

Clinical leadership advances digital maturity



Liverpool Heart and Chest Hospital (LHCH) offers world-class heart and chest services with a commitment to deliver excellent, compassionate and safe care for every patient, every day. This patient-centered approach guides every aspect of the organisation, including its efforts to advance digital maturity.

With a steadfast focus on patient safety, LHCH clinicians shape electronic patient record (EPR) and digitisation initiatives. They use technology to reduce risk, improve efficiency and deliver the highest quality care. In just a few short years, LHCH has become 99.9% paperless, been ranked Third in Cheshire and Merseyside for digital maturity, and was rated “Outstanding” by the Care Quality Commission, which was the first time a specialty Trust earned this rating. LHCH is currently top in the country in the Care Quality Commission’s National Inpatient Survey, which is the ninth time LHCH has earned this distinction in the last 12 years.

Client Profile

Liverpool Heart and Chest Hospital NHS Foundation Trust

Liverpool, United Kingdom

OVERVIEW

- One of the largest single-site specialist hospitals in the UK
- Catchment area of 2.8 million people
- 193 inpatient beds, including 40 critical/coronary care beds
- Rated “Outstanding” by Care Quality Commission
- Nine years achieving Top in the National Inpatient Survey
- 99,655 outpatient appointments annually
- 12,954 inpatient procedures annually

ALLSCRIPTS SOLUTIONS

- Allscripts Sunrise™ Electronic Patient Record (EPR)
- Sunrise HIM Scanning (EDMS)



Nearly 100% paperless

Nearly all clinical information is captured electronically, which will save an estimated £100,000 over 10 years



Top-rated for digital maturity

Ranked Third in Cheshire and Merseyside and achieved HIMSS EMRAM Stage 5



Ranked first by patients

Top in the country according to Care Quality Commission’s National Inpatient Survey, earned nine times in the past 12 years

“Throughout our technology transformation, we haven’t been aiming at any recognitions; those are just byproducts of our aim to always improve clinically and be better in safety issues.”

Carol Moss, EPR Manager

Keys to EPR success: Clinical leadership and a trusted technology partner

In 2010, LHCH set a goal to be the premier, integrated cardiothoracic organisation in the country. Its commitment to lead and deliver outstanding care and research has helped LHCH become a top-performing Trust in the country for overall patient experience in the Care Quality Commission’s National Inpatient Survey for nine out of the past 12 years.

Technology plays an important role in this vision, and LHCH understands the importance of clinical leadership for its EPR transformation. Analysts on the core EPR team were from clinical backgrounds and helped shape workflows and procedures to best meet clinical needs.

“From the beginning, our new EPR wasn’t about costs or technology, and it wasn’t IT-led in any sense of the word,” Head of Digital Healthcare Dave Murphy said. “It was always about identifying clinical needs and developing systems that benefit patients.”

When reflecting on the EPR selection process, Murphy recalled Allscripts offered the capabilities and approach that was the best fit for LHCH. “Allscripts Sunrise gave us the flexibility and features to be the innovator we wanted to be,” he said. “But it wasn’t just about the technology; Allscripts takes a partnership approach, which is a standout feature for us.”

Implementation began in 2012 and, because LHCH was one of the first UK sites to use Allscripts Sunrise, the project required extra effort. “Allscripts took the time to understand the different workflows we have in the UK and built a lot to make it an English solution,” EPR Manager Carol Moss said. “Even with all of that work, the implementation was on time and on budget.”

Improving the cardiac rehab referral workflow

LHCH has used the flexibility within Allscripts Sunrise to address clinical and technical challenges, such as duplication in the cardiac rehabilitation referral workflow.

Cardiac rehab – including supervised exercise, counseling and education – can help patients improve cardiovascular health after an acute episode. A timely, accurate referral from LHCH to an appropriate cardiac rehab location is an important part of a smooth transition for patients.

Previously, the EPR was separate from the referral system and required double entry of multiple fields within the workflow. “We developed an EPR form that automatically pulls information from previous places where it has been recorded, reducing the number of fields from 15 down to three,” Moss said. “When the patient is discharged, we have logic in the background that matches patient information to a Cardiac Rehabilitation location, which improves the accuracy of these referrals.”

Missed referrals have decreased drastically from an average of 50 to just one or two overall each month, resulting in most referrals going to the right place the first time.

LHCH is using this pilot program as a template to extend the same technical solution to other referral systems. For example, Community Heart Failure Team, District Nurses and Community Anticoagulation management.

Ranking Third in Cheshire and Merseyside for digital maturity

A steadfast focus on clinical priorities has earned LHCH national recognition in digital maturity. The NHS England assessment, which ranked LHCH Third in Cheshire and Merseyside, evaluated 15 categories, including resource optimisation, governance, strategic alignment and more.

For example, LHCH attained an exceptional score in asset and resource optimisation, for its ability to use digital systems to manage inpatient beds, track patient flow in real time, assign staff rosters and automatically upload relevant data from monitoring devices into the EPR. Another area of strength for LHCH is orders and results management. The organisation excels in using digital systems to create orders and enable access to test results.

“We scored well in most areas, even though we weren’t chasing these specific principles,” Murphy said. “We find that when we deliver clinically-led technology improvements, good scores and recognition follow.”

LHCH has also ranked well within the HIMSS Analytics Electronic Medical Record Adoption Model (EMRAM). This model helps track healthcare organisations’ progress towards achieving a paperless environment. According to this eight-stage maturity model, LHCH has reached over Stage 5, which puts LHCH in the top one-third of European healthcare organisations.

Achieving a nearly 100% paperless system

The National Health Service (NHS) describes a vision for the future of healthcare that acknowledges the benefits of a paperless system. In fact, NHS is urging all Trusts to become paperless by 2020 to enable better health and care at a lower cost. LHCH embraced these principles in the earliest days of launching its EPR.

“From go-live, our aim was to put all clinical information into electronic format, with only a very minimal amount captured on paper,” Moss said.

LHCH evaluated every paper-based process at the hospital and developed a way to capture the same information electronically, using the Sunrise HIM scanning solution delivered by Hyland OnBase, even for items such as patient signatures.

“Now when patients are discharged, there is a small amount of paper from diagnostic systems, which we scan and capture electronically,” Moss said. “In the end, we are operationally nearly 100% paperless.”

Pre- go-live historic case notes totaled 133,000, with the remaining figure being 90,000, which are being reviewed with the appropriate files being destroyed delivering a minimum cost, saving more than £100,000 over 10 years.

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Dave Murphy, Head of Digital Healthcare

Clinicians acknowledge benefits of EPR

In the early days of the transition, Moss remembered clinicians were concerned that the EPR made it more difficult to quickly document information. "But they realised that information is much easier to locate in an EPR, because it's always in the same place, and that saves them time," she said. "We have also enabled remote access, which makes it easier for clinicians to assess patients' data from wherever they are, improving the response time to changes in a patient's condition."



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