

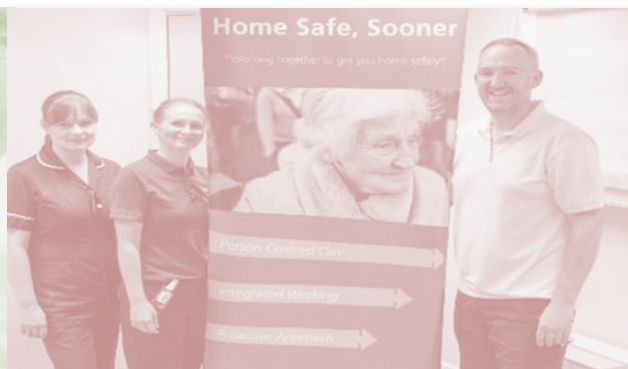
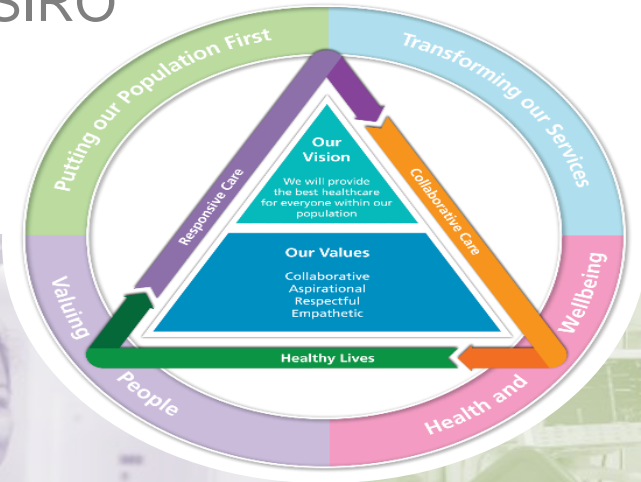
Digital Health Rewired 2022

Digital Transformation

“The Digital Hospital of Things”

Prof. Graham Evans

Chief Information & Technology Officer/SIRO



National and Local Context

Life expectancy has stopped increasing in England, and in some areas is reducing



Health inequalities are widening and England lags behind comparable nations of many key measures of health outcomes



Demand on NHS services has been increasing, but much of that extra demand is for treatment of conditions which are preventable



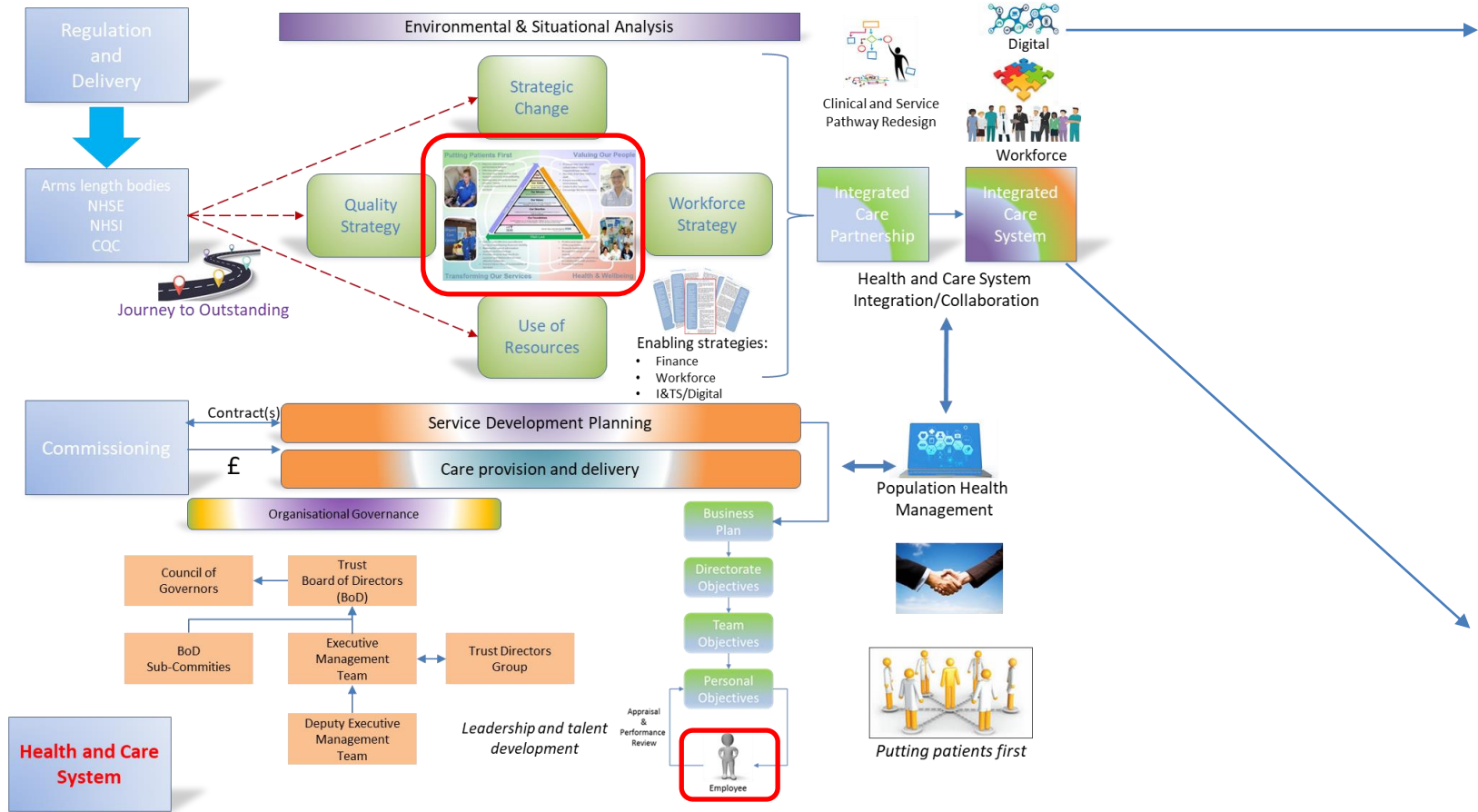
Our Trust..

- considers digital as an ‘investment’ not a cost.
- has a history and legacy of technology (digital) enabled change, what we do is not an accident..
- organisational transformational change, is about; “*People, Process and Technology*”.
- corporate strategy enacted by underpinning enabling strategies – i.e. digital.
- leadership and vision – Executive Director professionally qualified and experienced.
- create the conditions and environment on solid digital foundations, from this the future opportunities can be built as we will now see.....

Digital journey and strategy



Organisational – Strategic alignment



North Tees and Hartlepool NHS Foundation Trust

Digital Strategy 2020 - 2025

Excellence as our Standard Collaborative | Aspirational | Respectful | Empathetic

Alignment

ICS
Integrated Care System
North East & North Cumbria

North East & North Cumbria ICS

Digital Strategy 2020 - 2024

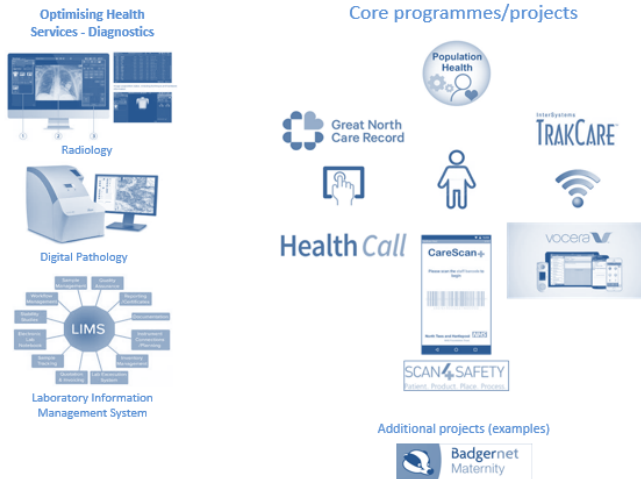
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| Version: | v1 |
| Approved by: | NENC ICS Management Group |
| Date: | 18/12/2020 |

Digital Hospital of Things - origins

The **Internet Of Things (IoT)** describes the network of physical objects, so known as, "things" — that are embedded with sensors, software, and other technologies that is used for the purpose of connecting and exchanging data with other devices and systems over the [Internet](#)

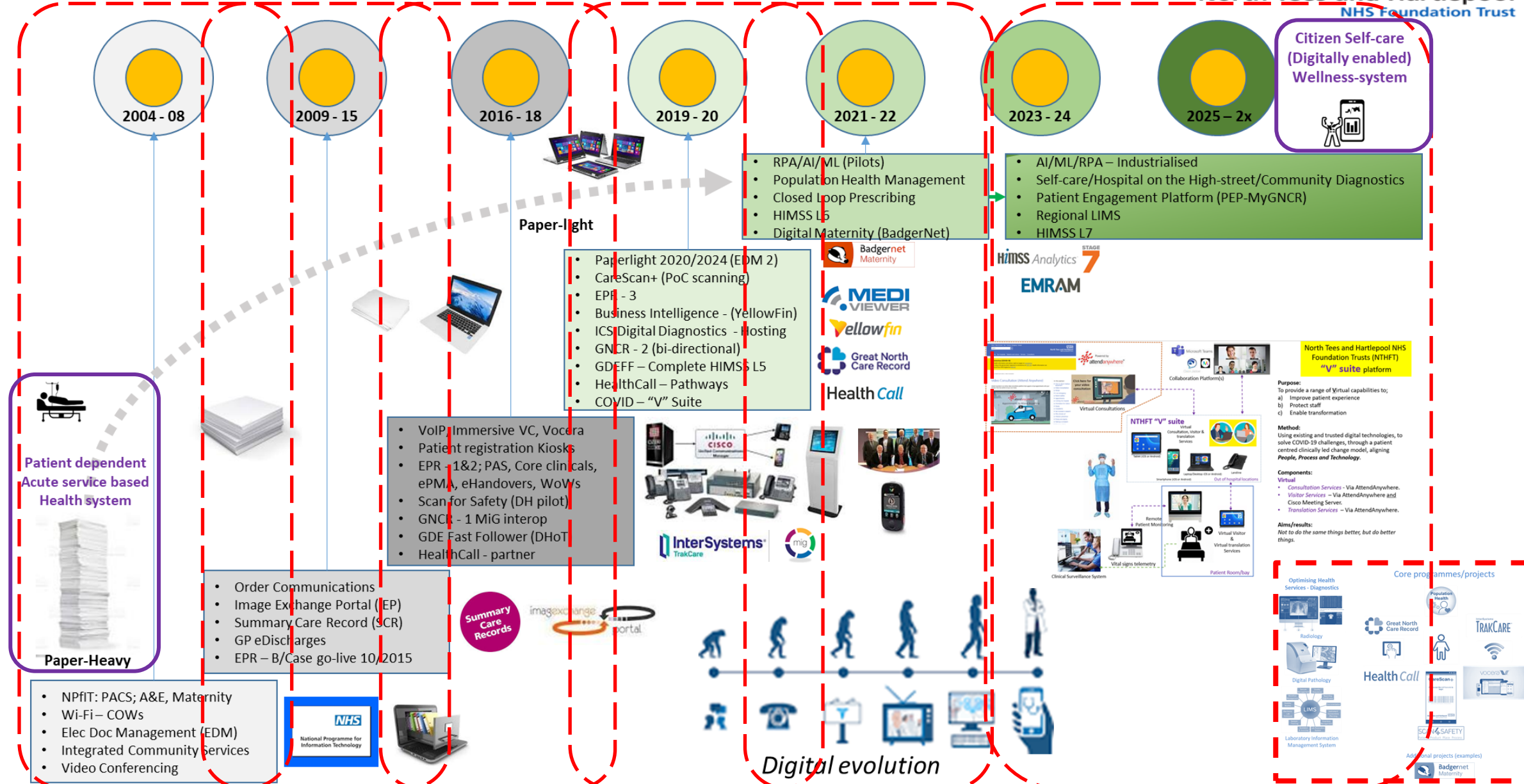


GDE – “Digital Hospital of Things” - initiatives



The **Digital Hospital of Things (DHoT)** is our overarching digital transformation programme, that brings together, a range of physical and virtual elements "things" — these systems, technologies and services are used for the purpose of providing an “enterprise-wide” experience for the patients and population we serve and our clinical support teams delivering high quality care.

Digital Hospital of Things - evolution



Digital Hospital of Things - initiatives

Optimising Health Services - Diagnostics



Radiology



Digital Pathology



Laboratory Information Management System

Core programmes/projects



Health Call



Additional projects (examples)



Accreditations



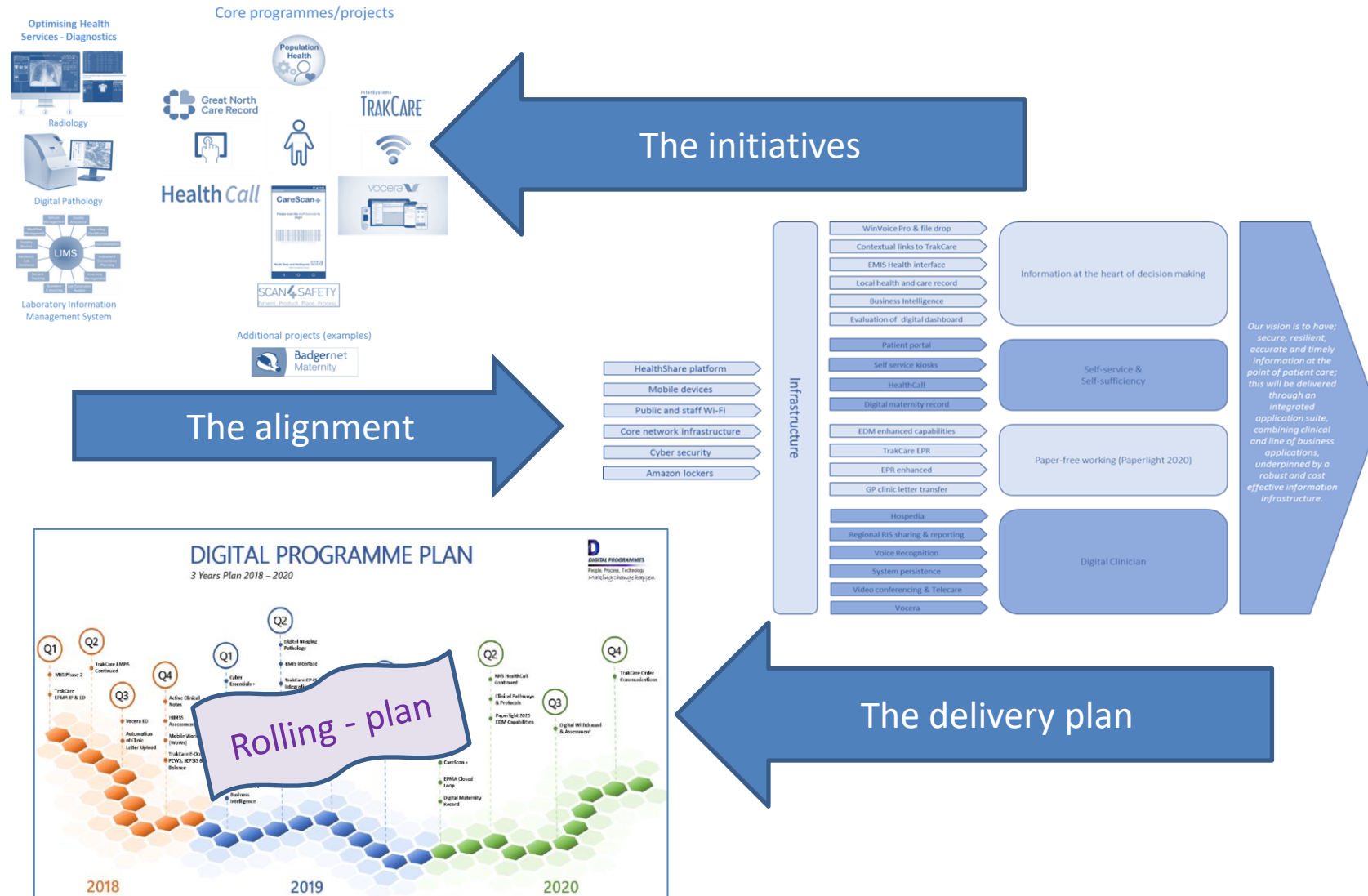
Electronic Document Management



GDE FF £ Investment

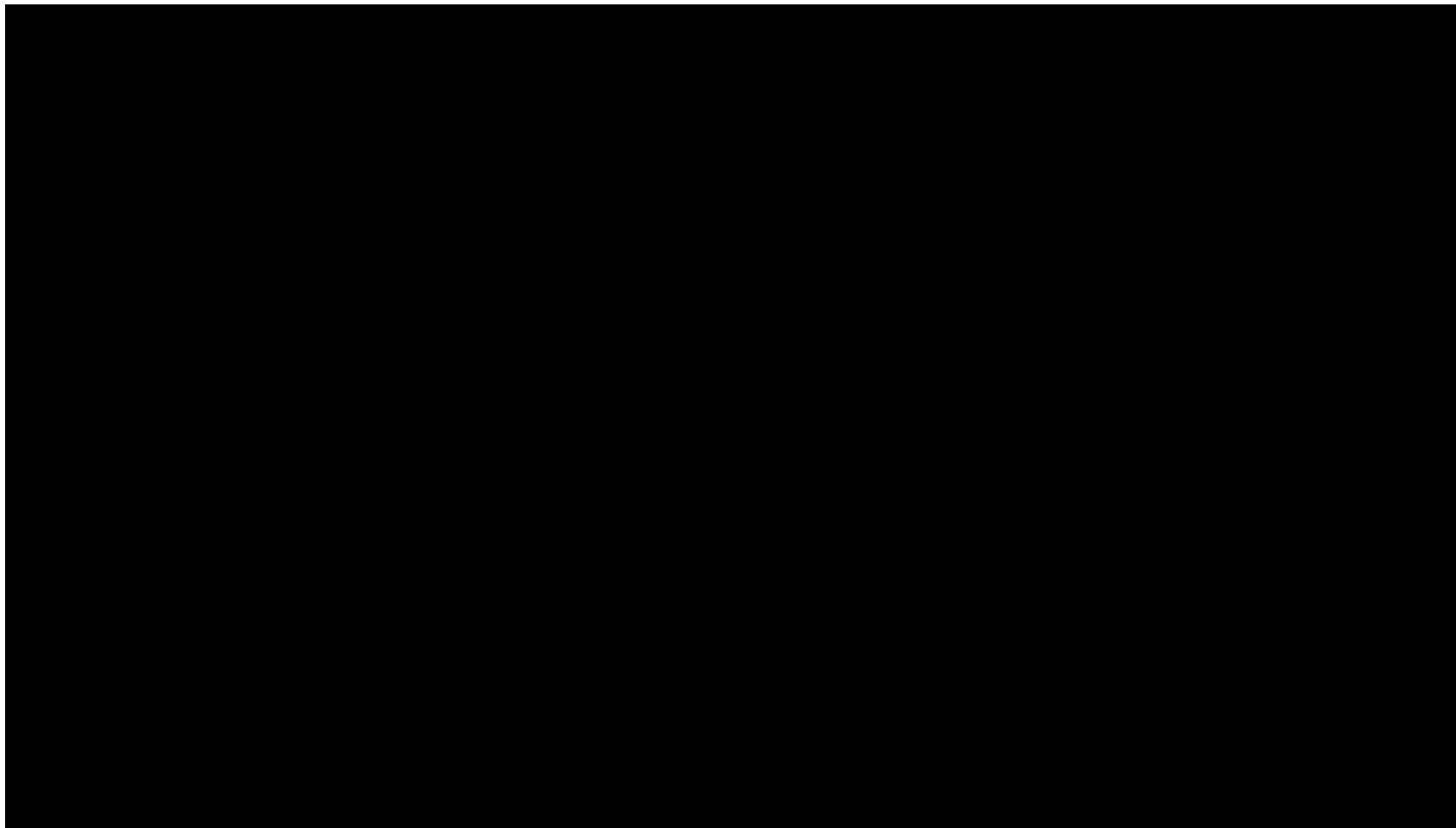
Where appropriate, business "owned" schemes, business benefits, supported by approved **business cases**

Digital Hospital of Things - delivery



Snapshot of achievements





Measuring the impact



Reaping the benefits – what our ‘customers’ said...

“Active Clinical Notes has made managing the shop floor easier as we no longer have to search for notes, they are now easily accessed, instantly available on the screen in front of you and are legible. This has also had a positive impact on re-viewing abnormal results as we no longer need to request historic notes.” - Dr George Simpson, Consultant in Emergency and Paediatric Medicine

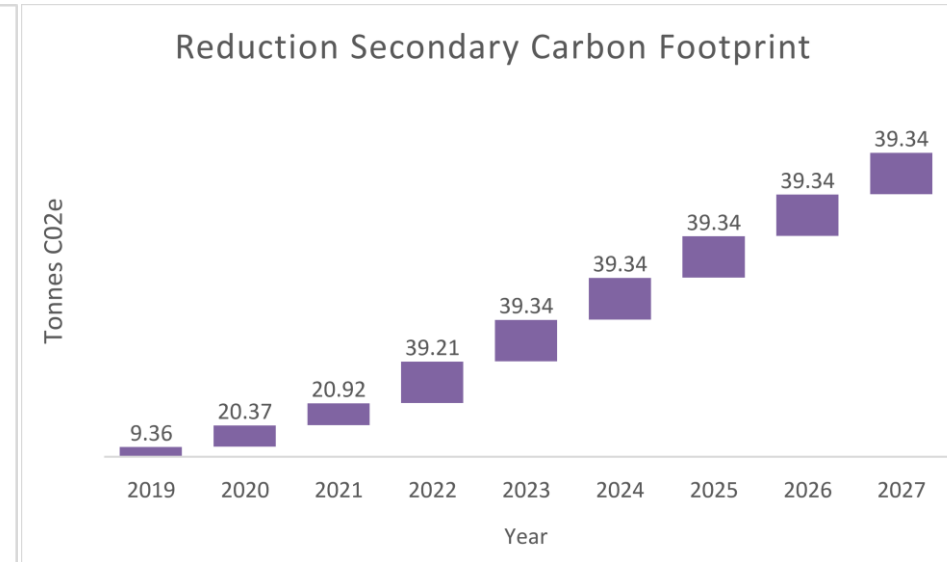
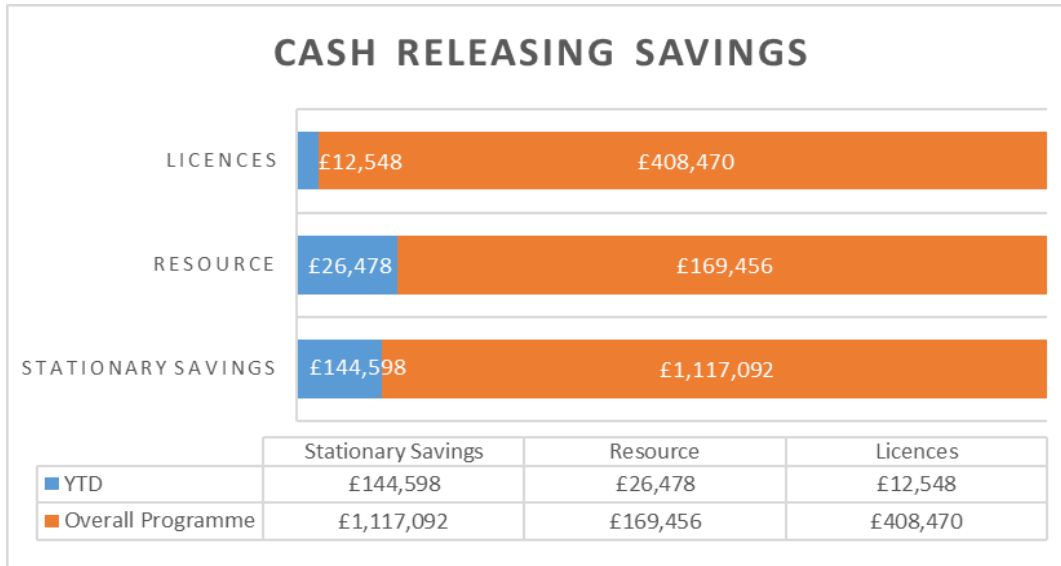
“Vocera has already helped me improve patient flow communications throughout the department. It means I can just get in touch with someone by name, rather than trying lots of different numbers” James Willingham, Patient Process Facilitator

*“The way we manage and access patient information has massively changed since the first time I worked at the University Hospital of North Tees. Ultimately, it just makes much more sense when I compare it to my time using more paper-based systems. **TrakCare EPMA** has made it so much easier to ensure I can spend more time actively treating and caring for my patients, rather than being sat in a doctor’s office hidden under piles of paperwork.” – Luke Ventress, Junior Doctor*

***File Drop** - “Really get the feeling we’ve gone past tipping point, I can be at one PC and access handover/primary care/radiology /lab data/old letters/old ecg’s/prescription/referrals... Heaven!” – Dr Nick Roper, Clinical Director (Emergency Services)*

*The process was painless and I am loving **e-Obs**. The machines work faster and it makes handover of patients and huddles much quicker, safer and improves the quality of information at a glance. A big thank you to the Digital Programme team and all the staff on Ward 32.
Hazel Jones – Ward Matron, Ward 32*

Benefits summary



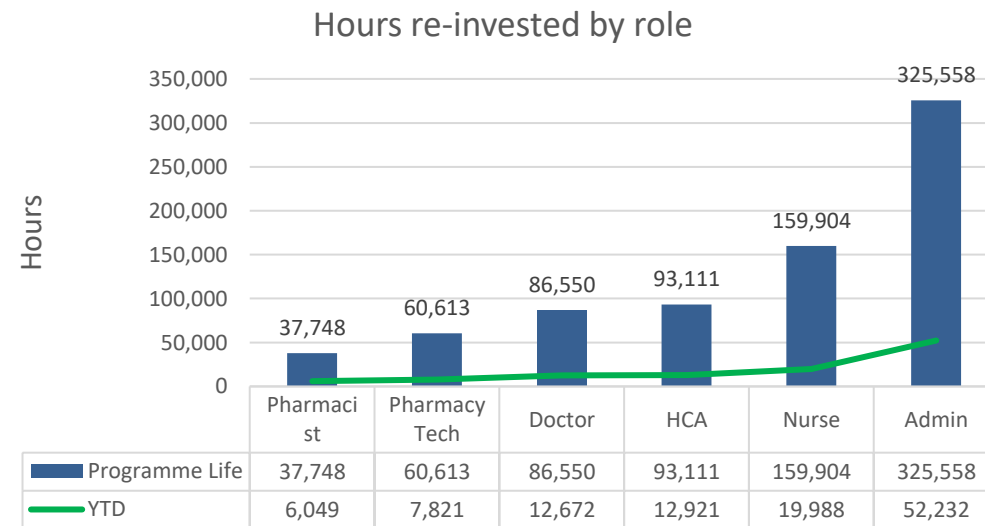
£1,695,018 cash saved by 2027

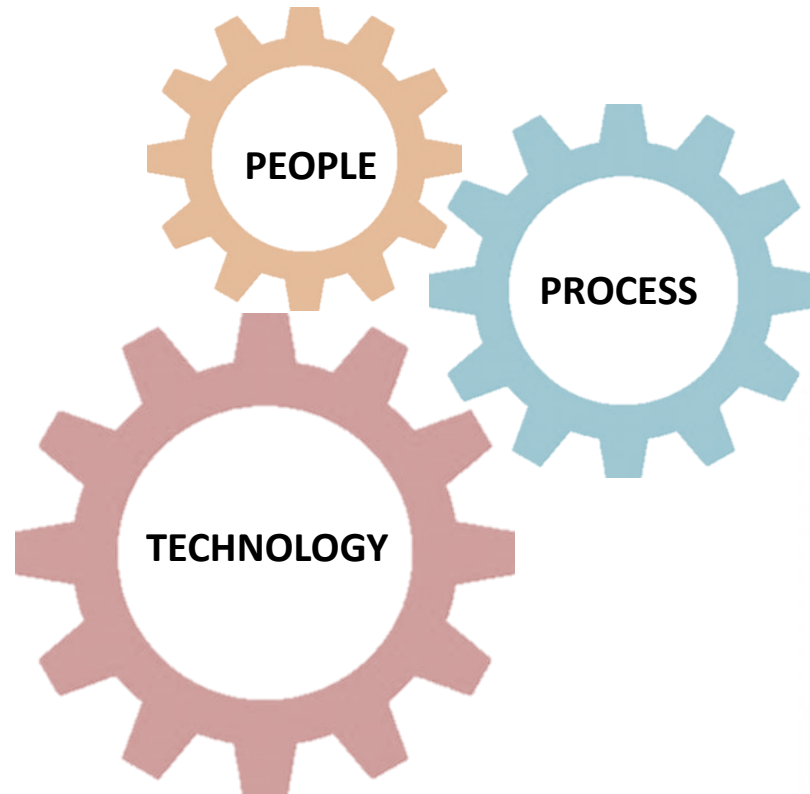


763,484 hours reinvested by 2027



286.56 tonnes of CO2e saved by 2027





Once *people* are aligned,
the *process* is developed and clarified,
then *technology* can be applied.



Case Studies

Poster Campaigns

Electronic Observations, Fluid Balance
Improve the quality and efficiency of our electronic systems - A Case Study
North Tees & Hartlepool NHS Foundation Trust

Vocera Communication System
Introduction of Vocera Communications System within the Emergency Care Directorate
North Tees & Hartlepool NHS Foundation Trust

Automation of Clinical Letter U
Improving clinical document workflow: TrakCare – a case study
North Tees & Hartlepool NHS Foundation Trust

DIGITAL PROGRAMME NEWS
North Tees and Hartlepool NHS Foundation Trust
March 2019, Issue 21

Active Clinical Notes – now Live in Accident and Emergency (A&E)
Active Clinical Notes (ACN) is now live in A&E. Due to the dedication and hard work from the A&E Team, the go-live has been very extremely successful with many positive comments received around the ease of access to update a patient's record. A&E have already reported they are seeing some benefits, such as nurses being able to view the patient record without needing to wait for the Doctor to complete their notes. As well as positive feedback from downstream services who have stated that the information is much clearer.

Electronic Booking – pilot with the Pain Service
The Pain Service will be piloting Electronic Booking on TrakCare, this will replace the Yellow Booking Card. The pilot is scheduled to run for a two-week period, weeks commencing 28th March 2019. The Pain Service Consultants and Specialist nurses will complete the electronic booking within TrakCare for any procedures prescribed, this will then appear directly on the Booking Teams Worklist to be booked. Towards the end of the pilot a decision will be made as to whether the team will continue with this process. A lessons learnt workshop will be scheduled shortly after the pilot, this will review any issues identified and what further refinements are requirements prior to rolling out to further services.

Easter Raffle – Wednesday 17th April 2019
The Digital Programme Team are hosting an Easter Raffle in the main concourse based at North Tees Hospital. 9.30am - 4.30pm - Wednesday 17th April. Please join in the fun and help us raise funds for our hospital.

EPMA Training
PRESCRIBERS
Medication History & Meds Discharge: [EPMA ePrescribing Module 1](#)
Nurse Administration: [EPMA ePrescribing Module 2](#)
[EPMA Administration Demo](#)

Newsletters

TrakCare is being upgraded to latest release!

Some of the improvements you've asked to include ...

- Enhancements to the Inpatient Discharge Summary
- Co-morbidities now save at a patient level
- Updates to ordering medications
- Medications more clearly displayed for GP's
- Improvements to inpatient episode handling
- Improvements to the Maternity module
- Fixes for problems reported by you
- Functionality in preparation for an E-Obs trial
- Functionality in preparation for the Theatres Module
- Patient information available when and where you need it better when they need it

Digital exemplars

Building the Foundations for our future
To find out more visit our SharePoint site
Find us under: Finance and Information, EPMA Programme

Blueprints

“you asked, we did”

Digital priorities



DIGITAL PROGRAMME PLAN (Q2)

3 Year Plan 2020-2023



Outcome of GDE/FF Programme
HIMSS Level 5
National Digital Leader

HIMSS Level 6
Gap analysis undertaken

Several years of significant technology investment and delivery
Good level of Digital Maturity



GDEFF - PDC 'matched' fund
Wisely invested, enabled transformations, business "owned".

Used to supplement and speed up rate of transformation. Build on solid organisational foundation.

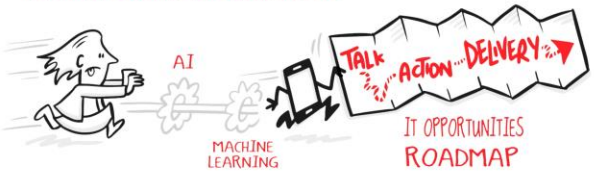
Opportunity
Share, learn and transform

HIMSS Level 6 Target

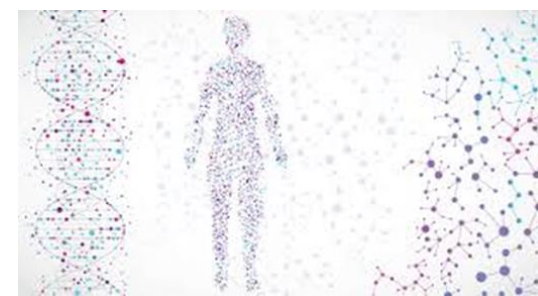
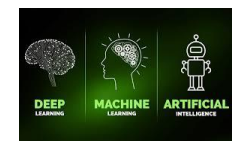
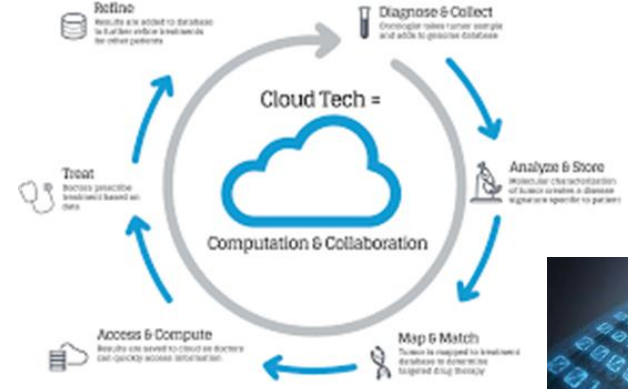
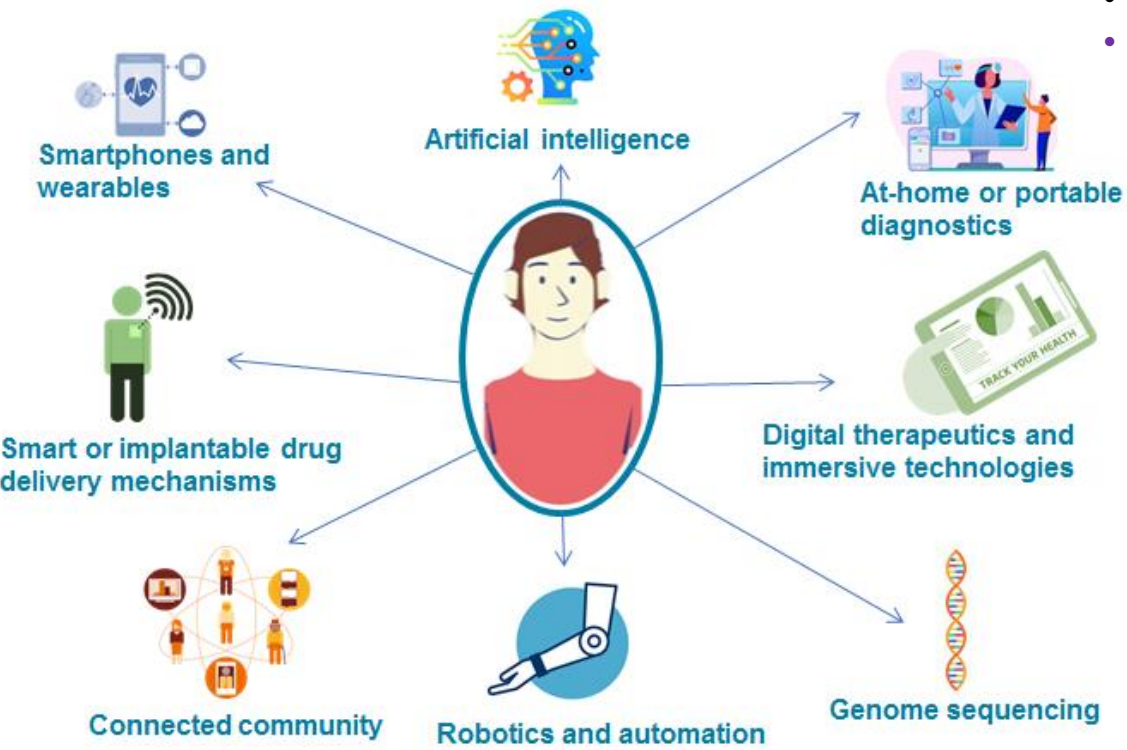


Digital transformation – where are we heading?

TECHNOLOGY IS CHANGING ...FAST

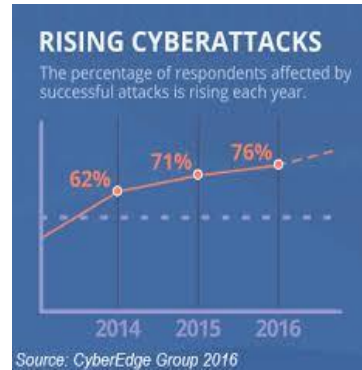


- Community Diagnostics
- Population Health (*Health Equality/Inequality/Digital Inequality*)
- Hospital on the High street
- Trusted Research Environment
- Artificial Intelligence (AI) Machine Learning
- Robotic Process Automation (RPA)
- Genomics
- Precision Medicine
- Person centred care

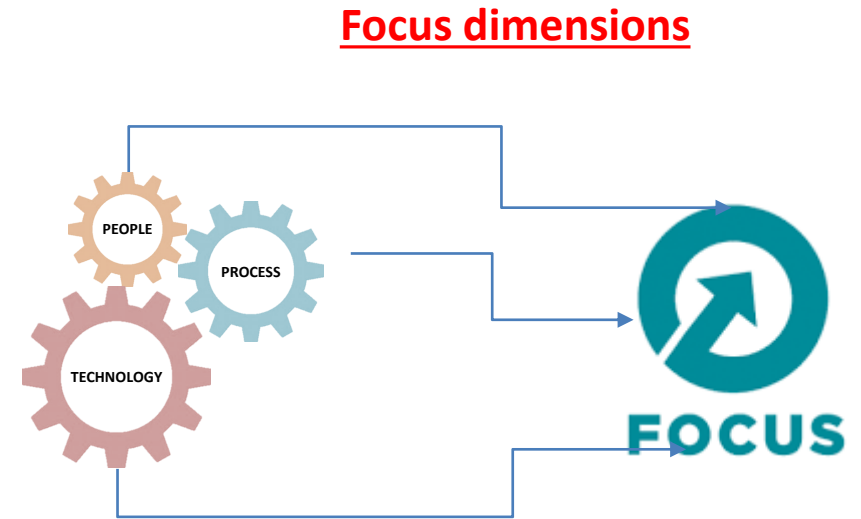


But the basic building blocks need to be in place

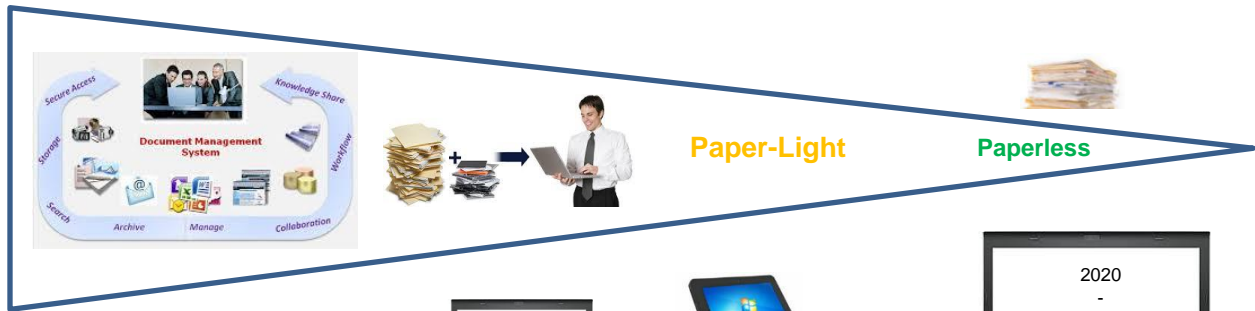
Unintended consequences of digital adoption



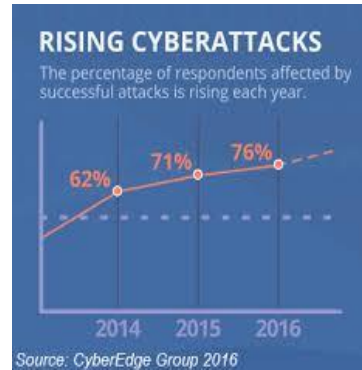
Increasing digital dependency (and increasing cyber risk to an extent)



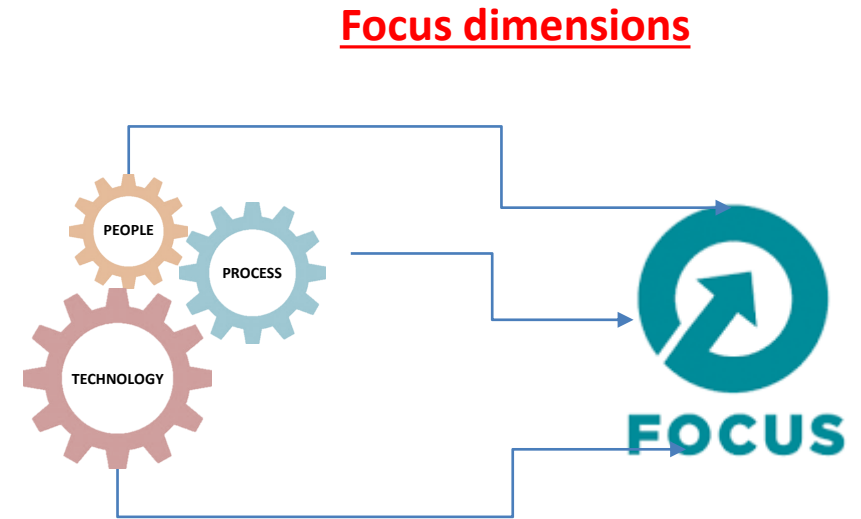
Paper Heavy



Unintended consequences of digital adoption



Increasing digital dependency (and increasing cyber risk to an extent)

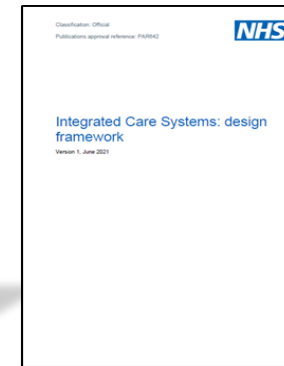


Paper Heavy



Strategy is delivery

- ❑ Digital dependency
 - ❑ *Digital is not an option, but a necessity.*
 - *What Good Looks Like (WGLL)*
 - *.....People, Process and Technology*
 - ❑ *Unintended consequences*
 - *Cyber-threat....*
 - *Digital exclusion*
- ❑ Alignment with;
 - ICS Next steps/Design Framework
 - Planning guidance
 - National Digital/Data Strategies



*The Digital Hospital of Things...
Don't do the same things better, do better things*

