

Trust Board  
22-05-2007  
Agenda Item 10

**Item:**

**Cerner Millennium System Go-Live**

**Synopsis:**

This document outlines the process that was used to ensure that the new Cerner Millennium clinical patient system went live in the Trust with the minimum disruption to patients and staff.

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**Presented by:**

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**Action Required:**

**For information**

# **Cerner Millennium – Go-Live 20<sup>th</sup> April 2007**

## **1.0 Purpose**

The East Surrey Local Health Community (LHC) is delighted to announce that it went live with a new Clinical System called Cerner Millennium, at 9:00 pm on 20<sup>th</sup> April 2007.

This document outlines the processes that the Trust used to ensure a successful go-live of the new clinical patient records system. It covers the three week pre go-live period, the go-live date itself and the forty five day period after go-live.

## **2.0 Background**

NHS Care Records Service (CRS) is a ten year project comprising of four different stages. These stages are called 'releases' Release 0, Release 1, Release 2 and Release 3. The East Surrey LHC has now become amongst the first in England to complete Release 0. This release focuses on ensuring that the necessary foundation work is ready so that the rest of the project can be driven forward with a completion date of 2010.

The success of this project is pivotal to our plans to modernise the services we offer to local people and build a health service fit for the 21<sup>st</sup> century. [NHS CRS](#) is providing us with a unique opportunity to replace outdated systems for handling patient information and fully utilise the benefits of the latest working practices and the new technology available.

The LHC has worked extremely hard in close partnership with NHS Connecting for Health and our private sector colleagues Fujitsu Services on the thorough and extensive preparations required to complete this phase of the project.

It is important to remember that implementing a programme this size and scale is complex and will not always run smoothly immediately. As is inevitable in any large IT enabled change programme that is deploying into operational NHS sites which deliver treatment and services that are critical to care and service delivery, there are likely to be changes to deployment dates for a range of reasons that can either be supplier or NHS driven or a combination of both.

### **The Go-Live process – 'Cutover'**

The preparation for go-live started by entering a period of time called "cutover". This was when existing patient information was transferred from our old Patient Administration System onto the new Cerner Millennium clinical system. This period was meant to last for 10 days. During this time the CRS Project Team was meeting three times a day at 8am, 1pm and 6pm to

receive regular updates about progress and ensure that any problems were quickly dealt with.

During this period the project board identified a concern that delayed the go-live for a further 7 days while they sought assurances that the issues were resolved.

### **The Go-Live process – Authority to Proceed (ATP)**

Ten days prior to the go-live date and before the Trust entered into the final cutover period there was an extensive check that all of the necessary actions had taken place to make sure we were ready to go ahead. This involved all of the Trust senior managers, service managers and clinicians who were involved in the project signing off the work that related to their area.

This was followed by a similar exercise 3 days before go-live where all of the work that was required to proceed at that stage was again signed off by the appropriate manager.

This work was then completed on the go-live day itself by the signing of a final report by the Trust CEO Gail Wannell and the Director of Nursing, Irene Scott which signified that the Trust was ready to go-live.

### **The Go-Live**

After the signing of the ATP by the Trust executive managers the news went out at 9:00pm on Friday 20<sup>th</sup> April to 'Go-Live'. In preparation for this event we had divided the Trust up into zones. Each zone had a lead member of staff to coordinate all of the significant numbers of training staff (called Floor Walkers) and other champion users (who had received additional training) that were to support the normal system users in each area.

All of the additional support staff were employed in shifts to provide around the clock 24 hour support during the critical period of 5 days post go-live. The quieter weekend period was relatively trouble free and enabled a smoother transition to the use of the new system. When most staff returned to work on Monday morning many of the teething troubles were ironed out. From Monday onward, as so many users were starting to use the system and the out-patients departments were all operating normally the number of calls to the help desk increased significantly, but were all responded to in a proactive manner.

### **Post Go-Live – first week.**

For the first week post go-live the Project Board had arranged for a 'Gold Team' of key clinical staff, managers, support staff and supplier staff to meet on a regular basis to respond rapidly to any issues raised by the use of the new system. The Gold Team started meeting late on the first Friday night, with meetings then scheduled three times a day during the weekend. The schedule was then adjusted to twice a day at 12:00 and 6:00 pm after this

critical first weekend. After one week the group reverted to meeting daily with a gradual tailing off to twice weekly meetings as everyone became more familiar with the system.

### **Post Go-Live – notable successes**

- Within 15 minutes of Go-Live the first new baby details were successfully put onto the new system.
- Within 24 hours of Go-Live the Emergency Department were electronically capturing and managing in real time 100% of emergency care activity.
- Within 24 hours from Go-Live the Trust's Hospital bed state was 99% accurate due to the enormous efforts of the nursing staff and ward clerks.
- Floorwalkers who had supported other R0 Go-Lives commented how remarkable it was to have achieved all this within the first 24 hours.
- Theatre implementation of Cerner across both the East Surrey and Crawley hospital sites went extremely well.
- The dedicated efforts of the Patient Access Team have ensured that outpatient clinics across all sites were well prepared for the first full day of activity with the new system.
- Most of our clinic notes have been tracked successfully by our committed team of Medical Secretaries.
- The local IT team, have worked incredibly hard to prepare all devices for the go live and the performance of this element has exceeded all expectations.
- The IT Service Desk at its peak was dealing with 100 calls an hour. The Service Desk is working incredibly hard to resolve and deal with these issues quickly and efficiently and performance is continuously improving on a daily basis.

### **Post Go-Live – next 45 days.**

After the first week the Trust then returned to 'Business as Usual' with plans put in place to ensure that the clinical staff gained maximum benefit from the use of the system. During this period the hospital will continue to ensure that any outstanding items in the final 'work off' plan are delivered to schedule. At the end of the 45 days the Trust will then, if fully satisfied, formally 'accept' the delivered system and move on to the next phase of the CRS project, called 'R1' This will include the roll out of further clinical functions including the paperless ordering of Pathology, Radiology and other services. It will also be possible to post the results of these investigations back to the wards and departments electronically. This will lead to much faster and more effective clinical care for patients

## **Go-Live – the complete time line.**

3 <sup>rd</sup> April 2007	Signed ATP
3 <sup>rd</sup> April 2007	Entered Cutover
17 <sup>th</sup> April 2007	Signed second ATP
20 <sup>th</sup> April 2007 5pm	CEO and Director of Nursing authorised go-live
20 <sup>th</sup> April 2007 9pm	Went Live
20 <sup>th</sup> April 2007 11pm	Start of Gold Team meetings
20-25 <sup>th</sup> April 2007	24 hour support for staff
27 <sup>th</sup> April 2007	Started reverting to business as usual
4 <sup>th</sup> June 2007	End of 45 day period and acceptance of system

## **Challenges**

Any change project of this magnitude would not be delivered without significant challenges to the working lives of staff. The system is not a replica of the legacy Star PASS patient record system and therefore requires all staff to work in a different way. We have experienced significant challenges in ensuring the Out Patients system runs as smoothly as possible during the transition period. However, the change has had a demonstrable effect on the time it is taking to register patients into clinics and has generated queues at the reception desks. To mitigate against this problem being exacerbated, additional support has been given to all reception staff and this will continue for as long as deemed necessary, or at least until the end of the 45 day period.

Communications have been made to all key stakeholders to advise them of the challenges faced and requesting support and patience with the transition period.

The success of the delivery of this complex and extensive change programme has been due to the extremely high level of commitment from many groups of staff who have worked very long hours, over and above any normal course of duty, often late into the night and throughout weekends. Overall, the implementation of this programme has been a demonstration of the ability of Surrey & Sussex NHS Trust to succeed in a very demanding and stretching environment.