



Title
**Health Overview and Scrutiny
Committee**

Date
21st November 2018

Title	Royal Free Electronic Patient Record (EPR)
Report of	Royal Free London NHS Foundation Trust
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	Appendix A - Electronic Patient Record (EPR) – Go live information
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Summary

This report provides an update on the Royal Free London's Electronic Patient Record system which is scheduled to go live over the weekend on November 17-18 2018.

The EPR introduces one single, integrated electronic patient record and makes it available to all staff that need to access it, when and where required.

Officers Recommendations

1. That the Committee note the report on Electronic Patient Record.

1. WHY THIS REPORT IS NEEDED

- 1.1 The Royal Free London NHS Foundation Trust will be going live with their new Electronic Patient Record system. The Committee has been provided with this report in order to note what the new system is, how it will change the way the Trust works, as well as the risks and benefits of its implementation.

The Royal Free London's new Electronic Patient Record (EPR) is scheduled to go live over the weekend of November 17-18 November at Barnet Hospital, Chase Farm Hospital, Edgware Community Hospital theatres, Finchley Memorial Hospital and the Royal Free Hospital Maternity department. It will go live across the remainder of the Royal Free Hospital during 2019.

EPR will fundamentally change how the Trust works and cares for patients

EPR introduces one single, integrated Electronic Patient Record and makes it available to all the staff who need to access it, when and where they need it. It will be quicker and more convenient for staff and means that the Trust can be confident that care is as safe as possible for their patients.

EPR will provide an accurate and real-time view of each patient's care using live data to create clinical documents for records and correspondence to GPs and patients.

Staff will be able to enter data and documents straight into the EPR. Integrated medical devices will upload readings automatically to the patient's record, reducing potential errors and freeing clinical time. If a patient's observations and assessments are outside expected ranges, staff will be alerted.

EPR means the Trust will no longer have paper records at the patient's bedside. Instead, there will be computers or laptops which can be used to input information directly onto the EPR.

The move to Electronic Patient Records is a key enabler for integrated care across North Central London and underpins the local health and care system's digital ambitions.

EPR will also help to address unwarranted clinical variation and prompt healthcare teams to the best evidence-based treatments. Multidisciplinary Clinical Practice Group (CPG) care pathways will be embedded in the EPR so patients receive the same standard of care regardless of where they are treated across the Trust's group of hospitals.

The move to EPR is an exciting innovation, enhancing care and outcomes and heralding the end of paper records over the next 12 months. The Trust is proud to be taking this important step on their journey to becoming the most digitally advanced Trust in the NHS.

2. REASONS FOR RECOMMENDATIONS

- 2.1 The report provides the Committee with the opportunity to be briefed on this matter and provide scrutiny on new system.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

Not applicable

4. POST DECISION IMPLEMENTATION

- 4.1 The views of the Committee in relation to this matter will be considered.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.11 The Health Overview and Scrutiny Committee must ensure that the work of Scrutiny is reflective of the Council's principles and strategic objectives set out in the Corporate Plan 2015 – 2020.

The strategic objectives set out in the 2015 – 2020 Corporate Plan are: –

The Council, working with local, regional and national partners, will strive to ensure that Barnet is the place:

- Of opportunity, where people can further their quality of life
- Where people are helped to help themselves
- Where responsibility is shared, fairly
- Where services are delivered efficiently to get value for money for the taxpayer

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 N/A

5.3 Social Value

- 5.3.1 N/A

5.4 Legal and Constitutional References

- 5.4.1 Section 244 of the National Health Service Act 2006 and Local Authority (Public Health, Health and Wellbeing Boards and Health Scrutiny) Regulations 2013/218; Part 4 Health Scrutiny by Local Authorities provides for the establishment of Health Overview and Scrutiny Committees by local authorities.

- 5.4.2 The Council's Constitution (Article 7) sets out the terms of reference of the Health

Overview and Scrutiny Committee as having the following responsibilities:

“To perform the overview and scrutiny role in relation to health issues which impact upon the residents of the London Borough of Barnet and the functions services and activities of the National Health Service (NHS) and NHS bodies located within the London Borough of Barnet and in other areas.”

5.5 Risk Management

5.5.1 The launch of the new EPR is a significant change. During the weeks immediately after implementation, the staff will be getting used to the new system. Patient appointments could take a little longer than usual and there may be some delays to schedules. The Royal Free London NHS Trust will be communicating with their patients to apologise for any delays and will explain why they may be experiencing them.

The Trust have been running a major training and awareness programme to ensure staff are trained and ready to use the new EPR before it goes live. Departments have been reviewing rosters and leave to ensure that additional staff are available to provide support.

5.6 Equalities and Diversity

5.6.1 Equality and Diversity issues are a mandatory consideration in decision making in the Council pursuant to the Equality Act 2010. This means the Council and all other organisations acting on its behalf must fulfil its equality duty when exercising a public function. The broad purpose of this duty is to integrate considerations of equality and good relations into day to day business, requiring equality considerations to be reflected into the design of policies and the delivery of services and for these to be kept under review.

5.6.2 The specific duty set out in s149 of the Equality Act is to have due regard to need to:

Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act; Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it; Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

5.6.3 The relevant protected characteristics are – age; disability; gender reassignment; pregnancy and maternity; race; religion or belief; sex; sexual orientation. Health partners as relevant public bodies must similarly discharge their duties under the Equality Act 2010 and consideration of equalities issues should therefore form part of their reports.

5.7 Corporate Parenting

5.7.1 N/A

5.8 Consultation and Engagement

5.8.1 Not applicable

5.8 **Insight**

5.8.1 N/A

6. BACKGROUND PAPERS

6.1 N/A