

OPEX United Kingdom

Carrington Business Park
Carrington, Manchester M314YR.

Tel: 0161.776.4033

Fax: 0161.776.2663

Email: SLee@opex.com

www.opex.com

Electronic patient records come of age with OPEX

The Trafford Healthcare NHS Trust's 'Paper Lite' project in Manchester is bringing radical changes to the working day of clinicians and support staff as traditional ways of managing the patients' pathways are superseded by IM&T led solutions. Paper Casenotes will be replaced by electronic records in clinics, wards and theatres delivering

improved patient management and realisable cost and time savings.

The innovative OPEX DS1225 scanning solution links a new Electronic Document Management (EDM) system to the existing information-rich Electronic Patient Record (EPR) – the latter having been supplied by Graphnet. In turn, the adoption of digital dictation handled through a virtual typing pool underpins the withdrawal of the traditional thick volume(s) of patients' paper casenotes. Coupled with these is the unique in house development of an Electronic Whiteboard which will see hand written whiteboards in wards replaced by truly interactive touch screen displays. These will draw information from systems such as the Bed Management system from iSoft's UltraGenda brand and EPR but, critically, will offer web based technology solutions for recording electronic information about handover actions, referrals, daily progress and pathway management.

Why 'Paper Lite' ?

The core reason for investing in 'Paper Lite' is to provide a strategic solution to improve the efficiency of patient data handling throughout the Trust. This is coupled with the current pressures on the administration process, which highlight the need for the more timely ►





capture & distribution (letters, forms, history sheets, reports, x-ray & overall data capture) and to reduce the significant costs associated with storage of hundreds of thousands of case notes as well as the cost of managing the logistics of records across multiple sites. Changed working practices are being enabled by a series of IM&T interoperable solutions which in turn provide higher levels of patient service at reduced cost.

Whilst the Digital Dictation process reduced the movement and filing workload for the paper casenotes, the bulk of the physical effort to deliver the casenotes to any number of locations both day and night remained. What was required was a solution that would not only allow access to historical paper records but start to reduce future generation of more paper notes. That solution came in the form of an Electronic Document Management (EDM) system via the OPEX scanner initiated and delivered by the specialist supplier Plumtree Group with electronic links between the EDM and the EPR. And notably it is Plumtree's DART technology which drives the EPR concept in tandem with Graphnet. The OPEX DS1225 offers numerous core benefits including compact user-friendly design; reduced file prepping including absorption of damaged or creased paper and clips; secure instant processing with content integrity, quality auditing and record of activity and compliance benefits; and production features in the form of multifeed detection and overlap prevention, and compatibility with the majority of software applications plus even an ink level indicator

Plumtree Group and IM&T staff have devised a scanning process that will allow historical or legacy casenotes to be scanned and available to clinical staff via the EPR together with temporary notes created during a clinic visit or inpatient episode of care. The use of bar codes to define the normal divisions within casenotes, patient identifiers and key dates underpins the use of the scanning machinery in the specifically formed Scanning Bureau.

The legacy case notes are processed through the unique called Drop Feed technology of the OPEX Corporation. The latter are designed for high throughput and are well suited to the 12 to 15 hours a day workloads. The scanning process is through PC display driven management with virtual divider sheets and handles duplex, coloured originals, rotation, flimsies, staples etc. The stack fed scanners have a long document feed for ECG traces etc.

A Scan on Demand policy is in place where all patients attending for new outpatient appointments will have their legacy casenotes (if they have any) scanned in advance with, at this time, the clinician being provided with a temporary plastic wallet on the appointment day for ad hoc notes and forms. These are collected at the clinic end and scanned through the stack fed scanners. The EPR is then as up to date as possible. Inpatients are prepared for in a similar way except many will have had their legacy casenotes scanned at outpatient stage. Temporary notes will be used at ward level and scanned at discharge.

The Electronic Whiteboard completes the new trio of innovations by providing every aspect of the patient's situation at a glance via appropriate icons and the means to complete forms and referrals without the traditional problems of lack of staff time and accidental wiping of details. The real time use of electronic forms by clinical staff is being progressively introduced and forms an integral part of the next stage of the process development.