

CATEGORY: SERVICE DELIVERY

CCOMS

MAKING THE CASE

INTRODUCTION

The burden of administration on healthcare professionals (HCPs) is considerable, including stock-checking, handwriting individual prescriptions, clinical documentation, recording information on electronic health records, ordering medicines, taking deliveries, dispensing prescriptions (e.g. preparing, storing, and delivering blister packs or dosettes), and preparing patient baskets for filling. This administrative burden may have a direct impact on the patient-clinician relationship and interrupt care delivery (Fudge and Swinglehurst, 2021; ONC, 2020).

CCOMS: HOW IT WORKS

CCOMS is a non-prescription online ordering system operated by Convatec, for obtaining stock items for patients in the clinic. CCOMS aims to streamline the ordering process for stock items, reduce time spent on administrative activities by clinicians and free up time for clinical care, limit manual handling risks, and prevent wastage [Figure 1]. CCOMS was set up with only South West London Clinical Commissioning Group (SWL CCG) Wound Formulary products on it, which ensures that adherence to wound formulary is maintained.

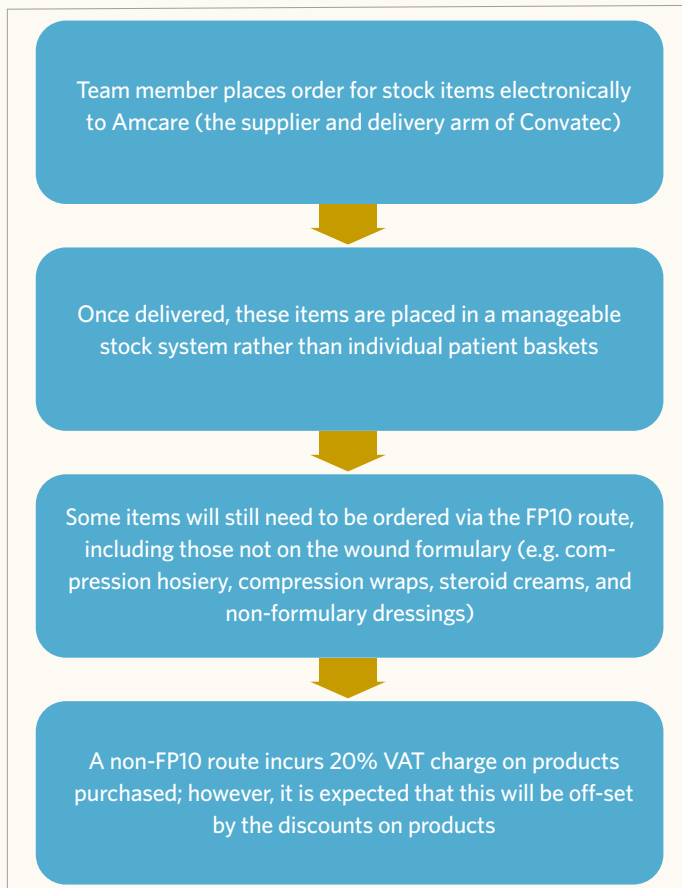


Figure 1: Process for obtaining stock using CCOMS

TIME SAVINGS

Prior to CCOMS, staff working in a leg ulcer clinic at Surbiton Health Centre (SHC) were spending 11.5 hours per week on administrative work. Using CCOMS, time spent on administrative activities was reduced to 3 hours per week, equating to a saving of 34 hours per month [Table 1] (Nichols and Kavanagh, 2022). These savings have released time for professional learning, training, and development, enhancing clinicians' practice and enabling staff to work within their contracted hours. Moreover, instead of spending hours prescribing, writing, and chasing prescriptions, clinicians can use their advanced skills and time to focus on more complex patients who may require non-formulary products and treatments.

Table 1. Weekly workload comparison (Nichols and Kavanagh, 2022)

	Jan-Jun 2019	Jul-Dec 2019
Average number of patients seen per month	168	171
Number of FP10 prescriptions written per week	18	6
Hour(s) spent completing dressing request forms per week	2	0
Hour(s) spent completing CCOMS orders per week	N/A	0.66
Hour(s) spent writing prescriptions per week	4.5	1
Hour(s) spent recording in patient records in Care Notes per week	4	0
Hour(s) spent unpacking deliveries per week	1	0.5
Total weekly workload hours	11.5	2.16

Administrative tasks perceived as below the level of training of healthcare providers is a driver of burnout and organisational interventions alleviating these burdens can ameliorate work-related stress (Hillmann et al, 2021). Stemming from job-related emotional and interpersonal stressors, burnout manifests as exhaustion, depersonalisation, and a feeling of inefficiency/low personal accomplishment in day-to-day work (Patel et al, 2018). In 2019, the NHS Staff Survey found that 40.3% of respondents reported feeling unwell due to work-related stress in the last 12 months (NHS England, 2019), and following the COVID-19 pandemic, 92% of trusts told NHS Providers they had concerns about staff wellbeing, stress, and burnout (NHS Providers, 2021). Structural change is needed and, utilising the CCOMS ordering system may help to reduce levels of burnout, creating a more fulfilling and sustainable work environment for clinicians (Nichols and Kavanagh, 2022).

MAKING THE CASE

Explanation of how to use this guide: This document can be used to make the case for implementing effective prevention and management measures and may be supported by data from your own care setting. As well as economic impact, it is important to know the impact of interventions on patient quality of life and outcomes.

COST SAVINGS

Saving time means saving costs and making departments more efficient overall [Table 2]. Using the CCOMS system, cost savings equated to £127/week and £622/week for Band 4 and Band 7 practitioners respectively, which totalled a saving of £35,952 over 12 months (Jones and Burns, 2021). Healing and non-healing wounds present a substantial burden to healthcare systems in terms of annual prevalence, health outcomes, healthcare resource use and associated costs. Annual levels of healthcare resource use attributable to wound care included 54.4 million community nurse visits, 53.6 million healthcare assistant visits, and 28.1 million practice nurse visits (Guest et al, 2020). Costs involved also included 97.1 million drug prescriptions and 262.2 million dressing changes in 2012/2013 (Guest et al, 2015).

Table 2. Estimated cost savings associated with nursing time (Jones and Burns, 2021)

Pay band (Agenda for Change)	Cost saving per working hour (£)
4	33
5	44
6	55
7	66
8a	75
8b	88

With a lack of delays around ordering products, non-prescription ordering systems improve access to wound care products, reduce wastage and standardise clinical practice (Grothier, 2013). These systems have been shown to improve formulary compliance and ability to monitor expenditure, with real-time data allowing tracking of product usage and spend to inform decision-making, drive efficiency, and promote a cost-effective culture within healthcare organisations (Markey and Barrett, 2017).

PATIENT BENEFITS

The fast turnaround time of CCOMS (typically 24 hours) has a positive impact on patients, with fewer delays and more flexibility, enabling patients to receive immediate changes to their treatment if

needed (Nichols and Kavanagh, 2022). CCOMS provides a patient-centred approach to care, as stock standardised to local formulary will familiarise clinicians with wound care products and their mode of action, aiding decision-making (Grothier, 2013). This can improve patient quality of life by supporting clinicians to help patients to make informed choices, involving patients in their own care, which maximises patient wellbeing and increases trust in clinicians (Wounds International, 2012).

Furthermore, non-prescription ordering systems have been shown to encourage joint working and interprofessional collaboration between healthcare professionals, leading to continuity of care for patients and an optimal effect on care delivery (Markey and Barrett, 2017).

BOX: BENEFITS OF CCOMS IN BRIEF

- Quicker and easier ordering process
- Reduces administrative burden
- Releases time for direct clinical care and training and development of staff
- Cost savings
- Limits manual handling risks
- Reduces product wastage
- Access to real-time data to improve efficiency and care delivery
- Increases formulary compliance
- Fewer delays and more flexibility
- Promotes joint working and improves the patient experience

SUMMARY: WHY USE CCOMS?

- Cost- and clinically-effective solution which streamlines administrative processes
- Saves clinicians time and effort
- Ensures timely and responsive patient care

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