

“ Readily available  
24/7.”

“ Regional and  
potentially national  
consistency.”

“ I feel my practice is safer for using it  
and I am confident that the information  
is relevant and valid. I like all the  
referencing so I can check the validity of  
something if I need to.”



“ App is great, it can  
be used at/or near the  
bedside.”

“ Care continuum  
consistency (aged  
care, primary and  
hospital).”

“ Modern up-to-date info from a source  
that has been around a long time and that  
I have confidence in.”

# Working together to implement Lippincott Procedures across New Zealand

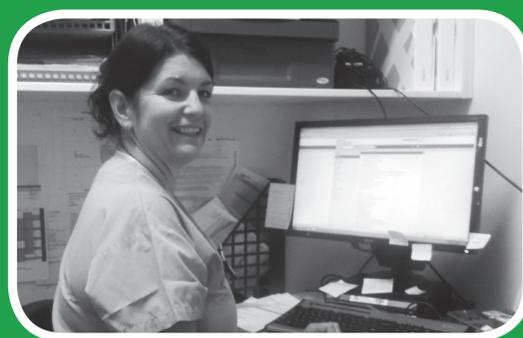
- THE GOAL: Safer, more effective patient care
- THE PROBLEM: One procedure done many different ways with many different outcomes
- THE SOLUTION: Lippincott Procedures – real-time access to step-by-step guides for over 1,700 evidence-based procedures and skills in a variety of specialty settings. Primary and secondary care from 12 district health boards (DHBs) using the same current and clinically proven procedure guides.

## Why Lippincott?

Written by clinicians for clinicians, Lippincott Procedures is an online resource that provides clinicians with up-to-date information when and where they need it from a source they can trust.

The Executive Directors of Nursing in 12 DHBs agreed to implement Lippincott Procedures, the New Zealand Instance, building on the access five North Island DHBs (Midland region) already had.

Lippincott Procedures is an American product. The challenge was to adapt the product for a New Zealand context (where legislation around mental health and midwifery are quite different), and to encourage uptake.



## Effects of change

(survey of Lippincott New Zealand Instance users in May 2016)

The benefits 90% of survey participants reported include:

- supports patient safety
- access to evidence based information
- a consistent and standardised approach from a patient perspective
- increased confidence in practice
- use in clinical teaching
- use in reviewing and developing policy and procedures.

Our users also helped us identify opportunities to improve and develop Lippincott further, including:

- increasing promotion to increase usage
- improving how access to Lippincott is provided
- continuing to adapt Lippincott to better reflect the New Zealand context (e.g. aligning with New Zealand and Australasian guidelines).

## Lessons learned

Along the journey, we've had wins and losses. Here's what we've learned:

- importance of engaging users
- adoption by clinicians takes time – local barriers need to be removed, need to move on from 'this is the way we do things here'
- work with the willing.

## Next steps

Building on our success so far, we have big plans for the future:

- national adoption of Lippincott Procedures, New Zealand Instance
- a national contract (rather than regional contracts)
- embedding Lippincott into learning resources
- adoption throughout Australasia?

## Partnership and collaboration

- A shared governance structure has been created across 12 DHBs.
- Available to whole of sector – DHBs; primary care; community; aged residential care; private hospitals; non-government organisations (NGOs); Māori and Pacific health providers.
- Clinical expert groups collaborate across the 12 DHBs to review procedures and develop learning resources; some meeting for the first time.
- Partnerships with tertiary education providers mean students use Lippincott Procedures during undergraduate study and on clinical placement.
- National guidelines and clinical expert groups are used where they exist – for example, NZ Blood Service, IV Nursing NZ Inc. and ANZCOR resuscitation guidelines.
- A toolkit is available to share processes and forms and a regular Lippincott newsletter is sent to all participating organisations.
- Accessibility - available 24/7; apps on iPads/iPhones/Android devices provide access in rural and remote areas, and to those working in the community and in homes.

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New Zealand instance

