Patientrack (eObs) Quality Measures and User Experience

Clinical Implementation Team
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Background

Patientrack (eObs) was implemented in NHS Tayside in June 2023 to August 2024. Post-implementation, the Clinical Implementation Team reviewed the initial quality measures identified in the Business Case including feedback from staff and their user experience.

Aim

To gather user experience information that would form part of the end phase project report. This data would then be available as part of a lessons learnt process to enhance future project work.

Method

The Clinical Implementation Team walked the wards to gather qualitative and quantitative real time feedback from staff using Patientrack (eObs). Data was collected from staff who were the early implementers in acute and community partnership inpatient areas. Two questions were asked that would help to inform the quality measures and users experience as outlined in the Business Case:

Q1 - On a scale of 1-terrible to 10-excellent, how positive was your experience of using Patientrack?

Q2 – On a scale of 1-not at all to 10-greatly, how do you feel Patientrack has enhanced patient safety?

Results

Q1 - On a scale of 1-terrible to 10-excellent, how positive was your experience of using Patientrack? The average score was 8.5/10:

	Number of staff responses (out of 26 surveyed)	% of staff responses (out of 26 surveyed)	Average Score
10 – (Excellent)	6	23.0%	8.5
9	5	19.2%	
8	12	46.1%	
7	2	7.7%	
6	1	3%	
5	0	0%	
4	0	0%	
3	0	0%	
2	0	0%	
1 – (Terrible)	0	0%	

Q2 – On a scale of 1-not at all to 10-greatly, how do you feel Patientrack has enhanced patient safety? The average score was 7.7/10:

	Number of staff responses (out of 26 surveyed)	% of staff responses (out of 26 surveyed)	Average Score
10 – (Greatly)	2	7.7%	7.7
9	3	11.5%	
8	12	46.2%	
7	6	23.1%	
6	0	0%	
5	3	11.5%	
4	0	0%	
3	0	0%	
2	0	0%	
1 – (Not at all)	0	0%	

Achievements

One of the biggest achievements from the Quality Measures is that the accuracy score for NEWS2 will always be 100% due to the mandatory fields and system calculation which removes the potential of human error. A pre-implementation study demonstrated accuracy of an average of 55% when using a paper record.

The NEWS2 score for each department will also reflect the actual average as Patientrack includes every set of observations recorded, compared to the previous 20 sets that were historically recorded on GDET.

Contact email: Tay.eObs@nhs.scot
References: Burke JR, Downey C, Almoudaris AM. Failure to rescue deteriorating patients: a systematic review of root causes and improvement strategies. Journey of Patient Safety 2020.

Qualitative Data

Staff were also asked to provide any additional feedback they would like to share. Below are the direct quotes from the staff who were the early implementers of Patientrack, pictured with Sandra (SCN) and Sheila (SN) in Tay Ward PRI who were the first staff members to use Patientrack:

"Good the doctors can see it from anywhere."

"It has a positive impact on Patient Safety, if you see a NEWS, you need to act on it."

"I love it."

"I like that it links to the doctors in the back office."

"When it turns red, everyone is aware so nobody is forgotten about, other nurses will help you do your obs if they are needing done, so we help each other."

"It's easier to see trendlines and if this is normal for a patient to see consistency."

"You can see trendlines better than on paper as handwriting can be terrible."

"It's much easier than paper and clipboards. I hate clipboards, they go missing and if you drop them it wakes everyone up."

"Doctors can review it as part of the ward round in advance and it's great they can jump on any PC."

"It's good you can see a sudden change in your patient and others are aware as they can also see it."

"Out of hours are really good at responding to high NEWS and call us straight away."

Next Steps

The next steps are to release the additional care assessments into the live environment, this includes MUST, Weight, Nutrition, SSKIN, D-PURA, Falls, Post-Falls, Bedrails, PVC/Combined lines, Catheter bundle (neurological assessments are already in use in the live environment).

The system also has Wi-Fi capability which would reduce clinical time spent manually entering vital signs. There is also the potential to build in an auto alerting system to identify signs of patient deterioration, this would generate an auto-page/call to the responsible clinician should the patient have a high Early Warning Score (NEWS2/MEWS/PEWS), additional tests of change into these potential areas of time saving and enhanced patient safety outcomes would demonstrate maximum use of Patientrack as a clinical resource.

Case Study

The biggest achievement from the qualitative feedback from staff was how effectively the Hospital at Night Team (HAN) used the system to be visually alerted and to respond to deteriorating patients. Staff said that they would often receive a call to ensure a plan was in place or to offer support, this feedback was reiterated across the site. This proactive approach to the way in with HAN use the system has been a positive cultural change in demonstrating the ability to actively detect patient deterioration and to provide an early response which in turn, is key to improving patient outcomes, JR Burke et.al (2020). Staff feel that this reduction in delay is supportive and pro-active, a new way of working that benefits both patients and staff.

The Clinical Implementation Team asked HAN to comment on their thoughts about Patientrack:

"It's really helpful when referring to seniors and other specialities, it's great to have all the information in one place." – H Wightman (FY1)

"This promotes closer monitoring of patients and early detection of deterioration. This is used to discuss patients at handover to ensure a plan is in place. It also aids SBAR communication from ward staff, promoting patient centred care which is the ethos of H@N." S Webster (ANP)

"It's a very user friendly interface. I find it beneficial to individualise parameters, especially for long stay patients.". – H McPhee (FY1)

"It allows us to see the acuity of the wards in the OOH period and we can review trends remotely. It allows ANP's to discuss unwell patients with Sr Dr remotely." – H Bisset (ANP) & G Hill (AP)

"Patientrack is great, I can see all my acute patients in real time across the site." – R Bednarz (ST1)

"H@N keep track of high NEWS throughout the whole hospital, this enhances patient safety due to the quick response of the team." – E jones (T-ANP)

"It's easily accessible for all healthcare professionals, which is effective for patient care." – D Hansen (StN)

"This allows the MDT to access observations more efficiently which allows for quicker escalation, improving patient safety." – J Vaughan (AP)

"I am a Champion and this has greatly improved patient safety as it allows you to closely monitor patients of concern and identify patients requiring rapid review. It's really accessible, easy to use and saves time in the OOH period ." – N Crabb (ANP)