



Electronic system enhances continuity of care in Wigan

Philips ICCA creates more time for patients

Wrightington, Wigan and Leigh NHS Foundation Trust is a major acute trust with three hospital sites, serving the people of Wigan and Leigh in Greater Manchester. The Intensive Care Unit and Coronary Care Unit are based at the Royal Albert Edward Infirmary, Wigan.

Challenge

To improve workflow and increase capacity for high quality clinical care in CCU and ITU through reduced paperwork and intelligent use of data.

Solution

Philips IntelliSpace Critical Care and Anaesthesia system (ICCA).

When Consultant Cardiologist Dr. Nayyar Naqvi first approached Wrightington, Wigan and Leigh NHS Foundation Trust with the idea of purchasing a new electronic clinical information solution, he had a vision.

He hoped that by installing a cutting-edge paperless system, precious staff time would be saved and a new era of intelligent data analysis would facilitate more informed decision-making. Within two months of seeing the Philips IntelliSpace Critical Care and Anaesthesia system up and running in CCU and ICU, Dr Naqvi has been thrilled with the results.

‘We are all delighted with the new Philips system,’ he said. ‘Nurses and doctors are not spending their time filling in forms and have more time for clinical work. My consultant colleagues can look up a patient on their own computer and everything they need to know is there.’



Dr Nayyar Naqvi, Consultant Cardiologist

As founder of the Heart Beat charity that contributed to the ICCA's installation in coronary care, Dr Naqvi had proposed that there would be many advantages in also replacing the ageing computerised system in ICU. It was no longer fit for purpose, and it would be beneficial for the units to work together. He explained: ‘If patients come into A&E, then to the CCU, and on to the ITU, it is a seamless service now as the units are connected. The ICCA adds a lot of value. There are links to the path lab, consultation notes and vital signs. During ward round you just click a button on the bedside display and you can see the electrocardiograms and angiograms on-screen. It means things are much more streamlined and it is better in terms of follow-up.’

PHILIPS



Dr Kohei Matsumoto (left) and Dr Sreetharan Chelliah check patient data.

Tailored to suit

Ensuring that the ICCA is configured to exactly what the teams require has been the job of Clinical Lead Petro Bekker – formerly a senior sister on ITU. ‘The Philips’ package is very configurable to our documents and the way we work as a Trust,’ she said. ‘We can configure ICCA to do exactly what we want. In my role, clinical knowledge is 80% of it but I needed specific training to build the forms.’

Although they sync to share the same information, the systems in ITU and CCU have been tailored to fit each unit’s requirements, enabling each team to simplify workflow. Petro has been particularly pleased at the way the priorities of different health professionals have all fed into the system’s functionality.

‘It’s great because nothing is fixed,’ she explained ‘and nurses are already contributing to the system’s ongoing development. The ICCA has been configured to our liking and we are even thinking differently about how the shift gets planned now. We can see it’s

beneficial in saving time already. You can see a patient status overview on one page, a 24-hour view or break down per hour and it’s much easier to find documents. There is less paperwork and more time for care.’



Clinical Lead, Petro Bekker



Ian Thompson, Nurse

“There is less paperwork and more time for care”

“Things are much more streamlined”

Promoting patient safety

Ensuring patient safety is at the core of the ICCA's design, and staff have found its simple, built-in security features intuitive to use. 'There is a log of events and you have to put in your username and password to enter anything,' Petro said. 'This includes what interventions are done and when. But you can't do anything without using your digital signature so the ICCA improves safety and reduces the risk of error.'

Where nursing staff in Wigan had to previously log-in to a programme to



Ann Matthews, Coronary Care Unit Sister and Dr Naqvi.

obtain lab results and then copy them all down, the ICCA automatically downloads and displays results as soon as they are available. Nurse Ian Thompson believes the standardised process will improve accuracy and eliminate variables. He said: 'I am new to this team and I really like the ICCA system. It's a lot more straightforward and people don't have to struggle to read the handwriting in paper notes. You can see the blood results in the morning and these little flags come up to remind you about things. It's really clear and it's safer.'

The right information at the right time



Dr Chelliah is able to locate relevant notes more quickly.

The ICCA's flexible, intuitive design allows multidisciplinary teams to focus on the precise information they need - when and where they want to access it.

Dr Sreetharan Chelliah is based in Wigan's 11-bed Coronary Care Unit. He has found that using the ICCA he can identify the precise data he requires much more quickly and effectively than before.

'The new system is easier for everyone,' he said. 'It's much more structured and organised and it's easier to get access to the information I want. With the old style paper I would have to go through notes from other teams, such as dietitians, physios etc when I only want to see the doctors' notes. Now I can cut straight through to what I'm interested in.'

Dr Chelliah also claims that he has had to deal with less queries since the ICCA was installed as the nurses are able to find out the information that they need from the system. He added: 'I think we work better as a team now. Previously, I rarely had time to read the nurses observations but now I do. The system has cut down on duplication and it's easy to flip to different notes. I was on a night shift last week and I could look at my patients from the computer to see how they were getting on that very moment. The system works well for our purposes.'

“The continuity of care is enhanced”

Analysis to improve outcomes



Dr Rafat Saad, Consultant Anaesthetist.

Whilst automated reports help address regulatory mandates, the ICCA's simple drag and drop interface also allows individuals to build up bespoke tables and charts without extensive training.

Consultant anaesthetist Dr Rafat Saad is keen to test out the quality of data he will need to write coroner's reports. He said: 'The next stage will be to integrate our system for audits.' 'It's not a 'one-size fits all' package and we can manipulate the system and build it up to be exactly what we want.

So far, I am pleased with the ICCA's ease of use. I am planning to get information out to find out about fluid balance in people alive or dead, so that I can link outcomes to fluid balance.'

Seamless transfer

Ensuring the smooth transfer from the old systems to the ICCA was crucial in such high acuity settings. And according to the Trust's Clinical Systems Project Manager Tom Richens, the transformation in each unit was successfully achieved in just a few hours.

'The installation went without a hitch,' he said. 'We just went from bed to bed moving from paper straight to the electronic system. In ITU, each patient has a one-to-one nurse and when the nurse was comfortable that the patient was stable we just switched the computers on, transcribed the paperwork onto the system and that was it. We had the Philips application specialist here and the technical guys were also here as a buffer but they didn't need to get involved.'

Around 160 staff from the multidisciplinary teams had previously attended face-to-face training sessions and an e-learning package was made available to others. 'The training was great,' said Tom. 'We did it in several blocks of two days and the first thing we did at each session was spend time going through the questions we had built up. It was a good way to learn.'

A supportive partnership

Tom claims the relationship that the Wigan team has with Philips has been a significant part of the project's success 'It was very important for us to have the reassurance of 24/7 support from Philips,' he explained. 'Philips pulled out all the stops for us. We knew we could pick up the phone at any time and they would be happy to answer any of our questions. Our staff also felt more confident because the



Tom Richens, Clinical Systems Project Manager

Philips applications specialist had a clinical background. That sort of thing makes a big difference.' He added: 'There is still a feeling that we are in it together, even now, months later. The support is still there.'

The teams on both ITU and CCU are looking forward to maximising the potential of the ICCA to expand their clinical capabilities, with Philips as part of the on-going process. 'There is a lot we hope to do,' said Tom. 'The ICCA is robust and there is a big improvement in data quality. It will also enable us to pick up areas where people are struggling, for example with the flow of patient care. We wouldn't be able to establish those things with paper notes.'

'Philips has been a great partner for us,' Dr. Naqvi added. 'We are very happy with the way things have been dealt with and we are delighted with the ICCA system. The continuity of care is enhanced. It's a great innovation and I am pleased that we are now using 21st-century technology. We would recommend it to anyone.'

“Philips has been a great partner for us”

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