

Five steps to achieving paperless

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Health Secretary Jeremy Hunt has repeatedly highlighted the need for a 'digital revolution' within the NHS, and NHS England's own Chief Executive, Simon Stevens, has identified better IT as a key factor in closing the funding gap facing the health service.

The deadline for achieving an entirely digital health service has now been set as 2020, which means that Clinical Commissioning Groups (CCGs) are busy drawing up plans for how the Government's target will be met in their respective regions.

At this stage, there is still time for the introduction of a digital health service to be effective and transformational, rather than a rushed or backward looking exercise in 'computerisation'.

While the NHS as a whole has had a fairly rocky journey to date, encountering various setbacks and false starts, examples do exist where paperless is already a reality. Indeed, Ethitec has a proven track record in helping NHS services achieve the transition to paperless working.

So, for services evaluating their requirements, we have set out here our five top tips on how you can do so too.

1. Take a step back from the IT and first be clear about what you want to achieve as a service.

Irrespective of whether you are computerising for the first time or looking to change or extend the scope of a current system, you need to establish what you really require. It is all too easy to get bogged down in the specifics of a procurement or to limiting your aspirations to computerising the paper-based processes you already have in place.

While it is probably self-evident, it is still worth saying that taking time at the beginning to think about your longer-term service objectives and, as a consequence, being able to use the tender process as an opportunity to improve, redesign and future-proof the way you operate will pay massive dividends in the long-run. The 'wish list' that you create will become a key reference point that you can refer to at every future stage, allowing you to maximise the benefits and minimise the risks.

This approach has helped services such as the adult therapy services run by [Leicestershire Partnership Trust](#) undergo a complete service transformation, shortening waiting times and delivering significant efficiency savings through effective IT.

2. Be realistic about how much you can bite off in one go.

As well as identifying your service objectives, it is advisable to take the time to consider how best to handle the implementation process. An 'all-at-once' switchover may well be tempting, but has many risks and challenges attached.

Practicalities, such as having to have all staff trained up and all existing patient records registered on the new system from day one, may simply be unachievable. Long-lasting service transformation requires widespread support from those involved. A rolling or phased implementation which allows fine-tuning in reaction to end user comments will often achieve the desired objective quicker.

Having a robust outline deployment plan before commencing your procurement will allow this crucial element to be fully explored before you make any commitment. Rather than having to accept the supplier's standard plan, you will be able to challenge and assess whether their approach truly meets your needs. If you would prefer a rolling or phased deployment, then use the tender process to ensure that the software and the supplier are able to deliver.

The phased implementation undertaken by [Frimley Park Hospital Trust](#) began with patient recording, then appointment bookings, before moving on to full electronic patient records, all supported with appropriate reporting. The role based security within Ethitec's Tiara9 allowed user access permissions to be changed immediately following training, which made the switch much smoother for all involved. A staggered deployment enabled the therapy department to achieve its primary goal of allowing shared access to patient records far more quickly, and with full clinician support.

3. Choose the best fit.

As government initiatives such as NPfIT (the National Programme for IT) have proven: one size doesn't fit all. Neither does it necessarily guarantee a joined-up solution. Large-scale Enterprise systems may provide a minimum level of support for all services across an organisation, but will serve the complete needs of very few.

In recognition of this, NHS England has more recently endorsed an Interoperability Charter, whereby subscribed suppliers have agreed to make their software interact with complementary systems. A series of interoperable departmental solutions working together 'as one' liberates services to procure 'best of breed' systems that actively support their existing workflows, rather than having to follow the path set by others.

4. Find a partner, not a supplier.

Once you've made your choice, for better or for worse, you're unlikely to be allowed to change for some years (NHS procurements typically state a minimum system life of five years). It's therefore worth finding a supplier with whom you can form a successful long-term relationship, a partner that wants you to be successful and that will consequently offer the level and quality of ongoing customer support to make that happen.

Independent companies often have greater capacity and willingness to adapt their software to meet their customers' individual needs, and there's a greater chance that the team implementing and maintaining the software will have been directly involved in its development.

As your success is their success, independent companies are also more likely to be influenced by your suggestions for improvements, compared with many large corporations whose overriding objective is primarily to satisfy their shareholders.

5. Choose a solution that puts the user experience first.

Considering the ‘look’ of a system is not just vanity. Your staff will spend a lot of time using the system so choose a solution that mirrors their working practices, saves time and encourages clinicians to fully embrace electronic record keeping. This creates subtle efficiency gains, as well as directly increasing the quality of the clinical notes they record.

From the outset, Ethitec’s Tiara9 has been designed with input from clinicians to ensure an intuitive workflow that is easy to master. Training clinicians to use its simple, attractive interface takes less than one hour, thus minimising a significant cost that can often be overlooked. Tiara9’s workflows also feature individual default values to minimise data entry, making forms faster to complete by reducing the number of times information has to be entered.

Essentially, intuitive design makes it easier to gain clinical acceptance, which is the ultimate key to a successful deployment.

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