Using Technology to Support Practice

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Imperial College – Regional and national focus
## The Imperial Journey so far...

<table>
<thead>
<tr>
<th>Year</th>
<th>Project Description</th>
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<tbody>
<tr>
<td>Aug 2011</td>
<td>Order Comms for Pathology and Radiology</td>
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<td>Apr 2014</td>
<td>Patient Administration System and Maternity</td>
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<td>Nov 2014 – Feb 2015</td>
<td>Pilots for Clinical Documentation, e-Prescribing and Meds Administration</td>
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<td>Mar 2015</td>
<td>FirstNet for A&amp;E and Surginet for Theatres</td>
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<td>2015/16</td>
<td>Trustwide rollout of clinical documentation and electronic prescribing and administration, bedside devices</td>
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<td>2016/17</td>
<td>Care Information Exchange, Global Digital Exemplar</td>
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<td>2017/18</td>
<td>Pathway Development, embedding EPR</td>
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Digital Optimisation

- Reduce variation
- Release time to care & enhance the care process
- Enhance clinical audit
- Evidence nursing impact on patient care
Reduce variation

Remote monitoring and the use of smart systems to increase patient safety e.g. deteriorating patients

Nudging nurse practice in the right direction – the right way is the easy way – digital and paper differences

Understanding the nursing demand OOH and potential resource redeployments

Patient education and information modules

Link all information systems into a single portal
Release time to care & enhance the care process

More time with the patient, less time in the clinical record

BMDI

BMDI level 1 and level 2 role out

PPI

Positive patient identification into the care process e.g. ECG and medication administration

CNS & Safeguarding Referrals

Multi patient work lists – drive specialist workflows and ensure this can be reflected in their activity and that of the trust
Clinical audit

Automatic Audits that demonstrate nursing care & activity

Meaningful data from the EPR, from every step of the patients journey

Link the data from the EPR with data in e-roster and other systems

Link multiple data sources

Utilise the clinical audit process at all levels

Empower the ward nurse to improve their own practice and that of their peers
Evidence nursing impact on patient care

**Standard Nursing language**

Ensure that care is reflected with the same language across the trust.

**Evidence of care activity**

Measure a series of different points of the clinical record and reflect this at all levels.
Summary

Reduce variation

- Remote monitoring and the use of smart systems
- Understanding the nursing demand OOH

Release time to care & enhance the care process

- Release time with continued BMDI role out
- Streamlined referral process to CNS & deterioration work streams
- PPI

Enhance clinical audit

- Empower the ward nurse to improve their own practice and that of their peers
- Link the data from the EPR with data in e-roster and other systems

Evidence nursing impact on patient care

- Utilise the data in the EPR to demonstrate the nursing input into the patients care