Improvements made so far:
- New referral process was introduced to manage referrals more efficiently and ensure nurses were informed of date & time of OP appointment
- Referral Form B (resumption to primary care provider) updated to reduce amount of administration for referrers.
- Aiming for 50% reduction in overtime not worked due to annual/sick leave significantly reducing staff numbers and loss of bank holidays increased workload on other days.
- Due to the improvement in productivity in the appropriate job roles by 31 January 2014, the graph below includes ALL paid overtime worked in the department, not just nursing staff (eg pharmacy support etc)
- New rota system introduced
- Set up anticoag inbox to aid internal staff enquiries
- Anticoagulation CNS launched education campaign to all directorates supported their ongoing practice with simplified flow diagrams for patients
- Community care guidelines developed with community staff to support the administration of anticoagulants in care homes and by community staff
- Patient Safety

Improvements made so far:
- Introduced EMR anticoagulation module rewritten for junior doctors
- Strengthened leadership through appointment of Matron, CNS Anticoagulation and CNS VTE
- VTE appointments, with no effect seen yet in reduction of Warfarin numbers
- Associate Specific Aim: We aim to decrease the amount of overtime worked by nursing staff within the Anticoagulation clinic from an average of 3 hours in April 2013 to <1.5 hours in October 2013.
- Patient Safety

Improvements made so far:
- Turnaround Times Summary

Visits to our Anticoagulation Intranet Site:
http://www.sth.nhs.uk/NHS/SpecialisedMedicine/Haematology/AntiCoagulationAndThrombosisPrevention/