

An apple a day keeps the doctor away.....!

Using technology to improve patient safety



VitalPAC

Annual Members Meeting

25 September 2012

Deborah Higgs

Consultant Nurse Critical Care

Why VitalPAC?

The overall aim of introducing VitalPAC is to improve patient safety and outcome. The Trust has a strong commitment to improving patient safety and using innovative means to achieve this.





Who, where, how, what, when ...

1. Bedside, real-time data capture according to patient need
2. Accurate tracking of patient location & hospital capacity
3. Analysis of patient status – ViEWS, sepsis, MRSA, VTE, pain, nutrition, infection outbreaks.
4. Better communication between nurse and responder – proactive & reactive
5. Transparent, relevant & timely clinical information – performance data.





Decision support

Immediate, localised, at the bedside



https://vitalpac.ekht-ad.ekht.nhs.uk/VPClinical/MyPatients.aspx

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[Safety](#)
[Tools](#)

Obs & alerts - patient lists

Obs & alerts - patient lists

My lists

View:

Ward	Patient name	EWS	ic	C	O ₂	vte	Pain	Cons	Nurse	Next obs
Marlowe	B1:2	4 ↑				⚠	0	FARC	JK	2h
Marlowe	B1:4	4 ↑				⚠	0	ALIT	PC	+7h
Marlowe	B1:5	2 ↓		C			0	ALIT	JK	3h
Marlowe	B1:6	0 ↓					0	ALIT	JK	10h
Marlowe	B2:9	1 ↑				⚠	0	FARC	JK	25m
Marlowe	B3:15	0		C		●	0 ↓	ALIT	RT	4h
Marlowe	B3:16	2				⚠	0	DASN	LS	5m
Marlowe	B3:17	5 ↓				○	0	ALIT	JK	4h
Marlowe	B3:19	1 ↓		C			0	ALIT	RT	4h
Marlowe	B4:22	1 ↓		C		⚠	0	ALIT	JK	5m
Marlowe	B4:23	0 ↓				⚠	0	FARC	JK	10m
Marlowe	B5:26	3		C		●	0	FARC	AW	⌚
Marlowe	B5:30	0 ↓				⚠	0	FARC	EC	4h
Marlowe	B6:32	6 ↑		C			0	FARC	ST	⌚
Marlowe	B6:33	2 ↓				●	0	FARC	AW	2h
Marlowe	B6:34	1				⚠	0	ALIT	NH	2h
Marlowe	B6:35	1 ↓		C		⚠	0	FARC	ST	4h
Marlowe	S1:1	1				⚠	0	ALIT	PC	4h
Marlowe	S2:36	6 ↓	ic			⚠	0	FARC	AW	+10m

VTE & bleeding risk assessment

VitalPAC[®] CLINICAL You are logged in as Dr. David DOCTOR [Log out](#)

VitalPAC - VTE risk assessment [Refresh](#)

John PATIENTNAME **Ward ABC, bed 6**
 Hospital number: 12345678 NHS number: A123 4456 789 Born: 21-Jan-1945 (65 y.o.)
 Last assessed: not yet assessed for current admission

☒ Patient category
 ☒ Thrombosis risk 1
 ☒ Thrombosis risk 2
 ☒ Bleeding risk 1
 ☒ Bleeding risk 2
 Risk & treatment

Risk summary and recommended treatment plan

Thrombosis risk: **HIGH** Age > 60; reduced mobility >= 3 days; anaesthesia + surgery > 90 minutes
 Bleeding risk: Low

Recommended treatment plan - SURGICAL > general [View Trust treatment plan](#)

- Heparin or LMWH or other parenteral anticoagulants
- Warfarin or other oral anticoagulants
- Mechanical prophylaxis, such as antiembolism (TED) stockings or SCD or foot impulse devices
- Early mobilisation

Planned treatment - indicate the treatment you intend to prescribe

Pharmacological prophylaxis ☒ Yes ☐ No

treatment ☐ Heparin ☒ LMWH ☐ Warfarin ☐ Other

Mechanical prophylaxis ☒ Yes ☐ No

treatment ☒ TED stockings ☐ Compression device (SCD) ☐ Foot impulse device ☐ Other

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Nurse	Next obs
JKD	2h
DFR	+2h
JJ	2h
RJG	+1h
DFR	+15m
Awaiting first obs	
KJB	1h
RJG	1h
DFR	15m
Awaiting first obs	
DFR	3h
JJ	30m
KJB	45m
DFR	11h
JKD	3h
FSN	
DFR	1h
DFR	+2h
KJB	10h

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Impact - compliance

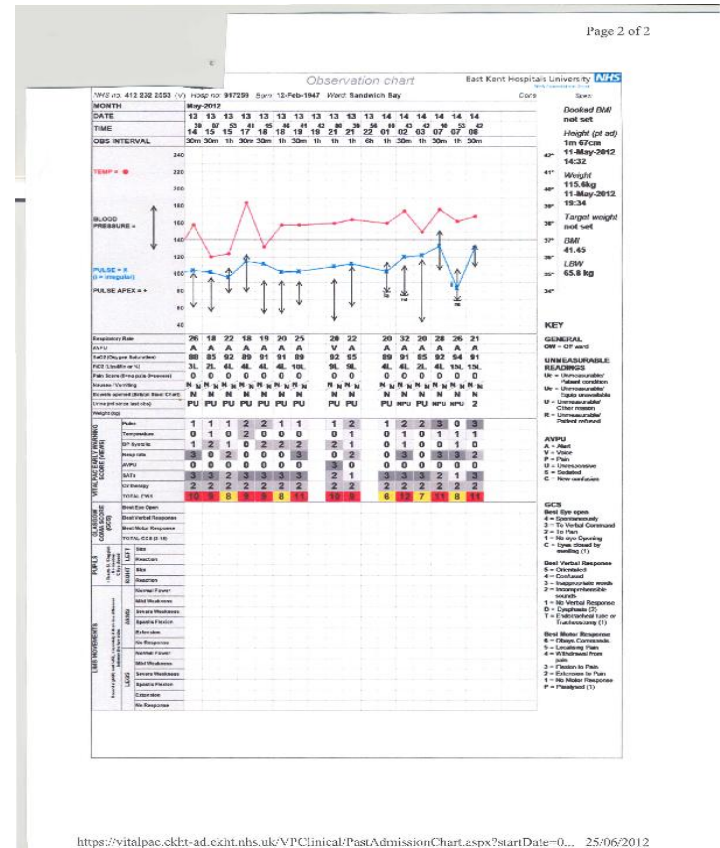
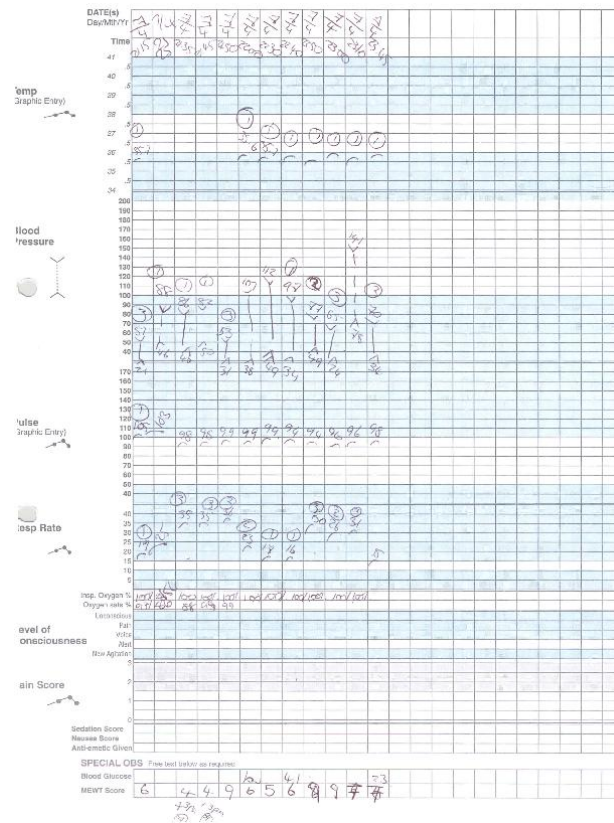
(Data from PHT, UHCW, SNEY, DCH, SDH)

- Release time to care:
 - 40% quicker to record obs
 - Immediate escalation of care
- More appropriate, targeted obs taking
 - More obs taken on time with shorter delays
 - More obs taken at night
 - 30% fewer unnecessary low risk obs
- Better quality obs taking
 - 99% complete obs taking
 - 99% accuracy of EWS calculation
- Better compliance
 - 98% MRSA screening
 - 95% VTE risk assessment



Benefits

Our charts have gone from this to this!



<https://vitalpac.ckdt.ac.cht.nhs.uk/VPClinical/PastAdmissionChart.aspx?startDate=0...> 25/06/2012



Appropriate, effective, accountable care



Local roll out

Locally we have achieved a fantastic roll out:

- In four months we will have rolled out VitalPAC nurse to 50 wards in the trust.
- 95% of these areas are now paper free (with regard to observation charts)
- Our compliance with undertaking a full set of observations with a correct score is >99%
- The wards generate more than 3500 sets of observations in each 24 hours period!



The Future

With the rollout of VitalPAC Nurse complete we will move to introducing:

August: VTE module

January: VitalPAC doctor

January: IPC manager

January: Patient flow

January: Fluid Balance module



Feedback

“Thank-you for taking the time to train me yesterday.

I just wanted to say I am already using VitalPAC Clinical and have made my own diabetes inpatient list. Now at a glance I can monitor my patients blood glucose levels every morning and prioritise who I have to review. Absolutely fab. Love it.”

Diabetic Clinical Nurse Specialist



*Thank you
for listening
Any
questions?*



SHE WILL BE BETTER.