TriVice

NHS
Birmingham Women's and Children's
NHS Foundation Trust

HOW AUTOMATED TRIAGE CHANGES THE GAME FOR CLINICIANS DEALING

Dr Andrea Jester, Clinical Lead Hand and Upper Limb Service at Birmingham Women's and Children's NHS Foundation Trust explains how a new AI-powered triage system has delivered time and efficiency savings for healthcare professionals and patients providing and accessing plastic surgery services –and offers a model for modernised triage across every NHS specialist department.

"With TriVice, clinicians, health professionals, occupational therapists, physios – they can all do what they're trained to do: treating the patient. No triaging referrals! We now have over 1,000 clinical users across the region." Dr Andrea Jester, Clinical Lead Hand and Upper Limb

Register today to discover how TriVice can revolutionise your paediatric ophthalmology referral process. Experience the future of healthcare collaboration at your fingertips.

Scan the bar code now to download the TriVice App.

You can access TriVice our web application.

Developed and supported by Capri Healthcare Ltd

TriVice

NHS
Birmingham Women's and Children's
NHS Foundation Trust

Summary

Greenfield opportunities for IT development are scarce in the NHS but where they do exist, the replacement of a legacy manual system with a digital platform built from scratch can deliver significant benefits for clinicians and patients. This has certainly been the case for the Department of Plastic Surgery and Hand and Upper Limb Surgery at the trust.

The department engaged with Capri Healthcare in the development of a fully automated triage system when trainee clinicians red-flagged the inefficiency and labour intensity of the existing process.

The challenge of the triage bottleneck

"Before the system was rolled out in 2022, trainees were fielding up to 80 phone calls during the 24 hours they might be on call," she says. "Instead of focusing on their patients, they were waiting on the phone, chasing information, or trying to identify and track down an appropriate specialist.

"When trainees started to raise red flags, the GMC fed back to us that we had to do something urgently to address the situation," says Dr Jester. "When we looked at the types of referrals we were having, we saw that at least two-thirds could have been dealt with by an intelligent system rather than a human being." However, any digital solution would have to meet the complex needs of a department with such a

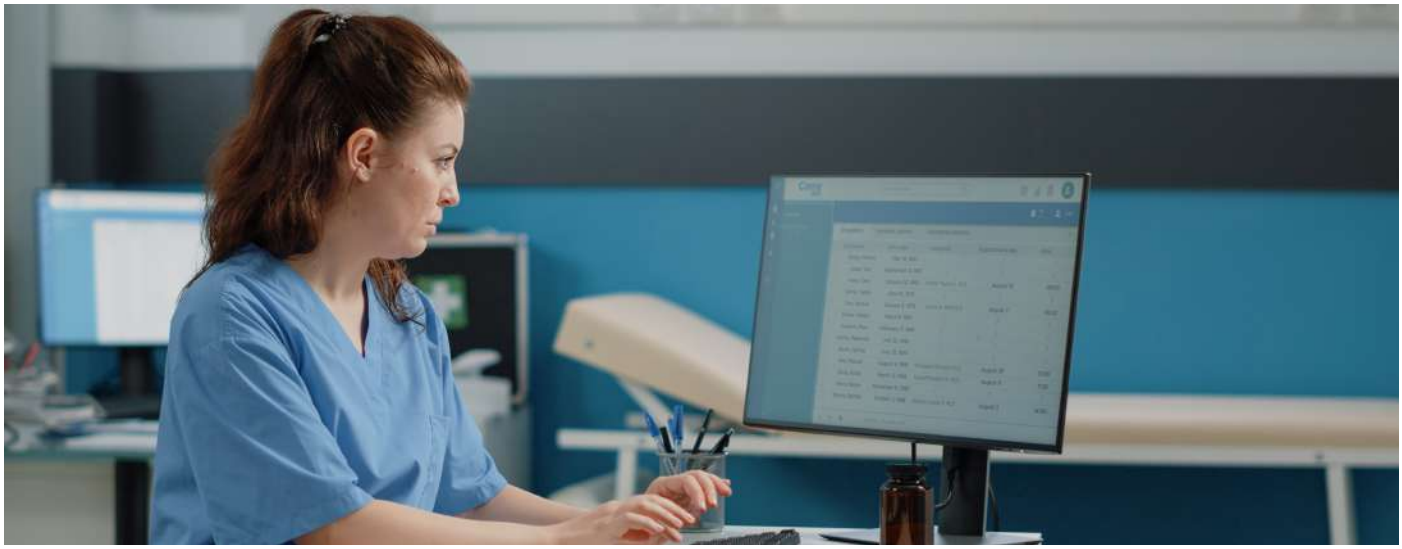
How the new system works

It took around 18 months for Capri and Dr Jester's team to develop, fine-tune and onboard TriVice for the department.

TriVice categorises the incoming information, tells the registrar what needs to happen next, and directs appropriate communications, guidance and assistance to the relevant healthcare professional, external services, and the patient themselves, up to and including appointment reminders and outcome questionnaires. It is also fully integrated with the trust's EPR (Electronic Patient Record) system, so that data including images is automatically fed in.

"I'm too expensive a resource to sit at a computer and direct patients to whichever clinic is best," says Dr Jester. "With TriVice, clinicians, health professionals, occupational therapists, physios – they can all do what they're trained to do: treating the patient. No triaging referrals! We now have over 1,000 clinical users across the region."

One of the most important aspects of TriVice is the creation of peer-reviewed care pathways by senior specialists – in this case Dr Jester, and as the system is extended across other departments, experienced



Benefits for clinicians and their patients

Patients with less serious injuries can often be treated equally well in the primary care system. TriVice has signposted 36% of cases to be treated in local care settings, significantly reducing the amount of travel for patients and helping Emergency Department staff to prioritise their time triaging more serious injuries.

Dr Jester says that the trust's strong relationship with Capri has been a critical factor in the implementation of the platform. As a system provider, Capri has always responded quickly to requests for fixes. Other systems can, she says, be "clunky" – not just in operation but in the prolonged interactions that they might require with developers to rectify a problem.

"For example, here the system sends out notifications to come in for their surgery the next day," she says. "It tells them what to do, what to wear and where to come – directions are everything. But on one occasion, because of building work, we knew the patients couldn't come to the ward they were being directed to. There wouldn't have been anybody there!

"Within 24 hours, we had to change the messaging. But that could be done because the system is so flexible. I called Capri in the evening to explain what we needed, and the next day it was tested and implemented, and we knew that the patients were receiving the new messages."

"The thing is, if you want platinum care by the best possible specialist, that person can give you the best advice and guidance," she says. "With TriVice, you know that while the system is not a human being, the