



# Theatres give ORMIS the ThumbsUP...

A year after deployment, a reflection on the benefits realised from Theatre Management (ORMIS) system at Warrington and Halton NHS Foundation Trust by staff from theatres, waiting list and IT

*(November, 2016)*



## THE CHALLENGE

To change the electronic theatre system at Warrington and Halton NHS Foundation Trust which supported approximately 33,000 patients passing through 21 theatres every year on the perioperative pathway.

The key drivers included:

- Removing paper based processes
- Driving efficiencies
- Improving user experience

Initiated by the Trust, the movement towards a new electronic theatre based solution was driven by the need to source a proven theatre management system which would integrate with Lorenzo, an integrated and interoperable real-time electronic patient record (EPR).

Lorenzo is the Trusts strategic choice of an EPR, to achieve the objective of 'paperless records to improve patient care'. However, the theatres functionality within Lorenzo was not available at the time the Trust was planning to implement the electronic EPR. Subsequently, the Trust decided to implement ORMIS as a tactical interim solution.

in a   
nutshell

Solution:

ORMIS - Theatre Management System

Implementation:

November, 2015

Funding:

Local Service Provider CSC Revised Programme Agreement (RPA)

Patient benefits:

⇒ Timely, accurate and involved communication

Staff benefits:

⇒ Improved staff experience, linked to collaboration, improved data quality and reduced complaints

⇒ Improved staff confidence, linked to control over deployment and availability of testing environment

Trust benefits:

⇒ Released staff time to administrative tasks (£4,793 non cash releasing saving annually)

⇒ Cash releasing saving £9,061 per year

⇒ Societal savings £9,061 per year

# So what are the BENEFITS....

## Efficiency

- Increased completeness and accuracy of information, supported by mandatory fields. As a result, reducing the re-work, transcribing, waiting and chasing of incomplete data, as well as the associated complaints. Through not chasing missing data, for example, theatre administration have released approximately **520 staff hours per year**.
- Quicker data input, with standardised information via drop downs and better flow.
- Completing WHO<sup>1</sup> Surgical Safety Checklist and SBAR<sup>2</sup> communication/handover documentation electronically will **save approximately £1,440 per year** and support the implementation of NatSSIPs<sup>3</sup>.
- Electronic auditing saves **approximately £7,621 per year**.
- By reducing paper usage, the organisation have **reduced their carbon footprint by approximately £9,061 annually** and freed office space.
- Ability to log into ORMIS quicker using individual pin facility, subsequently improving information governance, with the right people accessing and dealing with patient information, no longer sharing logins.

88% of staff agree / strongly agree that the various functions in ORMIS are well integrated

## Safety

- Ability to follow the patient journey through the Trust, with real-time availability of WHO Surgical Safety Checklist /SBAR Handover inline with NatSSIPs. Previously, WHO checklist and other documents such as care plans were not available electronically.
- Ability to effectively plan has reduced incidents linked to kit and implant availability.

100% of staff agree / strongly agree that the ORMIS reduces the risk of clinical error

## Effectiveness

- Increased quantity of information in a standard format available to staff, with improved visibility via remote access and better screen layout / usability. As a result, a positive impact on staff and patient experience from improved:
  - Planning and coordination of theatre lists
  - Reporting and auditing capability
  - Ownership of data
  - Communication with patients and their families
- Improved communication and collaboration between staff, with responsibilities now able to be shared across more staff to input information.

100% of staff agree ORMIS improves the quality of clinical care provided

1. World Health Organisation
2. Situation, Background, Assessment, Recommendation
3. National Safety Standards for Invasive Procedures

"All the information I need is on one screen"

Theatre Practitioner

"ORMIS is much more user friendly"

Waiting List



"Patients are now better informed & communicated to than before"

Theatre Practitioner

# IMPLEMENTATION / DEPLOYMENT OVERVIEW

As part of the Local Service Provider CSC Revised Programme Agreement (RPA) (formerly the National Programme for Information Technology (NPFIT)), ORMIS was deployed at Warrington and Halton NHS Foundation Trust to support the patient pathway for theatre scheduling from admission through to and out of theatre. ORMIS replaced the previous electronic system Meditech, which was supported by a paper process that the Trust had been utilising for 15 years.

With the deployment of the trusts electronic patient record (Lorenzo), at the same time to ORMIS, reduced resources were available to support the theatre system roll out.

As a result:

- Local hardware installations was carried out by one of the organisations IT project managers on approximately 1450 computers
- System testing, training and support was led by the services involved in the theatre pathway along with driving the required business change, rather than by IT



Leading the change to ORMIS across the three trust sites (Warrington Hospital, Halton Hospital and Cheshire & Merseyside Treatment Centre), two members of theatre staff from each of the sites volunteered to be trained as super users to support training of other users and floor walking support after the system was implemented. This involved 5 days of training from the supplier Computer Sciences Cooperation (CSC).

Through a 5 week training programme in the run up to deployment, the six super users trained 180 theatre colleagues on ORMIS in a converted theatre room and a Computed Tomography (CT) room, due to the Lorenzo deployment training taking precedent on training rooms. Varying in approach, protected time was identified for training, which was delivered during dedicated theatre audit sessions, with additional drop in sessions using the train the trainer methodology for all ORMIS users, including non-clinical staff also available. Refresher training sessions were also offered to staff.



Along side training 22 Standard Operating Procedures (SOPs) were created to support staff, which were built on SOPs developed and shared by Walsall Healthcare NHS Trust. A test environment was also available to staff as a 'sand pit' environment to try ORMIS in their own time to gain confidence and raise any questions early.

In the run up to deployment a 26 week project plan was established, with meetings being held every Monday between theatres, waiting list teams and IT services. The meetings reviewed progress in sections (senior management, governance and training) and used risk assessments to provide focus.

Rolled out in November 2015, ORMIS was deployed first over a weekend to Emergency and Trauma, then to the rest of the organisation on the following Monday. Supplier support was on hand for the day of Go Live, as well as super users / floor walkers and laminated user guides being available in each theatre.

Date	Surname	First Name	MRN	DOB	Alert	Theatre	Ward	Consultant	HC2000	Branch	Operation	Time Full Description
1 OCT 2015	BARKLEY		2 OCT 1934	2 OCT 1934		2091	AS	ANDERSON			Procedure - TAREHET - LEFT	
1 OCT 2015	MORRIS		17 JUL 1930	17 JUL 1930		1935	AS	ANDERSON			Emergency - SALVAGE	
1 OCT 2015	MCDONALD		11 AUG 1967	11 AUG 1967		1936	AS	ANDERSON			Emergency - SALVAGE	
1 OCT 2015	FOSTER		2 AUG 1930	2 AUG 1930		1936	AS	ANDERSON			Anterior Resection - SL BARTRES	
1 OCT 2015	MORRISON		18 APR 2008	18 APR 2008		1936	AS	ANDERSON			Procedure - Mus - K Wire - T.AB202	
1 OCT 2015	GRACE		28 MAY 1985	28 MAY 1985		1936	AS	ANDERSON			Procedure - Frac-Subcapsular	
1 OCT 2015	STEPHENSON		12 SEP 1936	12 SEP 1936		1936	AS	ANDERSON			Emergency - Fracture, Proximal Im	
1 OCT 2015	BRADY		8 JUN 1930	8 JUN 1930		1936	AS	ANDERSON			Emergency - Fracture, Proximal	
1 OCT 2015	WHITE		16 APR 1938	16 APR 1938		1936	AS	ANDERSON			Procedure - Frac-Proximal,Orb/Plat	
1 OCT 2015	BEALE		14 SEP 1964	14 SEP 1964		1936	AS	ANDERSON			Procedure - Frac-Proximal,Orb/Plat	

## LESSONS LEARNT

- Be mindful of the multiple interactions between the theatre management system and an electronic patient record. To mitigate against information issues, dual processes and workarounds, carry out as much system testing as possible of the system relationships / processes between the two.
- Deploying electronic solutions highlights further process improvements required, facilitating standardisation across sites, with the roll out of best practice.
- Ensure you fully appreciate the breadth and number of staff that interact with a theatre management system, many users may “*come out of the woodwork*”.
- Good communication, weekly involvement of key staff across the project and training led by the service supports and smooth’s system and business process change.
- Great system supplier support and availability is crucial to successful implementation
- To mitigate against staff burn out and stress by the time of go live, ensure that the supplier plan is aligned to normal staff working patterns, rather than working on an overtime set up that could incur additional project costs.
- To reduce the nervousness of staff with system change, a system test environment is invaluable in helping staff familiarise themselves with the new system in a safe environment.
- To get the most value out of the audit functionality in ORMIS, advanced training is required from CSC due to its in-depth detail.
- As a national fit solution, be aware that:
  - ORMIS uses national role based profiles which might not map against local roles and system access required.
  - Not all trusts are deploying ORMIS in the same way, however, attending the national user group is still very useful for discussing issues with other organisations.



An overall reflection on the deployment of ORMIS:

*“You don’t hear people banging at the door to remove ORMIS ... people are in a better place than before”*

Head of Theatre Services

## FUTURE PLANS

### Strategic Direction of Travel

This was a tactical deployment, and Warrington and Halton NHS Foundation Trust plan to replace ORMIS with the Lorenzo Theatre solution to integrate into the wider CSC Lorenzo solution suite already deployed within the trust.

Currently, the Trust is benefitting from the additional time that the ORMIS solution has provided and plan to focus on:

- Improving the process of waiting list cancellations, linked with Lorenzo
- Addressing the issues faced with session bookings and overruns, for example linked to secondary procedures
- Preparing for the requirement of national SNOMED coding in Lorenzo, rather than local coding in a data warehouse, to utilise fully the data available in ORMIS

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