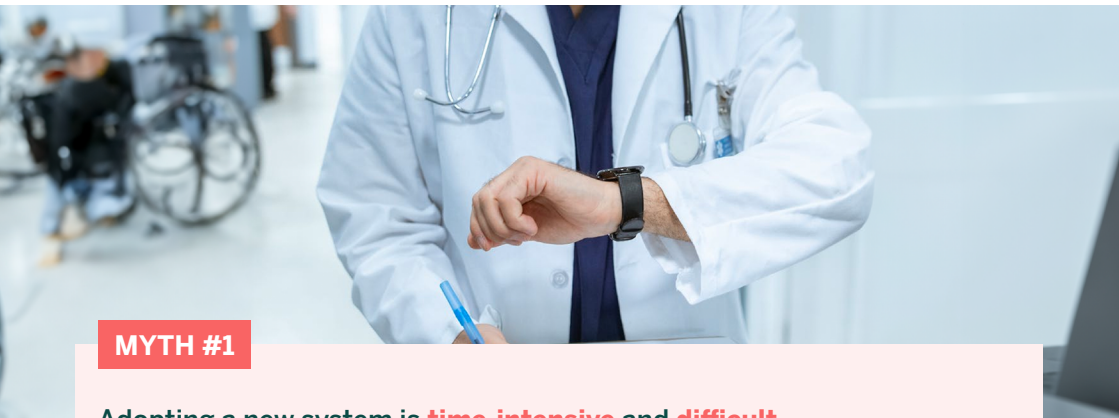


Debunking the ePMA switch myths

Overcoming concerns about switching from the current ePMA system to a better medication management solution

In the dynamic world of healthcare, where technology constantly evolves, transitioning from one ePMA system to another can sometimes spark concerns and misconceptions. The Better Meds team is committed to alleviating any concerns that may arise during the transition process. We are here to debunk prevalent myths that can be dispelled when working collaboratively with a supportive and engaged team of professionals.



MYTH #1

Adopting a new system is **time-intensive** and **difficult**.

FACT

Most healthcare systems are designed to align with clinical processes, making it easier to adapt and learn. Upgrading an inadequate system can be time-consuming and costly compared to adopting a new alternative.

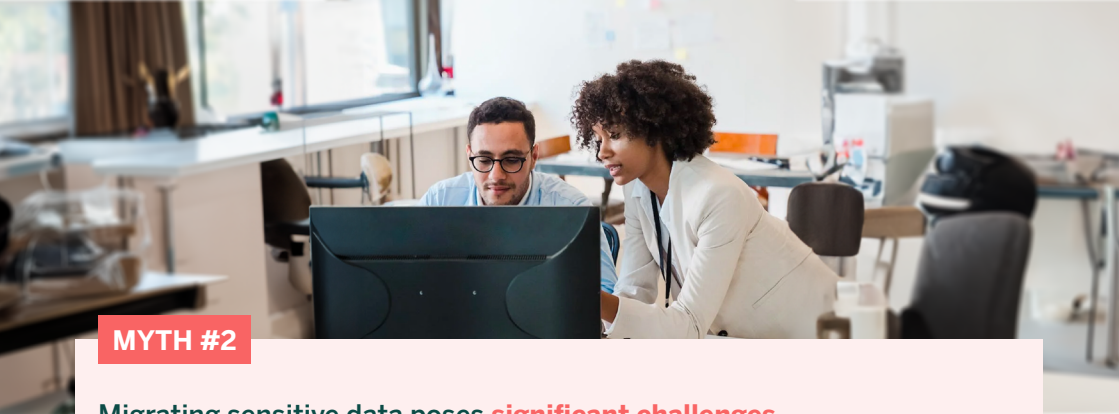
Transitioning to a new system can present challenges. However, not all workflows undergo drastic changes. While there may be variations in system functionalities that necessitate learning and adaptation, the **workflows of most healthcare systems are designed to**

align with actual clinical processes. This ensures that staying ahead of the learning curve is not overly difficult.

Moreover, healthcare is constantly evolving with rapid changes and advancements, creating opportunities for progress and improved patient care. In order to deliver high-quality care to patients, it has become essential to embrace the use of advanced technologies. **Keeping up with emerging trends is often imperative to meet the evolving standards and patient expectations in healthcare.**

It would be unfortunate to stick with an outdated system in healthcare

simply out of familiarity when there are alternatives at hand that not only offer enhanced functionalities, but also alleviate the long-term workload of clinicians, promote transparency, and foster greater patient engagement. Moreover, **maintaining an inapt system or upgrading to a newer version can sometimes be more time-intensive and financially burdensome compared to adopting a new alternative.** Embracing a new system that aligns with emerging trends in healthcare technology can result in long-term cost savings and operational efficiency, freeing up valuable resources that can be redirected towards providing high-quality patient care.



MYTH #2

Migrating sensitive data poses **significant challenges**.

FACT

Our system ensures that **no relevant and critical patient data is lost during the integration process.**

As a standalone application, it **seamlessly integrates with key**

clinical systems (laboratory systems, pharmacy stock control systems and Electronic Patient Record/hospital information systems), **following openEHR and FHIR interoperability standards that facilitate the secure exchange of patient information.**

This enables a comprehensive overview and integration of all work processes for a holistic approach.

openEHR

The system is built on the **openEHR framework**, ensuring that data is stored in a **standardised manner**. This allows for efficient data and facilitates **seamless querying** through the APIs we provide. They are designed with **security features**, including encryption and patient consent controls, and offer guidelines to ensure the safe handling of patient data. Such interoperability brings **significant advantages** for users by alleviating the burden of repetitive data entry tasks.



MYTH #3

The user experience journey is **lengthy and burdensome, adding to the workload** of users.

FACT

With our extensive range of support and educational materials, users no longer have to bear the responsibility of generating new training materials, and the implementation strategy is tailored to suit the specific requirements of the hospital.

Adapting to a new system can seem challenging, as it requires dedicating a team to learning and training. For clinicians, this may initially result in

additional workload, but like any new endeavour, it is typically a temporary phase. The ultimate objective is to **alleviate users from the time-consuming burdens in the long term**, streamlining processes and improving efficiency.

The project team receives **comprehensive support throughout the entire process**, benefiting from our methodology and analysis at every step. We maintain close engagement with the team on a regular basis and equip them with a **knowledge base containing learning resources and**

customised training packages to alleviate the challenges of creating new materials and organising training sessions. Our methodology is built upon past experience, allowing us **to adapt the strategy according to the specific needs of the hospital**. Additionally, the Better team actively involves clinicians and staff members through workshops to understand their expectations for the ePMA system. This approach helps generate interest and foster engagement in the implementation process.



What I've really found is that they (Better team) are so keen to understand how we work and to understand what we, the experts, need. This understanding makes the whole process much smoother for everyone.

Lex Moon

Lead ePMA Pharmacist at Oxford Health NHS Foundation Trust



MYTH #4

The testing phase **should be conducted by the dedicated hospital staff out of scratch.**

FACT

We provide crucial support during the demanding testing phase of system implementation by facilitating connections between clients.

The testing phase of system implementation can be demanding, which is where testing scripts play a

pivotal role. **We facilitate connections between all our clients**, enabling them to share testing scripts, exchange experiences, address concerns, and provide valuable advice to one another. Our vibrant community thrives on digital connectivity, fostering regular user group meetings and live events where feedback is gathered and relationships are strengthened.

Testing the system is a crucial step in assessing its functionalities and identifying any additional requirements and improvements tailored to the specific needs of the hospital. However, this process is not solely entrusted to users or staff members, as **we are here to offer both guidance and advice.**



MYTH #5

Smooth execution of the switch **relies solely on previous experience from an identical project or implementation.**

FACT

The absence of precise prior experience in a specific system switch presents an opportunity to bridge any gaps and customise processes according to the hospital's needs.

When considering the reality of system switches, it is certainly desirable to have precise prior experience in the specific switch at hand. However, in practice, such a perfect match is not always attainable. Nevertheless, this

should not be seen as a weakness, but rather as an opportunity to **bridge any gaps through meticulous planning, strategic implementation, and a continuous feedback loop.**

Prior experience is helpful, but not crucial. We acknowledge that **every hospital requires a distinct analysis and comprehension, and we refrain from assuming that identical solutions will work across different trusts.** This inevitably leads to differences between implementations. However, any aspects that fall within objective standards are diligently

addressed through the application of **interoperability principles.** By adhering to these principles, the system provider ensures seamless integration and smooth functioning of the new system within the existing healthcare infrastructure.

Through careful planning, ongoing feedback, and a commitment to interoperability, the system provider strives to bridge any gaps, adapt to specific requirements, and deliver a solution that meets the hospital's unique needs while aligning with industry standards.



Still concerned?

If you are still unsure, do not hesitate to [contact us](#).

We would be more than happy to address any additional concerns or questions you may have.

Our team is here to provide you with prompt resolutions and offer comprehensive answers to ensure a smooth transition process.

[Read more](#)

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