

- **Digital, Data and Innovation Committee
(DDIC)**

- Update on Patient Flow rollout

First Phase 1a includes – All Acute Adults ward, Mental Health & Maternity

Functionality

- Admissions,
- Internal referrals (Therapies 5 pathways)
- Bed management and occupancy
- Transfer management,
- Discharge planning
- Patient flags and alerts,
- System pressure dashboard,
- Patient Record View
- Reporting

Integration

WPAS (demographics, wait list / TCI, ADT)



Training

Training method

Via teams (group sessions) and 1-2-1 for those hard to reach / difficulty attending. Q&A, access to resources post training.

Target groups

Ward Administrators (inc users of Frontier)
Clinical Site Managers
Nursing / Ward managers
Navigators
Operational Managers

Training schedule

Over four weeks over 1200 staff trained (training team ten application support) also supporting on the ground.
Training takes place during day and evening
Different sessions provided depending on role and access requirements.

To date:

95 % Clinical site Managers trained across all Acute sites
69 % Ward administrators
65 % overall more to do, but continuing to train

Go live support

From 08.30 – 22:00pm
then on call overnight
through to morning.

Weekend working

Attendance at all physical sites

Bed meetings

Ward rounds

Walk around with clinical site managers

Sitting with Ward administrators

Demonstrating and encouraging use of Interactive Whiteboards (EWB).

Clinical conversations with informatic nursing team

Plus all members of the Application Support team plus majority of DI & T Team

Snags & Issues

Microsoft Update to EWB

An update removed the interactive whiteboard keyboard – not just for HDdUHB but all organisations absorbing the update. Our Desktop Team and integration lead worked through night to rebuild one from scratch.

Key individuals had not attended training

We accessed rota information to help identify when staff were next on shift and targeted communication / 1-2-1 support to encourage use of the system / attendance at training..

WPAS not updated with Admissions, transfers, discharges

Continuation of an existing issue where patient location details / position in the care pathway is not updated promptly. This is amplified in eFlow as the system relies on this information. WPAS is still our patient Spine and supports Welsh Nursing Care Record (WNCR), Welsh Clinical Portal (WCP) etc. Communication circulated to heads of nursing, system GM's, training sessions will include this reminder as well as face to face discussions with staff across the organisation.

Location	No. of Wards	R2G Updated within 24 hours	% of wards updating
Bronglais Hospital	8	6	75%
Glangwili Hospital	22	18	81%
Prince Philip Hospital	11	11	100%
Withybush Hospital	11	10	90%
Grand Total	52	45	86%

R2G: Red to Green (patient status)

How are we doing?

What's next on the list?

- ▶ **Phase 1b – Manual eObs** (Delivery alpha phase: Towy ward): Go late Jan 26

Functionality - Manual recording of observations re NEWS2 and Sepsis, soft alerting

Integration - Nil

- ▶ **Phase 1c - eObs extended (further assessments and rollout to additional wards)**

Functionality - Manual recording of observations re Maternity Early Warning System (MEWS) and Paediatric Early Warning System (PEWS), hard alerting and direct messaging

Integration - Nil

- ▶ **Phase 2 – eObs with device integration**

Functionality - Inpatient spot monitoring, clinical noting and task management, resource assignation.

Integration - Monitoring devices (demographics, observations)

- ▶ **Phase 3 - results integration and application context launch**

Functionality - *ePMA, Picture Archiving Communication System (PACS) context launches*

Integration - *ePMA (demographics, ADT (incl. discharge meds), allergies), WLIMS (pathology orders, results), RISP (radiology orders, appts, reports)*

What else? ..

Operational requirements

- ▶ Installation of further Electronic White Boards and estates works to install
- ▶ Wireless Access Points replacement to ensure connectivity
- ▶ Purchase and distribution of mobile devices
- ▶ Design and implement network & assurance effectively for vital signs monitoring
- ▶ Strengthen and Improve Business Continuity estate

Continuously learning...

- Lessons learned
- Reflections
- Feedback
- Floorwalking log
- Celebrating small wins
- Motivating the team
- Motivating staff
- Business change and analysis to target improvement in usage and compliance

- **Recommendation:**
- The Committee is asked to **note** the update on the Patient Flow rollout