



**Cambridge
University Hospitals**
NHS Foundation Trust

**Together
Safe
Kind
Excellent**

**Changing
everything ...**

Dr Afzal Chaudhry

BSc(Hons) MA(Med Ed) MA(Cantab) PhD FBCS FHEA FRCP FAcadMEd FFCI FEDIPLdgPra

Consultant Nephrologist

Director of Digital & Chief Clinical Information Officer

Cambridge University Hospitals NHS Foundation Trust

&

Assistant Professor

Department of Medicine, University of Cambridge

Declaration of Interest

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

The Trust in Numbers

1,200+
Beds



530,000+

Catchment population
as a District General Hospital



4 million+

Population for UK-
wide 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



11,500+
Staff



£1bn (€1.15bn)
Turnover



Our Digital Journey

- **2010**
 - Multitude of clinical IT systems & aging technology
 - Limited functionality, accessibility & poor integration
 - No / low levels of resilience
- **2011** - Procurement commenced
- **2013** - Contracts signed
- **2014** - Go-live across the hospitals (acute & maternity)

Preparation

- **Workflow validation**
 - 1,000+ clinicians, 270+ sessions, 470+ pathways
- **Training**
 - > 95% of staff trained (12,000 people)
 - > 175,000 hours of training over 9 weeks
- **120, 90, 60 & 30-day pre-go-live**
 - technical / software readiness assessments
 - parallel divisional operational assessments

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

- PAS, bed management
- Enterprise scheduling
- All IP & OP care
- Emergency Department
- Intensive Care
- Maternity
- Cardiology
- Oncology
- Pathology
- Ophthalmology
- Pharmacy
- Radiology
- Transplant
- Theatres and anaesthetics
- Surgical pre-assessment
- Care plans & pathways
- Clinical documentation
- Orders and results
- Standard clinical terms & coding
- Prescribing & formulary management
- Workflow management
- Medical device integration
- Mobile & remote access
- Hydra (document import)
- Communicator (sending documents)

Challenges ...

BBC Sign in News Sport Weather Shop

NEWS

Home Video World UK Business Tech Science Stories

England Local News Regions Cambridgeshire

Addenbrooke's Hospital consultants concerned over online records

31 July 2015



computing

Addenbrooke's Hospital £200m IT system proves an Epic fail

Cambridge University Hospitals NHS Foundation Trust is put into special measures, in part thanks to a new online patient records system



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The NHS's chaotic IT systems show no sign of recovery

Paperless patient records are a necessity, but a new, US-made system at Addenbrooke's in Cambridge is a chronic misreading of patient needs

Advertisement

Changing everything ...

The Way Forward

- Operational engagement
 - ‘Support link’, Epic specialty leads, ‘Lunch and Learn’
 - Personalisation
- ‘Recording of Care’ / ‘Variation in Care’ programmes





STANDARDS

- CRISIS CARE SUMMARY
- DIGITAL CARE AND SUPPORT PLAN
- E-DISCHARGE SUMMARY
- EMERGENCY CARE DISCHARGE
- MENTAL HEALTH INPATIENT DISCHARGE
- OUTPATIENT LETTERS
- HEALTHY CHILD RECORD
- STRUCTURE AND CONTENT OF PATIENT RECORDS
- STRUCTURE AND CONTENT OF AMBULANCE RECORDS

PRSB STANDARDS

The PRSB develops national standards for the structure and content of health and social care records. These cover, for example, hospital referral letters, handover communications, discharge summaries, and inpatient and outpatient letters.

Our care record standards are widely accepted and endorsed across the UK.



PRSB STANDARDS



- [Digital care and support plan](#)
- [Healthy child record](#)

<https://theprsb.org/standards/>

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

Latest IT equipment

8,500+ desktop PCs

1,500+ laptops

1,700+ mobile / handheld devices

Remote access - 2,500+ off-site daily

Integrated devices

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



Releasing time to care

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

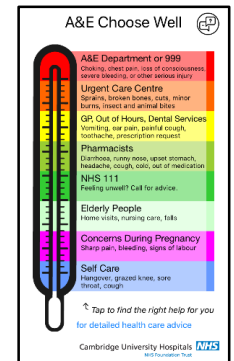
Use of mobile & handheld devices

Real-time information recorded at the patient's bedside



Mobile apps factory

Clinical care & clinical trials



Better for our patients

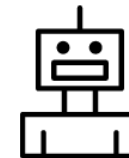
Electronic prescribing

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

MyChart patient portal

104,000+ active users,
158,000+ test results automatically released per month



Routine review of best practice for intensive care ventilator tidal volumes

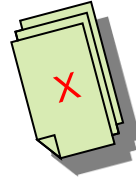
saving 2-3 avoidable ventilator-related deaths per year



Better for our hospitals

Paperless processes

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



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 & closing of pathways (cancer & RTT) based on clinical activities / decisions



Real-time bed occupancy information

electronic bed status available to all
better management of high occupancy areas and discharge planning



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



Financial savings

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

Scanning for Safety

- Patient wristband scanning & close loop administration
- Barcode medication administration, transfusion & sample collection scanning
- Positive patient assignment throughout
- Saving 2,600+ lost bed days per year from avoidable adverse drug reactions
- National blueprint with NHS England



- First UK fully integrated patient portal
- Enabling / empowering patients in their own care
- Access to
 - Diagnoses
 - Medications
 - Allergies
 - Results
 - Demographics
 - Letters
 - Surveys
 - Appointments
 - Scheduling
- Activation data: Jul 2022 - 104,687
- Results release: ~158,000 automatically / month

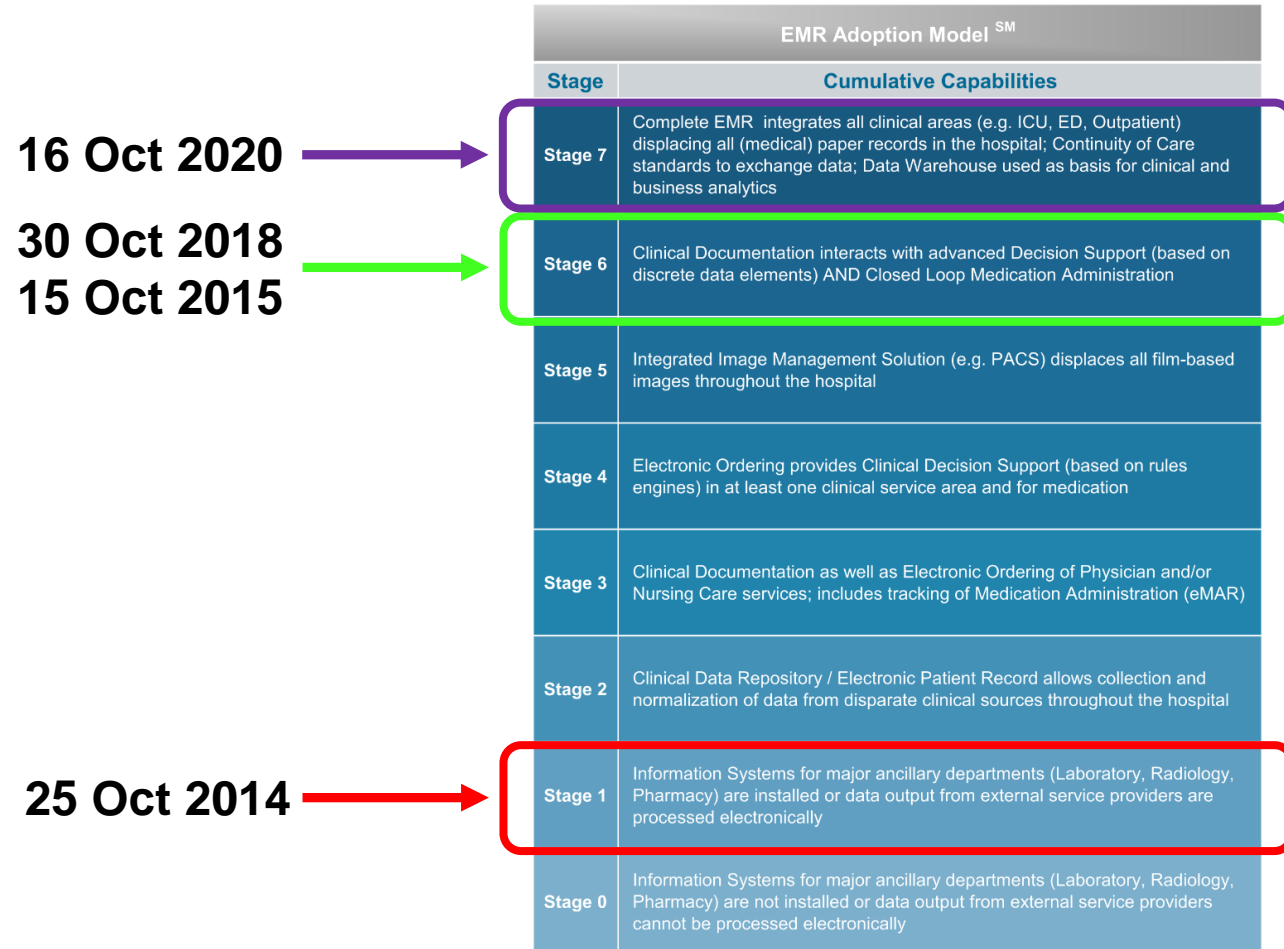
Sharing Beyond the Hospital

- **Care Everywhere** - sharing with hospitals
 - Integrating Healthcare Enterprise (IHE)
 - XCPD, XCA protocols
 - real-time sharing
- **Sharing with Primary Care**
 - Transfer of Care programme - interoperability toolkit 3.0
 - 'GP Connect' - <https://digital.nhs.uk/services/gp-connect>
 - FHIR based messages - <https://digital.nhs.uk/services/fhir-apis>

Digital Maturity

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	April 2022
Staff are able to find relevant patient info easily in Epic	+44	+60	+63	+69	+74	+76
Staff are satisfied with the support available/provided for Epic issues / Epic changes that arise	-8	+18	+25	+31	+39	+49
Staff who are confident, at the present time, that the Epic system supports them in caring for their patients	+25	+55	+61	+66	+71	+71
Staff who are confident that, in 6 months time, the system will support them in caring for their patients	+39	+54	+56	+60	+65	+62

Net promoter scores: +50 excellent, +70 exceptional

Lessons (I)

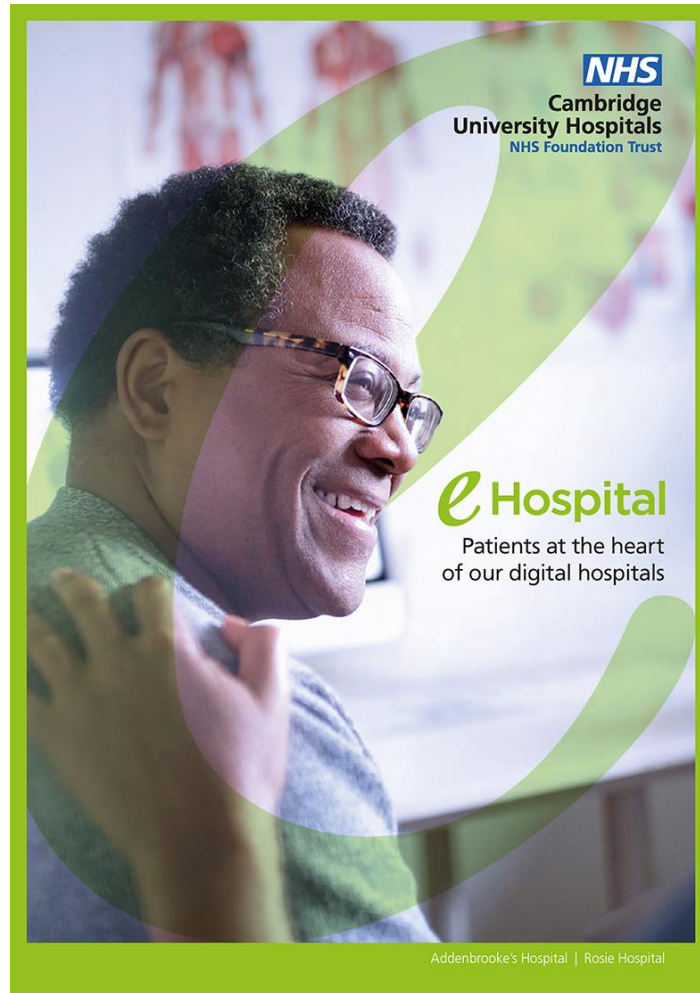
- **Change of mindset**
 - digital underpins everything - it is not a 'bolt on'
- **Understand**
 - your clinical, administrative & operational workflows / policies
 - define / describe 'who', 'what', 'when' and 'why'
 - EPR is typically the 'how'
- **Become more educated in defining 'value' and measuring benefits**

Lessons (II)

- **Staff engagement & change management**
 - Make it 'real' - stories about ever-increasing high-quality care
 - Dress rehearsals for operational readiness (incl. infrastructure)
 - 'Too much' is not enough

**This is NOT about IT nor about medicine
it IS all about people**

Further Information



eHospital brochure (Sept 2019)

'Patients at the heart of our digital hospitals'

www.cuh.nhs.uk/ehospital

@CUH_NHS

@my_eHospital

Current Projects / Plans (I)

- *MyChart* enhancements
 - Expansion of self scheduling of appointments
 - Uploads of own data / wearables
- **More device integration**
 - Infusion pumps
 - Remote monitoring on-site and offsite – virtual wards
- **Registries & population health**
 - Expanding interoperability
 - Move towards broader cohorts and earlier intervention

Current Projects / Plans (II)

- **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/>

Any questions?

Email

ehospital@addenbrookes.nhs.uk

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