

Declaration of Interest

- I am a member of the:
 - **UK & European HIMSS Advisory Council**
 - **KLAS International Advisory Board**
- HIMSS have previously supported some of my registration & travel costs for attendance at their conferences

Thank you...

Professor Keith McNeil





Keynote address: Jeremy Hunt, Secretary of State for Health

"...He [Prof Wachter] said we needed to have a Chief Clinical Information Officer for the whole of the NHS and we were delighted to appoint Keith McNeil to that role after his fantastic work at Addenbrooke's. ..."



- Two hospitals Addenbrooke's & The Rosie
- 5 clinical divisions women's & children's healthcare fully integrated

Cambridge University Hospitals (CUH)

1,200+

Beds



Catchment population as a District General Hospital

4 million+

Population for UKwide specialist care



126,000+

ED attendances



67,000+

Inpatient episodes



853,000+

Outpatient episodes



130,000+

Day case attendances



38,000+

Surgical operations



5,200+

Births



11,000+

Staff

90-925

AUD \$ 1.52b

Turnover



2019-2020 data

Our Digital Journey

High quality care underpinned by modern informatics tools

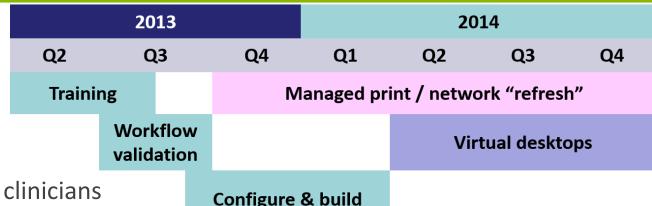
2010

- Multitude of clinical IT systems & aging technology
- Limited functionality, accessibility & poor integration
- Decades old impending permanent loss of support
- No results reporting audit trail; no decision support etc.
- Unofficial HIMSS EMRAM Stage 1
- **2011** Procurement commenced
- **2012** Preferred bidders (software & hardware)
- **2013** Contracts signed

Implementation Timeline

100+ hospital staff seconded to the programme team





250+ sessions, 1000+ clinicians validating 500+ clinical pathways

First Epic system to incorporate UK workflows & local, national and professional guidelines

>95% of CUH requested changes are made by our own Epic qualified staff within eHospital

Testing October 26 **Training** Sunday

Go-live

99% of activity now in ONE system

26 October 2014 (go-live day 1)...

- PAS, bed management
- **Enterprise scheduling**
- All IP & OP care
- Care plans & pathways
- Clinical documentation
- Orders & results
- Standard clinical terms & coding
- Prescribing & formulary management
- Workflow management
- Medical devices integration

- Cardiology
- ED
- Intensive care
- Maternity
- Oncology
- Ophthalmology
- Pathology
- Pharmacy
- Radiology
- Surgical pre-assessment
- Theatres & anaesthetics
- Transplant

- Mobile & remote access
- Hydra (document import)
- Communicator

2016 & 2017...

- MyChart patient portal
- Welcome check-in kiosks

2018...

- CareEverywhere
- EpicCare Link

2020...

GP Connect

Digital Environment

Fully integrated EPR one patient, one record, one system, one place (integrated healthcare)



Same information viewed by the clinical team vital for patient care and safety

Integrated device



All physiological monitors and ventilators in 40 theatres and 148 critical care beds integrated

Latest IT equipment

8,300+ new PCs

1,700+ mobile / handheld devices

Remote access - 2,500+ off-site daily

Use of mobile & handheld devices

Real-time information recorded at the patient's bedside



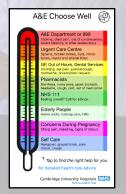
Releasing time to care saving 124 WTE nurses through documentation always to hand & eliminating data transcription



Mobile apps factory

Clinical care & clinical trials





Better for Our Patients

Electronic prescribing

100% reduction in sedation related prescribing errors in paediatrics = 50 intensive care beds & 100 regular beds saved / year

Faster preparation of discharge medications 50% reduction in the time taken to prepare discharge medications interfacing directly to our dispensing robot in pharmacy

Decision support

16% of allergy-related prescribing alerts have led to a change in prescription (preventing 850 + significant adverse reaction / year)

Rapid Response Team

Automated calculated warning scores drive workflows & alerts, >50% reduction in time to clinical review

Self-check-in kiosks

in outpatient areas with onscreen maps & directions to clinics



Routine review of best practice for intensive care ventilator tidal volumes saving 2-3 avoidable ventilator-related deaths per year

Better for Our Hospital

Paperless processes

£470,000 saved annually in medical records with a 99% reduction in paper notes (inpatient & outpatient areas)



Real-time bed occupancy information electronic bed status available to all better management of high occupancy areas and discharge planning





Clinical coding improved

Information reviewed in one system Improved data quality & depth of coding cumulative additional income (5.5 years £87.3m - ROI > 5,500%)



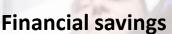
Pathway automation

75%+ automated opening & clo pathways (cancer & RTT) based clinical activities / decisions



Automated letter creation

80% of clinic letters in paediatric gastroenterology are given to the parents at the end of clinic – tools combining data from elsewhere in the patient's chart into a structured letter



£1.8 million average annual reduction in the financial gap between high-cost drug expenditure and income.

Accelerated Change Process

COVID-19 order set required, Infectious Disease team

Change request submitted to Bronze

Change request approved to Silver

Build configured, contents agreed by SME, testing complete

Approval by Infectious Disease team

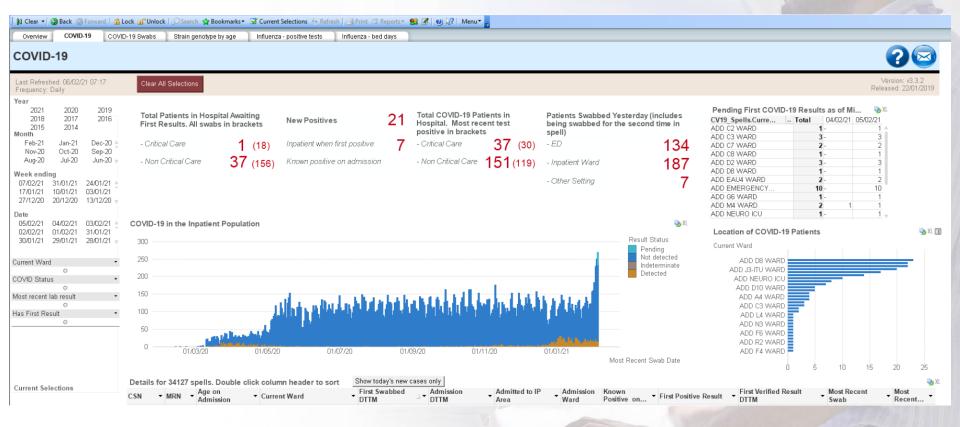
Deployed into live

March 2020									
Wed 18	Thurs 19	Fri 20							
14:00									
16:30									
16:30 (Wed)									
	PLE	13:30							
16		15:00							

flowER'- Predicting ED Capacity

ED Dashboard				C 14	1:50:36	7th Sep			Re	ecent Ar	rivals las	st hour:	3 1-2 h	ours ag	jo: 18 2	-3 hours	ago: 20
Now: 81 in ED	쑽		&	<u> </u>		Status	Forecast Triage and Init	ial Assessmen	nt								
Whole ED	5	3	37	25	14	(2)	Input	Whole ED	Amb Bay	Resus	Area A	Area B	Area C	ABC	Minors	Paeds	Unalloc
Resus			2				+1 hour		20	**		20	•	•	**	21:	211
Area A			3	4	3	(2)	+2 hours		<u>*</u>	22			22	**	44	22	22
Area B			1	3	2						•	-					
Area C		1	12	10	5	8	+3 hours	(2)	777	-	•	•	•	22	111	•	•
Majors ABC		1	16	17	10	(9)											
Minors	2		6	4	1	(2)											
Paeds	1			1	1		Undergoing Te	ata and Treats	m ont								
Ambulance Bay							0 0										
Unallocated	2	1	13	3	2	(2)	Throughput	Whole ED				Area B		ABC	Minors	Paeds	Unalloc
							+1 hour		757	-	-	221	222	20	2.	75:	-
Speciality Queues		쌸	<u>&</u>	<u> </u>		Status	+2 hours		2.0	2.0			22	2.0	2.0	200	2.
Emergency Medicine		5	34	24	14	8	+3 hours	(2)	777	-	22	-	222	20	777	***	***
Acute Medicine			12	14	8	9											
Surgery			1														
Orthopaedics			1		1												
Gynae							Waiting for Ad	mission or Dis	charge								
Paediatrics			1				Output	Whole ED	Amb Bay	Resus	Area A	Area B	Area C	ABC	Minors	Paeds	Unalloc
Psychiatry							+1 hour		24	20	22	22	22	22	22	21	22
Other							+2 hours		21 2	222	22	***	***	***	22	*	22
							+3 hours	(2)	2:	75:	**	20	**	***	***	•	•
	Record A	ction 1															

COVID-19 Tracker



Epic – Electronic Patient Record

Recording of all clinical care of our patients in one fully integrated electronic patient record system.



Care Everywhere

Our digital connection with other hospitals worldwide, enabling real-time sharing of records to advance patient



Joined-up healthcare for our patients

MyChart

Patient portal enabling our patients to access their hospital information



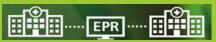
EpicCare Link

Digital portal providing GPs and community nurses access to their patient's hospital



GP Connect

Integration with GP services to enable CUH clinicians to view the last 3 encounters in the **GP** record



MyChart patient portal

- First UK fully integrated patient portal
- Enabling / empowering patients in their own care

Dec 2018 - 3,223 Dec 2019 - 22,429 Dec 2020 - 83,880

~138,000 results released automatically per month









Current conditions



Clinical correspondence



Vital signs



Test results



Medications



Known allergies



Demographics



Pre-visit questionnaires

Scanning for Safety

Patient wristband scanning & close loop administration

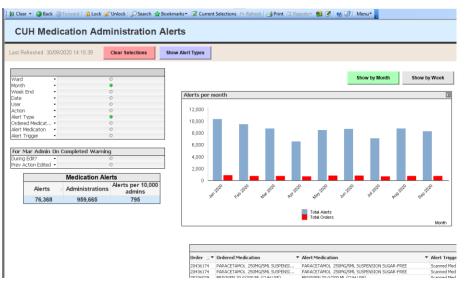
Aim:

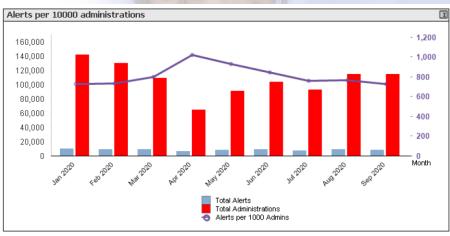
- barcode medication administration, transfusion & sample collection scanning - all 56 inpatient areas including critical care & ED
- breast milk in NICU & areas with communally stored milk

Outcome:

- Positive patient assignment from 'start to finish'
- System performs '5 rights' checks failures trigger alerts to be professionally actioned
- National blueprint with NHS England

Scanning for Safety - Alerts & Overrides





Activity	Jan 20		Mar 20					Aug 20	Sept 20
No order	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%
No active order	0.9%	0.9%	1%	1.1%	1.2%	1.2%	0.8%	1.1%	1%

Saving 2,600+ lost bed days per year from adverse drug reactions

Saving Lives from Sepsis (I)

Since the introduction of sepsis alert...

Aim:

- earlier identification & treatment of patients with sepsis
- delivered through strong clinical engagement & enhanced digital decision support systems

Outcome:

- 70% increase in patients receiving antibiotics within 1 hour of ED arrival
- 50% increase in adult inpatients receiving antibiotics within 60 minutes of the alert triggering
- At least 64 lives saved from sepsis in 2018/19
- National blueprint with NHS England

Saving Lives from Sepsis (II)

Value in healthcare...

achieving the best possible improvement in health / wellbeing outcomes relative to the amount of resource consumed

▼ Robyne Toseland ▼ @glitterykisses · Sep 13

I suffered sepsis for the first time last year, & @CUH_NHS were honestly amazing! 🤎 Resus started treatment immediately & everyone involved, from the rapid response nurses to @JVFICU were incredible! Thank you all SO much! Honestly the most poorly I have ever felt!

Debs @DebsKeppey · Sep 13

In July members of this brilliant team diagnosed my sepsis within 15 minutes of me arriving at A&E. Treatment started, seen by three doctors and consultant within an hour. Lifesavers. #WorldSepsisDay2018 #AlwaysAsk #SepsisAwareness



CUH @ @CUH NHS

to our brilliant team in the emergency department. They've done some outstanding work to raise awareness of #sepsis symptoms, and the importance of starting treatment within one hour. 🧔 #WorldSepsisDay

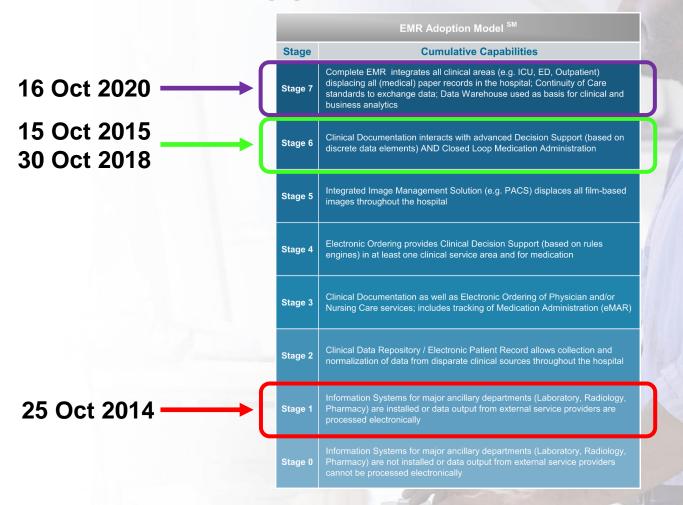
Show this thread

tl CUH Retweeted Sammy Davis @Sammy DDavis · Sep 13

Sepsis is the worst thing that has ever happened to me but also one of the best things. The worst is the pain and the long recovery. The best is that it's given me a new zest for life & shown me how much love & support my family, friends & all the @CUH_NHS staff have to give.



HIMSS EMRAM



Healthcare Information & Management Systems Society (HIMSS) Electronic Medical Records Adoption Model (EMRAM)

https://www.himssanalytics.org/europe/electronic-medical-record-adoption-model



Staff experience & engagement

Item	April 2015	March 2016	May 2017	May 2018	June 2019
Staff can find relevant patient info easily	+44	+60	+63	+69	+74
Staff are satisfied with the support available for issues / changes that arise	-8	+18	+25	+31	+39
Staff who are confident that the Epic system supports them in caring for their patients	+25	+55	+61	+66	+71
Staff can login to the Epic system quickly	+48	+66	+59	+58	+33
Staff can access the reports or metrics in the system that are relevant to their role	+37	+50	+51	+60	+70

Net promoter scores: +50 is excellent; +70 is exceptional, n = 1,774 - 1,888

Lessons (I)

- Change of mindset digital underpins everything it is not a bolt on
- Understand
 - your staff and their roles
 - your clinical, administrative & operational workflows / SOPs
 - define / describe 'who', 'what', 'when' and 'why'
 - Epic is typically the 'how'

Lessons (II)

- Staff engagement & change management
 - Make it real stories relating to ever-increasing high-quality care
 - 'Too much' is not enough
 - Dress rehearsals for operational readiness (incl. infrastructure)
- Become more educated in defining 'value' and measuring benefits

Current Projects / Plans (I)

MyChart enhancements

- self scheduling of appointments
- uploads of own data / wearables

More device integration

- Infusion pumps
- Remote monitoring on-site and offsite

Registries & population health

- **Expanding interoperability**
- Move towards broader cohorts and earlier intervention

Current Projects / Plans (II)

Analytics & Research

- Data stewardship & governance
- Automated pipelines of clean curated data for self-service tools
- NLP / data mining of current / legacy records
- Predictive modelling evolving to prescriptive care
- Project Inner Eye Dr Raj Jena
 - https://www.microsoft.com/en-us/research/project/medical-image-analysis/
 - https://www.cuh.nhs.uk/news/hancocks-high-tech-visit/

Further Information



eHospital brochure

(Sept 2019): 'Patients at the heart of our digital hospitals' www.cuh.nhs.uk/ehospital

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@CUH_NHS @my_eHospital

