale District Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 0 | 10 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 10 | 0 | 10 |
| Fate Inventory in BloodNet | 2 | 0 | 2 |
| TOTAL | 27 | 1 | 26 |
|  |  |  | 96% |

3-5 days per week

|  |  |  |  |
| --- | --- | --- | --- |
| Royal North Shore Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 20 | 3 | 17 |
| Create New Stock Order | 15 | 3 | 12 |
| Enter New Stock into e-Blood | 15 | 0 | 15 |
| Fate Inventory in BloodNet | 5 | 0 | 5 |
| TOTAL | 55 | 6 | 49 |
|  |  |  | 89% |

7 days per week, 2-3 times per day

|  |  |  |  |
| --- | --- | --- | --- |
| Ryde District Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 0 | 10 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 10 | 0 | 10 |
| Fate Inventory in BloodNet | 2 | 0 | 2 |
| TOTAL | 27 | 1 | 26 |
|  |  |  | 96% |

3-5 days per week

Pathology New England (PNE)

|  |  |  |  |
| --- | --- | --- | --- |
| Glen Innes District Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 1 | 9 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 10 | 0 | 10 |
| Fate Inventory in BloodNet | 2 | 0 | 2 |
| TOTAL | 27 | 2 | 25 |
|  |  |  | 93% |

1-2 days per week

|  |  |  |  |
| --- | --- | --- | --- |
| Inverell Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 1 | 9 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 10 | 0 | 10 |
| Fate Inventory in BloodNet | 2 | 0 | 2 |
| TOTAL | 27 | 2 | 25 |
|  |  |  | 93% |

1-2 days per week

|  |  |  |  |
| --- | --- | --- | --- |
| Pathology New EnglandArmidale | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 1 | 9 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 10 | 0 | 10 |
| Fate Inventory in BloodNet | 2 | 0 | 2 |
| TOTAL | 27 | 2 | 25 |
|  |  |  | 93% |

2-3 days per week

|  |  |  |  |
| --- | --- | --- | --- |
| Pathology New EnglandTamworth | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 1 | 9 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 15 | 0 | 15 |
| Fate Inventory in BloodNet | 3 | 0 | 3 |
| TOTAL | 33 | 2 | 31 |
|  |  |  | 94% |

2-3 days per week

Mid North Coast Pathology Service (MNCPS)

|  |  |  |  |
| --- | --- | --- | --- |
| Manning Rural Hospital | Pre-BloodNet Interface (min) | Post-BloodNet Interface (min) | Savings |
| Count Inventory | 10 | 0 | 10 |
| Create New Stock Order | 5 | 1 | 4 |
| Enter New Stock into e-Blood | 20 | 0 | 20 |
| Fate Inventory in BloodNet | 5 | 0 | 5 |
| TOTAL | 40 | 1 | 39 |
|  |  |  | 98% |

2-3 days per week

Other Benefits

Data Accuracy

Removing the potential for human error in data entry either when receipting into e-Blood or when providing Inventory levels or Fate information to BloodNet has resulted in more accurate/reliable data. Having more accurate data allows us to better address the issues raised by ‘The Stephen Review’,

i.e.

• Financial Due Diligence

• Budget Devolvement

• Supply Planning

• Stock Management

• Clinical Usage reporting & data analysis

Increased Data

It should be noted that the interface has allowed for the collection/exchange of data that was not

handled/exchanged prior to the interface. This includes:

• Counts of Allocated Components & Products sent to BloodNet

• Automatic receipt of Modifier & Phenotype data into e-Blood

• Fate information sent to BloodNet for Allocation, De-Allocation & Transfusion events.