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**Swift Better Meds  
deployments:  
4 NHS trusts  
in 5 months**

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**Better, the leading healthcare IT provider of open data technology, achieved four successful implementations of its award-winning Better Meds ePMA solution in just five months. We demonstrate the breadth and depth of Better's implementation capabilities and share what unique methodology the team employs to ensure the bespoke needs of every trust is met.**

Following a national government drive to accelerate the digital maturity across NHS Trusts, the UK government set a target for all Trusts to have adopted an electronic prescribing and medicines administration (ePMA) system by 2024. This has seen the number of trusts opting to contract Better Meds accelerate in recent years, with four new deployments between April and August 2022 alone, including two go-lives at two different trusts on the same day.

### **The swift deployments took place at:**



#### **South London and Maudsley NHS Foundation Trust (SLaM) on 5 April 2022**

SLaM is a mental health trust that serves a local population of 1.3 million people in south London, as well as specialist services for children and adults across the UK and beyond. It provides the widest range of NHS mental health services in the UK.



#### **Oxford Health NHS Foundation Trust (OHFT) on 5 July 2022**

OHFT provides physical, mental health and social care for people of all ages across Oxfordshire, Buckinghamshire, Swindon, Wiltshire, Bath and North East Somerset. Its services are delivered at community bases, hospitals, clinics and within people's homes.



### **South Tees Hospitals NHS Foundation Trust (STHFT) on 5 July 2022**

STHFT is the largest hospital trust in the Tees Valley with two acute hospitals and services in a number of community hospitals, providing a range of acute inpatient, outpatient, and emergency services for the people living across Tees Valley and North Yorkshire.



### **North Cumbria Integrated Care NHS Foundation Trust (NCIC) on 9 August 2022**

NCIC provides rural and remote healthcare and provides a wide range of community and acute services to patients throughout north Cumbria and beyond.

**In order to ensure successful deployments, the Better team works closely with its partners' and Trusts' teams, assisting them with its unique blend of clinical and technological expertise to gain an in-depth understanding of the individual challenges that each trust faces when implementing the new ePMA.**



*"We have a high percentage of clinical staff, some of whom are former NHS staff, within our team," explained **Stefan Siekierski**, Delivery Manager at Better.*

*"This includes Christine Wadsworth, our UK Clinical Lead, who has more than 30 years' experience working as a pharmacist within hospital, community, and GP settings. I am a former nurse with 20 years' of experience in the NHS, during which I led the implementation of ePMA solutions at several trusts. Many of our other team members are trained frontline staff with vast insight into how an ePMA solution needs to operate in different settings. This insight is invaluable when we are assessing the needs of a trust and planning the most appropriate implementation strategy."*



## ePMA implementation at pace

The key to developing an implementation strategy lies within the implementation plan. Better team has created it as a result of learning from previous implementations and the experience of individuals involved in the implementation of an ePMA. The implementation plan can be tailored according to the Trust rollout plan.



Better works with each trust's implementation team to plan the most appropriate strategy for implementation, taking into consideration its unique circumstances. **Christine Wadsworth**, Clinical Lead at Better UK, explained:

*"We usually advise that they identify a pilot ward for the initial go-live, with a subsequent rapid roll-out on a staggered two-week programme, as this is often the safest and quickest approach. However, if there is a specific business need to adopt a different approach, we can do that."*

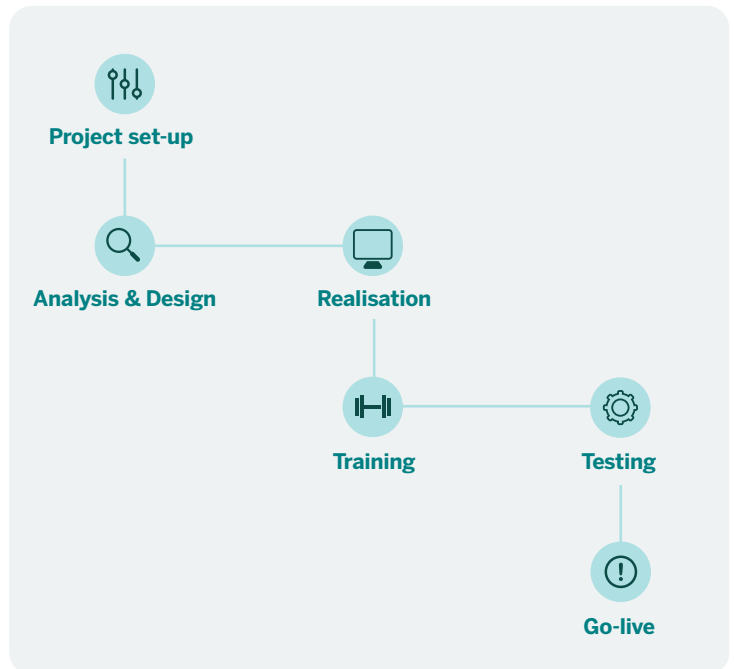
When it comes to implementations of ePMA systems, speed, along with quality, is of key importance. While the introduction of electronic prescribing systems is known to bring a plethora of benefits such as reduced medicine administration errors, reductions in illegible prescriptions, transcribing errors, or the loss of paper charts, the use of paper alongside electronic systems, even for a short time, brings its own risks (e.g. missing scheduled medicine doses or duplication of medicine if records are not cross-checked). Therefore, trust-wide implementations are suggested to proceed quickly and safely.



# Phased approach to implementation

Better has developed an implementation methodology from its previous experience with an aim to assist and guide the project team at the Trust for quality implementation of Better Meds.

The implementation methodology/plan for ePMA devised by Better consists of **6 phases**:



Better can provide detailed documentation on the implementation methodology to the Trust, which can serve as a user guide for the implementation of the ePMA.

Project set-up is the first phase of the methodology. It provides an overview of how to bundle up all the actions and tasks required for implementation in later phases and

identifies key roles which will be required to overlook/lead the phases of the implementation project. Better team also actively engages with the project team on a regular basis to adapt to any changes or unforeseen challenges.



**Barbara Arroyo**, Interim CCIO at SLaM, said:

*“We care for people who have severe mental illness, so it’s very complex. It doesn’t just involve mental health; it involves physical health, social circumstances, social care, plus we have to follow the mental health law. We need systems that bring together the information at the point of care. The more collaborative decisions we make when treating this long-term illness, the better outcomes we see. ePMA helps with our medication pathway – one of our main interventions – making it safer and more available. It is improving the patient experience by making their care continual across services.”*

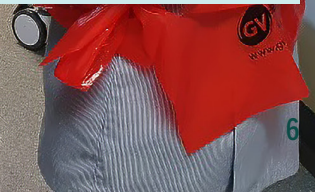


To deliver a system (BM) which would fit the work processes at the Trust, close engagement between the Better Meds team and the Trust team is essential during the Analysis and Design phase. Better closely associated with the project team at SLaM (through the partners) to map the exact procedures (work processes) that best suit the Trust and its patients through a combination of micro-services and personalized approach. Stefan Siekierski explained: *“This involved working collaboratively to undertake a full scoping exercise, with workshops to map 21 current and future states to ensure Better Meds could meet the trust’s specific needs and that each stakeholder had an equal voice in shaping the system.”*

Christine Wadsworth said: *“Trusts need to plan how the ePMA project interlinks with other digital plans, what wards or teams may have additional software that will need to be integrated, e.g. Patients under the care of OHFT often move between inpatient and community settings and so it was important that a patient’s medication could be accessed in these different settings.”*



**During the realisation phase, the technical backbone of Better Meds for users is designed considering all required configurations.**



Additionally, required integration for interoperability purposes is assessed and implemented. Better team initiates a configuration workshop which is followed by meetings between the technical team at the Trust and Better to deliver a version of Better Meds which covers aspects of clinical safety and aligns with the Trust's requirements by configuring Better Meds accordingly.

Furthermore, to achieve the maximum benefit from the implementation of an ePMA, it is essential that it is integrated with other required clinical applications and systems used by the Trust. Being a standalone application, Better Meds is a highly interoperable ePMA system which can easily be integrated with Trusts EPR/PAS systems, laboratory systems, pharmacy stock control systems and many others. However, it is essential that thorough Testing is done to validate the desired outcomes from the integrations. Better technical team is a call away to provide guidance and inputs for any integration required.

**Better recommends that Trusts, during the initial stage of the project, decide on a pilot ward (covering the essential requirements) and, if possible, already devise a phased ward-by-ward rollout plan already, considering the order in which the ePMA is to be rolled out around the hospitals and Trust. The goal is to minimise the disruption of staff and patients while taking into consideration the possible safety implications.**



Oxford Health NHS Foundation Trust opted for a phased rollout approach. **Nicci Wilson**, ePMA Programme Manager at the trust, said:

*"We chose an older adult ward as our pilot ward as it had patients with the widest range of medications. It's also a slow-moving ward, and the turnover of patients isn't high, which gave us a chance to test the system and make any adjustments before moving on to other locations."*





## In-depth understanding

Better team has gained some in-depth understanding of how to assist and consult Trust's team for a swift and quality implementation of ePMA. It has been noticed how important it is to dedicate time during the initial stage of the project for planning. Better team assisted the project team at the Trust in every way possible in planning their timelines, resources, and actions.

Better team organises **Clinical Engagement Day** at the start of the project to engage and interact with the clinicians and staff at the Trust. These engagement sessions are organised for all clinicians. They are also done for clinicians with a specific role (nurse, pharmacist, doctor) to get a holistic overview of the expectations from an ePMA system and to build interest and excitement for the ePMA system.

Following this, Better consolidates all key requirement specifications in which all relevant stakeholders from the Trust's side are consulted, including nurses, clinicians, doctors, pharmacists, and board executives. This was of particular importance at South London and Maudsley NHS Foundation Trust (SLaM) – the first mental health trust to deploy the Better Meds ePMA solution. As a mental health trust, its processes and needs differ from acute trusts, and SLaM was keen to ensure that any ePMA system would provide the appropriate level of support to all clinicians.

Better encourages the Trust to organise such engagement workshops often during the implementation project to keep the interest and motivation of the staff within the Trust/ Hospital. Better team is always happy to help and assist these engagement workshops in any capacity.



**Lex Moon**, Lead ePMA Pharmacist at OHFT, added:

*“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.”*

It is essential to keep all the stakeholders engaged during the implementation journey. Better recommends a training programme, which includes onboarding/training of the project team members during the initial period of the project, and *train the trainer* workshops for *super users* who would conduct the training of the end-users later.

**Better team noticed a unique approach from SLaM as they conducted “dress rehearsals” prior to the pilot go-live to test its plans and identify any issues in advance. This enabled the team to adapt workflows accordingly and streamline processes before the full go-live.**

The *dress rehearsal* learning from the SLaM implementation was also replicated in another mental health trust – OHFT. Again, Better took a co-creation approach in partnership with the trust. Together they planned a thorough, robust release programme and reconfigured the ePMA solution to tailor for use in this specific mental health setting.

Additionally, this strategy was something that Nicci Wilson, ePMA Programme Manager at OHFT, particularly valued.

*“Better has been really flexible. The team understood that mental health trusts have different needs to acute units, and they have been very receptive to working with us to ensure that the ePMA system suits our needs.”*



## Identify issues and adapt

Even though it has an impressive track record of successful NHS implementations, the Better team remains committed to learning and adapting its implementation methodology to suit each and every trust they serve. They continue to gather data, analyse and apply learning on each deployment to ensure they continue to offer the best possible service.



**Daniel Ivison**, Lead Clinical Pharmacist at NCIC, found the clinical knowledge of the Better team invaluable during the implementation of Better Meds, with the team ensuring they understood any issues that arose.

*“Christine is very experienced as a pharmacist and knowledgeable in the use of the Better Meds system. If we have an issue, she asks appropriate questions to ensure she fully understands the needs of the trust before providing us with an answer.”*

Christine used her previous clinical experience to help NCIC plan how syringe drivers are used in the care of palliative patients in different clinical settings and how the Better Meds system could support the trust.

Daniel added: *“Christine has previously worked in a hospice, so she was able to use her knowledge of palliative medicine to support us in finding a solution that suited the needs of the palliative care team at our trust.*

*The pharmacy clinical team at Cumbria have spoken highly of Christine and the Better team concerning the pharmacy review processes in the Better Meds system. The implementation meant a huge change of practice for the pharmacy team, and speaking to Christine made them feel more comfortable with the changes, knowing that the supplier was listening to their needs.”*



## Constant feedback loop

During implementations, Better adopts a constant feedback loop to ensure any issues are tackled quickly. This is a significant benefit when adopting a phased deployment approach, as data collected from each ward go-live can be analysed, and processes can then be streamlined for implementation in subsequent wards. In the case of SLaM, this resulted in a 70% reduction in issues reported following the second ward compared to the first.

This shared learning extends beyond the insights gained within an individual trust, with knowledge shared between similar trusts. Stefan Siekierski said:

*“While each trust will often have unique requirements or ways of working suited to the needs of the particular patient cohorts it serves, there are also many similarities. We offer advice to our customers based on our previous experiences of implementations, and we also put our customers in touch with each other so that they can share their experiences.”*

The Better team connected the IT leads from North Cumbria Integrated Care NHS Foundation Trust with other trusts so the team could discuss any challenges and share insights. Daniel Ivison said:

*“The Better team was able to understand our needs and offer advice based on experiences from implementations at other similar trusts. We were put in contact with other trusts to ask questions directly and learn from them. This enabled us to plan more successfully for our roll-out, allowing us to foresee any potential challenges so that we could address these proactively to ensure a smoother roll-out process within our own organisation.”*



## On-site support

**Better is committed to placing a team on the ground during each implementation – even when there are go-lives at multiple trusts on the same day.**



**Ashok**, Implementation Consultant Associate at Better, said:

*“We know the importance of having staff on the ground to support the front-line users of our system during go-live. We have a comprehensive training programme for staff to undertake to ensure that they are trained on the new ePMA. However, it really helps confidence levels for them to know that there are people there to ask for help, even if it turns out this isn't required.”*

The on-site teams are also supported by technical teams at the Better headquarters, who are available to address any application-related issues that may emerge and do a quick resolution.

South Tees Hospitals NHS Foundation Trust went live with Better Meds on the same day as Oxford Health NHS Foundation Trust. Nicci Wilson said:

*“During the go-live, Better provided fast and reliable communication, and any problems were sorted quickly and efficiently. We were aware that South Tees was going live with its ePMA system at the same time, but this did not affect the service we received at all. We always felt supported and that the Better team were there should we need them.”*

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## Better data, better care.



**Better d.o.o.**  
Štukljeva cesta 48  
1000 Ljubljana  
Slovenia

[www.better.care](http://www.better.care)

**Better Ltd**  
Capital Quarter No.4  
Tyndall Street, Cardiff,  
Wales, CF10 4BZ

[info@better.care](mailto:info@better.care)

**Better Deutschland GmbH**  
Ballindamm 39  
20095 Hamburg  
Germany

  @BetterCareIT

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