



iCare Case Study - Springhill Hospice

Springhill Hospice opened in 1989 providing Specialist Palliative Care for people with life limited illness for patients throughout Rochdale and the surrounding areas. Services include an Inpatient, Day Hospice, Outpatient, Hospice at Home, 24 Hour Advice Line and Community Services. This hospice is an independent charity and relies on voluntary contributions and fundraising effort in order to maintain their services.

The hospice employs 130 staff and is supported by a great team of over 300 volunteers. Having an average of 300 inpatient admissions annually, with a further 2000 day hospice attendances alongside outpatient, and Lymphoedema services are available too, care is also extended to patients' carers and families through counselling, complementary therapies and bereavement services.



The Business Challenge

Having been an SMI customer since 1994, Springhill Hospice were very happy with the services, responsiveness and professional approach to system development provided by SMI.

In 2014, the hospice was commissioned by the Clinical Commissioning Group (CCG) to provide Specialist Palliative Community Services throughout the Borough of Rochdale. As part of the Community Service, the hospice has been required to enter into an NHS Standard Contract, which has resulted in additional reporting requirements.

The hospice were still using Pal.Care which has become outdated and was problematic particularly where patients were in receipt of multiple services. "Our existing system was largely status driven and it was impossible to have a patient with a multiple status. This was a particular concern in relation to the risk involved with regard to 'losing' a

patient from waiting lists". The hospice was however still in a transitional phase to recruit new senior positions within the hospice, the migration to iCare had been postponed because of this. With contractual obligations driving the need for a new software solution, the hospice's Pal.Care system was finally upgraded to iCare providing far more extensive reporting capabilities which were now a necessity for the hospice which included the multiple service data collection and reporting now being required.

Although the hospice had been an SMI customer for many years, they still needed to investigate the other software solutions available. "We have been so satisfied with the service we received from SMI for so many years. We ensured that the product we were purchasing was competitively priced and had listened carefully to anecdotal feedback from others who had moved to alternative products and were experiencing difficulties, and decided to stay with SMI after thorough evaluation of the product" says Julie Halliwell, Chief Executive.

**"Fabulous... We are now able to report on almost anything!
The chart facilities and reporting from Smart Forms
have been very well received."**

Project Summary & Implementation

Having the need to move to iCare for the additional functionality available, the hospice still had a staffing resource issue, one in particular being that the Director of Corporate Service position was currently vacant, which meant that staff were already stretched for time. Having discussed their staffing resource issues with SMI, a mutually beneficial agreement was made. SMI was to provide an essential Project Management Service enabling the project to succeed with less resource on the hospice key management staff. SMI team member Matthew Webster, Systems Trainer and Data Consultant, worked closely with the hospice management staff to recognise the key data requirements for the multiple service implementation. **“The implementation happened at a time when there were significant changes within the organisation but staff understood the need for improved recording and reporting, and worked well together to learn the new system”**. SMI designed the new iCare software to suit the hospice’s exact coding structure requirements and ensured staff were trained to ensure the new data requirements were met. **“SMI are always professional, responsive and work well alongside us, I am particularly impressed with the support staff’s ability to gauge what level of IT literacy staff are at and to advise and train accordingly”**.

The Implementation of iCare

The joint project management between Matthew Webster (SMI) and Julie Halliwell (Springhill Hospice) proved a successful partnership. A core team was selected from the offset and all key decisions were made jointly by the SMT. The outcome has ensured iCare has been configured to suit the hospice’s exact requirements and accommodates all existing and future data collation requirements. The implementation of smart forms has enabled the hospice to replace paper-based forms such as Preferred Place of Care/ Death Recording and Onward Internal Referral forms.

Time savings are already being recognised, monthly reporting is much quicker and easier to produce with the added value of making medical secretaries and community staff duties much easier.

More accurate reporting has also been achieved, a main driver the hospice wanted to see improved.

“Moving to iCare and including multiple services has been a worthwhile exercise, resulting in improved recording and reporting”.

Key Benefits for Springhill Hospice

Excellent Reporting Capabilities

Reduction in paper-based Forms

Easy to Use

Multiple Service Management & Reporting

Flexible Data Configuration

MDS Compliant

Staff Friendly

Quick & Instant Reporting




Julie Halliwell, Chief Executive says:

“Having worked alongside SMI for many years, we knew that the service provided was excellent, knowing they understand hospices and the continual changes in reporting requirements required. We wanted a solution that would meet our exact requirements but also a package that staff would find easy to use, it was of particular importance to us to ensure staff were not tied up using a complicated software solution at the expense of patient care. iCare has enabled us to respond to the requirements of our NHS Contract, particularly with regards to KPI reporting”.

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