GREEN WARD COMPETITION
CENTRE FOR SUSTAINABLE HEALTHCARE

Barts Health NHS
NHS Trust

IMPROVING ACCESS TO ELECTRONIC NOTES IN THE COMMUNITY – COMMUNITY NEURO TEAM , 2019

TEAM MEMBERS: Holly Corlett (Specialist Clinical Psychologist), Lily Smythe (Speech & Language Therapist), Mairead Espinoza (Occupational Therapist).

HIGHLY COMMENDED

Goal: To improve access to electronic notes in the community setting.

Background: The team identified that one of the main areas of waste was due to returning to their office at Mile End hospital to write up notes.

Current system: After the introduction of the EMIS electronic notes system handwritten notes taken on community visits need to be scanned on to the EMIS electronic notes system and extra information typed into the electronic system, duplicating the effort of making hand-written notes. Extra journeys back to the department at the end of the day only to write up notes take up staff time that could be spent more productively and have environmental, social (to staff) and financial costs. The time lost to travel was especially important as they are a team member short currently and so are under pressure to work even more efficiently.

Holly, Lily & Mairead (left to right)

Alternatives: Many other Trusts, including the neighbouring East London Foundation Trust, provide community staff with the capability (both devices and docking units installed at hubs in the community), to add notes to the electronic notes system when working in the community. **The team wished to assess how such technology might make their practice more sustainable.**

Approach: the team gathered **baseline data** of the **wasted travel** (cost, mode of transport, distance) from journeys of 3 of the 15.8 full-time equivalent staff made back to the department over 1 week just to add notes to
EMIS ('unnecessary journeys') and **staff time wasted** due to travel and duplicate work required to complete notes. The team reported that the pattern of work of the 3 team members (Speech and Language Therapist, Physiotherapist and Psychologist) was generalisable to the other team members.

The aim was to **compare** this data with data collected **after the introduction of an iPad** or work laptop. Since (despite best efforts) it was not possible to obtain a device to test this change within the timescale of the competition the impact of the change was **calculated** based upon the potential impact of saved journeys and reduction in duplication of administration, taking into account the cost of introducing iPads for the team (capital investment and running cost) for use on community visits.

Results:

The results represent potential savings for the whole team of 15.8FTE staff over 1 year (236 working days) calculated from the data for 3 team members over 1 week.

The potential benefits include:

Environmental benefit	A forecast **annual carbon saving** of **235 kgCO2e,** including saved travel and paper. Travel made the greatest contribution to saving carbon with a potential average saving of **1,316km.**
Social sustainability; benefit to patients, staff and community	Benefits to staff include an increased likelihood of staff going home on time, reduction in low value work (travel and data entry) and frustrating work (meaningless duplication) for the team. All of these have a potential to increase job satisfaction and staff wellbeing.
Financial benefit	A forecast annual saving of **£ 1,228 in travel costs and use of resources,** even after capital investment and running costs of iPads considered (assuming an iPad will last for 5 years). A further annual saving of **£8118** was forecast due to **savings in staff time** related to unnecessary travel and duplication of documentation. This amounts to a **total annual saving of £9,346.**
Clinical outcomes	Saving time could allow more patient reviews to take place and reduce wait times. More timely availability of notes to other healthcare professionals will help to contribute to safer care and greater accuracy of notes; during the project it was noted that there was sometimes a delay of 1-2 days before paper notes were entered into the electronic system.

Next Steps:
The Chief Medical Officer was so impressed with the project and saw the need in providing iPads for the team that he has promised to work to facilitate this.

There are many community teams in Barts Trust who would potentially benefit from this technology and so this project has **HIGH potential for spread and impact throughout the Trust**.