

PERINATAL FORUM

Connecting for Health

Maternity Systems

How it all began

- When? 20 years ago
- Where? Kings College Hospital
- Why? Timely, accurate, consistent information for care planning, risk management, litigation
- How? “In House” computer system
- Mistakes? “Hard coded”, inflexible, IT owned

Criteria for re-development

- Easy, fast and intuitive to use – little training
- Flexible – changing clinical practice
- Accurate, consistent data collection for care planning
- Validation at point of data entry – user definable
- Intelligent structured data entry– branching over irrelevant questions
- Confidential information
- Ability to adapt to local requirements – one size fits all?
- No duplication of effort – integration and sharing information
- Management information – timely, legible, shared, accessible – at your fingertips
- Data retention – 25 years – all data on line
- On –going support, consultancy and product development

Risk Management

- St Thomas' Hospital
- Escalation rules for risk management – defined locally
- “Copy forward” from previous episodes
- Decision support and alerts
- Clinical help text and suggestions
- Legality of clinical records – audit trail

Scope of Maternity Systems Today

- County wide – supporting multiple acute trusts
- Comprehensive EPR – Antenatal – Discharge
- Initiatives – Sure Start, Screening Programmes
- Management Information – departmental management, governance, audit, research, statutory returns
- Interfacing with Child Health, Social Services and new Children's Trusts

Today.....

- 20 years on – new technology – clinical practice – statutory requirements – 200 years of development
- Still essential:
- Clinical engagement for future developments
 - Manageable, measurable and affordable building blocks
 - Legality of records, flexibility, ease of use
 - Always moving forward.....supporting current working practices and service delivery
 - Fundamentally – the same criteria!