

Newsletter

Demand Optimisation

Issue 1
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Following the success of phase I of NDOG, the Scottish Government has provided funding for a further 12 months to support a national workplan to build on ongoing work and embed the recommendations of the report into operational practice. The NDOG is a multi disciplinary group represented by all laboratory disciplines, Radiology, Scottish Government, NSS and the Realistic Medicine Team.

The second phase of NDOG began with a workshop on 15th February to identify the key areas that will result in the realisation of this vision. This included:

- National alignment with strategic priorities
- Specialty specific workstreams
- Development of an Atlas of Variation
- Communications and engagement



The second DOG II meeting was held on 25th April. Updates were provided on:

National alignment with strategic priorities- Alignment with Shared Services Data Programme

Shared Services are developing a Datamart which will provide an almost real time dataset for numerous purposes, including regional and national planning. This is in alignment with the demand Optimisation's vision of data collection and output for Business Intelligence. A review of reports showed that there were no standard processes and codes across the hospitals and health boards and this was recognised as the first step to be addressed, in order to correctly process all the test codes from all health boards. It was agreed that all networks were to identify and produce a list of top priority tests that will be used as a benchmark to identify the challenges faced with standardisation which, in turn, will determine how to progress the project.

Specialty specific workstreams

Biochemistry- The sub-group have met and agreed on the key areas that will be tackled through the Biochemistry D.O. These include FSH, U&E and Vit. D testing. In addition, tests for inclusion in the Atlas of Variation have been agreed.

Microbiology- have agreed their workstreams and compiled their methodology. A short life working group has been established to review the requirements for TB testing and pilot sites have been identified to lead on the leg ulcer swabs (Lothian) and high vaginal swabs (Dumfries and Galloway).

Pathology- have endorsed their 3 workstreams: optimising demand on appendicium reporting, review of Megablocks on reporting and molecular testing. The data fields relevant to demand optimisation are already included in their annual data report.

Haematology- have suggested some new tests for inclusion in the Atlas of Variation.

Atlas of Variation

IMS revealed a new GP dashboard that has been produced using test data provided by GP practices. The dashboard can split the data to regions, individual practises and provide an overview of the testing requests. Each GP who will have access to the dashboard may also access data of other practices in their own area and across Scotland, providing the opportunity to compare for benchmarking. The National Realistic Medicine team are in support of the programme and keen to develop the atlas in partnership with their team. In addition, they are assisting with the purchase of software licences for a small number of GPs.

