

## NHS Tayside

### *Introduction to Tayside Clinicians of the Evidence Based Minimum Retesting Interval for Cross Reactive Protein (CRP) Requests*

A joint initiative between the RCPATH and the ACB produced the first publication of evidence based minimum retesting intervals (mri) for Biochemistry investigations in 2014. At the time, a number of different approaches were being tested in Tayside as a means to encourage Diagnostics service users to consider the need for a test, through the consideration of the latest guidance, at the point of requesting.



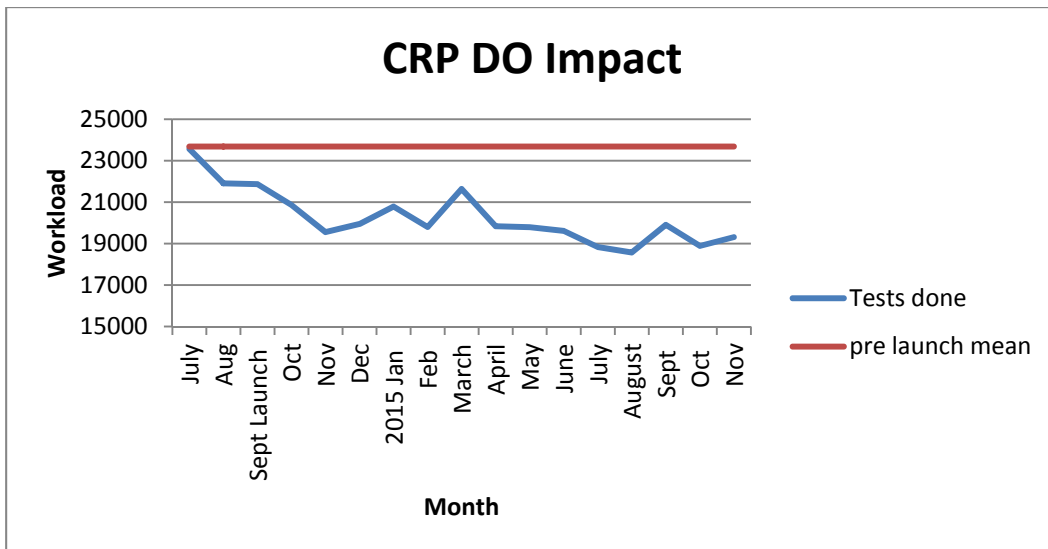
CRP was identified in Tayside as a high volume test showing significant escalation in workload and the laboratory workload data showed that this test was often repeated daily and within day. The mri has been identified as 24 hours for CRP. The Tayside Diagnostics Demand Optimisation Group decided to introduce the concept of the mri to Tayside service users, as part of the tool kit approach to Demand Optimisation, in applying it initially to CRP requesting via the ICE electronic test requesting system.

The first steps were to issue a short bulletin to Tayside, discussing the minimum retesting interval and the rationale for using this for CRP, by way of advising requesters of the imminent changes to the ICE requesting for CRP. The bulletin included contact details for Biochemistry Consultants and service users were invited to raise any questions with them.

The approach taken was to introduce a reminder to requestors, which appears as a pop up box for those requests where the system detected a previous request within 24 hours. The requestor is advised that the previous request was less than 24 hours, given the opportunity to review the result and then asked if they wished to pursue the request. So, this is a 'stop and think' moment, for the requestor to either abandon the request in the light of the latest result or to pursue the test request with the provision of clinical details.

This approach is a simple, sustainable way of introducing a single level of guidance/reminder that enables the requestor to make a self determined judgement of the clinical need and effectiveness of the request in hand. It encourages a change in practice without creating a barrier to access to the test that the requestor feels is clinically valuable.

The change to ICE was introduced in July 2014 and the impact measures included monitoring feedback from service users and workload measures against the average monthly workload prior to introduction.



#### Headlines

The average monthly CRP workload fell from 23,685 requests to a new average of 18,858 requests in 2016. The request rate is still falling and there are no further changes planned for the requesting process. Compared to the 2014 workload, approximately 58,000 CRP requests annually have been avoided with a marginal cost saving of £12,000 in reagents.

The latest update to the **National Minimum Retesting Intervals in Pathology** include Haematology and Immunology investigations. Wider application of mri s is under current consideration in the foward strategy for Diagnostics Demand Optimisation in Tayside.

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