



Planning for Value: CHFT's Approach to Benefits Realisation

CASE STUDY



In 2020, two forces converged to accelerate implementation of real-time location system (RTLS) technology at Calderdale and Huddersfield NHS Foundation Trust (CHFT).

The first was the NHS's Scan4Safety initiative, which aims to apply global standards at the point of care to improve quality and safety. As part of the West Yorkshire Association of Acute Trusts, CHFT had received funding to implement solutions supporting the Scan4Safety goal of "Right Patient, Right Product, Right Place, Right Process." CHFT's Digital and Biomedical Engineering teams had identified real-time asset tracking as a strong candidate, and a business case was taking shape early in 2020.

Then a second, unexpected force—the COVID-19 pandemic—emerged. In the face of case surges, CHFT needed much faster, more efficient tools for locating needed equipment and deploying it to intensive care beds to treat COVID patients. The urgency of these challenges put real-time asset tracking on a fast track. In very short order, CHFT deployed the Securitas Healthcare RTLS platform powered by MobileView® software for asset tracking.

In other words, the business case leapt from the spreadsheet to the ward floor—and continues to demonstrate value for CHFT.

CHFT's journey provides a strong example of what's possible with an investment in real-time technology. It also offers a model to follow in terms of establishing clear value goals—and then tracking progress against those goals. That's a primary focus for Senior Project Manager Joanna Gadd, who oversees CHFT's formal approach to documenting benefits realisation.

As new products and technologies are implemented at the trust, Joanna takes the lead in terms of honing the target benefits and documenting progress against those goals. As she explains, "It's important that we

articulate goals that are specific and measurable—goals that go beyond 'improve patient safety.'"

For asset tracking, the targeted benefits include:

- **Ensure the whereabouts and maintenance status of vital medical devices are always known and that equipment is readily available when required for patient care;**
- **Significant reduction in clinical time spent looking for medical devices;**
- **Fewer devices lost or misplaced, reducing unnecessary waste;**
- **Releasing staff from manually tracking misplaced equipment.**

Gadd recommends conducting baseline studies to capture tangible numbers for associated time, effort, expenses and/or other metrics prior to solution implementation. Because CHFT implemented the first RTLS solution—asset tracking—so rapidly, there was not time to conduct such studies. Instead, the team used surveys to estimate the time nurses had been spending searching for equipment. They used those estimates alongside hourly wages to quantify cost savings.

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– Joanna Gadd, Senior Project Manager, CHFT



“Ideally, we would have captured more accurate data about how nurses were finding assets before the MobileView platform. I would recommend that other hospitals invest the time to set those baselines, as it will make it easier to track benefits realised.”

– Joanna Gadd, Senior Project Manager, CHFT

Now that the asset tracking solution has become a seamless part of day-to-day care delivery, Gadd and her colleagues are able to focus on establishing baselines and target benefits for the trust’s second RTLS solution: real-time environmental monitoring. Existing environmental monitoring processes are manual and require nurses to check and record temperatures on a regular basis. There is no automated mechanism for alerting when temperature or humidity levels are out of range or for generating logs of environmental conditions to support Care Quality Commission (CQC) audits.

The team continues to implement and test the new, automated solution. They are also working to establish new processes for responding to “push” alerts. This is more complex than real-time asset tracking, for which clinicians “pull” the information as they need it. As they work through these nuances, they also have identified some specific, measurable benefits they will monitor and measure going forward. Several examples appear below.

GOAL	BASELINE	TARGET
All medicines stored at correct temperature, available for immediate use per CQC Compliance recommendations.	One manual check every 24 hours.	One automated check every hour.
Real-time alerts enable proactive intervention/response to prevent issues of inefficiency and ineffectiveness of the drug.	One manual check every 24 hours.	One automated check every hour.
Removing paper from the process will provide an auditable capability.	Four days to scan forms followed by analysis and entering onto a spreadsheet.	Spend less than one hour to get information through MobileView report.

In addition to the benefits that the team has targeted, they know that new technology also helps prevent and surface other opportunities, as well: “Once the temperature monitoring tags are fully implemented, we expect them to help identify areas where we have room for improvement,” Joanna says. “It won’t be the solution that fixes it. It’s the people that fix it. But it gives us the hard data to kickstart those conversations and drive real improvement.”

Indeed, for Joanna and her colleagues, people are critical to realising the value of any investment. She recommends engaging people early and giving them a chance to see the new technology. “Along with the intended benefits for the organisation, be clear about the benefits that your end users should experience as a result of the new solution,” Joanna says. “Rather than doing something to them, do something with them. Bring them along for the journey.”

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