Patient Flow,

Digital Inclusion and

60,000 “FREE” Computers

Brian Murray

Sales Director

hospedia

flow

[fləʊ]

1. the action or fact of moving along in a steady, continuous stream:
   "the flow of water into the pond"
   synonyms: movement · moving · locomotion · rise and fall · shifting · stirring · [More]

2. a steady, continuous stream or supply of something:
   "a constant flow of people" · [More]
   synonyms: movement · motion · course · passage · current · flux · drift · circulation · [More]

Does “steady” and “continuous” describe the individual patient journey through a hospital?

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The Problem….

- Patients routinely waiting over 4 hours in ED for a suitable bed to become available
- Patients not being discharged because something that should and could have happened hasn't
- Medically fit patients who aren't discharged because a suitable destination isn't ready
- Patients regularly being treated in an incorrect ward setting
- Patient conditions getting worse unnecessarily so they have to stay longer
- Elongated length of stay creates ill health
- Creates unnecessary readmissions

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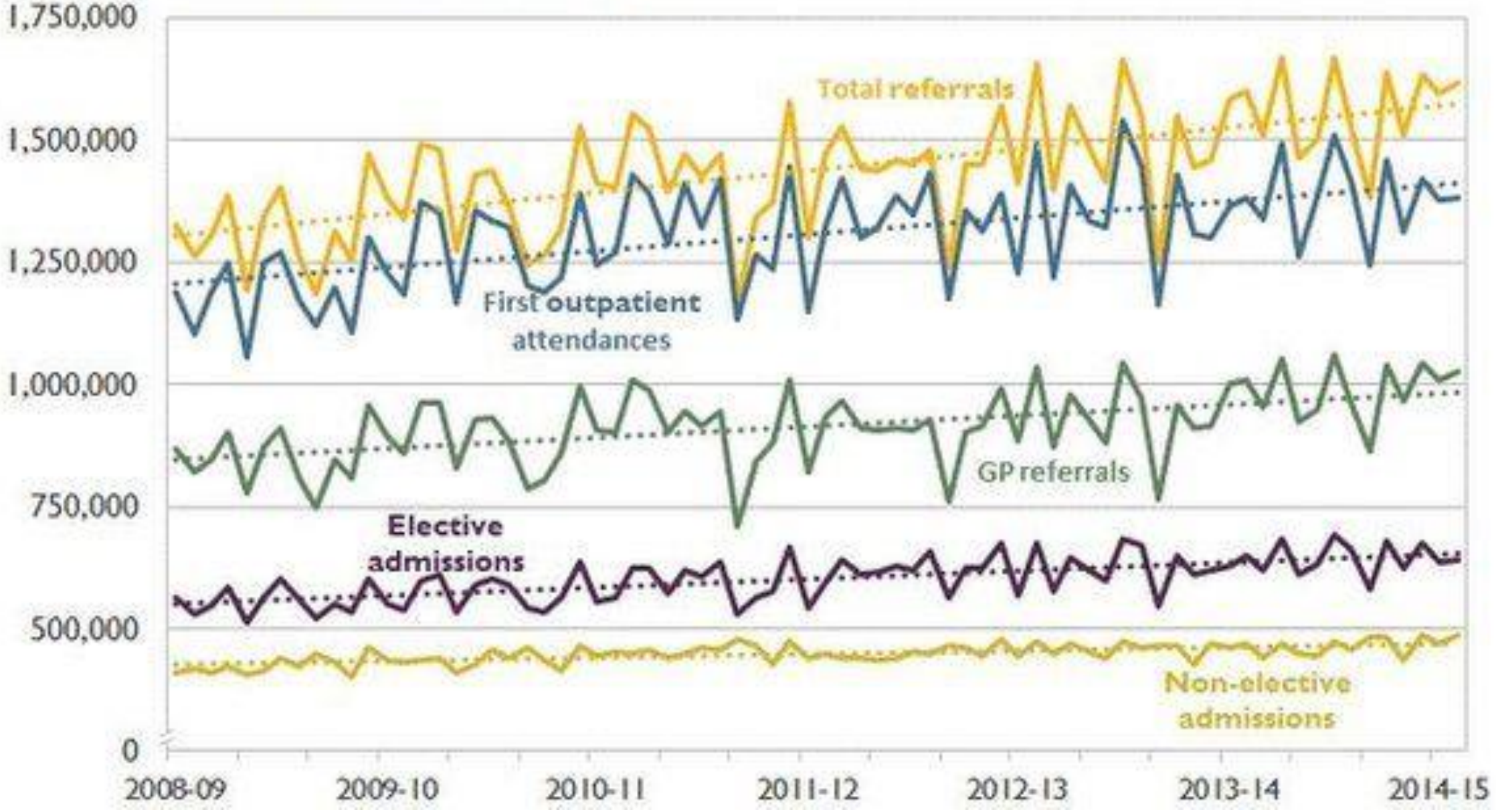
Hospital activity over time

Monthly totals recorded by NHS England



“Investing in Efficiency Today is about securing the capacity to cope in the future”

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While healthcare providers strive to deliver patient centred care, we need to recognise that the nurse and clinical staff need to be at the centre of the solutions we provide.

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extramed

Hospital | ED | Teams | Consultants | Wards | Help

Waiting Patients (1)

Show Patients

All

Smith, Peter (44)

PA

06:06

Dr Bob

07/09/2017

Pending Action (0)

Pre Booked Patients (0)

Medical - Harpur

Ward Team: All

Bay 1

01 — Hoolihan, Jessica (36) — 9 — PA — Dr Simmonds — 25/07/2017

02 — DRAMON, Stuart (66) — 10 — Dr Lua — 25/07/2017

03 — Burns, Bobby (86) — 9 — PA — 27/07/2017

04 — Random, Malcolm (40) — 4 — Dr Simmonds — 23/05/2017

05 — ROBERTS, JEAN (45) — 6 — 26/07/2017

06 — Smith, John (66) — 1 — Dr Sizer — 25/07/2017

TEMP BED — Suraj, kumar (32) — Dr Hurst — 30/07/2017

TEMP BED — Smith, Richard (48) — PA — 06:29 — Dr Simmonds — 01/08/2017

TEMP BED — Morris, Terence (62) — 7 — Dr Sizer — 25/07/2017

Bay 2

01 — Hugo, Large (77) — 1 — PA — Dr Simmonds — 26/07/2017

02 — Smith, Robert (87) — Dr Lua — 28/07/2017

03 — Jordan, Lindon (39) — 4 — Dr Lua — 26/07/2017

04 — O'Sullivan, Robert (27) — 4 — Dr Wilson — 31/07/2017

05

06 — Stilton, Russell (37) — Dr Lua — 26/07/2017

Bay 3

01 — Redknapp, Henrietta (49) — 1 — Dr Hurst — 25/07/2017

02 — Bellfield, Edwina (25) — 1 — Dr Ryska — 31/07/2017

03 — Oliver, Olive (40) — 0 — Dr Lua — 27/07/2017

04 — Cushing, Paula (67) — 0

05 — Round, Rita (76)

06 — Griffin, Jane (47)

Isolation 1

01

Side Room 1

01 — Parsons, Wendy (45) — 0 — Dr Snape — 27/07/2017

Side Room 2

01

TEMP SIDE ROOM

01

"Flow is not about the what of clinical care decisions, but the how, where, when and who of care provision…"

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The Health Foundation "Improving Patient Flow" 2013

Patient Flow Improving Patient Care and Performance

Salisbury NHS
NHS Foundation Trust

East Cheshire NHS
NHS Trust

East Lancashire Hospitals NHS
NHS Trust

Luton and Dunstable Hospital NHS
NHS Foundation Trust

Bedford Hospital NHS
NHS Trust

Barnsley Hospital NHS
NHS Foundation Trust

Medway NHS
NHS Foundation Trust

Greater Manchester West NHS
Mental Health NHS Foundation Trust

South Tyneside NHS
NHS Foundation Trust

Royal Bolton Hospital NHS
NHS Foundation Trust

Derby Hospitals NHS
NHS Foundation Trust

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Derby Teaching Hospitals NHSFT

- **1200 beds, multi-site**
- **Hospedia customer since October 2013**

- **Programme:**
  - Phase 1 – All medical wards live in 12
  - 600 active clinical users in first 4 weeks
  - Now over 4000 active users
  - **ExtraMed is used across all wards via eWhiteboards**
  - Virtual wards created for community and social care discharges
  - Ready to go initiative - discharge before 12 noon
  - Extended to 57 GP Practices October 2016

- **Benefits:**
  - 4 hour ED targets consistently met
  - Delayed discharges reduced
  - LOS reduced from March 13 (6.6 days) March 14 (5.9 days)
  - No winter wards opened since deployment

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The Economic and Wider Benefits of ExtraMed InPatient Flow Manager from Hospedia

This White Paper draws on the substantive analysis, performed by Deloitte, of the ExtraMed Hospedia InPatient Flow Manager service, alongside recent industry commentary, to assist hospitals in creating an evidence base and business case for using the service to improve patient care while supporting Cost Improvement Programmes (CIPs)

Based on economic assessment by **Deloitte.**

The Quantitative Benefits of InPatient Flow

"IPFM is estimated to support in delivering benefits of £4.5m per annum, and wider benefits to patients of £864k per annum."[5]

Significant efficiency savings can be realised by hospitals through improving the productivity of ward processes. By eliminating the manual processes associated with communicating information gathered during clinical rounds, IPFM saves valuable time. Patient information is input directly into an electronic system, saving 1,000 clinical hours per annum[7].

Timely admission and discharge planning is a key method of reducing patient length of stay. IPFM provides patient, bed and ward information, in real time, driving a reduction in the average length of stay by 13%[8]. Over the number of patients flowing through a typical hospital, this equates to a cost saving of £4.3m per annum[9].

Benefits	Hospitals p.a.	Patients p.a. (QALY)
Clinical time saving	£170k	-
Reduced length of stay	£4,300	-
Reduced isolation costs	£28k	-
Preventing hospital infections	-	£840k
Support during an infection outbreak	-	£24k
Total benefits	£4,498k	£864k

Figure 2: Economic Benefits of IPFM[6]

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Success Factors

- Whole hospital approach
- Whole Health Ecosystem
- Usability
- View at a Glance
- Works how nurses work
- Task driven
- Visibility & Accountability
- Working in teams
- Principal of Pull
- Concentrate on what will make a difference
- Your EPR is not a flow solution

extramed

Hospital | ED | Teams | Consultants | Wards | Help

Unseen Patients (1)

Helen, Smalling (47)
296:15

ED Majors Assessed Patients (6)

Hide Incomplete

Bay 01 | Bay 02 | Bay 03 | Bay 04 | Bay 05 | Bay 06 | Bay 07 | Bay 08 | Bay 09 | Bay 10 | MTR | Resus Corr | X-Ray W/R

ED Paeds | MINORS

Dr Jones is On-Call Bleep 4455

Admitting Consultant
Dr Simmonds

Name	NEWS	Status: Seen By	B|X	Inv	Ref	Tre	Oth	Location	Specialty	Breach	Destination
Brown, Coln (56)	16	FAB						Bay 7	UNK	299:13	MAU
McDonald, Moira (67) (Rys)	8	AM, ARobe						Bay 4	T+O	294:43	Oak House Care Home (Bed Ready)
Andrews, Joan (67)	NA							Bay 8	UNK	294:39	Oak House Care Home (Bed Ready)
Willam, Kork (37) (Lua)	6							Bay 1	UNK	294:30	Medical - Harpur
Smith, Richard (48)	NA	bm, 11:01						Bay 6	UNK	294:14	Medical - Harpur (Bed Ready)
Smith, Peter (44) (BB)	NA	10:44, 11:24						Bay 5	MED	293:51	

Toggle Features

Hospital Configuration: *Test Configuration 1*

Unassigned Patients (4)

Show Patients

All

Include Bed Requests

Filter

Collen, George (67)
PA
04/05/2017

Mahesh, M (37)
Dr Bob 11/08/2017

Jaya, L (54)
PA
Dr Bob 09/05/2017

Jones, Alan (58)
E
Dr Jones 20/05/2017

Hospital Summary

Hide Summary [-]

Total Beds	Available Beds	Projected Available Beds	No. 6 hr Waits	Critical Patients
187	98	60	8	10

Project To:

End of Today

Set

Division/Ward	Beds		Patients		Currently Available Beds					Projected (Confirmed) Available Beds				
	Avail	Total	Waiting	TCI	M	F	E/O	S	DC/O	M	F	E/O	S	DC/O
01 - Assessment Units	5	14	3	4			4	1	7			4 (1)	1	2
02 - Intensive Care	12	16	3				12						4	
03 - Surgical	17	45	2	1	2	7	5	3		2	5	8 (1)		
04 - Medical	12	60	6	7	4	3	4	1		13 (4)	11 (4)	10 (5)	2	
Medical - Godber	4	12	3	2	2	1	1			3 (1)				
Medical - Harpur	7	25		5	1	2	3	1		4 (1)	5 (2)	6 (4)	2	
Medical - Redbridge	1	23	3		1					6 (2)	6 (2)	4 (1)		
05 - Maternity and Paediatric	34	34		1		12	22							
06 - Renal	18	18			12	6								
07 - Discharge Lounge									4					2
08 - Community	5	8	3	3	1	1	1	2	38	1 (1)	1 (1)	1 (1)	1 (1)	5 (1)

Remember

Don’t try to boil the ocean.

Focus on the key deliverables that make the biggest impact.

Work with a supplier that can take you on the journey.

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"our approach is to manage things before they become an issue"

Karen ward, Dir of Ops, Luton & Dunstable.

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60,000

Free Computers!!!

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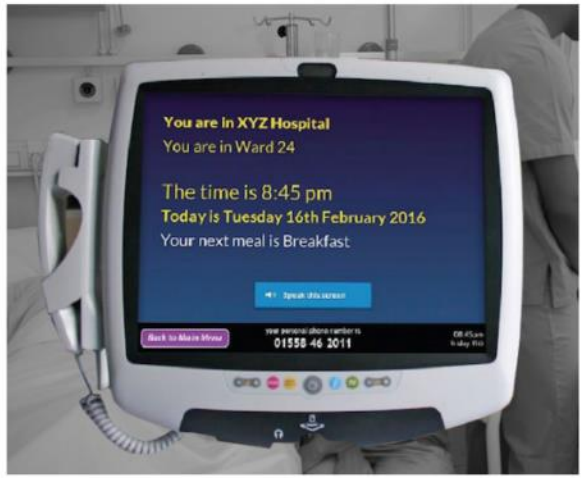
Free
Welcome to your Hospedia
entertainment and information system
Television
BiG Bundles
75 TV
48+ FILMS
Web
Free

Did you know you could be doing all this at the bedside?



A Clinical Tool at the Bedside

Films & TV

extramed

Time Left: 5:13

John Smith

Hospital

A&E

Teams

Consultants

Wards

Theatres

Help

Wilson, Anthony (59)(M)

Date of Birth: 03/04/1957

Consultant: Dr [redacted]

NHS NO. [redacted]

CARE REQUIREMENTS

- Falls Risk Assessment Form — Due in 6 days, 22 hrs
- Skin Risk Assessment
- Falls Care Plan
- Biochemistry
- Pathways Plan

Dashboard | Assessments | Care Plans | Daily Safe Chart | History

Visits: 04/07/2016 02:30 (Current)

N.E.W.S.	Waterlow	Nursing Evaluation	MUST
→ 11	→ 13		↑ 6
Taken 7 hours, 5 minutes ago	Taken 7 hours, 5 minutes ago		Taken 1 day, 4 hours, 5 minutes ago
History / Capture	History / Capture	Capture	History / Capture

Falls	Manual Handling	Bed Rail	Daily Safe Chart
At Risk of Falls	High risk		✔
Taken 1 hour, 17 minutes ago	Taken 5 hours, 12 minutes ago		Taken 23 hours, 5 minutes ago
History / Capture	History / Capture	Capture	History / Capture

What To Do Next

See us here for a Demo

Brian.murray@Hospedia.com

Visit the Digital Ward

www.improvement.nhs.uk