Understanding and managing electronic record keeping

Amanda Hamilton

Child Health Clinical Lead,
Community and Mental Health,
BT - London and South LSP
Programme.

20th October 2010

BT Health

Why Electronic Health Records?

- **Safer for clients** - correct identification and retrieval of the appropriate client case record.

- **Information is more secure** – confidentiality protected by role based user access.

- **Improved quality of care** – e.g. scheduling of health reviews, planning preventative care

- **Better planning and coordination of care** – more effective communication between multi-disciplinary teams/other agencies

- **Greater visibility of the clinical record** - viewing and sharing information.

- **More effective caseload management** – allocate, reallocate, sharing clients between care professionals.

- **Proactive planning of services** – management information, mandatory reporting sourced from more accurate, timely data.

BT

Record keeping - Guidance for nurses and midwives, NMC July 2009.

Information systems

29. You should be aware of, and know how to use, the information systems and tools that are available to you in your practice.

30. Smartcards or passwords to access information systems must not be shared. Similarly, do not leave systems open to access when you have finished using them.

31. You should take reasonable measures to check that your organisation's systems for recording and storing information, whether by computer, email, fax or any other electronic means, are secure. You should ensure you use the system appropriately, particularly in relation to confidentiality.

Good practice guidelines for general practice electronic patient records - DH & RCGP September 2003

- All clinicians participate in data recording

- All clinicians enter their own data directly into the computer system.

- Practices record all occurrences of the data set to ensure completeness.

- Practices record problems consistently.

- Consider using a Read code list

- Regular feedback and audit of data quality is carried out.

BT

Benefits

Strategic – think bigger.

Provide the business case.

Resist dual records and aim for paper light

Demand more training and support

Expect and demand mobile solutions for a
mobile workforce

Mobility – Kirklees CHS Case Study – Mobile Health Worker

- >1,200 staff, >402,000 people across 7 localities in Dewsbury, Spenborough, Central and South Huddersfield

- 150 sq miles – moorland, Peak District, South Pennines and urban Huddersfield.

Solution:

- Community staff - 600 Panasonic Toughbook laptops. Built in high speed broadband, integral NHS smartcard, pre-configured. Helpdesk & next day hardware replacement.

- Unlimited access – secure VPN to safeguard confidentiality.

- Estimated saving of £600,000 pa. Travel, printing, desktop computer cost savings. Improved life/work balance. Possible reduction in property estate.

BT

Broadband heralds a healthier planet

- N3 is an enterprise-class wide area network that runs over a high-speed IP-based backbone. Over 43,000 connections link 1.3 million NHS employees through 62 points of presence across England and Scotland.

- Iain McConachie Sustainability Project Manager N3 - "When fully embedded into the NHS, some 600 videoconferencing end points will be in use for an average of four hours per day,". That equates to a saving of over 2.3 million in travel hours, over £160 million in travel costs (both staff time and fares), and nearly 9,000 tonnes of CO_2.

BT

NHS Lanarkshire - Flexible working

- 3 month pilot, 60 clinicians chosen - community, public health and district nurses plus mental health teams specialising in old age psychiatry.

- Each pilot member given a laptop providing real-time access to the information and systems they needed while on the move.

- Efficiency and productivity improvements: Staff no longer queued for office PCs, shared access to online calendars made it easier to arrange patient appointments and team meetings, patient records were standardised, frequently updated and more secure.

- Service was improved because staff could focus more time on patient care and less on administration.

- In terms of work-life balance, staff gained flexibility to plan their workload, reduced stress levels and enhanced job satisfaction.

- Fewer miles travelled, particularly during rush hour, meant improved efficiency, productivity and carbon footprint.

BT

Significant achievements - 3 months later:

- 66% reduction in time taken to write up patient notes

- 33% less sick leave

- 22% improvement in work-life balance

- 21% increase in time spent with patients

- 12% fewer technical constraints

- 11% decrease in business miles

- Craig Cunningham Locality General Manager, East Kilbride: "Flexible working will deliver significant capital savings with every new build. For example, in any new builds, rather than building accommodation for 50, we will provide 20 desk facilities and 50 laptops. Our new mental health outreach service is also taking a flexible working approach."

BT

Look how far we have come…..

RiO, London and the South

Scale of Community & Mental Health – London & South

54 live C&MH trusts – all spine enabled

64,000 registered users

1.8 million progress notes per month

1 million appointments

6 million patients

30,000 PDS transactions a day

BT

Child Health Functionality

- **Registration** – PDS: Central Issue System (CIS) imported into RiO to populate a child's birth record.

- **Assumed GP** – until registered

- **Birth Details** - birth problems, neonatal interventions, congenital malformations. Mother and child are linked when the child's birth record is completed – any other children linked to the mother form a family unit incorporating the new child.

- **Immunisations** - scheduled, ad hoc, Quick Outcome

- **Health Reviews** – scheduled or ad hoc

- **Child Health Scheduler** - auto appointing, virtual and actual

- **Birth Sheet** - screening tests, health reviews completed, by team, by month, breastfed/bottle fed.

Child Health Related Assessment Forms (1of 2)

- Children's Nursing Assessment
- Child in Need/Protection Plan
- Looked After Children
- Looked after children - lives out/cared for in requests
- Asylum Seekers Health Assessment
- Community Paediatrics Developmental Assessment
- Developmental Assessment Management Plan
- Multi-Disciplinary Review
- Special Needs Assessment
- Statutory Assessment of Special Educational Needs

- Antenatal Contact
- New Birth Contact-Mother
- New Birth Contact-Baby
- 8 weeks Review Contact
- 6-12 month review contact
- Ad Hoc Review Contact
- Maternal Mood Assessment
- Newborn Hearing Examination Screen
- Maternal Antenatal and Delivery
- Breastfeeding Assessment

Child Health Related Assessment Forms (2 of 2)

- Children's Occupational Therapy Assessment Outcomes
- Children's Occupational Therapy Assessment Summary
- School Health - Teacher Questionnaire
- Parental Questionnaire
- Speech and Language - Child Assessment form
- Speech and Language - Child Case History form

- Carer's Health Assessment
- Baseline Observations
- Diabetes Review Assessment
- Emergency Department Attendances
- Medicines History
- Substance Use/Smoking Form
- Pain Assessment
- Notable Events
- Nocturnal Enuresis Assessment
- Enuresis / Encopresis Assessment Tool
- Vaccine History form
- Smoking Cessation
- General Advice Form
- Group Contact Form
- Long Term Conditions
- Message Book

BT

More Functionality Coming Soon………..

Release 1 – March 2011

- Audiology Screening for School Age Children
- Childhood Vision Screening
- Case Finding
- Screening Register - Current suspensions, Current screening programmes, Past screening programmes, Child screening
- Results Reporting

- **Centile Charts** – UK 90 WHO Girls/Boys:
  Low birth weight,
  Head, Length and Weight for 0-1 and 1-4 years
- Prescribing

BT

Release 1.1 - Summer 2011

- RiO2RiO – copy & paste immunisations, health reviews, screening results

- GP Immunisation Upload

- Newborn Bloodspot Screening Interface

BT

Release 1 New Forms – Child Health related

- Common Assessment Framework for Children (unborn)
- Check list for Common Assessment Framework
- Common Assessment Framework for Children and Young People
- Haemoglobinopathy Antenatal Counselling
- Medical, Family and Social History form
- Attention Deficit Hyperactivity Disorder
- School / Teacher Report
- School Observations
- Autism Spectrum Disorder Assessment

Release 2 – significant additional functionality

- Summary Care Record (SCR) integration

- Care Plan Enhancements

- Case Record Display Enhancements

- Conditional Logic in Forms

- Auto-Save functionality

- Extending Locking Functionality

- Child Health enhancements

- Outpatient and Discharge Report and Summary Tool

- Order Communications

- Urgent/Unscheduled Care

- Store and Forward

- Additional Prescribing Requirements

- Costed Care Packages (Config)

Thank you for listening

Any Questions?

Amanda.hamilton@bt.com

BT