Best Practice for the implementation of Patient Focused Laboratory Medicine

By the EFLM Working Group on Patient Focused Laboratory Medicine

We offer this best practice advice for anyone considering adopting a direct result and comment service to patients to assist them in implementing this exciting service delivery option

Background

The advance of technology has enabled the information revolution in all walks of life, healthcare is no exception; patients are increasingly empowered through access to their medical records and can obtain authoritative information through sites such as Lab Test on Line (1). However a personalised perspective on their results is an opportunity for laboratory medicine specialists to engage directly with patients, both patients and professionals are interested in such a relationship (2,3). The Working Group on Patient Focused Laboratory Medicine of the European Federation of Clinical Chemistry and Laboratory medicine (EFLM) has been exploring the issues and would recommend the best practice advice below for any laboratory medicine specialists considering delivering a patient focused service.

Commentary

The confidentiality and risks of delivering such a service not only need recognised, but must be accepted by the institution responsible for the service as they will be responsible for the clinical governance of such a service.

It would be unnecessarily confusing should advice be offered without collaborating with and agreeing the parameters with the patients' physicians; the purpose of Specialists in Laboratory Medicine (SpLM) providing advisory comments to patients is to improve patient's understanding and engagement in their own health care. While comments are intended to be informative, they must be proportionate, so their scope needs to be agreed, as does the level of knowledge and attainment that should be required of the SpLM making the comments, it is advisable to define a protocol so all know what is expected and required.

Medical information must by its nature be held in confidence; the challenge when using IT is to maintain that confidentiality. The scope and process should be discussed not only with fellow professionals, but also with patients, e.g. with patient groups to ensure they are in agreement with proposals and their concerns are addressed to ensure that they will be supportive.

It must be recognised that problems can and will arise, such as an unexpected finding, if patients have a query or if something goes wrong, then a clear, robust

escalation procedure needs to agreed and in place. It is axiomatic that to support this that there should be a clear readily accessible audit trail. As queries will arise some time in the future for a minority of comments and results, the retention period for comments needs defined (4). When agreeing the service, Key Performance Indicators, such as number of patient queries; patient and physician satisfaction surveys etc., should be agreed to ensure standards are maintained and improved, of course the findings need to be reviewed regularly to ensure agreed service standards are met, maintained and are responsive.

Finally, as this is a developing area, it would be advantageous for others contemplating such a service, that those initiating such services publish their results.

We advise:

1. Ensure your employer is in agreement with initiating such a service.

2. Get the agreement in principle of the physicians responsible for the group of patients.

3. Ensure that any IT solution used is sufficiently encrypted to meet local laws and regulations

4. Agree the scope of comments to patients

5. Agree whether comments will go direct to patients with a copy to their physician or will be through their physician

6. If there is a patient group discuss the proposal with them and obtain their support

7. Explicitly agree the staff who can make comments and their adherence to the protocol.

8. The escalation procedure for
    a. If an unexpected finding is seen
    b. Patient initiated queries
    c. If something goes awry

9. Ensure a clear audit trail of all actions

10. Determine the length of record detention

11. Put Key Performance Indicators in place

12. Regularly review the service

13. Publish your experiences

References

1. Lab Tests Online https://labtestsonline.org (accessed 10th January 2017).

2. Watson ID, Siodmiak J, Oosterhuis WP, Corberand J, Jorgensen PE, Dikman ZG, Jovicic S, Theodorsson E. European views on Patients Directly obtaining their laboratory test results. ClinChem Lab Med 2015; 53: 1961-6.

3. Watson ID, Oosterhuis WP, Jorgensen PE, Dikmen ZG, Siodmiak J, Jovicic S, Aarke KM, Palicka V, Kutt M. A survey of patients views from eight European countries of interpretive support from specialists in Laboratory medicine. Clin Chem Lab Med (submitted).

4. The Retention and Storage of Pathological Records and Specimens (5th Edition). https://www.rcpath.org/resourceLibrary/the-retention-and-storage-of-pathological-records-and-specimens--5th-edition-.html (accessed 10th January 2017).