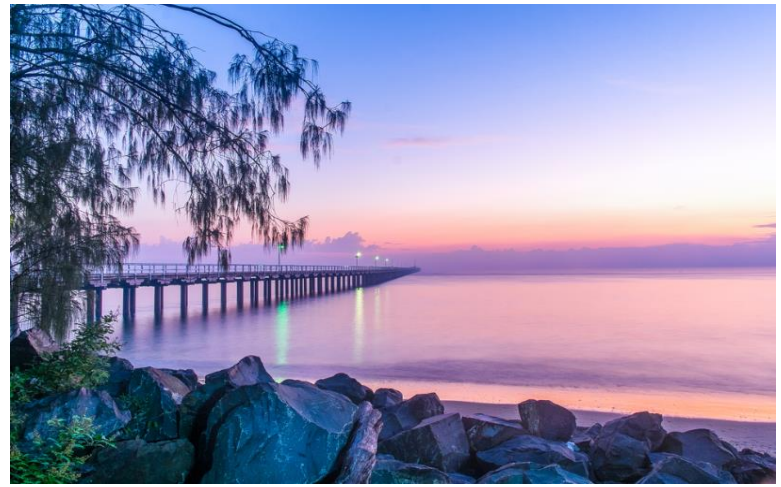
Welcome to Hervey Bay & St Stephen's Hospital!

We would like to respectfully acknowledge the Butchulla Traditional Owners of the land on which this event is taking place and Elders both past and present.

We also recognise those whose ongoing effort to protect and promote Aboriginal and Torres Strait Islander cultures will leave a lasting legacy for future Elders and leaders.



ST STEPHEN'S
HOSPITAL

About UnitingCare Health St. Stephen's Hospital

Nicholas E. Davies Enterprise Award of Excellence

Proudly part of UnitingCare

ST STEPHEN'S HOSPITAL

Who We Are

Vision

- **UnitingCare Queensland will be a mission-driven provider of quality health care services in Australia.**
- **We will have excellent facilities and technology but our major strengths will be our people and partnerships.**
- **We will set the standards for accountability to patients, partners and the community.**
- **We will be known for excellent standards and for our community contributions.**

Mission

Our mission is to improve the health and wellbeing of individuals and their families. We differentiate ourselves by living by our values, optimising our patients' care and their experiences.

UnitingCare Hospitals

- The Wesley Hospital
  - 536 overnight beds
  - 24 operating theatres
  - 19 ICU beds
- St Andrew's War Memorial Hospital
  - 250 beds
  - 15 operating theatres
  - 15 ICU beds
- Buderim Private Hospital
  - 190 beds
  - 8 operating theatres
  - 12 ICU/CCU beds
- St Stephen's Hospital Hervey Bay
  - 96 beds
  - 5 operating theatres

UnitingCare Queensland

- UnitingCare Hospitals
- Child and Families
- South-East Queensland Integrated Services
- Regional and Remote Service Group

ST STEPHEN'S HOSPITAL

About the Grant

- $47M grant from HHF including $21M for eHealth

Services at SSHB

- 96 bed greenfield site community hospital in Hervey Bay
- Medical, surgical, oncology, 5 fully integrated operating theatre suites
- SSHB opened 13 October 2014

ST STEPHEN'S HOSPITAL

Healthcare Service

- Wide Bay Burnett Region
- Fraser Coast approx 110, 000
- One of Australia's fastest growing regions
- Average age 55 years
- Health & Aged Care infrastructure investment
- 10% unemployment rate
- High DVA population

Proudly part of UnitingCare

St Stephen's Hospital Profile

BEDS

- 96 Beds total
- 32 Bed Rehabilitation Ward
- 32 Bed Surgical Ward
- 32 Medical Ward

DAY PROGRAMS

- Rehabilitation programs:
  - Orthopaedic
  - Neurological
  - General reconditioning
  - Falls prevention
- Cardiac Rehab
- Oncology

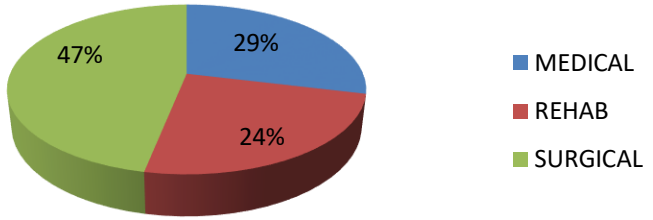
SPECIALIST SURGICAL SERVICES

- General surgery
- Orthopaedic
- Urology
- Ophthalmology
- ENT
- Gastroenterology
- Gynaecology
- Oral & Maxillofacial
- Vascular
- Plastic & Reconstructive
- Dental
- Bariatric

SPECIALIST MEDICAL SERVICES

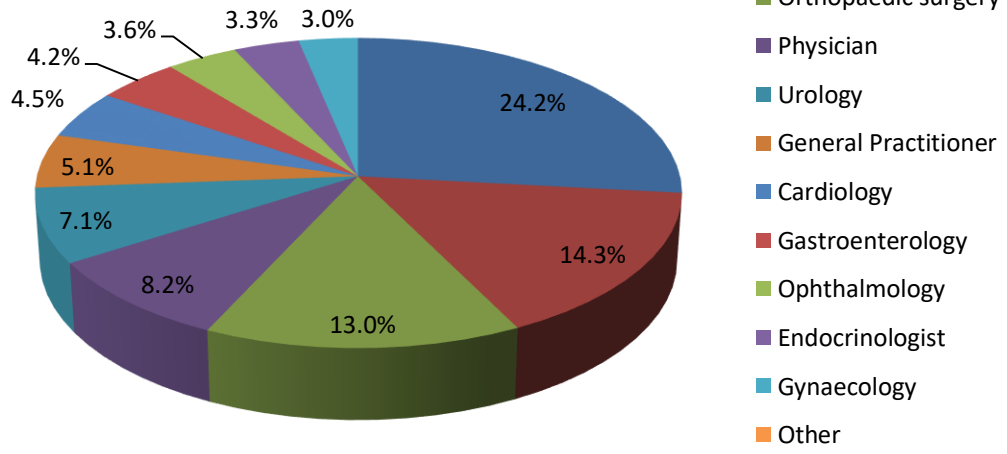
- General Medicine
- Endocrinology
- Cardiology
- Oncology/Haematology
- Dermatology
- Sleep Studies
- Rehabilitation
- Respiratory Medicine
- Nephrology
- Neurology

St Stephen's Hospital Revenue by Medical Area FY19



VMPs

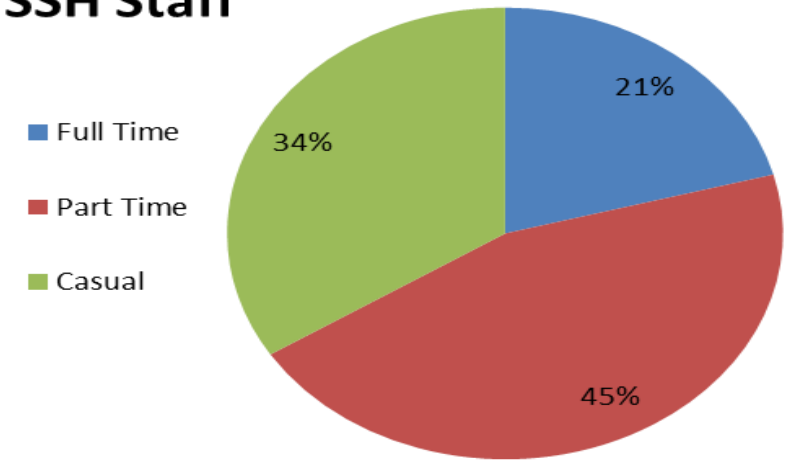
- 54 Specialist Medical and Dental VMPs



St Stephen's Hospital Total Revenue FY19 by Specialty

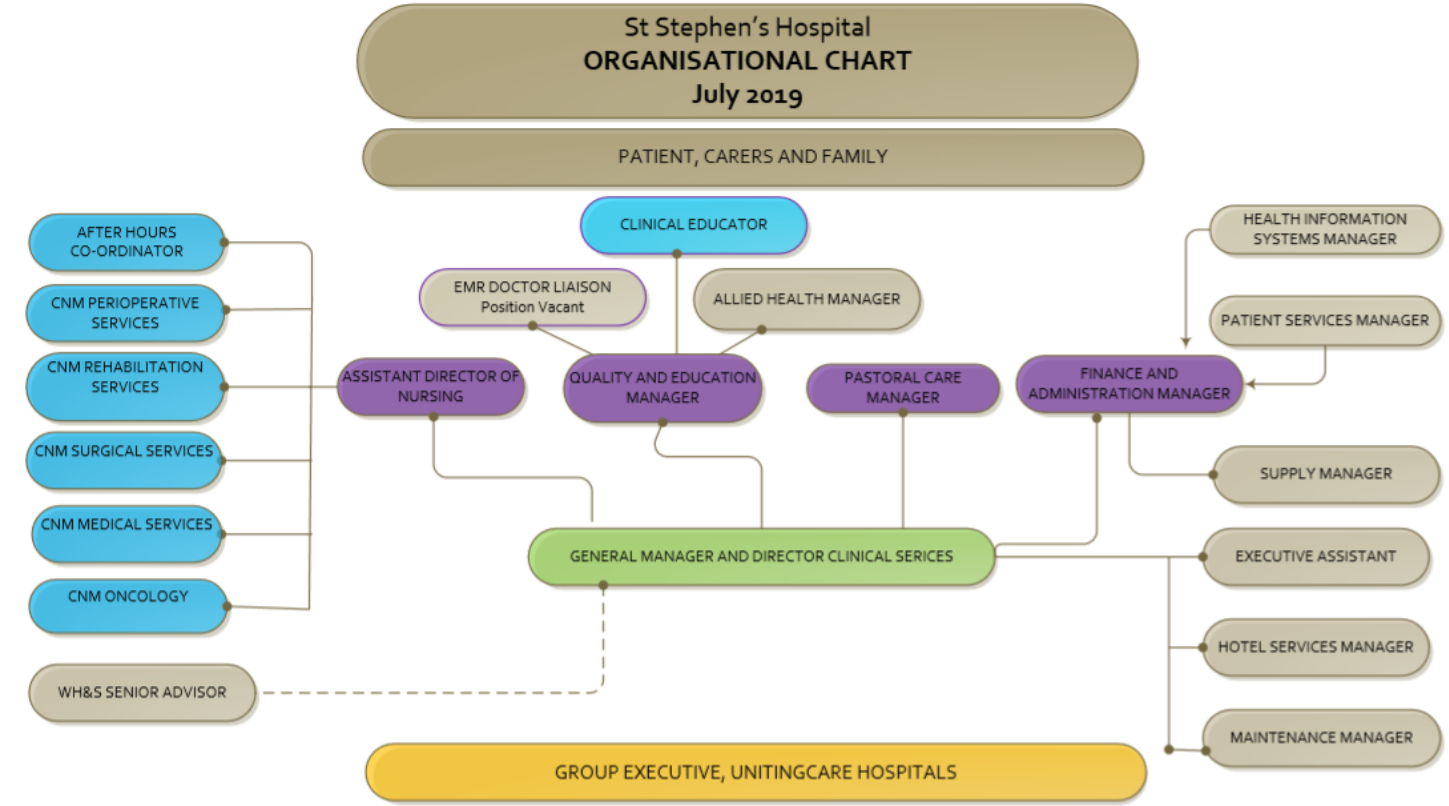
St Stephen's Hospital Profile

SSH Staff



*Other Medicine includes Radiology, Repiratory Medicine & Opthalmology

STAFF
• 52 Full Time • 113 Part Time • 85 Casual



St Stephen's Hervey Bay New Digital Hospital

July 2010

- Federal Government sought submissions via Health and Hospitals Fund for projects to improve access to regional and rural health services

May 2011

- Government announced $47.1M grant to UCH towards developing Australia's first fully integrated digital hospital
  - $25.9M towards construction costs
  - $21.2M for eHealth

June 2012

- Contract signed with Federal Government

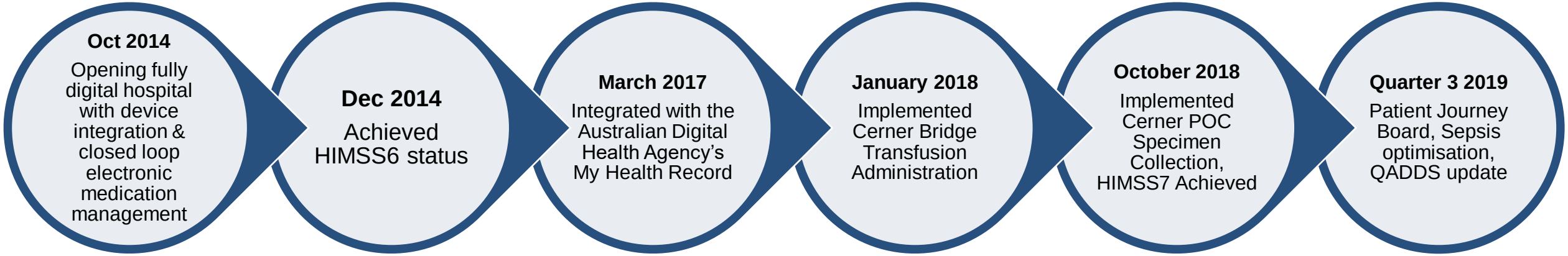
13 October 2014

- Project Director for eHealth appointed – Connie Harmsen
- Australia's first CMIO appointed – Dr Monica Trujillo

13 October 2014

- St Stephen's Hospital Hervey Bay takes its first patient

The St Stephen's Journey & System Implementation Timeline



UCQueensland	Ann Cross		**Craig Barke**	
UCHealth	Richard Royle	Arthur Yannakou	Richard Lizzio	**Michael Krieg**
St Stephen's	Deb Boyd	Amanda Cruwys	Darren Rogers	**Madonna Bowers**

Madonna Bowers
Acting General Manager & Director of Clinical Services

ST STEPHEN'S HOSPITAL

Key Learnings from Early Visits to US Fully Digital Hospitals

- ✓ Treat project as a change management piece, not an IT installation
- ✓ Develop a close working relationship with your IT vendor - in our case Cerner
- ✓ Engage with your Doctors upfront and involve them in the detailed design of the system
- ✓ Employ project personnel with a thorough knowledge of full EMR implementation
- ✓ Focus strongly on staff education pre go-live and educated IT support on the ground post go live

ST STEPHEN'S HOSPITAL

Middleware Case Study

Larnie Wright, RN
Assistant Director of Nursing

ST STEPHEN'S HOSPITAL

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Digital Transformation

Improve access to data and images in near-real-time, to improve the efficiencies of documentation, improve patient safety, and enhance the patient experience.



Local Problem

October 2014

Targeted areas for Improvement

- Improve Care Team Communication
- Improve identification of deterioration
- Decrease infection rates
- Improved management of pressure injuries
- Increase patient engagement in their healthcare journey
- Implement a scalable platform of device connectivity

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The solution:

Implementing a scalable device integration middleware

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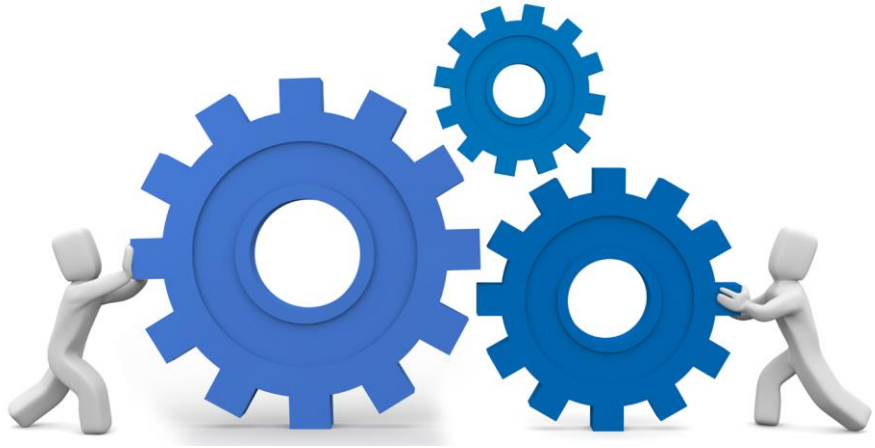
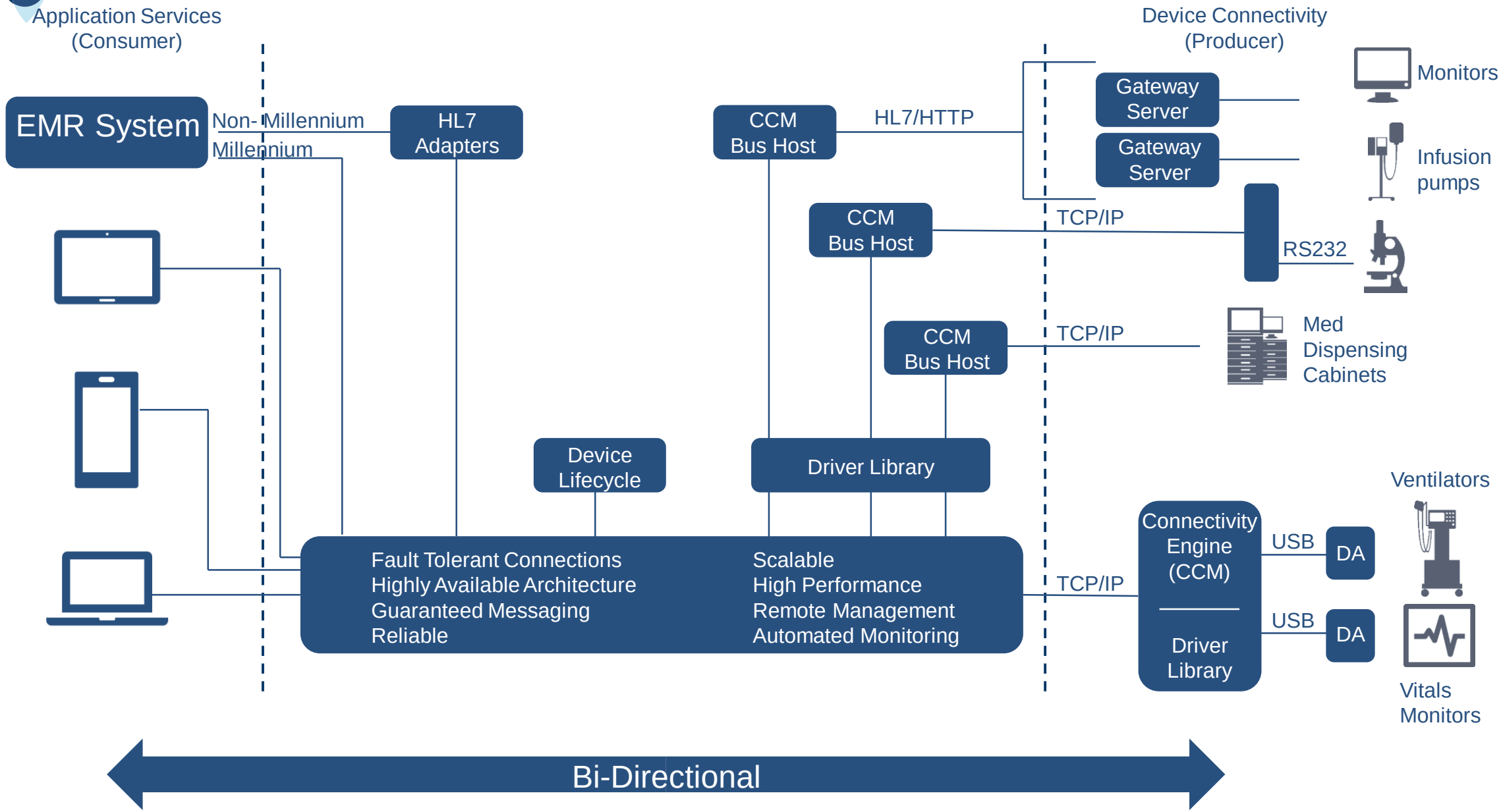
- ☑ **VoIP and Nurse Call Solutions**
  - Vocera, Raulands
- ☑ **Clinical Decision Support Alerts**
  - QADDS, Sepsis
- ☑ **Near-real-time access to data**
  - VitalsLink, Remote access
- ☑ **Near-real-time access to images**
  - Camera Capture, Mortara ECG
- ☑ **Medical Device Connectivity**
  - Vitals, ECG, Pumps, Monitors
- ☑ **Patient Entertainment System**
  - TV, Phone, Internet, Diet
- ☑ **Patient Safety**
  - Ultimate Goal!

Middleware connecting:



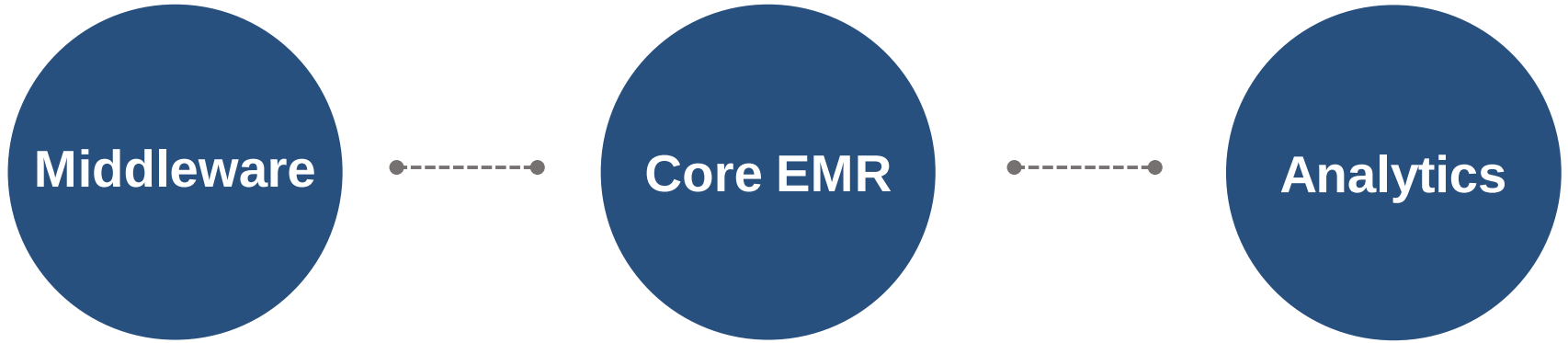
Electronic Room Signage
Staff Assignments
Alerts to EMR and VoIP
Single sign on and Follow Me
Vital Sign Device Connectivity
GE Monitor Integration to EMR in High Dependency and PACU
Anaesthesia Machine Integration to EMR in Operating Rooms
Meds Management – Automated Dispensing Cabinets with Patient Profiling
Unit Dose medication packaging done on site – only facility in Australia to do this
ECG Integration
PACSGear Endoscopy
RTLS and Patient Flow
Digital Dictation
Smartpump IV Fluid Balance integration
Bedside Patient Entertainment and Nurse Call system
VoIP communications

Scalable Middleware Platform



Integration Platforms

Digital Transformation



Device connectivity and communications

Staffing assignments
Communication and alerting

Electronic medical record

Safety risk assessment
Patient record
Clinical workflow
Good catches

Data and reporting

Research
Performance Monitoring
Patient Satisfaction
Clinical Adoption

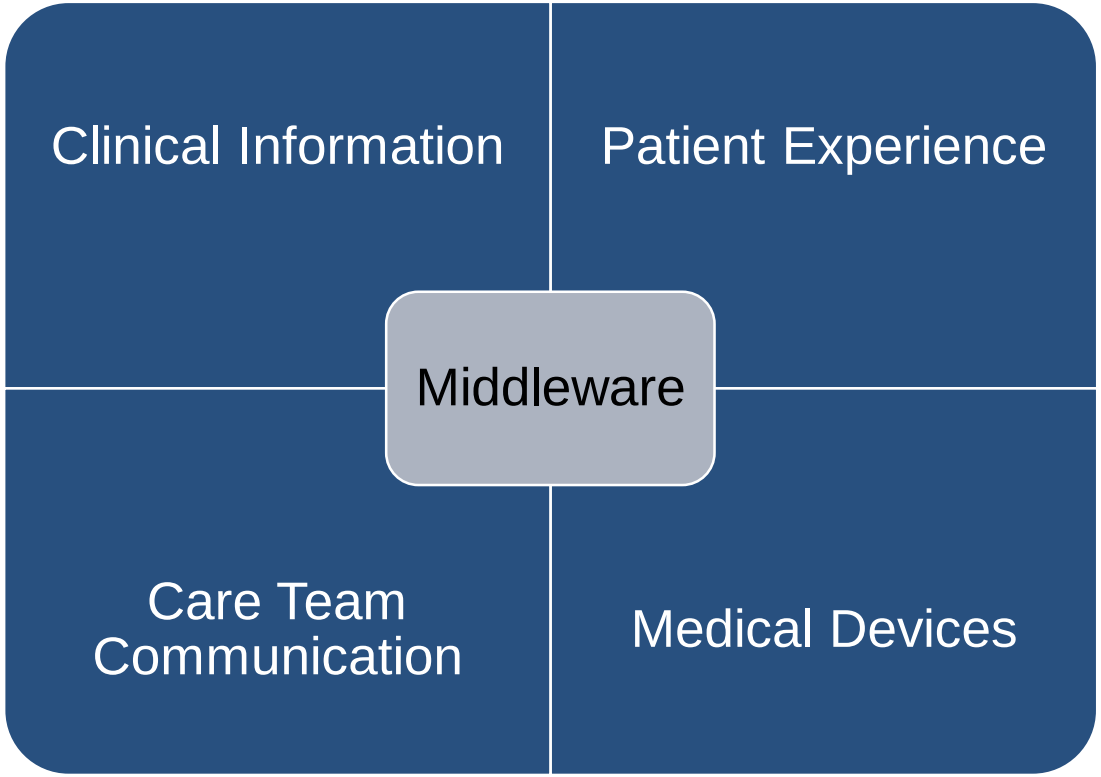
ST STEPHEN'S HOSPITAL

Design

Integration

Middleware acts as a hub and provides a scaleable platform of seamless device connectivity at the point of care within the workflow to drive:

- **Near-real-time monitor and device data (including images)**
- **Clinical Decision Support**
- **Care plans**
- **Electronic Room Signage**
- **Enhanced patient engagement**



Governance Tools

Vision

Why is this important and how will our future look?

Guiding Principles

What are the “rules”?

Benefits

How will we measure our success?

Guiding Principles for Work Redesign Teams

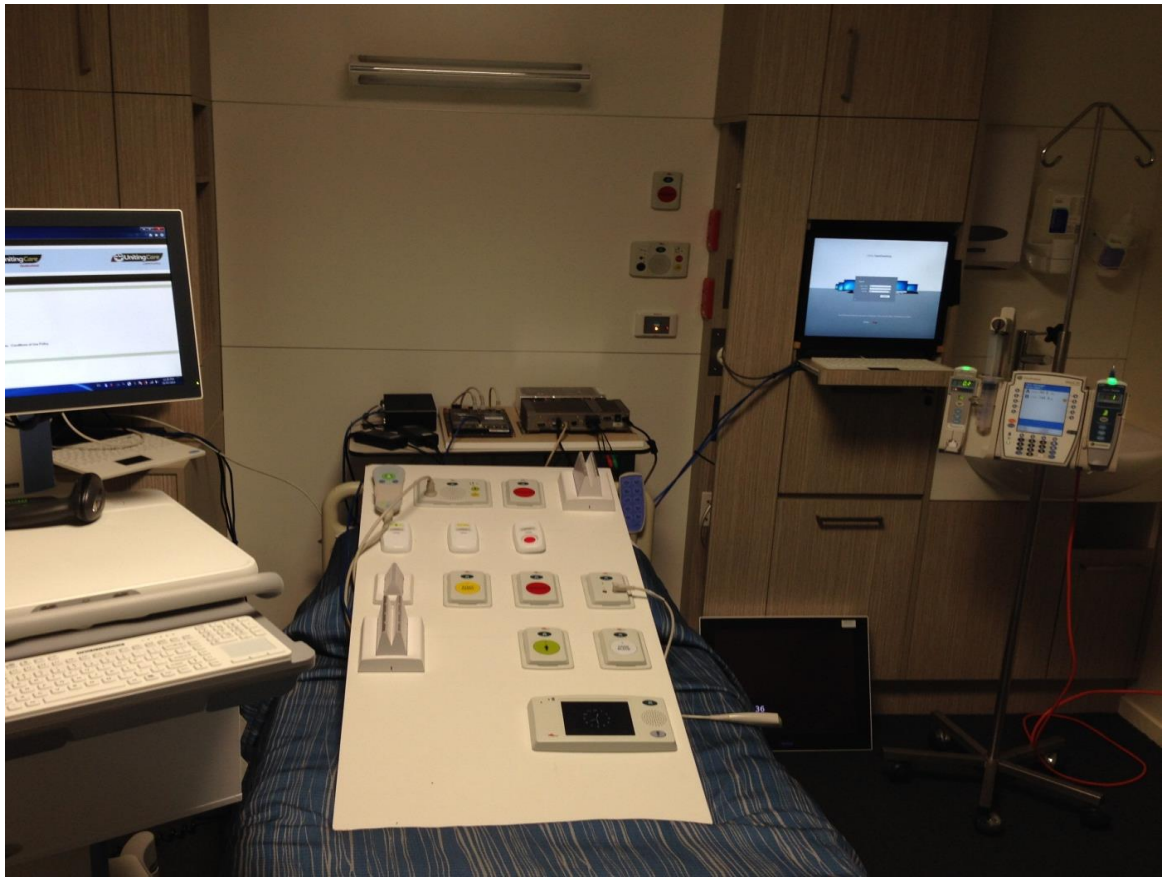
- We will do what is **best for the patient**
- **Patient safety** is our primary objective
- Design principles will be based on what is best for **UCH as a whole**, following **80/20 rule**: 80% can be used at any UCH hospital, 20% can be facility specific
- Design will be **clinician-driven** and support standardisation of clinical **“best practices**” and **medical decision-making**
- All design work will incorporate **Australian National Standards, ISO, Hospital licensing, UCH Policies & Procedures, Guidelines and Best Practice**
- Proactively identify, manage and resolve **issues to maintain the project** timeline, effectively utilise resources, and ensure design decisions are aligned with the Guiding Principle
- Design must be **benefit driven** and focused on improving performance of the organisation for the **long-term future**

Implementation requirements

- Creation of a testing domain
- Mock room
- Elbow to elbow education and support
- It took time, data, and feedback to fine tune the system
- Moving from paper to a digital environment
- Adoption of new workflows in a new facility
- Change management

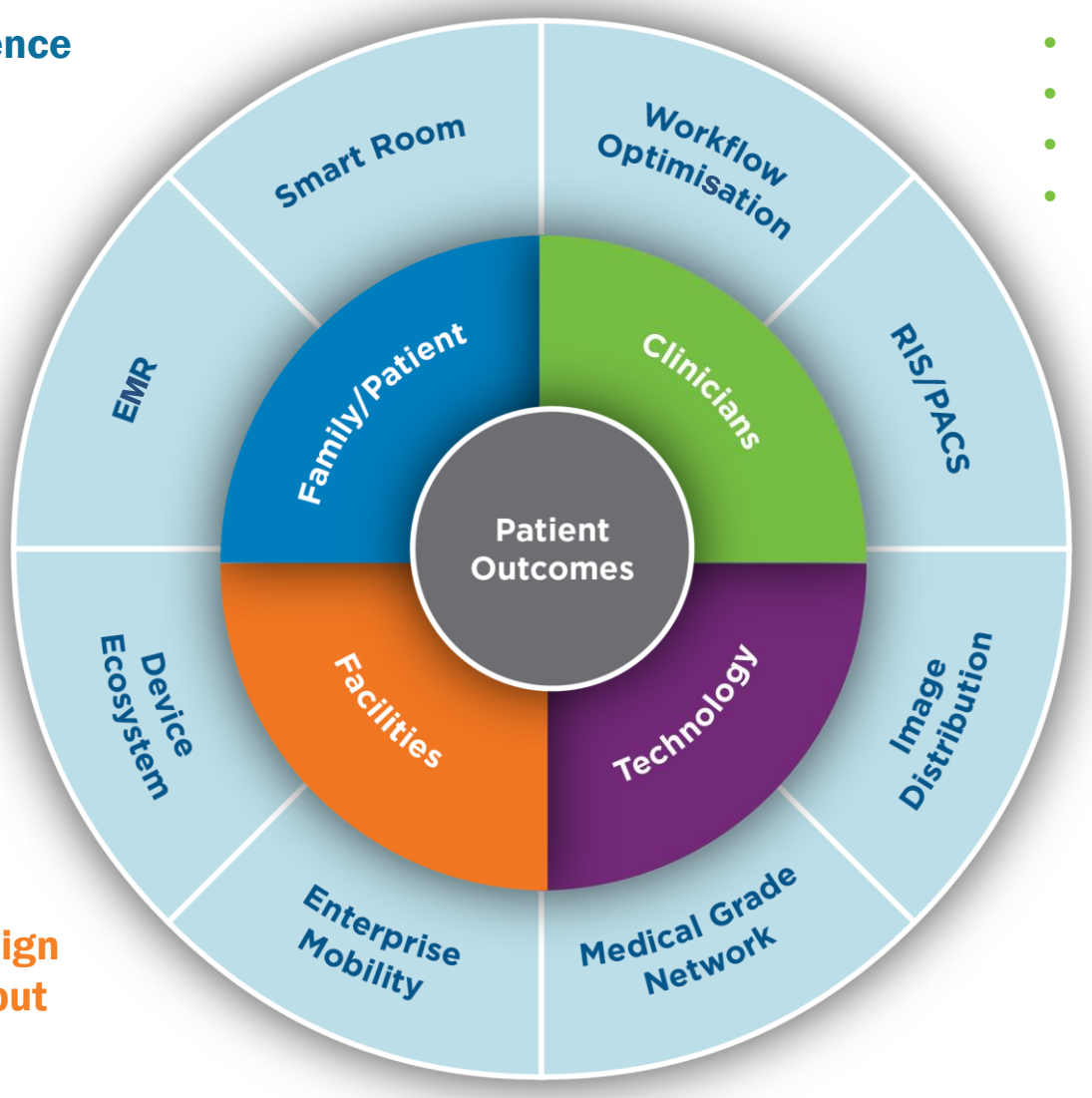
ST STEPHEN'S HOSPITAL

Mock Room



Patient Centric Focus for Optimal Design

- Patient Experience
- Healing
- Outcomes
- Safety



- Safety
- Experience
- Optimal Workflows
- Efficiency and Reliability

- Security
- Power
- Evidence-based Design
- Efficiency/Throughput

- Mobility
- Data Security
- Engaged Connectivity
- High Reliability

Clinical Information

- Clinical Decision Support Alerts pushed through the middleware to the care team member base on staff assignment tool
  - Sepsis
  - QADDS
  - Skin Risk Assessments
  - Prior resistant infections
- Digital data is able to be accessed at the right time, with the right context, within the workflow
  - Images
  - Skin protection protocols
  - Dashboards
  - Patient Assignments

ST STEPHEN'S HOSPITAL

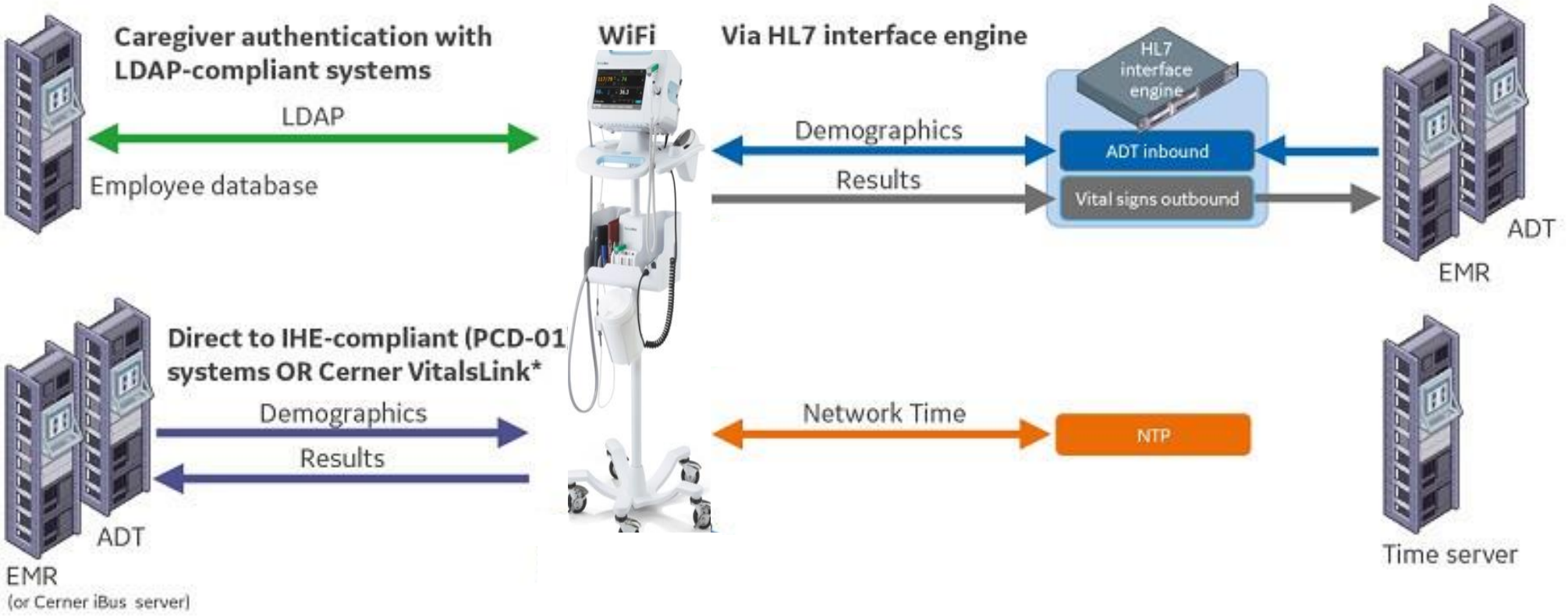
Real Time Vitals Collection

Enables clinicians to electronically send vitals at the point-of-care into any electronic medical record (EMR).

Key Benefits

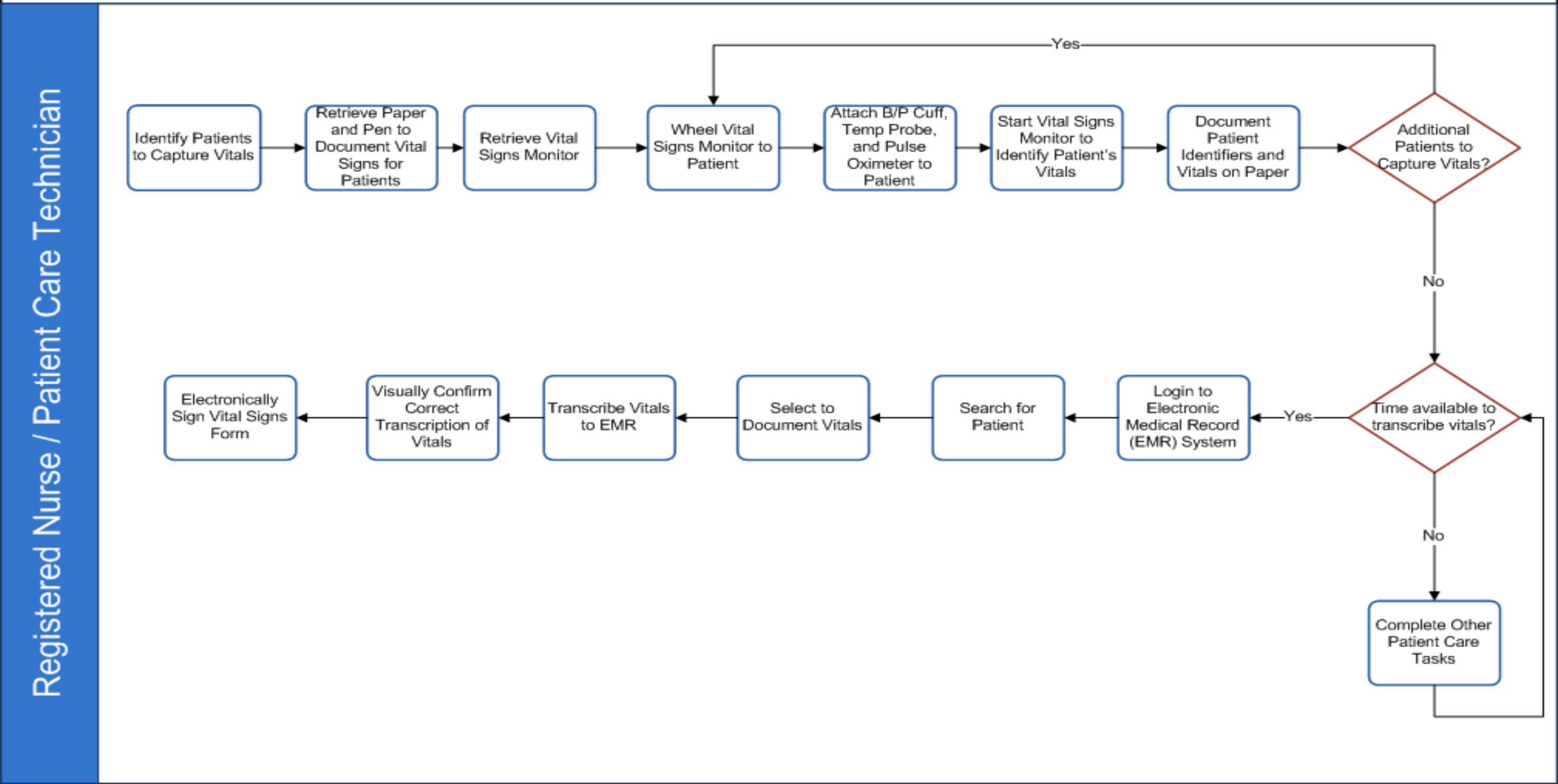
- Improves clinician workflow by decreasing documentation time
- Improves accuracy by eliminating transcription errors
- Improves access to vital signs in a timely manner
- Improves timeliness for Clinical Decision Support

Real Time Vitals Collection

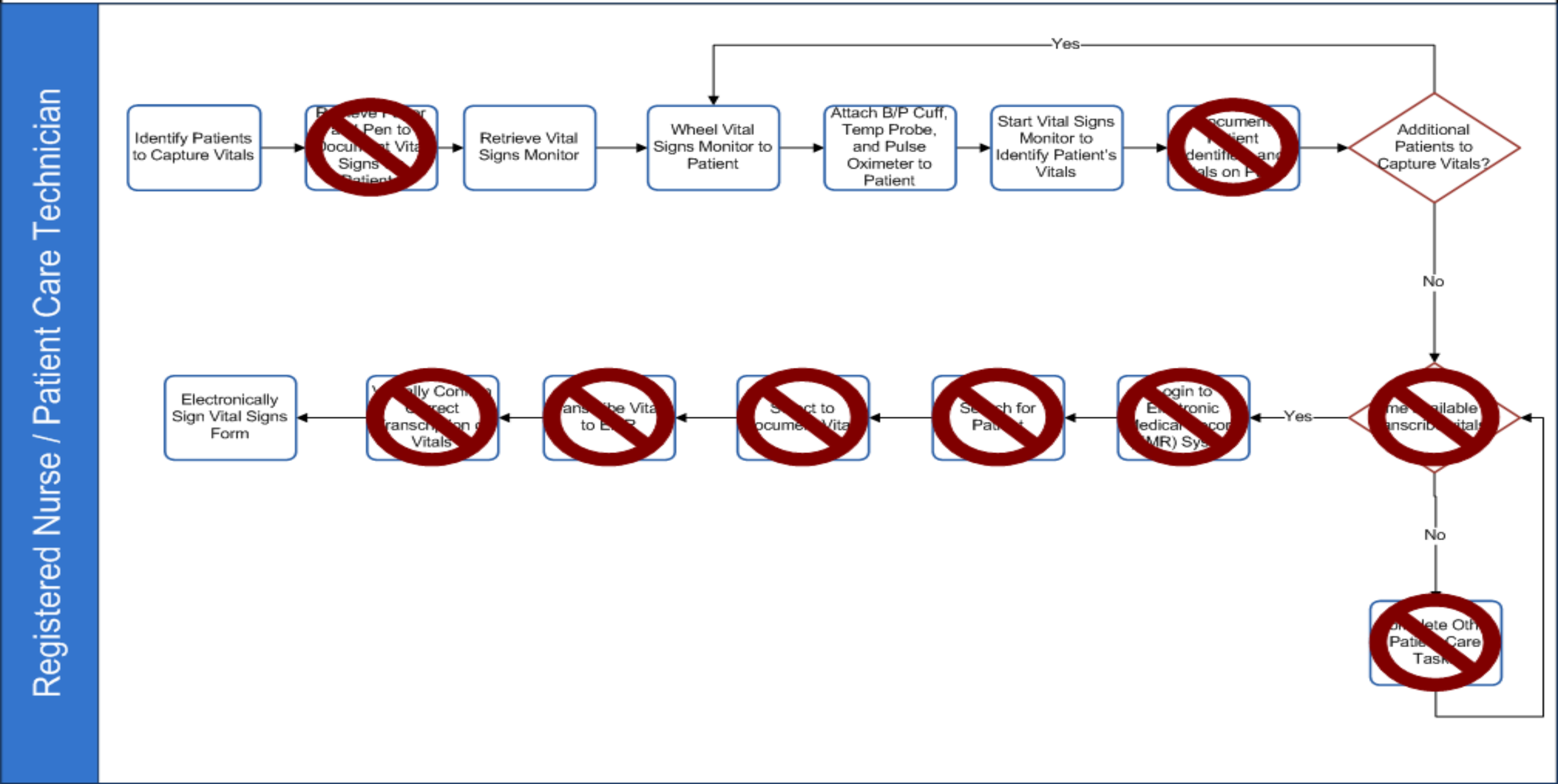


*Cerner VitalsLink includes caregiver authentication and all interfaces are passed through the iBus server

Current Vital Signs Capture Workflow without CareAware VitalsLink

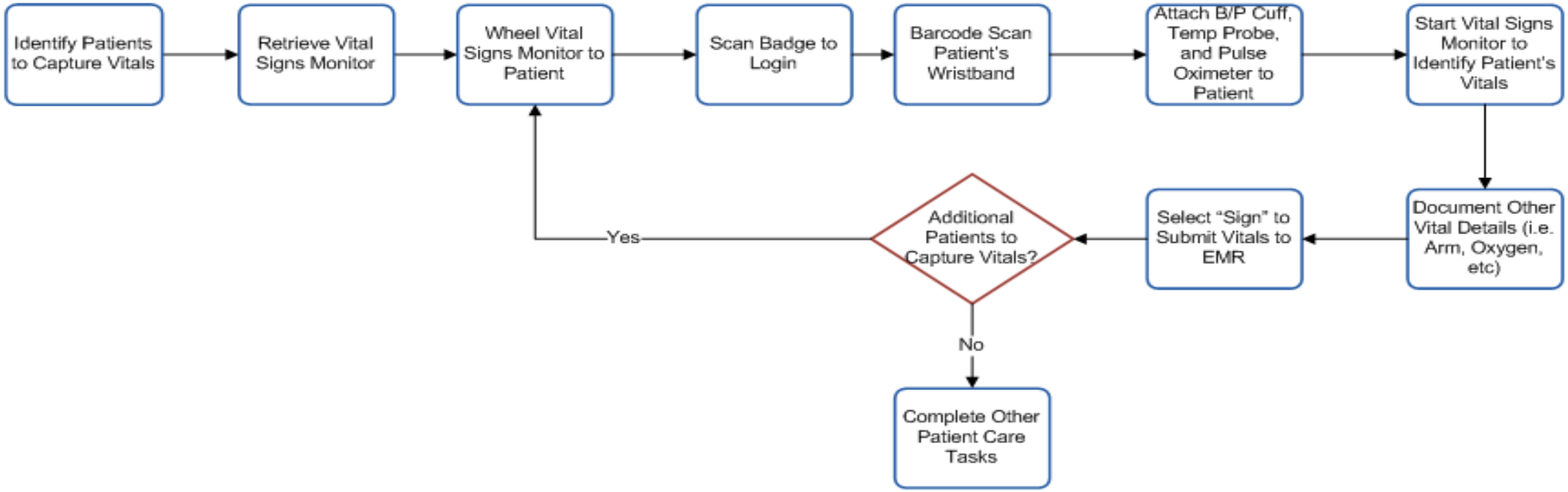


Current Vital Signs Capture Workflow without CareAware VitalsLink

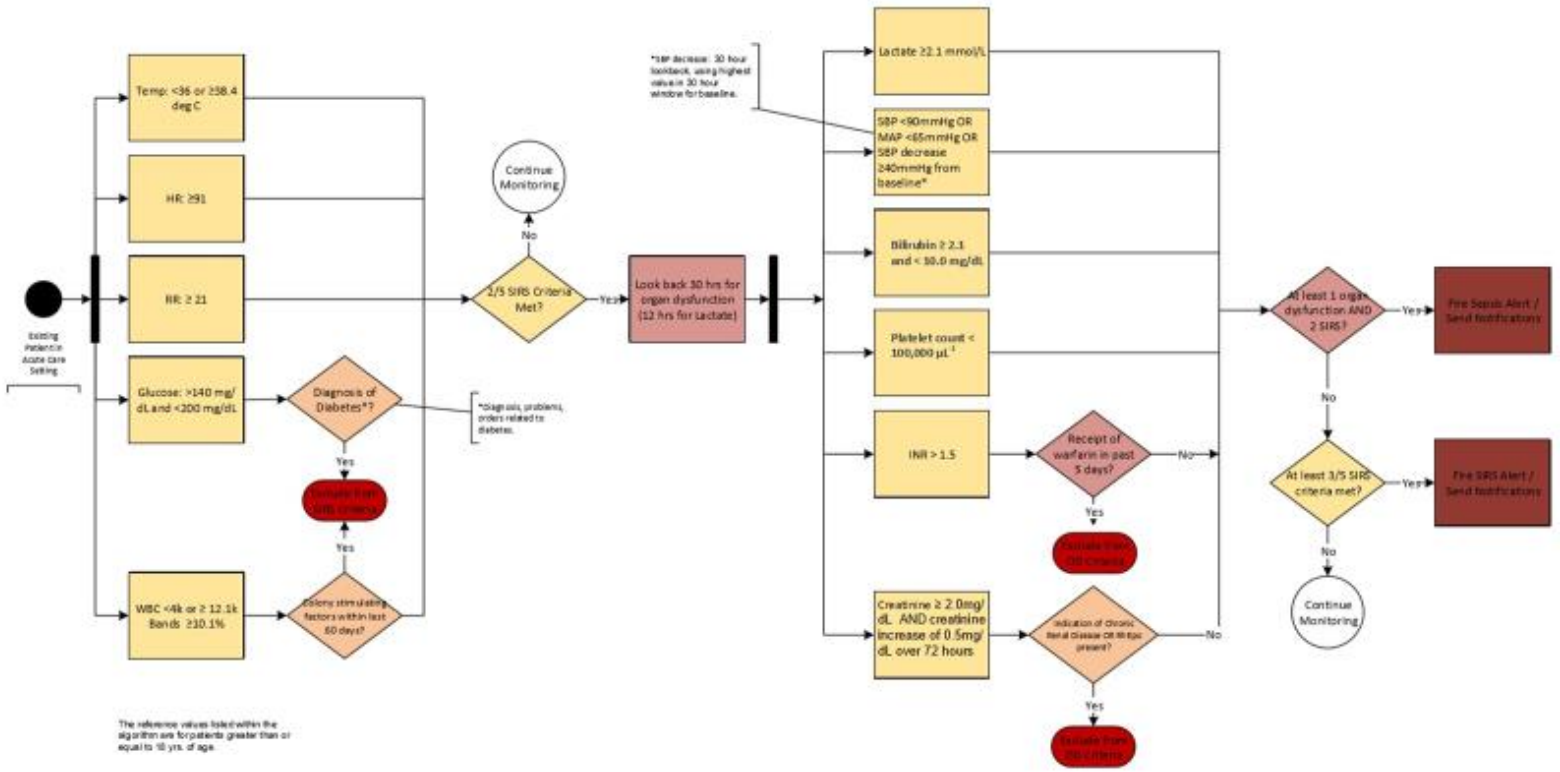


CareAware VitalsLink Workflow

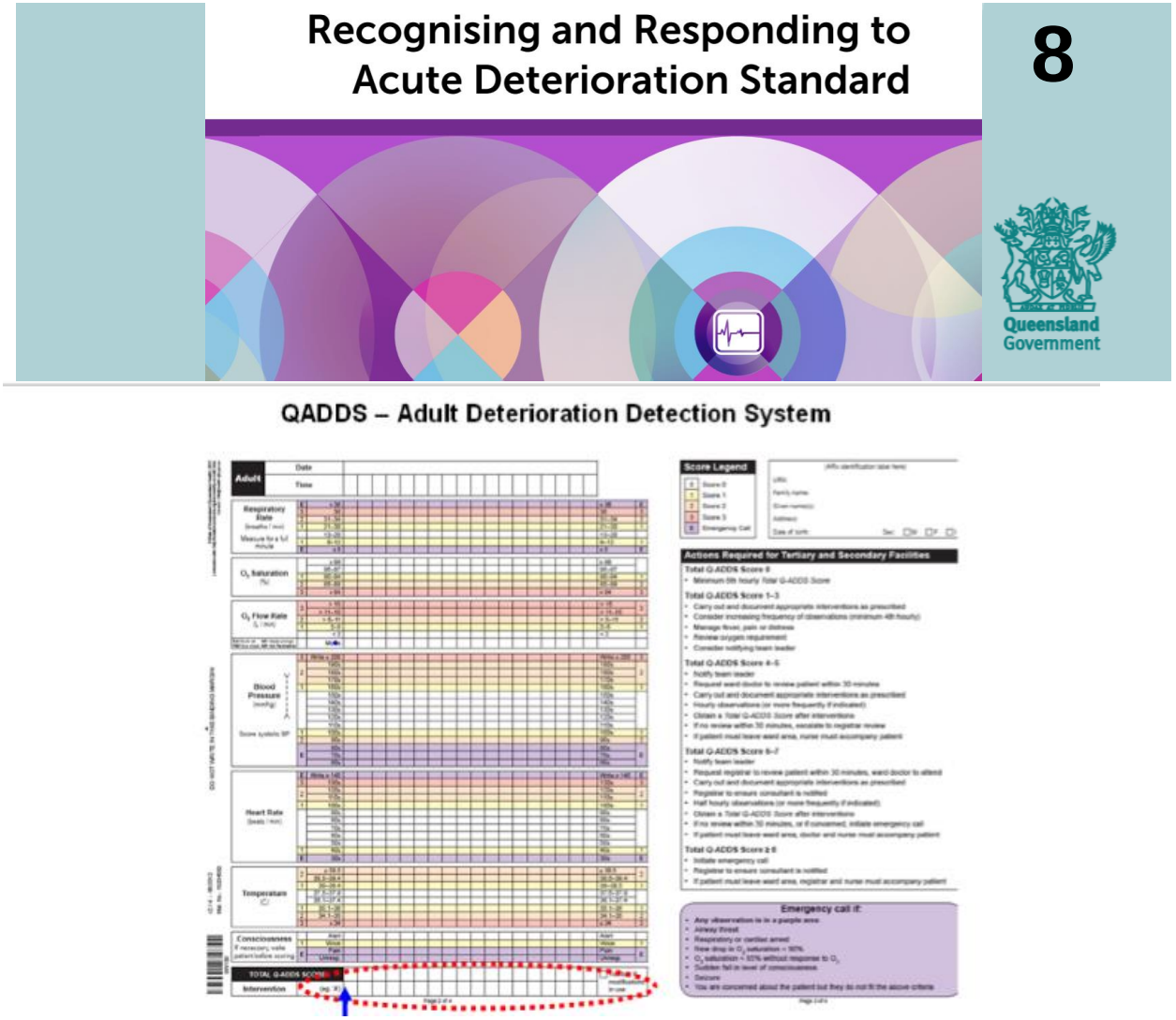
Registered Nurse / Patient Care Technician



Clinical Decision Support - Sepsis



Clinical Decision Support – QADDS



ST STEPHEN'S HOSPITAL

Clinical Imaging & Camera Capture

Solutions and Workflows

- Camera Capture
- Patient Photo
- Wound Care
- Dermatology

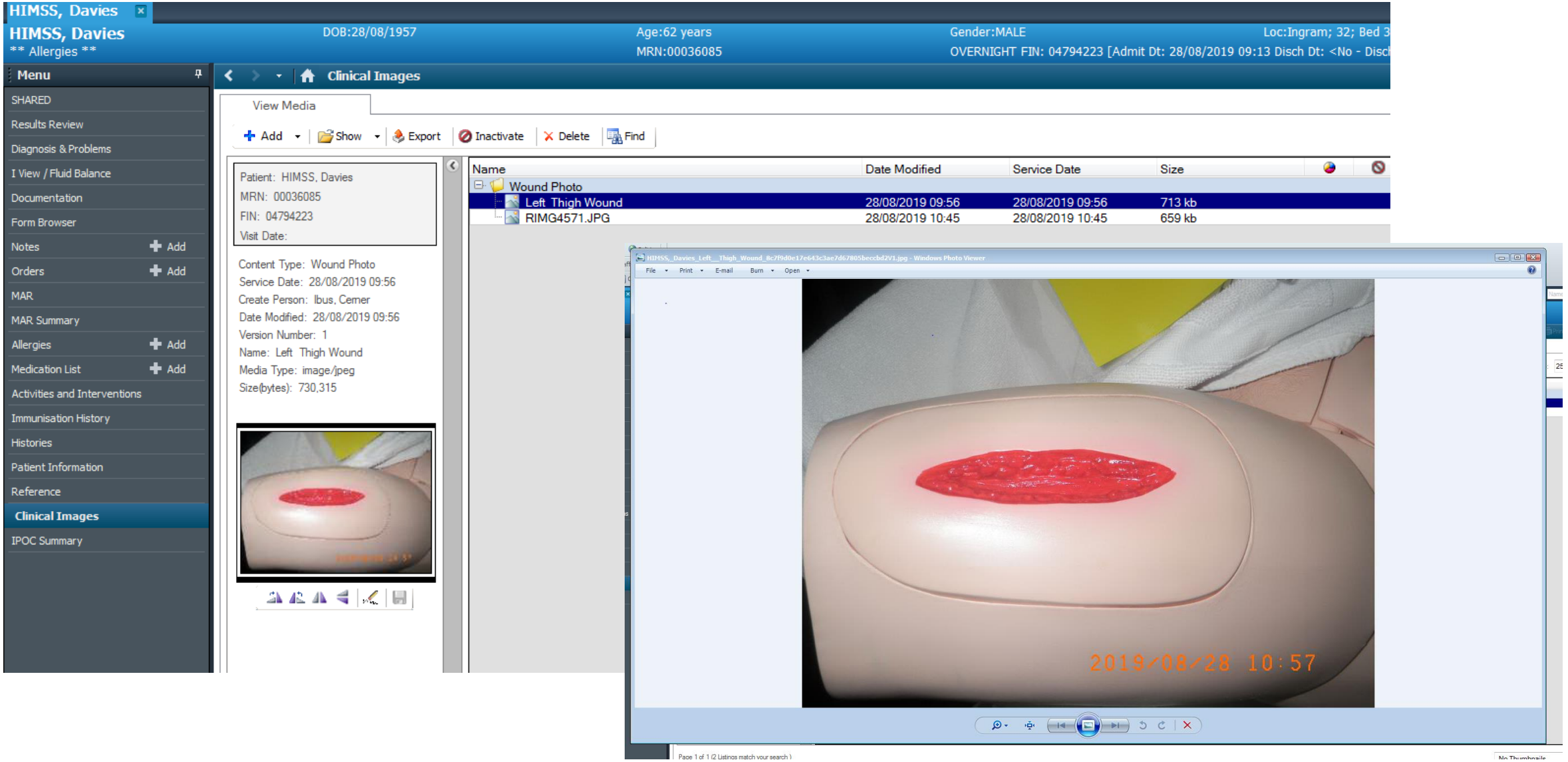
Improve Clinical Outcomes

Enable access to complete medical record, including all media – the Visual EMR

Improve Workflows

Increase efficiency by removing silos of information and enabling seamless media capture.

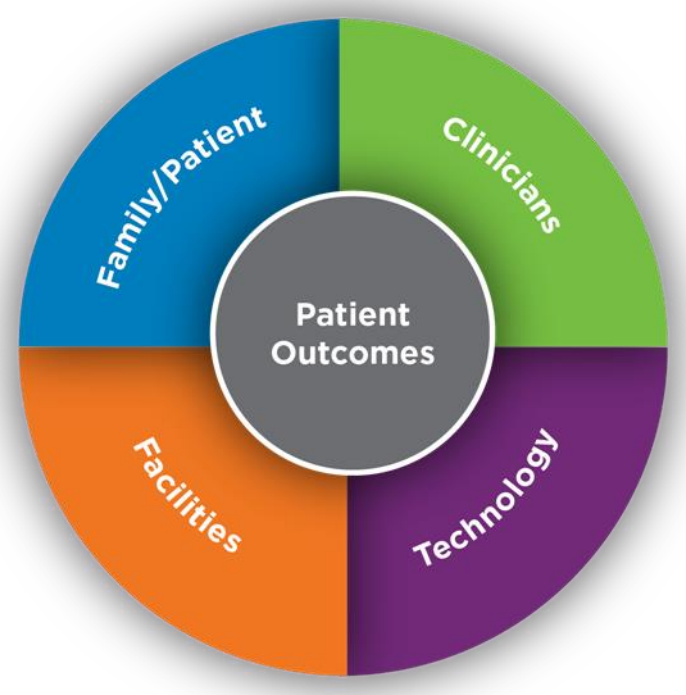
Wound Care


HIMSS, Davies
HIMSS, Davies
** Allergies **
DOB:28/08/1957
Age:62 years
MRN:00036085
Gender:MALE
OVERNIGHT FIN: 04794223 [Admit Dt: 28/08/2019 09:13 Disch Dt: <No - Disch
Loc:Ingram; 32; Bed 3
Menu
SHARED
Results Review
Diagnosis & Problems
I View / Fluid Balance
Documentation
Form Browser
Notes Add
Orders Add
MAR
MAR Summary
Allergies Add
Medication List Add
Activities and Interventions
Immunisation History
Histories
Patient Information
Reference
Clinical Images
IPOC Summary
Clinical Images
View Media
Add
Show
Export
Inactivate
Delete
Find
Patient: HIMSS, Davies
MRN: 00036085
FIN: 04794223
Visit Date:
Content Type: Wound Photo
Service Date: 28/08/2019 09:56
Create Person: Ibus, Cerner
Date Modified: 28/08/2019 09:56
Version Number: 1
Name: Left Thigh Wound
Media Type: image/jpeg
Size(bytes): 730,315
Name
Date Modified
Service Date
Size
Wound Photo
Left Thigh Wound
28/08/2019 09:56
28/08/2019 09:56
713 kb
RIMG4571.JPG
28/08/2019 10:45
28/08/2019 10:45
659 kb
2019/08/28 10:57

Reduce hospital-acquired infections

Healthcare Outcomes
Reduce hospital-acquired infections
Reduce medical errors
Reduce patient falls
Reduce pain
Improve patient's sleep
Reduce patient stress
Reduce depression
Reduce length of stay
Improve patient privacy and confidentiality
Improve communication with patients and families
Improved social support
Increase patient satisfaction
Decrease staff injuries
Decrease staff stress
Increase staff effectiveness
Increase staff satisfaction

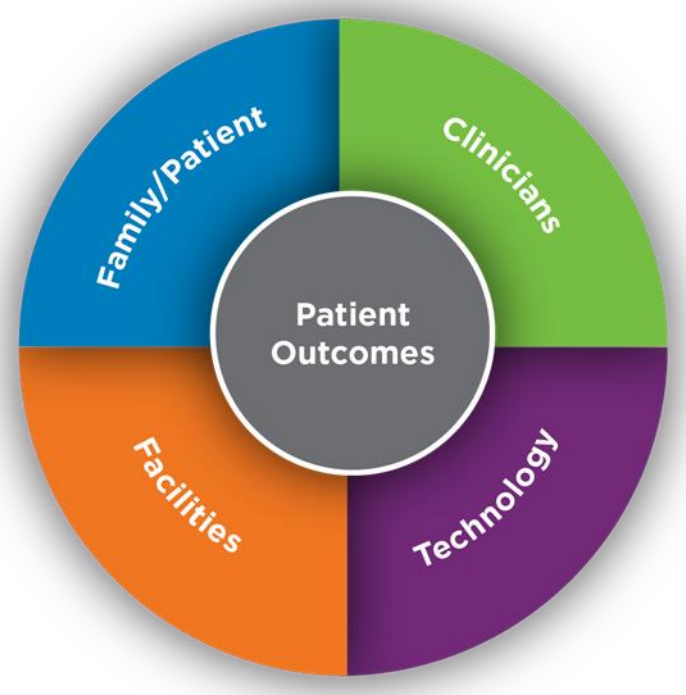
- EMR infection surveillance
- Immediate alerting for positive cultures
- Operational dashboards track infectious patients
- Patient Room sign updates biohazard risk indicator
- Room signage for visitors
- Interactive TV for education



Reduce Adverse Outcomes

Healthcare Outcomes
Reduce hospital-acquired infections
Reduce medical errors
Reduce patient falls
Reduce pain
Improve patient's sleep
Reduce patient stress
Reduce depression
Reduce length of stay
Improve patient privacy and confidentiality
Improve communication with patients and families
Improved social support
Increase patient satisfaction
Decrease staff injuries
Decrease staff stress
Increase staff effectiveness
Increase staff satisfaction

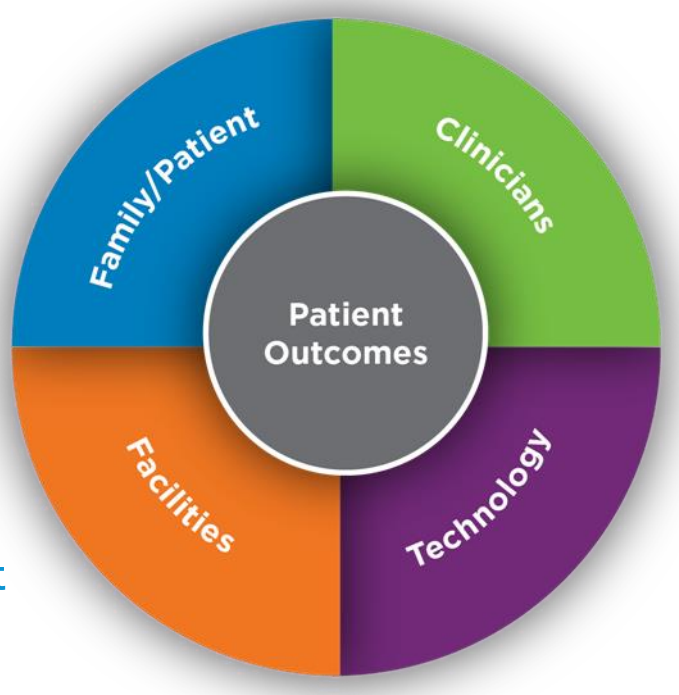
- Positive patient identification
- Closed loop medication including integrated drug cabinets
- 24/7 availability of medical records – downtime procedure
- Interactive TV for dietary orders and patient entertainment



Reduce Length of Stay

Healthcare Outcomes
Reduce hospital-acquired infections
Reduce medical errors
Reduce patient falls
Reduce pain
Improve patient's sleep
Reduce patient stress
Reduce depression
Reduce length of stay
Improve patient privacy and confidentiality
Improve communication with patients and families
Improved social support
Increase patient satisfaction
Decrease staff injuries
Decrease staff stress
Increase staff effectiveness
Increase staff satisfaction

- Design efficiencies to promote clinical and patient workflow; standardisation of care
- Mobility solutions to improve efficiencies/communication, medical devices connectivity
- Views/audio of nature delivered through the patient engagement for relaxation
- Patient flow/Bed Management systems
- Tracking Equipment



Patient Experience

- Delegate integration
- Improve patient safety
- The PES allows for
  - Access to entertainment
  - Education
  - Patient Meal choice
  - Access to health information
  - Results: Reduction in dietary errors

Researchers classified the errors into one of four categories:

1. Allergy to a food item on the tray
2. Receiving the wrong diet (e.g. not being served low-sodium or gluten-free meals)
3. Meals meant for other patients
4. Receiving a meal when medical orders say the patient shouldn't get food by mouth.

ST STEPHEN'S HOSPITAL

Patient Engagement Station

Key Benefits

- Improves patient satisfaction with the hospital experience
- Capability to comply and create consistency with the educational process
- Optimises communication workflows between patients and caregivers
- Integration with dietary system eliminating dietary adverse events

A fully-interactive patient system aimed at engaging patients and families throughout the entire care process by providing comprehensive communication education, communication and entertainment offerings.

Patient entertainment system: Practical technology integration

Care Team Communication

- VoIP
- Nurse Call
- Patient Entertainment System
- Staff Link
- Capacity Management
- Integration with EMR


Bed 32:1 Nurse
00:05
08-26-2019 02:41:28
Mute Tones
Night


St Stephens Hospital
14:46
ING Bed 32 Nurse 00:44
ING Bed 31 Nurse 00:16

Capacity Management

- Location history allows for optimal equipment utilisation
  - Lower capital device spending 10-15%
- Heads up information enhances staff awareness
  - Dramatically reduced time searching for equipment
  - Quick access to critical patient information
  - Leads to improved staff productivity
- Location based alerting
  - Improved patient safety
- Scalable platform to provide automated real-time patient location updates in Millennium

CareAware Capacity Management

File Personalization Help

Dashboard | Bed Management

Reset Perspective | 0 minutes ago

St. Stephens Hospital ▸ St. Stephens Hospital ▸ 0 - Ground Floor ▸

Transfer List | Transport List | Custodial Services List | PreAdmit List | Discharge List | Location Care List

Time Interval	Number of Jobs			Average Turn-Around Time	Average Response Time	Response Time Interval: 5 minutes	Custodial Hours
Current Day	Total: 18	Discharge: 18 Avg/hr: 2.12	Adhoc: 0 Avg/hr: 0	1274 minutes	0 minutes	100 %	0 hours 0 minutes
		Room Clean: 0 Avg/hr: 0					

Statu...	Type	Priority	Request T...	Scheduled...	Start Time	Comment	Custodian	Isolation	Location
Dirty	Disch...	Routi...	27/08/201...	27/08/201...		Standard Discharge Clean	Gorlick, Kristine		Alston Ward-Alston 27, Bed 27
Dirty	Disch...	Routi...	27/08/201...	27/08/201...		Standard Discharge Clean	Bates, Jeanette		Alston Ward-Alston 32, Bed 32
Occu...	Disch...	Routi...	28/08/201...	28/08/201...		Standard Discharge Clean			Alston Ward-Alston 19, Bed 19
Dirty	Disch...	Routi...	28/08/201...	28/08/201...		Standard Discharge Clean			Alston Ward-Alston 01, Bed 1
Dirty	Disch...	Routi...	28/08/201...	28/08/201...		Standard Discharge Clean	Harris, Lorraine		McPhail Ward-McPhail 05, Bed 5

Bed Board

Favorites | Clear | Available 32 | Occupied 16 | Dirty 3 | Cleaning 0 | Blocked 0 | Out of Service 0 | Held 0 | Reserved 0 | Virtual 0 | Patient Attribute | Location Attribute

Patient: | Summary | Global Search

Alston Ward 50%

D Alston 01, Bed 1	A Alston 09, Bed 9	A Alston 17, Bed 17	A Alston 25, Bed 25
Oc Alston 02, Bed 2	Oc Alston 10, Bed 10	Oc Alston 18, Bed 18	Oc Alston 26, Bed 26
A Alston 02, Bed 3	A Alston 11, Bed 11	Oc Alston 19, Bed 19	D Alston 27, Bed 27
Oc Alston 04, Bed 4	Oc Alston 11, Bed 12	A Alston 20, Bed 20	Oc Alston 28, Bed 28
A Alston 05, Bed 5	Oc Alston 13, Bed 13	Oc Alston 21, Bed 21	Oc Alston 29, Bed 29
A Alston 06, Bed 6	Oc Alston 14, Bed 14	Oc Alston 22, Bed 22	Oc Alston 30, Bed 30
A Alston 07, Bed 7	A Alston 15, Bed 15	Oc Alston 23, Bed 23	Oc Alston 31, Bed 31
A Alston 08, Bed 8	A Alston 16, Bed 16	A Alston 24, Bed 24	D Alston 32, Bed 32

Anaesthetics Bays 0%

A Anaes Bay 1, A
A Anaes Bay 2, A
A Anaes Bay 3, A
A Anaes Bay 4, A
A Anaes Bay 5, A

PACU Stage 1 0%

A PACU 1, 1
A PACU 1, 2
A PACU 1, 3
A PACU 1, 4
A PACU 1, 5
A PACU 1, 6
A PACU 1, 7
A PACU 1, 8
PACU 1, 9

Patient Hol

A Pat Hol
A Pat Hol

Google Chrome

System Time: 8/29/2019 08:34 +10:00 User: lwright1@p0297.ucqs_au.cernau.com Domain: p0297.ucqs_au.cernau.com

8:34 AM

CareAware Capacity Management

le Personalization Help

ashboard | Bed Management | Reset Perspective | 0 minutes ago

St. Stephens Hospital ▸ St. Stephens Hospital ▸ 1 - First Floor ▸ Ingram Ward ▸

Metrics

Bed Utilization 1/32 3%

Average Length of Stay 23:17

Transfer Jobs (1) Patient: 1

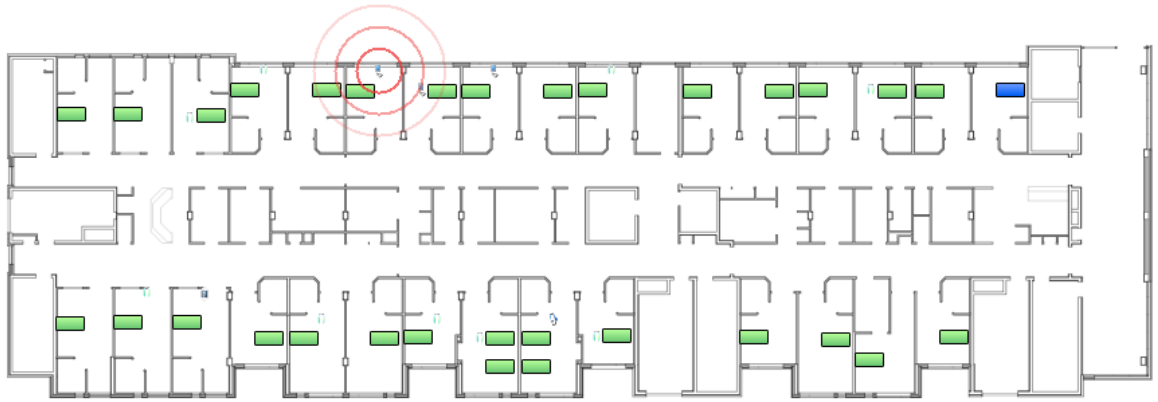
Custodial Jobs (0) Adhoc: 0 | Discharge Clean: 0

Transport Jobs (0) Patient (Adhoc): 0 | Patient (Transfer): 0 | Equipment (Adhoc): 0

Discharges (16) Pending: 0 | Confirmed: 16

Floor Plan

Display Controls



Patient List | Provider List | Equipment List

Equipment: Workstation on Wheels

Global Search

Description	Model Number	RTLS Location	Classification Type	Manufacturer	Lease...	Owning Location	Serial Number	Asset Control Number	Comment	Badge ID
Workstation on Wheels		Alston Ward-Corrido...	WoW	Advantec		Ingram Ward	TBNB130246	700157		114013
Workstation on Wheels		Ingram Ward-Ingra...	WoW	Advantec		Ingram Ward	TBN4140182	700178		114129
Workstation on Wheels		Ingram Ward-Ingra...	WoW	Advantec		Ingram Ward	TBN4140181	700149		114123
Workstation on Wheels		Ingram Ward-Corrid...	WoW	Advantec		McPhail Ward	TBN4140177	700172		114148
Workstation on Wheels		Ingram Ward-Corrid...	WoW	Advantec		McPhail Ward	TBN4140174	700173		114149
Workstation on Wheels		Ingram Ward-Corrid...	WoW	Advantec		Ingram Ward	TBN4140165	701331		114127
Workstation on Wheels		Ingram Ward-Corrid...	WoW	Advantec		Ingram Ward	TBN4140162	700165		114124
Workstation on Wheels		IT Offices	WoW	Advantec		Ingram Ward	TBN4140161	700185		114139

System Time: 8/29/2019 08:32 +10:00 User: lwright1@p0297.ucqs_au.cernau.com Domain: p0297.ucqs_au.cernau.com

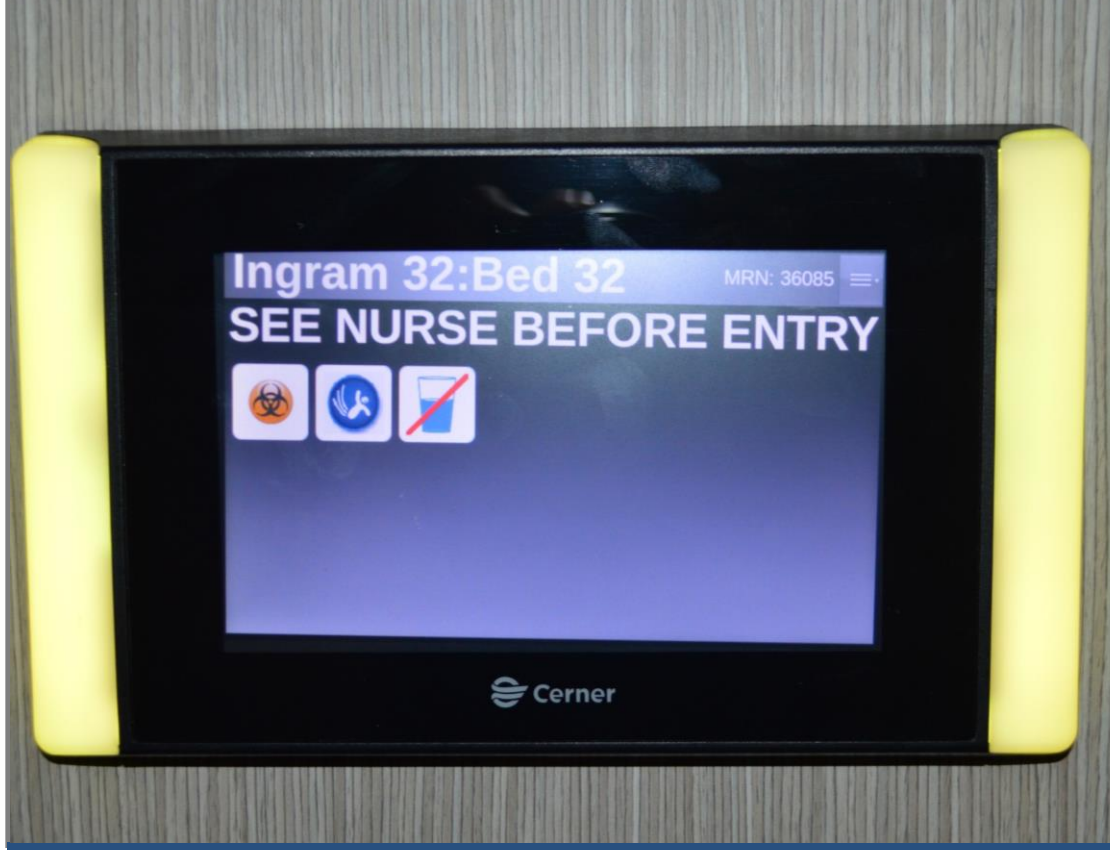
8:33 AM
29/08/2019

ST STEPHEN'S HOSPITAL

Digital Room Signage

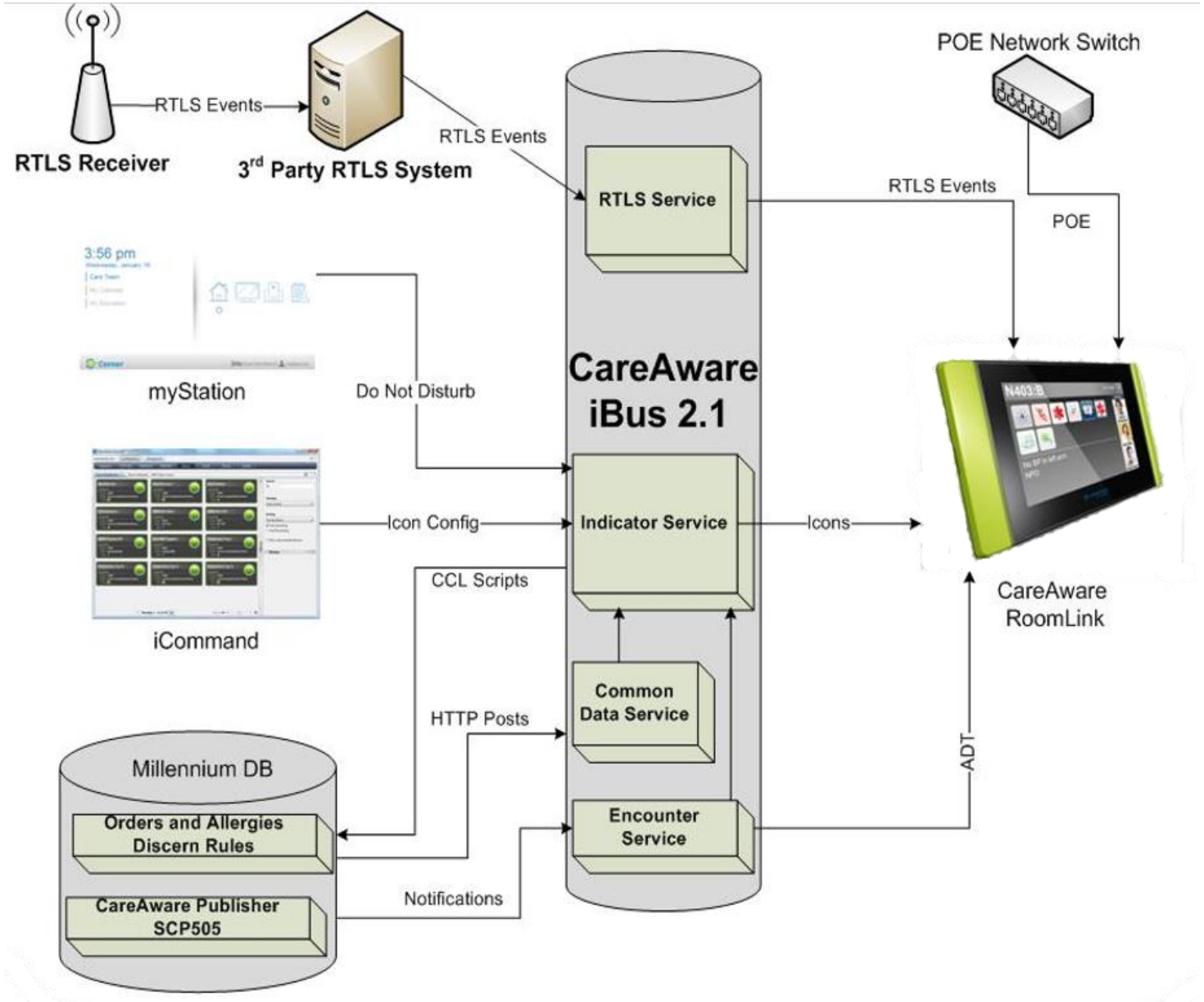
Key Benefits

- Allows access to pertinent information at-a-glance
- Improves communication with clinicians, family members and hospital staff
- Displays information and icons for warnings and notifications in real-time.



Digital signage solution displays key patient information to clinicians, hospital staff and family members outside the entrance of the patient room.

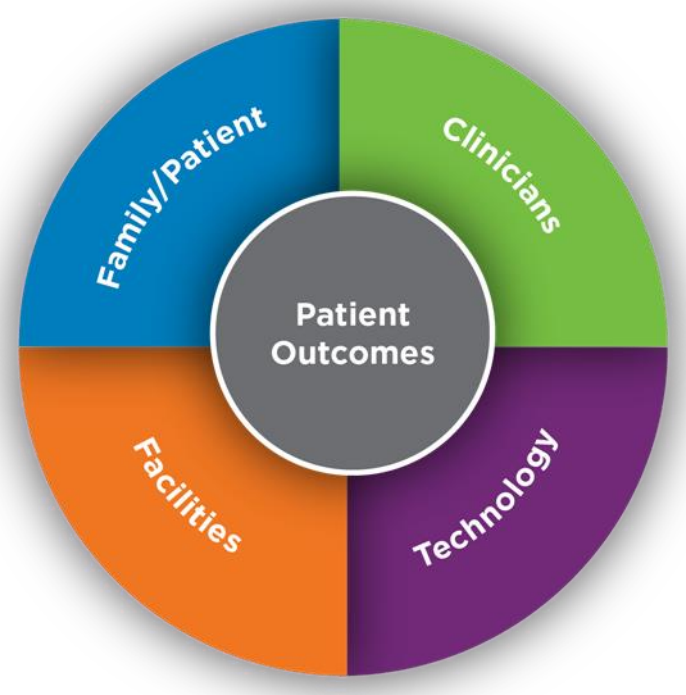
RoomLink Connectivity



Improve Communication w/Patient & Family

Healthcare Outcomes
Reduce hospital-acquired infections
Reduce medical errors
Reduce patient falls
Reduce pain
Improve patient's sleep
Reduce patient stress
Reduce depression
Reduce length of stay
Improve patient privacy and confidentiality
Improve communication with patients and families
Improved social support
Increase patient satisfaction
Decrease staff injuries
Decrease staff stress
Increase staff effectiveness
Increase staff satisfaction

- Family communication via Perioperative tracking board
- Improved communication via in-room patient engagement
- Patient & Family education delivered directly from care plan
- Nurse call and alarm response to patient via caregiver mobile device
- Digital room signage displaying real time patient care information



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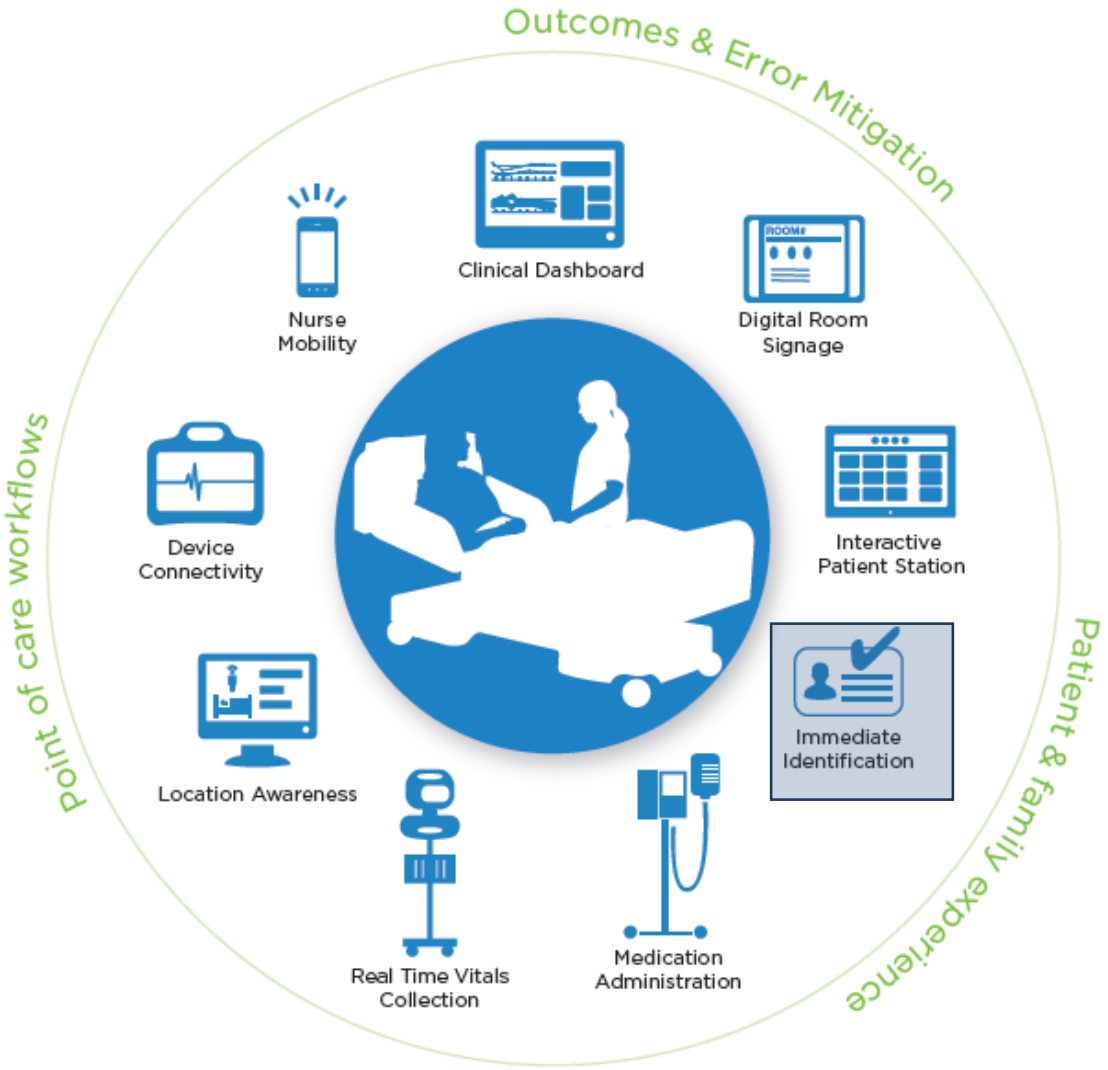
Digital Transformation



An Extension….

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Lessons Learnt

- Required a multidisciplinary team approach with the support and guidance of leadership and key stakeholders
- Create a testing domain to ensure the functionality met requirements
- Mock room for hands on education
- Elbow to elbow education and support
- Patient and family education
- Time commitment, data, and feedback loops to fine tune and tweak the system to gain adoption
- Allowing additional time for adoption to occur and constant sharing of data to show improvements in process and areas of opportunity where necessary for change management to take place

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Value Derived

- Hospital transmitted MRO rates as low as 0%
- Accuracy of vital sign documentation improved
- Zero dietary adverse events
- Overall decrease in LOS
- Sustained positive Patient Satisfaction
- Decrease in readmissions
- Decrease in falls
- Decrease in pressure injuries

Proudly part of UnitingCare

Patient Discharge Survey

Net Promoter Score

78 — 78 Difference to ytd

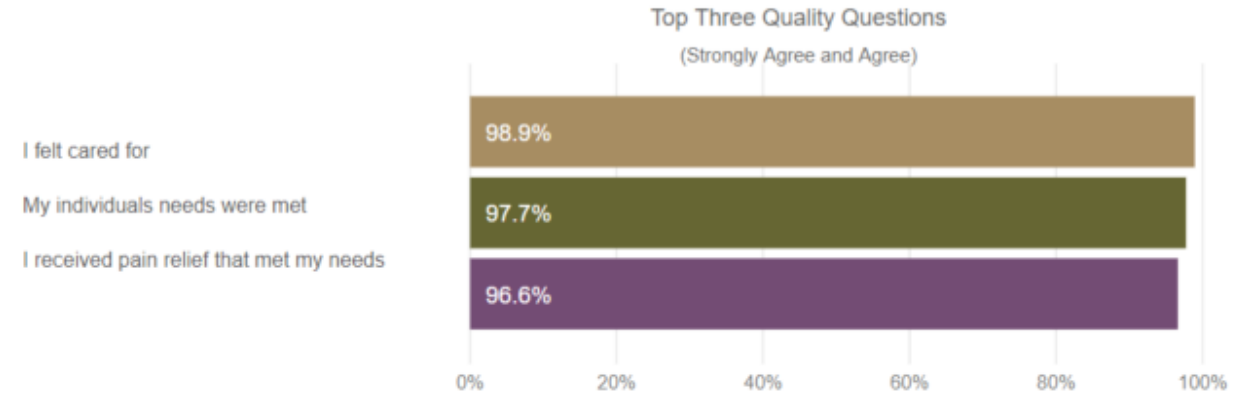
Overall Hospital Rating*

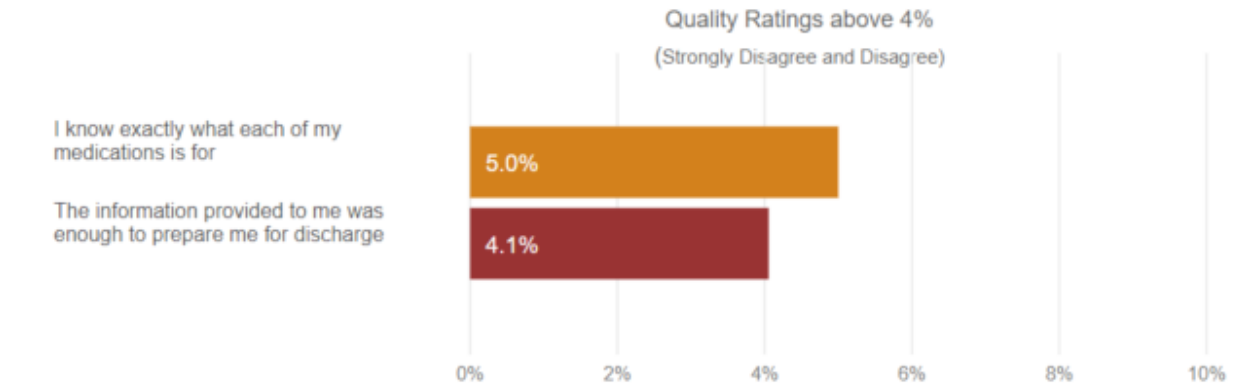
9.25 /10 — 9.25 Difference to ytd

Overall Quality Rating^

9.25 /10 — 9.25 Difference to ytd

Nursing	4.80 /5	0.00
Doctors	4.74 /5	4.74
Allied Health	4.57 /5	4.57
Food	3.76 /5	3.76
Noise	4.53 /5	4.53
Cleanliness	4.87 /5	3.76
		Difference to ytd





* Overall Hospital Rating is defined as the mean score from the question: 'How would you rate the hospital overall?'

^Overall Quality Rating is defined as the mean score from the question: 'How would you rate the overall quality of your care?'

# of Responses: 95

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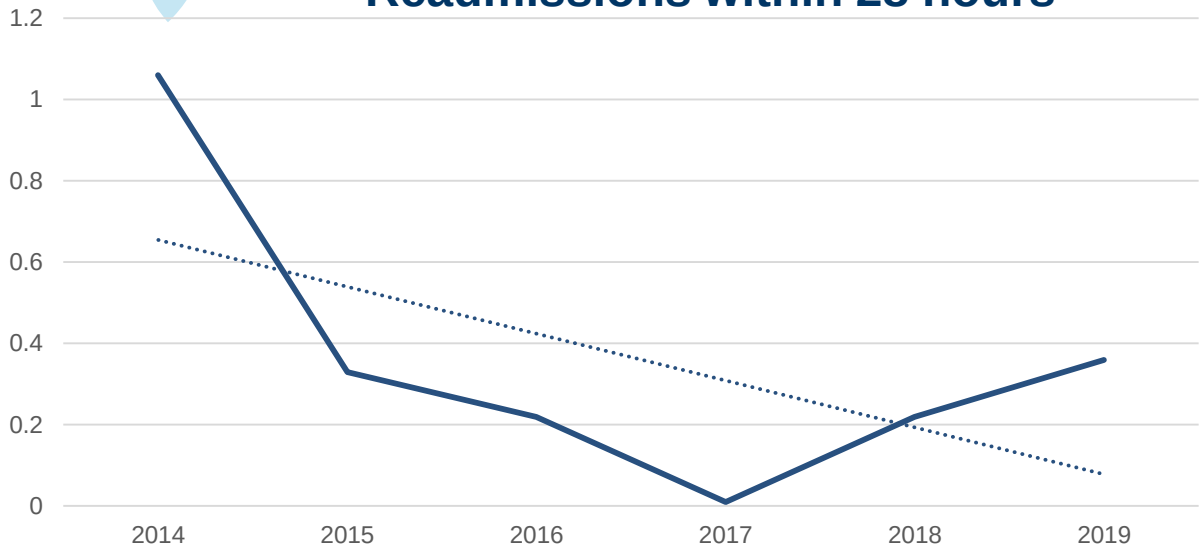
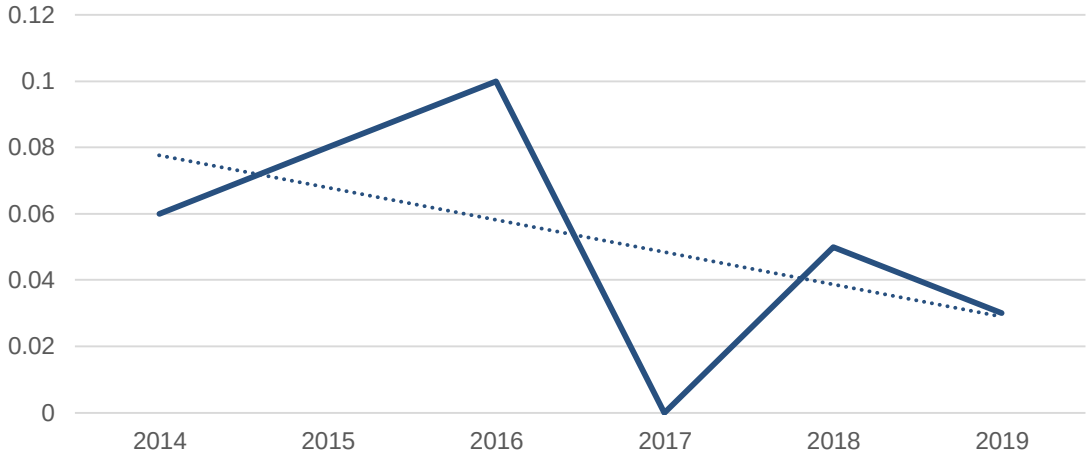
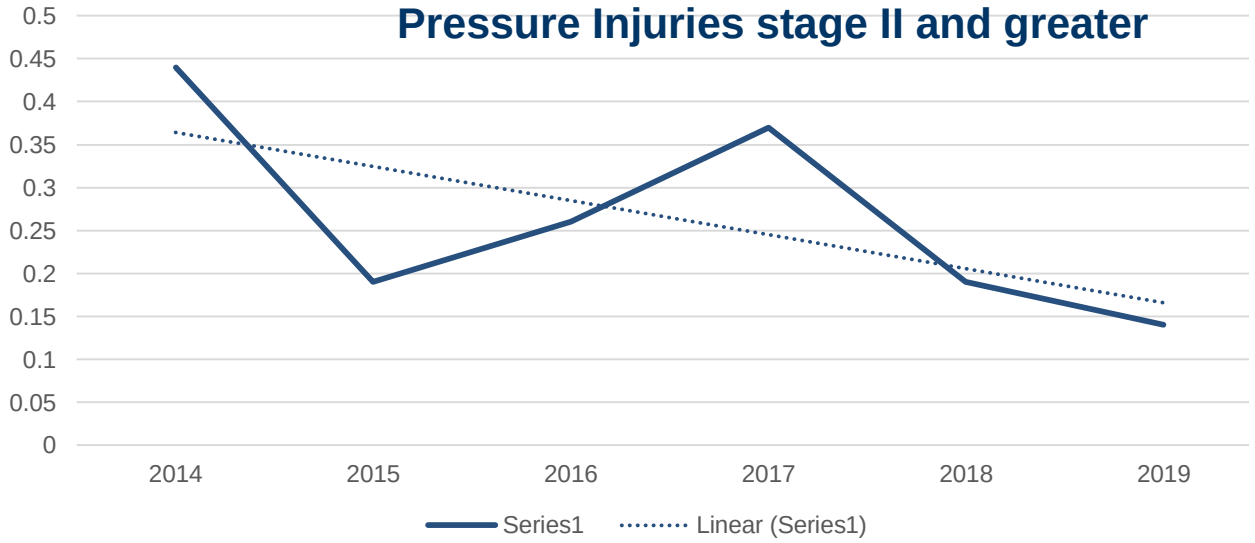
Readmissions within 28 hours



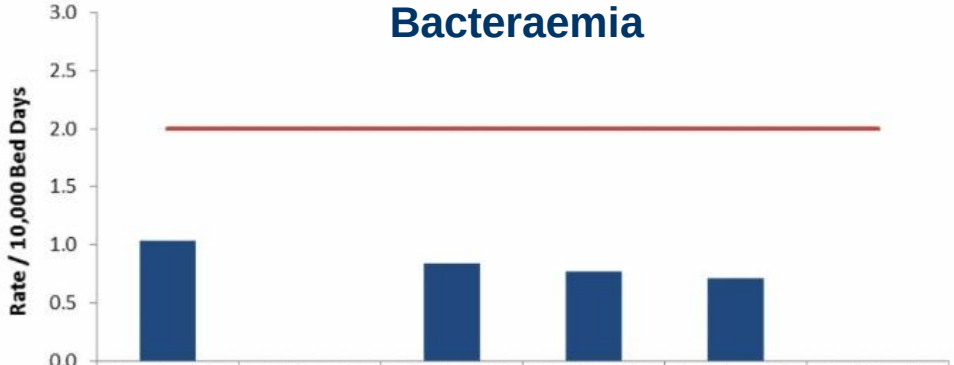
Falls with significant injury's



Pressure Injuries stage II and greater



Healthcare-associated Staph aureus Bacteraemia

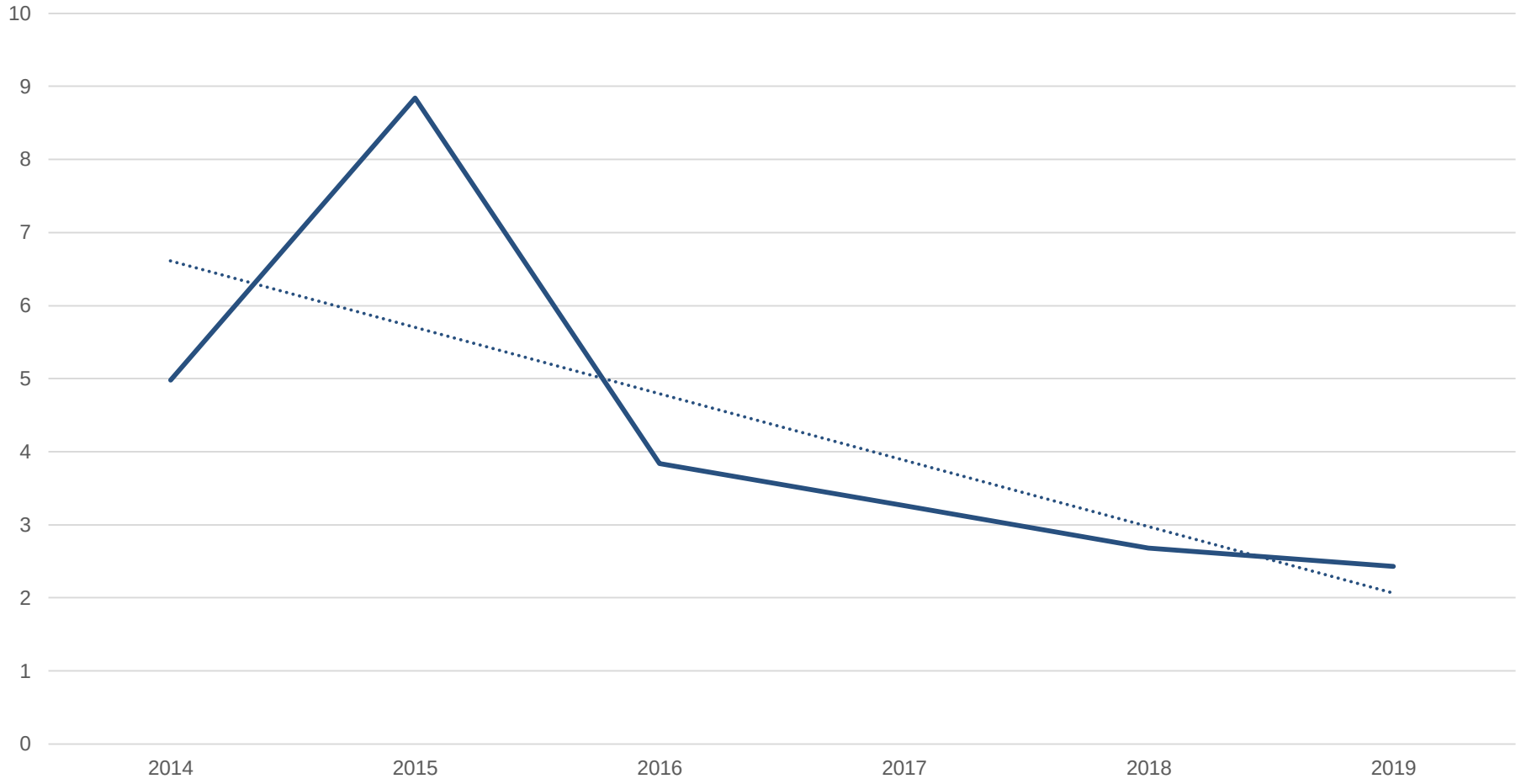


	Jan-Jun 16	Jul-Dec 16	Jan-Jun 17	Jul-Dec 17	Jan-Jun 18	Jul-Dec 18
Rate / 10,000 Bed Days	1.04	0.00	0.84	0.77	0.71	0.00
Industry Benchmark*	2.0	2.0	2.0	2.0	2.0	2.0

** National Healthcare Agreement performance indicator*

ST STEPHEN'S HOSPITAL

Length of Stay



In Summary

- **Local problem:** Improve the access to data and images in near-real-time, improve the efficiencies of documentation, improve patient safety, and enhance the patient experience.
- **Design and Implementation:** The focus of the digital hospital went beyond the electronic health record (EMR) and included a scalable platform to meet the need for device connectivity. Examples of targeted areas for improvement included communication to the care team regarding infection control, near-real-time monitor and device data (including images), and enhanced patient engagement.
- **Healthcare IT:** These integration points represent a hub and spoke model where the middleware acts as the hub and provides seamless connectivity at the point of care within the workflow to drive CDS, care plans, electronic room signage which keeps the care team and family up-to-date on patient risks and restrictions, to connect the right care team member to the right patient for communication needs, and to engage the patient in activities.
- **Value derived:** A decrease in infection rates has been sustained over the last 4+ years. Vital sign documentation improved timing for the QADDS and sepsis alerts. There were improvements in: LOS, infection rates, falls, readmissions, and patient satisfaction.


ST STEPHEN'S
HOSPITAL