



3 better joined-up care

Electronic Patient Record (EPR) Programme



Proud to be part of



Queen Elizabeth Hospital Kings Lynn
Norfolk and Norwich University Hospitals
James Paget University Hospitals

Working Better Together

A message from the EPR Programme Director

Across the three acute hospitals in Norfolk and Waveney we are working on our biggest digital programme to date; introducing an Electronic Patient Record (EPR) system. This programme is a key enabler of our transformation strategies for Acute Clinical Services across all sites.

The EPR is a digital tool which will essentially replace paper-based patient records over time.



Martin Evans
EPR Programme Director

This technology will bring many benefits to our staff, patients and communities, ultimately helping us provide better, safer joined-up care for everyone.

The EPR will improve care by enabling clinicians and operational staff to access information quicker, and help them make more effective and personalised decisions, as it provides staff with instant, real-time information.

The EPR programme will take time to implement across our three acute hospitals with us aiming for the system to go-live in 2026.

This is not simply a digital programme; this is one of the biggest pieces of clinical and operational transformation we will ever complete and it is vital everyone works together on the changes to come. Everyone in our acute hospitals will play a part in bringing the EPR to life and beyond, as we learn together about how to use it to its full advantage over the years to come.

As someone who has overseen the implementation of several EPRs across the country, the biggest piece of advice I'd give to everyone is to get involved now – so many times I've heard clinicians and operational staff say that they wished they'd got involved in an EPR programme earlier!

Thank you for your interest in the EPR programme and ongoing support as we move through this exciting journey.

What is the EPR?

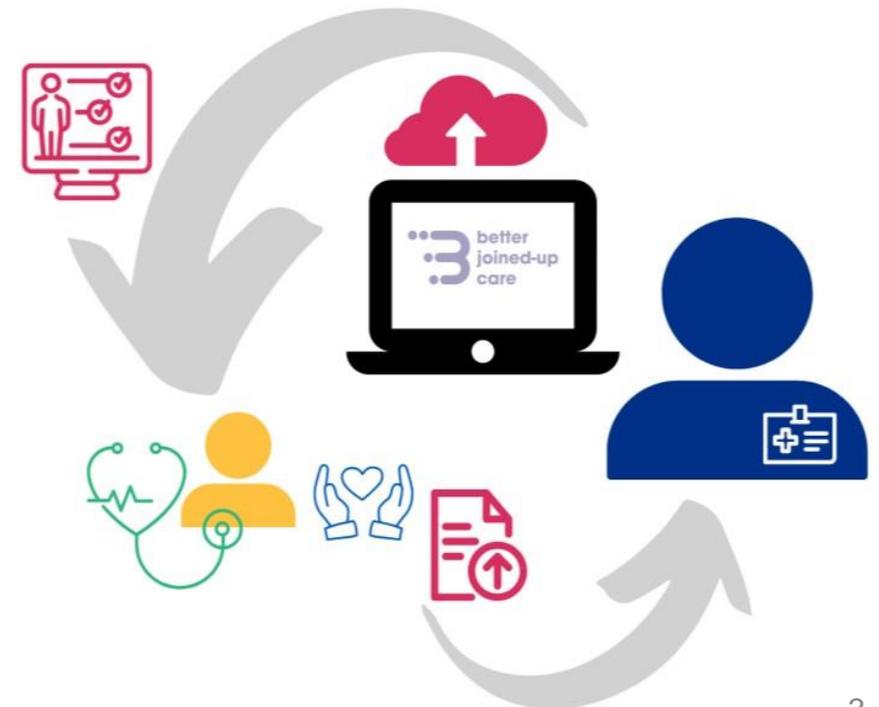
The EPR programme is a flagship project for our three acute hospitals in Norfolk and Waveney and will enable organisation-wide transformation of how we work and deliver care. The digital patient record solution is part of a national ambition the government has to revolutionise how information is stored to offer better joined-up care for patients. It is also a critical part of the Joint Acute Clinical Strategy for the Norfolk and Waveney Acute Hospital Collaborative.

EPR stands for Electronic Patient Record. The EPR is a digital system to manage clinical information, making it easily available for use by health and care staff.

At the moment, many parts of our acute hospitals in Norfolk and Waveney are reliant on paper-based patient notes which can take time for staff to find and complete. The EPR programme will switch the hospitals from using paper to digital notes which are held in one system for many of our clinical and operational services. Some services will continue to use specialist systems which will link into the EPR for information sharing.

The three Trusts who make up the Norfolk and Waveney Acute Hospital Collaborative and will share a single EPR are:

- The Queen Elizabeth Hospital King's Lynn
- Norfolk and Norwich University Hospital
- James Paget University Hospital



Benefits of the EPR

The EPR gives health and care staff instant and secure access to the information they need to provide better joined-up care and improved experiences for patients in our acute hospitals.

The EPR:

- Will provide real time information available when it is needed, where it is needed.
- Will enable faster, more personalised care by enabling quicker access to patient information.
- Can help to ensure that patients are seen in the right place by the right person by providing accurate information about their needs.
- Will support collaborative working across multiple patient pathways by providing a single source for patient information.
- Simplifies the process for recording up to date information and supports providing more joined up care for staff and patients.
- Can help our acute hospitals and overall health system improve care quality, outcomes and patient experience.
- Will reduce the chance of human error by reducing the need for paper records and sharing information between health and care professionals.



Ensuring that we have a robust framework for realising, measuring and reporting of benefits is a key part of our programme and all staff will have a role to play in this.

What does it mean for me?

As a member of Staff

Clinicians

Clinicians will have more information at their fingertips to make better, more effective decisions. You'll have automatic access to decision support tools, meaning your decisions will be made based on the best available information.

Administration staff

Paper records will be replaced by digital records and there will be new ways of working introduced to take advantage of this digital approach. Administration staff will also find a number of administrative tasks easier to manage as information will flow around the organisation more easily.

The EPR will:

- **Make you more efficient**
- **Create a smoother care journey for your patients**
- **Enhance communication across clinicians and teams**
- **Reduce duplication and some of the data collection burdens from people by capturing some things automatically**
- **Enable you to monitor patient outcomes much more effectively and build upon what works for patients**

What does it mean for me?

As a Patient

The EPR will improve the experience of care patients have in any of our three acute hospitals. The EPR will give staff access to your important health and care information at each site so your interactions with services are readily available to view.

The EPR will make patients safer with digital health records flagging up things like allergies and past interventions. These changes will also allow patients to engage with their care much better and strengthen the partnership between them and clinical services.

In the future, the EPR could offer opportunities for us to explore other ways of capturing health and wellbeing information into the system already used in some settings (smart devices, patient questionnaires, at home monitoring etc).



Staff FAQs

Why are the acute hospitals getting an EPR?

We are getting an EPR to give people and communities across Norfolk and Waveney better joined-up care.

The digital patient record solution is part of a national ambition the government has to revolutionise how information is generated, securely stored and shared to improve care.

The EPR will transform the way we deliver care to patients with all patient information available electronically, on screen, at any acute hospital location, at any time.

Will it mean extra work for me and my teams?

As with any change, implementing new ways of working take time to bed in and become business as usual. In the long term, the EPR will only improve efficiency and remove the burden paper-based records bring to clinical and administrative staff.

The way we manage our information will change significantly and this will have a major impact to many staff. There will be new equipment and devices for everyone to learn how to use, new software to become familiar with and new ways of working through process re-design. All of these changes will be rolled out in a manageable way. We will provide training and support in many forms. This is a very exciting journey and we want to bring everyone along smoothly and considerately.

How does the EPR programme sit with the Acute Hospital Collaborative's vision?

The vision of the collaborative is:

By working together, we will provide people with high quality hospital care when they need it and supporting people to get the care and treatment they need.

The EPR programme is the biggest, joint working project the three acute hospitals have collaborated on and the system's entire aim is to improve the quality of care people receive by making information readily available at any time.

How can I get involved in the EPR programme?

We encourage staff from all roles to get involved and engage with us on the EPR programme! From becoming part of our Change Network to an expert EPR user who helps staff learn the new system, there's lots of ways you can be a key part of our EPR story.

Visit the ['Get in touch' page](#) of the EPR Hub to contact your local EPR team.



What is the latest EPR news?

MEDITECH selected as Supplier for EPR system

After a rigorous procurement process, MEDITECH, a world leader in integrated digital systems, has been selected as the supplier for our new Electronic Patient Record (EPR) system.

Following the successful approval of the financial plan by the three Acute Hospital Trust Boards and NHS England at the beginning of 2023, this partnership marks a significant milestone in the collaborative's ambition to revolutionise healthcare information storage and provide better joined-up care.

MEDITECH Expanse is the name of the software solution that will become our EPR. It offers a flexible and evolving solution that improves business practices, reduces clinician burdens, and ultimately enhances patient outcomes.

MEDITECH's commitment to creating technologies that support secure and cost-effective care, along with its strategic partnerships with Google and Apple, makes it a strong partner for achieving digital transformation in our acute hospitals.

MEDITECH



What is the difference between the EPR and the Norfolk and Waveney Shared Care Record?

The EPR is a digital information system which staff will be able to view and record care information on. EPR notes will only be editable and accessible for staff in the three acute hospitals.

The Shared Care Record is a way of bringing together your most important records from different organisations involved in your health and social care. These are visible to frontline health and social care professionals, at the point of care, in a read-only view. This is much wider than just the acute hospitals and includes partners in the Integrated Care System such as primary care, mental health, community and social care providers.

Eventually, once the EPR is rolled out, a read-only view of your acute hospital notes may be available on the Shared Care Record to help give staff in the other parts of the health and care system who are directly involved in your care, a holistic view of your health and wellbeing.



Embracing the change

It is normal to have worries and fears when changes are being made, especially big ones, and it is important that you raise and address them.

As a programme team, we accept that everything will be new and, realistically, new processes may slow staff down initially during training and the early go-live days. However, once the new system is embedded, we fully expect to see significant benefits for everyone and know from other organisations where EPRs have been introduced, staff much prefer the new ways of working and would never go back to paper-based records.



Data security

Will my health and care data be secure on the new system?

It will be far more secure than it is on paper. The information will be stored off site and the data will therefore be less vulnerable to cyber-attacks or to outside agencies. All patient data will be stored in the UK.

Who will have access to the data?

We will use a role-based access system which only allows staff who have a legitimate relationship with the patient to be able to access the information. The EPR will also allow us to track access and prevent access to information where appropriate.



Will the data be monetised?

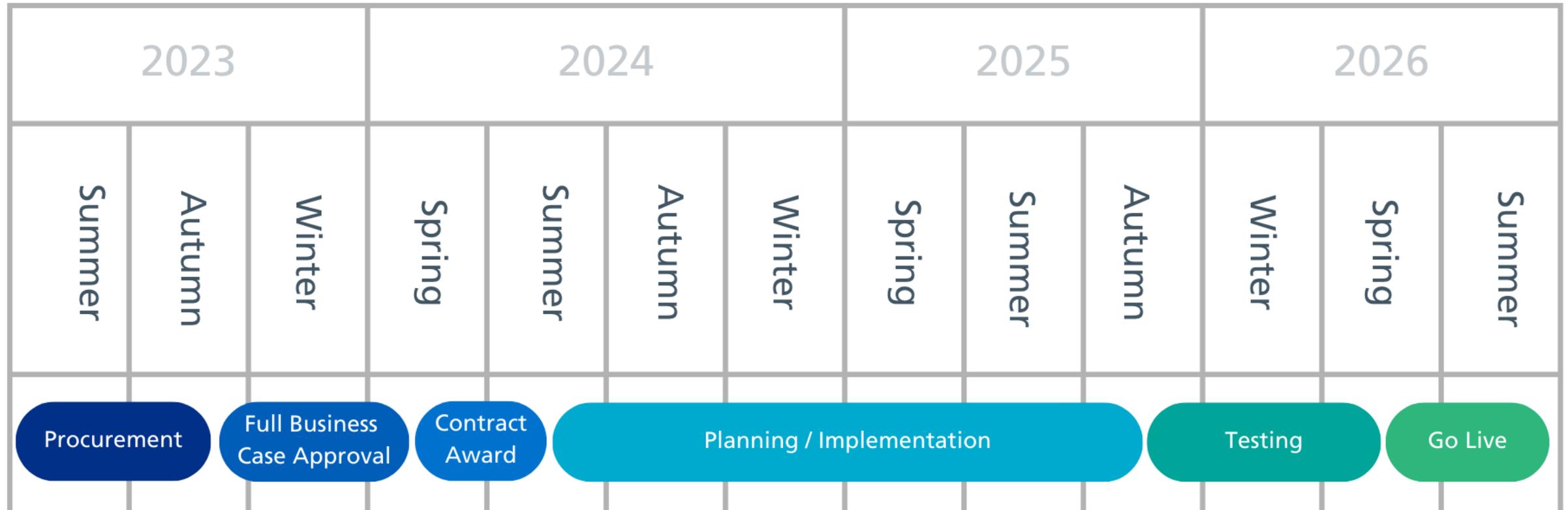
Absolutely not. There's no intention within any of the Trusts to monetise the data. We will use the data to enhance treatments and to instigate improvements across the acute hospitals to increase efficiency and the patient experience, but it would all be done anonymously.

Can third party organisations access the data?

All contracts conform to current legislation and no data is accessible to any outside agency.

The EPR Timescale

Below are some of the key points on the journey ahead:



Meet the 3-Acute EPR Team



Alice Webster
EPR Programme
Senior Responsible Officer

'The EPR offers us a chance to reshape the way we approach patient care, ensuring our staff have the information they need at their fingertips when they need it can only mean enhance care for our patients and make a smarter, more efficient working environment for our staff.'



Dr Ed Prosser-Snelling
Executive Chair of Clinical Design Authority
and Senior Responsible Officer for NNUH

'Patients expect data to flow between the hospitals and into their GP and community services, and the EPR is the way in which we will achieve that and will become a foundation for us to build a new way of working on.'



Martin Evans
EPR Programme Director

'The EPR is the best investment in technology and people to improve the Trusts' ability to deliver high quality clinical services.'



Mr Vivek Chitre
Senior Responsible Officer for JPUH

'The EPR is hugely important for improving every facet of quality including experience and effectiveness – but its greatest importance for me is the improvement to patient safety.'



Merwyn Agcaoili
Chief Nursing Information Officer at QEH
'The improvement of clinician's efficiency and productivity leading to improved patient outcomes as a result of EPR excites me the most.'



Lisa Cooke
Interim Senior Responsible Officer for QEH

'The NHS works in silos, an EPR can only help us to start considering our patients holistic needs.'



Ulrika Crossfield
Transformation and Adoption Lead

'Having key clinical information available at a point of care to support our staff make the best possible decisions for our patients is a core part of the national and local strategy. Without the EPR this vision can't be realised.'



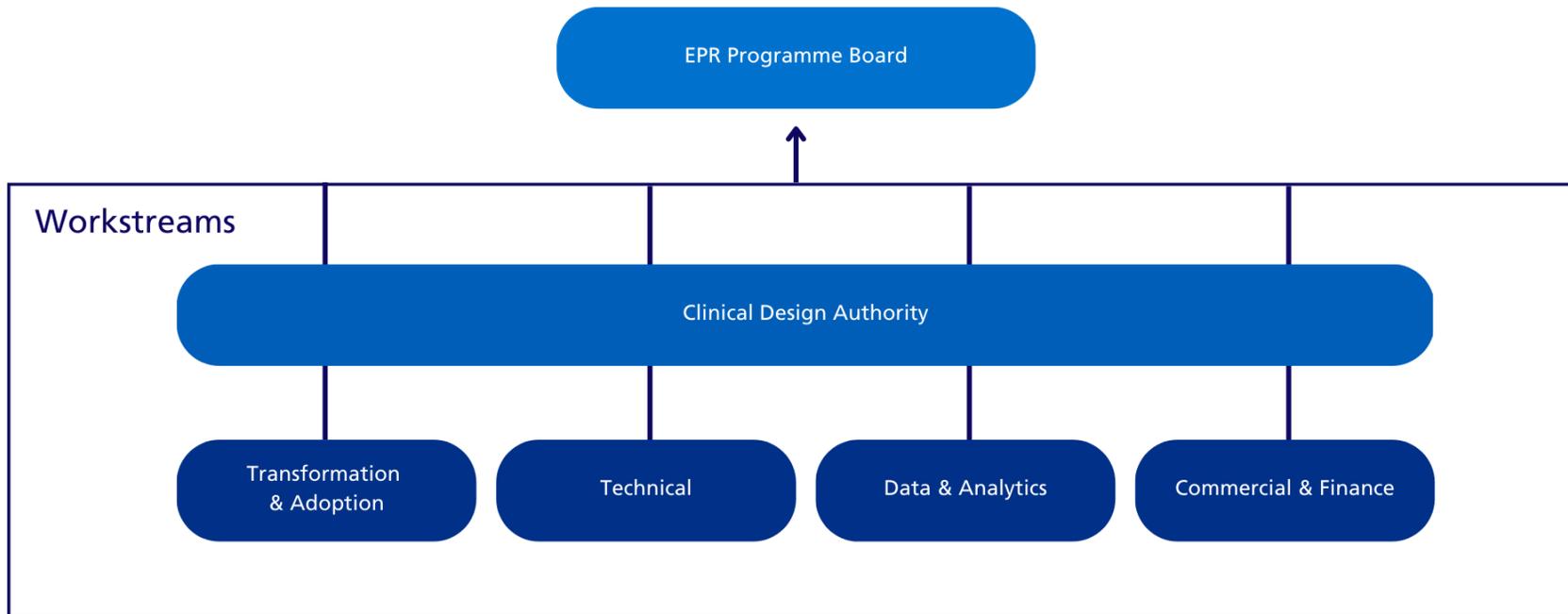
Emily Wells
Chief Nursing Information Officer at NNUH
'I am looking forward to ensuring visibility of patient records across our 3 acutes, standardising processes and ultimately improving patient experience in the process.'

Meet the 3-Acute EPR Team

	<p>Reet Johal Chief Clinical Information Officer at JPUH</p> <p>'The EPR will allow clinicians fast access to clinical information which will be available at their fingertips, giving them more time to focus on caring for their patients.'</p>	 <p>Tess Jones Operations Lead at NNUH</p> <p>'The introduction of an EPR is a major transformation and I'm excited about being part of its implementation.'</p>	 <p>Penny Bain EPR Programme Central Accountant</p> <p>'The EPR Team are a passionate and like-minded group that all care deeply for improving the clinical care of our population. Having such a wide variety of staff from all backgrounds and departments coming together to focus on delivering such an innovative project is inspiring.'</p>
	<p>Rachael Rider Chief Nursing Information Officer for JPUH</p> <p>'This is a fantastic opportunity to bring colleagues together to develop the best possible EPR that will improve the delivery and quality of joined up care across our system.'</p>	 <p>Britt van-Rooyen Chief Operations Information Officer at JPUH</p> <p>'The EPR will be the biggest opportunity that the 3-Acute hospitals get to absolutely transform how staff work with information, to improve the care of our patients.'</p>	 <p>Lisa Galbraith EPR Programme Procurement Lead</p> <p>'An EPR will save our colleagues so much time – time which is better spent with our patients, rather than administration tasks. Our clinical staff will be able to spend more time with our patients, and maybe even see more patients than before.'</p>
	<p>Sue Balmford Operation Lead at QEH</p> <p>'The EPR is a great example of us taking advantage of 21st century technology to deliver safer, higher quality patient care.'</p>	 <p>John Gash EPR Programme Chief Technical Officer</p> <p>'As a technologist, I'm most excited to help to bring a modern digital system into service that will underpin clinical services for many years to come.'</p>	 <p>Amy Metcalf EPR Programme Communications and Engagement Manager</p> <p>'It's exciting to see all three acute Trusts working together on one of the biggest, patient improvement projects ever in Norfolk and Waveney.'</p>

Meet the EPR Workstreams

The EPR Programme has a robust governance structure in place to ensure it runs smoothly and experts from all three acute Trusts are involved in decisions. The EPR Programme Board has oversight of five workstreams which work on various areas:



The EPR Programme Board reports to the individual Acute Hospital Trust Boards, the ICS Digital Services Strategy Group and the Committees in Common.

For information about each Acute Hospital Board click below:

[Queen Elizabeth Hospital Kings Lynn](#)
[Norfolk and Norwich University Hospital](#)
[James Paget University Hospitals](#)

For the latest news visit nwepr.co.uk

If you have any questions, please get in touch by emailing nwicb.epr@nhs.net

