

Delivering safer patient care with advanced technology solutions



Salford Royal NHS Foundation Trust (Salford, Greater Manchester, United Kingdom) uses a single platform electronic patient record (EPR). This advanced technology and dedication to patient safety has enabled the organisation to achieve clinical improvements and earn an "Outstanding" rating from the Care Quality Commission, one of only two trusts to earn this distinction two consecutive years.

Client Overview

Salford Royal NHS Foundation Trust

Salford, Greater Manchester, United Kingdom

CLIENT PROFILE

- Integrated provider of hospital, community and primary care services
- 1 hospital and more than 30 community sites
- 1 million hospital and community contacts with patients annually
- 839 beds at Salford Royal Hospital
- 7,000 staff

ALLSCRIPTS SOLUTIONS

- Allscripts Sunrise™
 - Sunrise™ Acute Care
 - Sunrise™ Critical Care
 - Sunrise™ Emergency Care



Reduced length of stay

Within one year, achieved average reduction in days by 10.3% for elective admissions and 3.4% for non-elective admissions



Improved consistency

Better compliance with evidence-based best practices, including 96% compliance with antibiotic prescribing procedures for C.diff



Safer medication administration

More accurate and efficient prescribing process reduce time patients spend waiting for prescriptions



Experience

Salford Royal offers comprehensive hospital, community and primary care services to approximately 400,000 patients annually in Salford. With 13 locations, including the 839-bed Salford Royal Hospital, the Trust has a clear ambition of being the safest organisation within the National Health Service (NHS).

As part of its commitment to patient safety, Salford Royal developed a Quality Improvement Strategy that focuses on delivering exceptional, personalised care in a safe, clean environment to every patient, every time. Salford Royal's hard work has resulted in its recognition as a national leader in quality improvement and patient safety.

Salford Royal implemented its first EPR in the year 2000 which provided only basic functionality. But the Trust soon realised that its quality improvement efforts required a more advanced system with clinical decision support (CDS) and the ability to provide more connected care.

Proven EPR solution with an on-time, on-budget implementation

Searching for a flexible and configurable solution, the Salford Royal EPR procurement team evaluated several vendors, specifically scoring the solutions in the areas of functionality, integration, migration capabilities, usability and price. Salford Royal ultimately selected Allscripts Sunrise.

During the first phase of implementation, the organisation migrated approximately 12 years of data into the EPR, including more than 180 million sets of test results and 1 million individual patient records. The new system went live in June 2013, featuring integrated order communications, results reporting, clinical decision support and e-prescribing.

Salford Royal completed the first stage of the implementation three months ahead of schedule and on budget. During the first four days that the new system was live, more than 3,350 users entered and viewed nearly 56,000 doctor's orders, test results and patient-related documents on the platform.

The second phase of implementation included a successful multi-stage release of the EPR platform to the Accident and Emergency (A&E) department.

Outcomes

Improving care for patients with dementia and delirium

Dementia is a collective term describing a unique set of symptoms, including loss of memory, mood changes, and difficulty communicating and reasoning. These signs occur when diseases such as Alzheimer's or a stroke damage the brain.

Delirium is acute brain failure that develops during a short period of time, from hours to days, and fluctuates over time. Delirium results in a disturbance of consciousness with characteristics such as the inattention and inability to perceive surroundings. While these are separate conditions, patients with dementia have an increased risk of delirium and many have both conditions.

Using evidence-based guidelines, Salford Royal developed a bundle in the EPR to help clinicians care for patients with delirium and/or dementia. The elements of the bundle include the commencement of discharge planning within 24 hours of patient intake, assessing and managing patient weight, completing intentional rounding to protocol, documenting rationale for any antipsychotics prescribed, and assessing and correcting sensory impairment. Salford Royal clinicians have achieved a 95% compliance rate adhering to the delirium bundle.

Care also extends beyond the walls of the hospital. "We're blending clinical and social services to meet the specific needs of our aging population," Director of Digital Rachel Dunscombe said. For example, upon discharge, the EPR can trigger discharge processes to help patients make a successful transition from hospital to home, and signal the need for appropriate interventions, such as transportation or changes of medication or GP.

Reducing pressure ulcers

Healthcare organisations around the world are working to reduce pressure ulcers (also known as bedsores), especially those of higher severity, patient risk and treatment cost—Stage III or Stage IV. Pressure ulcers are injuries to the skin that result from staying in one position too long. Patients who are unable to change their position, such as those who are bedridden or in a wheelchair, are at the highest risk for pressure ulcers.

Salford Royal embedded medical logic modules (MLMs) within the EPR to automatically and continuously assess every patient for this risk. The solution provides alerts to remind staff to conduct key assessments, identifies and advises clinicians of patients at risk, and prompts bedside clinicians to turn patients at risk on a frequent basis.

Adhering to evidence-based guidelines have helped Salford Royal clinicians reduce hospital-acquired pressure ulcers by 79% during the last two years.

Outcomes

- Achieved "Outstanding" overall rating from Care Quality Commission, one of only two trusts in the country to earn this distinction two consecutive years
- Reduced length of stay within one year by an average of
 - .45 days for elective admissions, or 10.3%, saving an estimated £10.1 million per year
 - .20 days for non-elective admissions, or 3.4%, saving an estimated £7.2 million per year
- Improved compliance with evidence-based best practices, including
 - 95% compliance with Dementia & Delirium Care Bundle
 - 96% compliance with antibiotic prescribing procedures for Clostridium difficile (C. diff)
- Improved accuracy and efficiency of prescriptions
 - 100% of patients have an accurate prescription on EAU when the pharmacists use the "on hold" function
 - Reduced time spent waiting for inpatient prescriptions by an average of 3.34 hours, or 20.7%, within five months
 - Reduced time spent waiting for outpatient prescriptions by an average of 8 hours, or 29.9%, within five months
- Reduced hospital-acquired pressure ulcers by 79% over two years

"Infection control remains one of Salford Royal's highest priorities. With a sophisticated system, our clinicians are able to more quickly identify and manage at-risk patients."

*Rachel Dunscombe,
Director of Digital*

"We're working to break down barriers to blend social and health services as the most effective way to meet our patients' needs. Our efforts revolve around the complete and total use of EPR data around the healthcare system, enabling it to be the central gravitational pull for everything we do in acute care."

*Rachel Dunscombe,
Director of Digital*

Controlling and reducing hospital-acquired infections

One of the most common hospital-acquired infections is caused by a bacterium known as C. diff. Using a medical logic module (MLM) within the EPR, Salford Royal created documentation and automatic testing for C. diff when patients met predefined criteria. As a result, clinicians are able to more quickly identify C. diff cases, provide faster intervention, prevent transmission and reduce cost per case.

Since implementing this module, the number of C. diff cases has dropped from 47 in 2012-2013 to 18 and 19 cases, respectively, in the following two years. Extrapolating the number to a rate of C. diff cases per 100,000 bed days, the rate for 2014-2015 was 8, compared with a national average of 14.7. "Infection control remains one of Salford Royal's highest priorities," Dunscombe said. "With a sophisticated system, our clinicians are able to more quickly identify and manage at-risk patients."

Length of stay and prescription turnaround times

One of many statistically proven outcomes is length of stay (LOS), which serves as a proxy for both better clinical outcomes for patients as well as better financial and operational management within the organisation.

Early quantifications show reduced LOS for elective admissions by 10.3%, reflecting an average reduction of .45 days. Recent estimates of cost per patient, per day for the UK would project that reduction saved as much as £10.1 million per year. Salford Royal is also seeing reductions in LOS for non-elective admissions of approximately -.2 days, equivalent to about 3.4% reduction and about £7.2 million per year.

Another important measure in the UK is turnaround time for prescriptions, meaning the time from when a physician orders a medication to when the medication is ready for pick up. Automated orders through the EPR enabled efficiencies and reduced wait times. For inpatient prescriptions, the time fell by 20.7% within five months. That averages 3.34 hours less time patients spent waiting for medications. The turnaround time for outpatient scripts fell by 29.9% within the same time period, or an average of nearly eight hours fewer.

Positioned to deliver truly integrated care

Salford Royal is one of the most digitally advanced Trusts and collaborates to bring together health care, home care, mental health and community nursing, hospital and social services into a new, unified model of care.

Because Salford Royal has an interoperable EPR platform, it is able to easily integrate with third parties to further these innovative initiatives. For example, a new partnership will bring into the EPR patient-generated health data from in-home medical devices, wearables and consumer health applications. Salford Royal will measure how this integration enables better patient care, outcomes and engagement.

"We're working to break down barriers to blend social and health services as the most effective way to meet our patients' needs," Dunscombe said. "A high-performing EPR platform is imperative to identifying and delivering appropriate services for patients. Our efforts revolve around the complete and total use of EPR data around the healthcare system, enabling it to be the central gravitational pull for everything we do in acute care."



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