Changing the way we think about services

Get out of this session

1. Supporting people to stay out of hospital,
2. Enabling patients receiving consultant -led care in own home rather than hospital,
3. Using virtual clinics to manage demand in A&E – Ask A&E,
4. Our experience and approach in Birmingham,

University Hospitals Birmingham NHS

NHS Foundation Trust

Queen Elizabeth Hospital

Heartlands Hospital

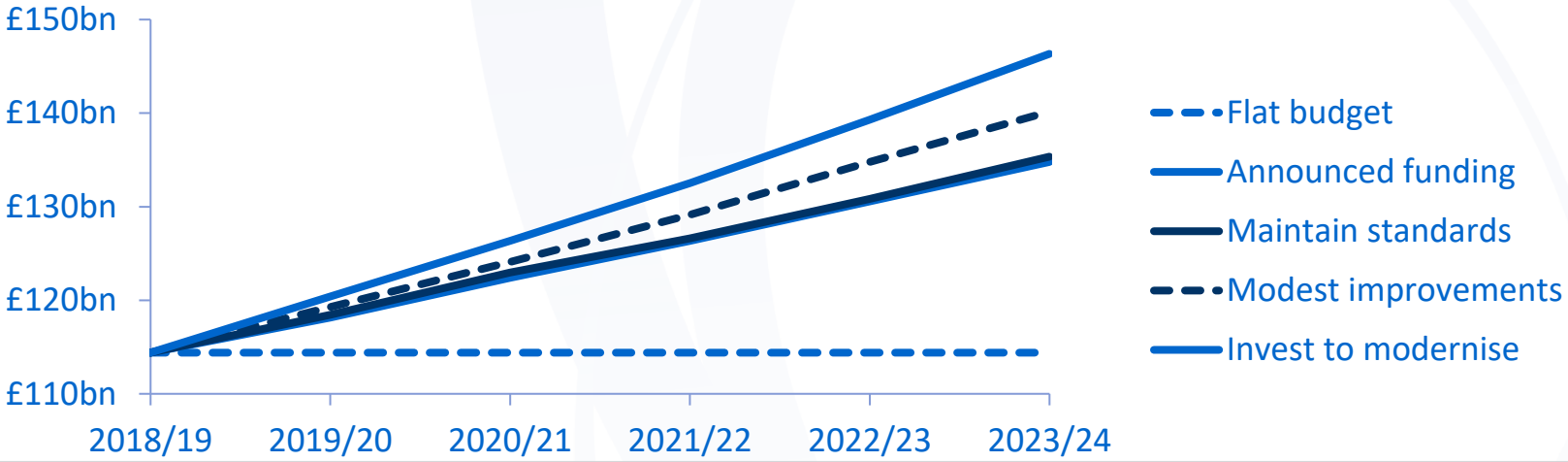
Good Hope Hospital

Solihull Hospital

- 22,000 staff | over 40 disciplines
- 2700+ beds | 100+ critical care beds | 80 Operating Theatres
- 2 million Outpatients | 370,000 Inpatients | 400,000 ED attendances

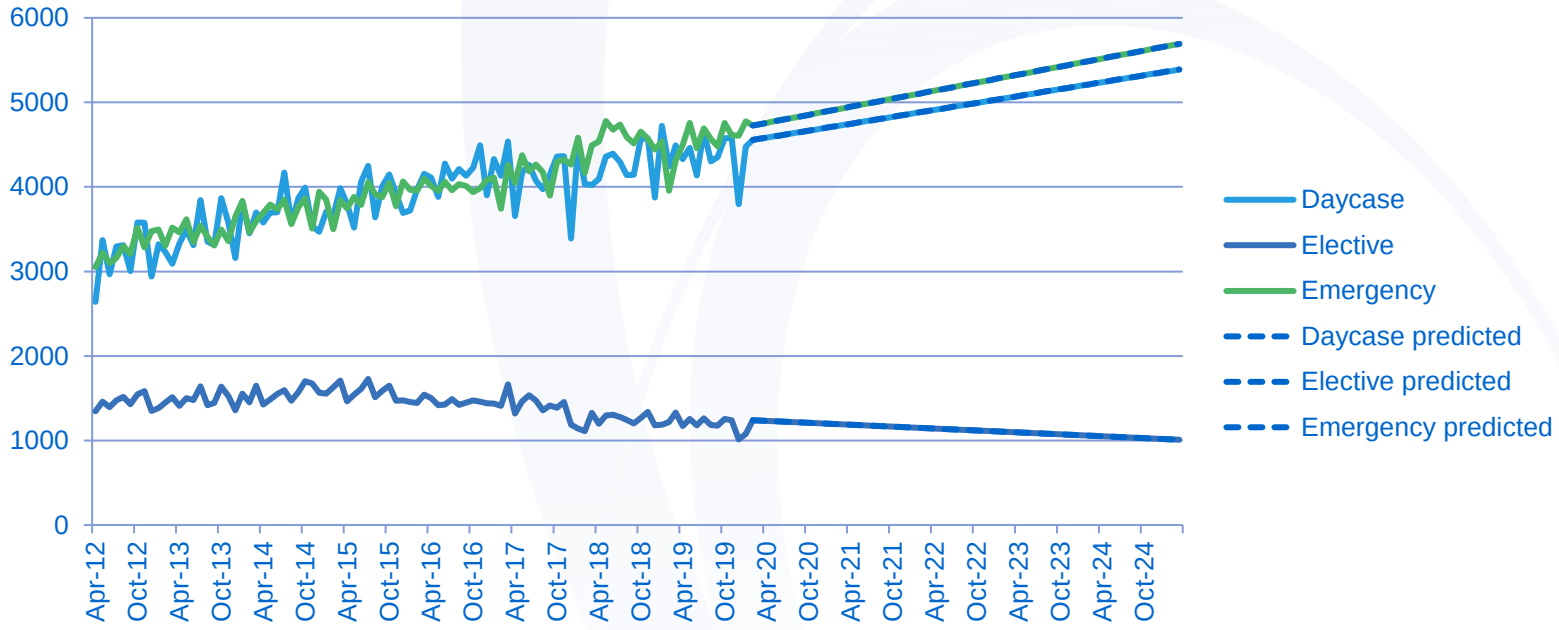
The challenges for health systems

- **Demography:** UK has an ageing population, with the number of over 85 year olds set to double over the next 20 years
- **Workforce:** Shortage of 100,000 doctors, nurses and other staff – gap might grow to 250,000 in the next decade if current trends continue
- **Technology:** Increasing demand for personalised medicines and clinically effective medical devices
- **Funding:** NHS funding has been incredibly constrained since 2010 – new £20bn settlement might only be enough to maintain standards.



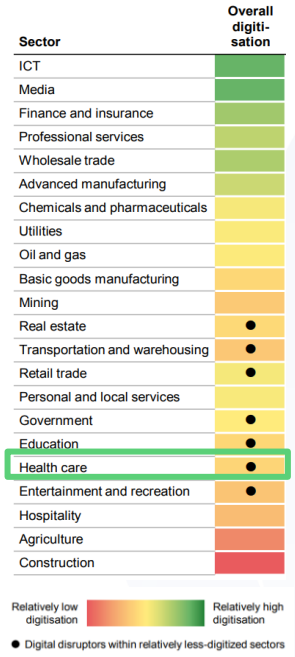
Source: Projections of multi-morbidity in the older population in England to 2035: estimates from the Population Ageing and Care Simulation (PACSim) model (Kingston A, 2018); Health Foundation (2019)

The UHB challenge



Digital innovation is key to tackling these challenges but the NHS is lagging behind

- Other industries have leveraged technology to improve standards and drive down costs
- Healthcare has been slow to adopt new technologies, despite many aspects of it being amenable to innovation
- Adopting new technologies should enable providers to deliver the new models of care required to keep up with demand
- This means that the projected adoption for digital technologies in the NHS lags behind societal trends and other healthcare systems.



Source: McKinsey Institute (2016) and Topol review (2019)

Supporting people to stay out of hospital

Connected ambulances and care homes

- Research has shown that 41% of emergency admissions could have been managed outside of a hospital setting (9% of UHB beds available for electives)
- We are connecting ambulances and care homes to hospital based Care of the Elderly specialists, helping to prevent unnecessary A&E attendance and admission
- There are clear benefits to managing patients outside hospital:
  - Better patient outcomes
  - Improved patient and carer experience, helping people stay in their own home
  - Reduced emergency department pressure and costs
  - Reduced unnecessary admissions
  - Reduced transportation costs

UHB / BT connected ambulances demo (2019)

Source: Health Foundation (2019)

Enabling patients to receive care in own home

myhealth@QEHB
unlocking your own health records

Queen Elizabeth Hospital Birmingham NHS
Part of University Hospitals Birmingham NHS Foundation Trust

Register | Log in | Help

"If, like me, people wish to be fully involved in their healthcare, this is an invaluable tool."

Introduction

myhealth@QEHB allows you to view your healthcare information online. All data is stored securely so your records can only be viewed using your login details.

To register to use myhealth@QEHB, you will require unique registration information. This is supplied by your consultant.

Find out more

Video guides

Registration | Login | My profile | My results

+ Can't see the videos?
+ See more user guides

Get ADOBE FLASH PLAYER

Queen Elizabeth Hospital Birmingham Charity

myhealth@QEHB has been developed with the kind support of the QEHB Charity.

+ Charity website

Need help using myhealth@QEHB?

Email
myhealthsupport@uhb.nhs.uk

Online
Visit the help section

Delivering the best in care

ISV | Entrust

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Register | Help | Terms and conditions

All current and historical medication records held by the hospital

Lab results held by the hospital

Patients can submit their own external blood and other test results (e.g. blood pressure)

Recent and historical inpatient history

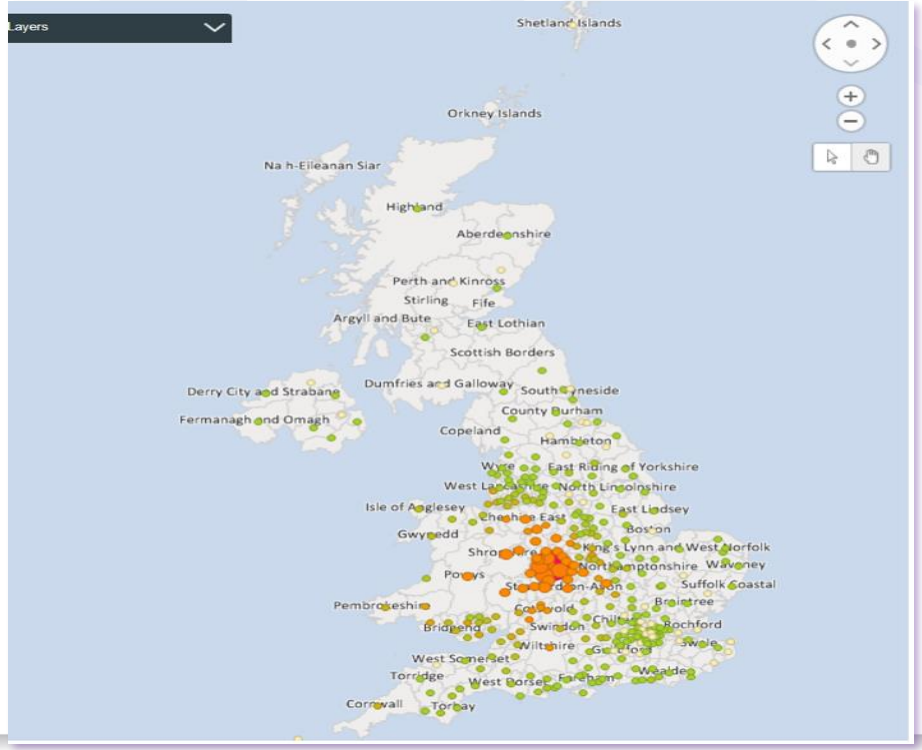
Relevant Web links (e.g. BNF) listed

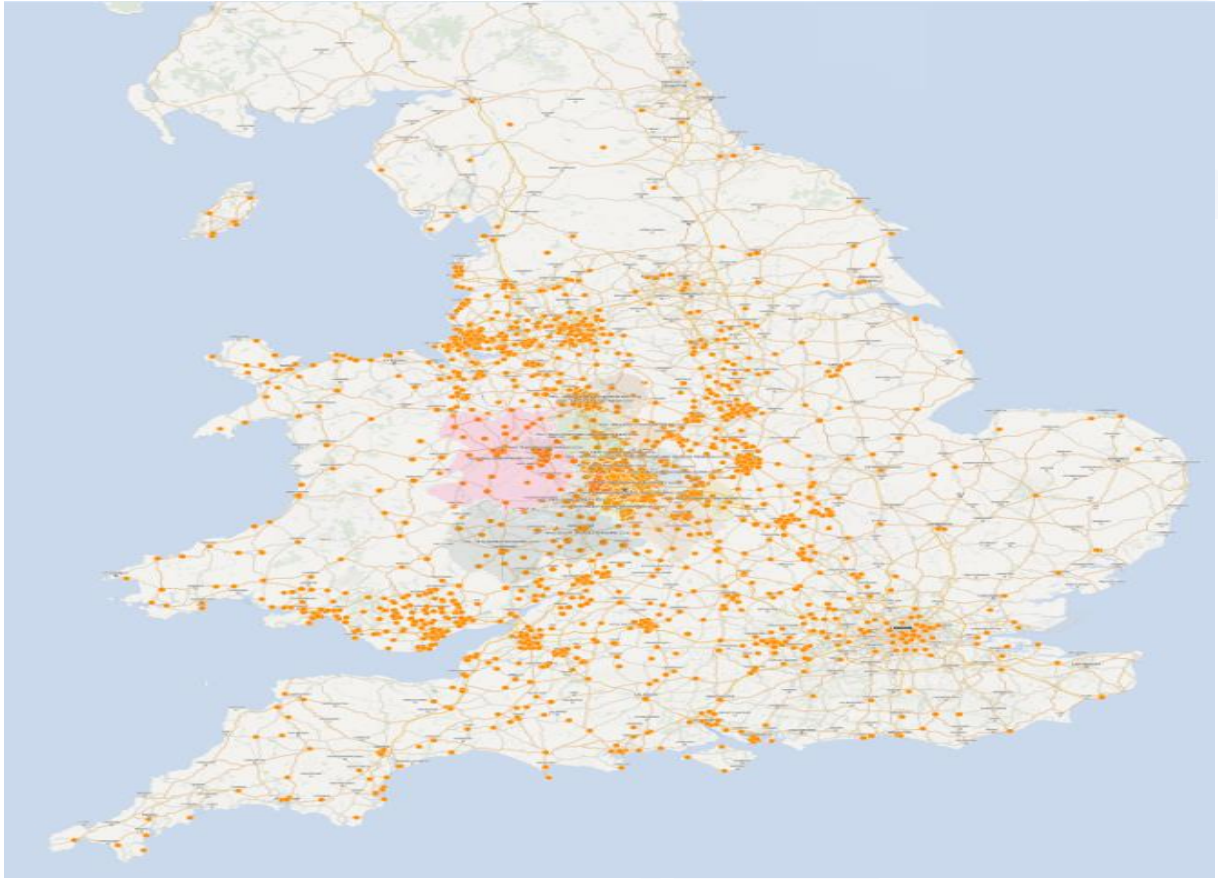
Hospital appointments are listed. Patients can add other events

Patients can add GP details, QEHB and other hospital contacts

Patients can upload health documents to their portal

Myhealth@ patients enrolments (UK)





Hepatology

myVideoClinic home page

myhealth@QEHB
unlocking your own health records

Queen Elizabeth Hospital Birmingham
Part of University Hospitals Birmingham NHS Foundation Trust

10:01:56, Wednesday, May 24 2017

My records | Communicate | Help | My favourites

You are here: My Health Today > Communicate > myVirtualClinic
Hello **Anna**

Report misuse | Log out | Home Bio Profile | 0 in your support network

myVirtualClinic

Rate this page

myhealth@QEHB is piloting dedicated virtual clinics for some of our patients with long term conditions, and also those patients who live far away. myVirtualClinic provides patients with direct face-to-face contact with their named healthcare professional for specific consultation appointments. Advice and treatment planning is arranged with the patient in the same way as an outpatient appointment.

Test my devices | User Guide

Please provide your contact no. here since your healthcare professional may need to call you if a technical fault occurs during the virtual appointment. 01213717323 Update

Upcoming appointments | Previous appointments

24 May 2017 - Dr J Ferguson Virtual Clinic, HEPATOLOGY, Liver Medicine

Appointment time : 10:30 AM

You can join the virtual appointment from 10:00 AM, once joined please wait for your healthcare professional to become available.

Expected appointment duration: 15 minutes

Join clinic waiting room

Prepare for my appointment | Add to personal calendar

Prepare notes for the video appointment

myVirtualClinic

You rated this page

myhealth@QEHB is piloting dedicated virtual clinics for some of our patients with long term conditions, and also those

What are the 3 most important points you want to talk to your healthcare professional about today?

Start by selecting some useful questions from the drop-down menu or by creating your own. Remember to press save.

All entries will remain private to you. Click the share button during the virtual clinic if you would like your healthcare professional to see a particular question.

Do I really need this test, treatment or procedure?

- Select key questions to ask about your healthcare...
- Do I really need this test, treatment or procedure?
- What are the risks or downsides?
- What are the possible side effects?
- Are there simpler, safer options?
- What will happen if I do nothing?

500

*

Save

You have not added any questions for your virtual consultation yet.

myVC video consultation

http://wells:92/Communicate/ChatSession.aspx?x=Ok6h09OJFTjvRxiYPrpBuo5WWAqu3J1c

End Call

Chat

[Georgetest Pas- support] : Shared a note : What will happen if I do nothing? 14:36:50

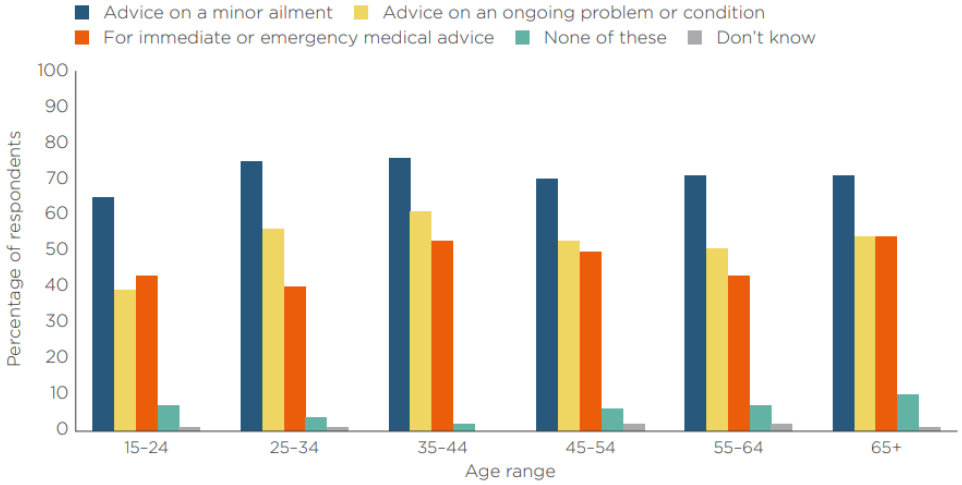
[Georgetest Pas- support] : Shared a note : Are there simpler, safer options? 14:37:27

Send | Share my notes

myVirtualClinic with DR J FERGUSON

…and patients are willing to access care in different ways

Figure 2: Public willingness to use video consultations with a previously unknown GP



Question asked: "In which, if any, of the following circumstances would you be willing to use a video consultation with a GP who you do not already know". n=1,726 (UK adults aged 15 and over).
Source: Ipsos MORI polling commissioned by The Health Foundation.

All age groups are open to moving to video consultations for care – 63% of 15-24 year olds are willing to consult with the GP via video for a minor aliments compared to 56% of over 65s.

Source: Castle-Clarke (2018) What will new technology mean for the NHS and its patients?

A&E challenge

uhb.nhs.uk/ask

Worried about coronavirus?
Advice is now available for people who have recently travelled from China.
Coronavirus advice

NHS
University Hospitals Birmingham
NHS Foundation Trust

UHB home page | About Ask A&E | FAQs | Get started

ask a&e

NHS answers when you need them most, 24/7

Get started

A&E challenge

uhb.babylonhealth.com

ask a&e

MG

OK, what symptom would you like me to check?

If you have more than one, tell me the symptom that's bothering you most.

e.g. headache Clear

Common Searches

Headache | Abdominal pain | Tummy pain | Cough

Muscle pain | Sore throat | Ear pain | Dizziness

Advice on coronavirus

If you think you have coronavirus, are at risk of becoming infected, or have recently travelled to Wuhan City in China, **do not** use the symptom checker.

Instead, you should:

- Speak to a doctor as soon as possible
- Try to stay indoors
- Avoid contact with other people

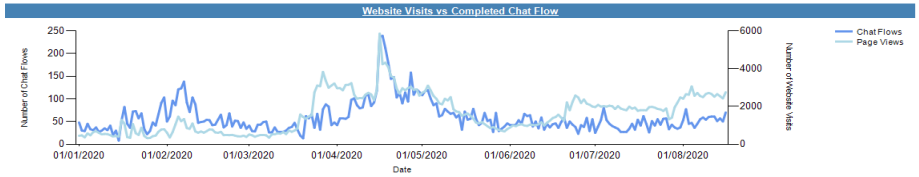
For the latest information and updates on coronavirus, visit the Babylon blog.

Got an idea of what's wrong?

Find information on conditions

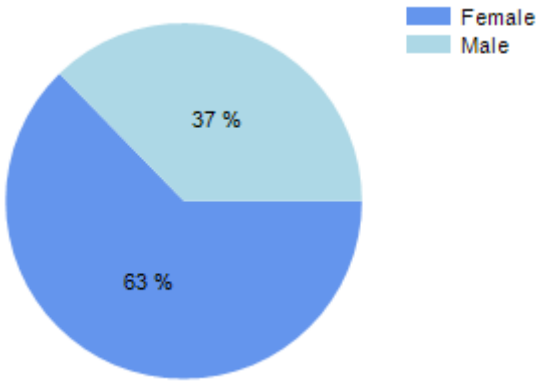
We are now using AI for A&E triage

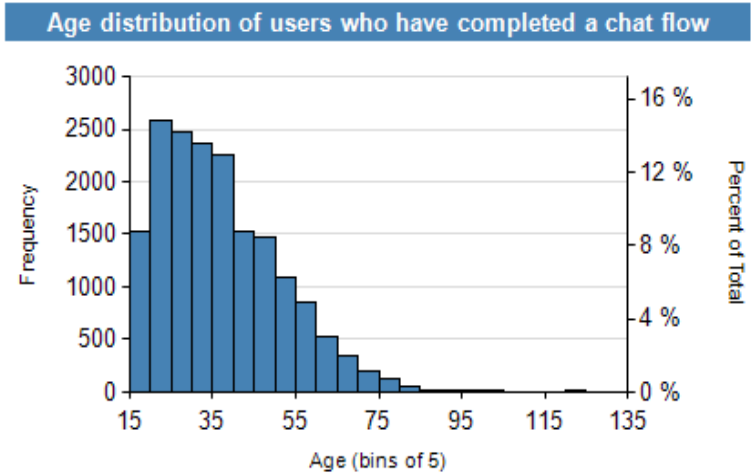
Thinking of going to Accident and Emergency but not sure if you need to? Before taking the time and having the stress of going to hospital, why not use our online symptom checker? Ask A&E offers you rapid NHS answers you can trust to help you decide what to do next based on the seriousness of your symptoms and the urgency of your illness.



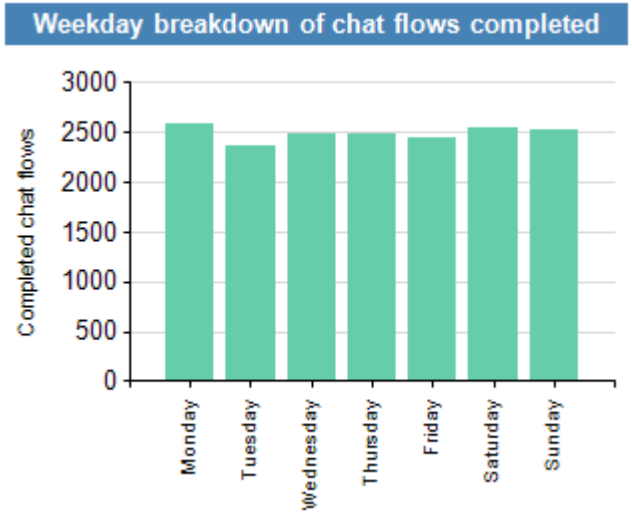
- Asks questions and interprets symptoms via a chatbot interface to recommend the most appropriate service.
- Conceived in the spring 2019, launched by October; buy-in from internal and external stakeholders
- The symptom checker has been used over 20,500 times, and has been used over 100 times per day
- Over 64% of patients are recommended not to attend A&E for their symptoms; vast majority don't
- Patients able to directly book in to urgent GP appointments, providing timely access to primary care.

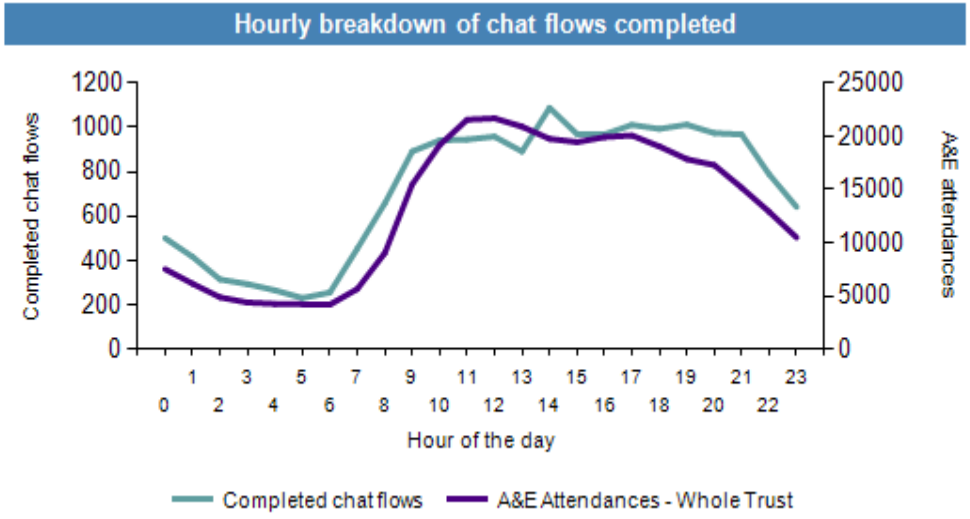
A&E challenges





A&E challenges





UHB experience

- Clinical champions,
- Demand and capacity challenges across the NHS,
- New services that are available to all patients,
- Expert patients / champions – more engaged with own healthcare,
- Technology is similar /available / create efficiencies,
- Risk appetite,
- Evolution,