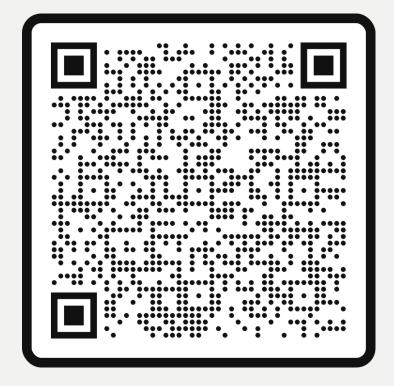


Welcome to the 2<sup>nd</sup> NHS Hospitals Interoperability Summit!

**IVENZIS** 

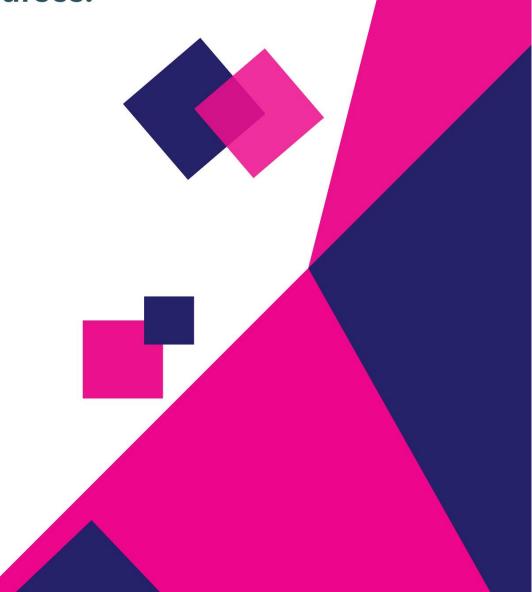


24<sup>th</sup> September 2025 Leonardo Hotel, Milton Keynes, Midsummer Boulevard, Milton Keynes, MK9 2HP



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## Join the Healthcare **Engagement Society (HES)**

- What it is A secure, year-round platform bringing NHS professionals together across six specialist communities.
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- How to join Simply scan the QR code, choose your community, and start connecting today.





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NVENZIS







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#### **Chair Opening Address**



Dr Avi Mehra
Associate Partner & Clinical Safety Officer
IBM





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**Keynote Presentation** 

**NVENZIS** 



Lee Rickles

Director and Chief Information Officer

Yorkshire & Humber



# INTERWENVE

CONNECTING CARE

# Unlocking the Potential of Shared Care Records

Lee Rickles CIO

## The Challenge: A Familiar Story

"I've told three different people this already..."

#### **Key Points:**

**Patient's View:** Repeating medical history, allergies, and medications to every professional they meet. Feeling unheard and unsafe.

Clinician's View: Making decisions with incomplete information. Wasting time chasing results from other organisations. Ordering duplicate tests.

**System's View:** Inefficient pathways, increased risk of clinical error, and wasted resources. This is the cost of a disconnected system.





### The Solution: A Single, Holistic View

The Right Information, for the Right Person, at the Right Time.

#### What it IS:

A secure, read and write view of a patient's key information from across health and care providers.

A 'virtual window' into other systems, not a new giant database.

Accessed by authorised professionals directly involved in the patient's care.

#### What it is NOT:

A free-for-all data pool. Access is role-based, audited, and requires patient consent where appropriate.



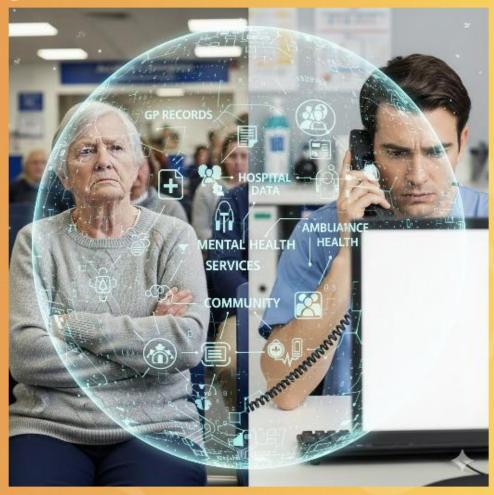


### The Challenge: A Familiar Story

Quick Poll: What's the biggest impact of poor information sharing you've witnessed?

#### **Options**

- A) Repeated diagnostic tests (e.g., scans, bloods).
- B) Medication errors or delays.
- C) Delayed hospital discharge.
- D) Wasted clinician time.





## The Yorkshire & Humber Story: Making it Real

It's Clinical Transformation, Not an IT Project: The technology is the enabler, but the goal is changing clinical pathways and improving care. It must be clinically-led.

**Building a 'Coalition of the Willing':** Gaining trust and buy-in from hundreds of organisations (GPs, Trusts, Councils, Hospices)and the public. This is a marathon, not a sprint.

**Build to standards:** Using FHIR and development new resource when needed. The last 9 yards are the hardest when joining information together.

Start with High-Impact Areas: Focus on where shared data makes the biggest difference first:

Unscheduled Care (A&E): Seeing GP alerts, medications, and problems lists.

End-of-Life Care: Ensuring a patient's wishes (e.g., ReSPECT forms) are visible to all.

Social Care: Accessing health information and knowing what is happening with the person.

Safeguarding: Joining up information across health and social care to protect vulnerable children and adults.

## The Strategic Value: System-Level Benefits

More Than Just an Operational Tool

Improved Clinical Decision-Making & Safety: Direct, tangible impact on patient outcomes.

Reduced Duplication & Enhanced Efficiency: Saves money, and more importantly, saves precious clinical time. Y&H estimated significant time savings for clinicians, freeing them up to care.

Enabling Population Health Management: Anonymised data from the ShCR provides invaluable insights into regional health trends, allowing ICSs to plan services proactively. We can identify health inequalities and target interventions where they're needed most.

A Foundation for the Future: ShCRs are the digital bedrock for patient-facing apps, Al-driven risk stratification, and further digital innovation.





Your Turn: Where could a ShCR transform care in your area?

"Take 30 seconds to think about one specific care pathway in your organisation or locality (e.g., frailty, maternity, mental health). In the chat, or with the person next to you, share one way a fully-functioning ShCR could revolutionise that pathway"



# **Key Takeaways & Call to Action**

#### From Silos to Synergy

Patient Centred: ShCRs put the patient back at the heart of the system, creating a safer, more coherent experience.

Clinically-Led: Success depends on clinical leadership and a focus on transforming pathways, not just technology.

**Strategically Essential:** They are the foundational layer for efficiency, population health, and the future digital NHS.

#### From Silos to Synergy







INTERWEAVE CONNECTING CARE

#### **Q&A** and Thank You

Lee Rickles lee.rickles@nhs.net

X handle @larickles www.linkedin.com/in/leerickles

https://interweavedigital.com

https://yhcr.org/

https://leicesterleicestershireandrutland.icb.nhs.uk/your-care-record/

https://digitalnotts.nhs.uk/notts-care-record/







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Lee Rickles
Director and Chief Information
Officer, Yorkshire & Humber



Alison Johnson UK Health Lead ORCHA



Joss Palmer Programme Director OneLondon





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# **Main Sponsor**



**Dan Parker**Delivery Manager
AireLogic



Matt Stephens
Principal Architect
AireLogic



# Interoperability in action

Iteratively improving interoperability



# Thank you

To get in touch regarding your Interoperability queries

www.airelogic.com

X @airelogic

**in** aire-logic-limited







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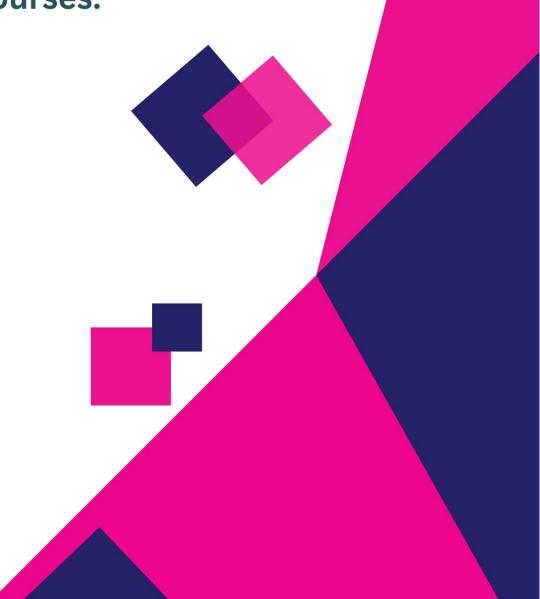


# Refreshments & Networking



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**NHS Hospitals** 

Bridging Trusts for Seamless Healthcare

Interoperability Summit

ONVENZIS

#### **Chair Morning Reflection**



**Dr Avi Mehra**Associate Partner & Clinical Safety Officer IBM





# **Case Study**







# **Case Study**



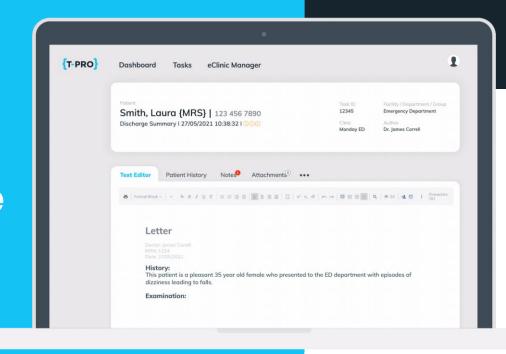
Blayne Scott
Account Executive
T-Pro

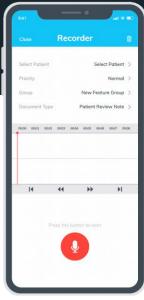
# {T-PRO}

#### {T-PRO}

**GIVING CLINICIANS A VOICE** 

Transforming Clinical Documentation at Scale with AVT







Al-driven, efficient, secure, and dependable solutions to enhance your clinical documentation workflow.















#### **T-PRO** Meeting Your Objectives

#### Inconsistent & Slow clinical correspondence

- Delays in care
- Patient frustration
- Burnout

#### Transcription related errors

- Safety risks
- Slower correspondence

#### Lack of Standardisation

- Poor record quality & safety risks
- Hard to reuse data
- Fragmented records

#### Excessive clinical and admin time

- Clinician burnout
- · Less patient time
- In-session note completion

#### Over reliance on manual workflows

- Delays & errors
- Time drain
- Hidden costs

85% same-day letter turnaround

same-day letter turnaround across outpatient clinic can increase patient satisfaction.



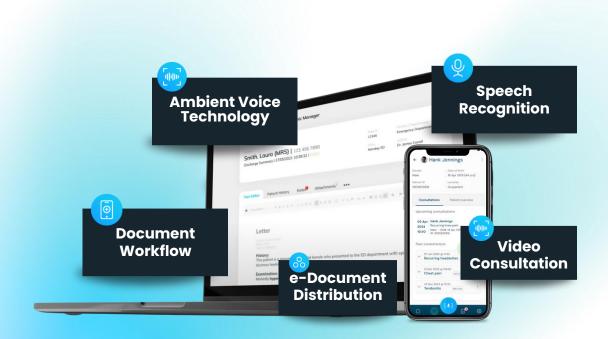


30 mins saved per clinic

reduction in secretarial workload shown increase in operational efficiency

#### **T-PRO** Clinical Documentation Portfolio







#### **Ambient Scribe**

Automatically generates clinical notes, reducing burnout, and improving patient care.



#### **Document Workflow**

Our mobile-first dictation workflow platform delivers process automation and Al-powered efficiency gains at every step of the process. Enhance productivity, increase your EHR adoption, and reduce administrative costs.



#### **Speech Recognition**

Machine Learning pipelines continually optimise the software based on user data and feedback, automating continuous improvement workflows.



#### **Electronic Distribution**

Highly complementary product suite underpinned by interoperability across solutions.



#### **Video Consultation**

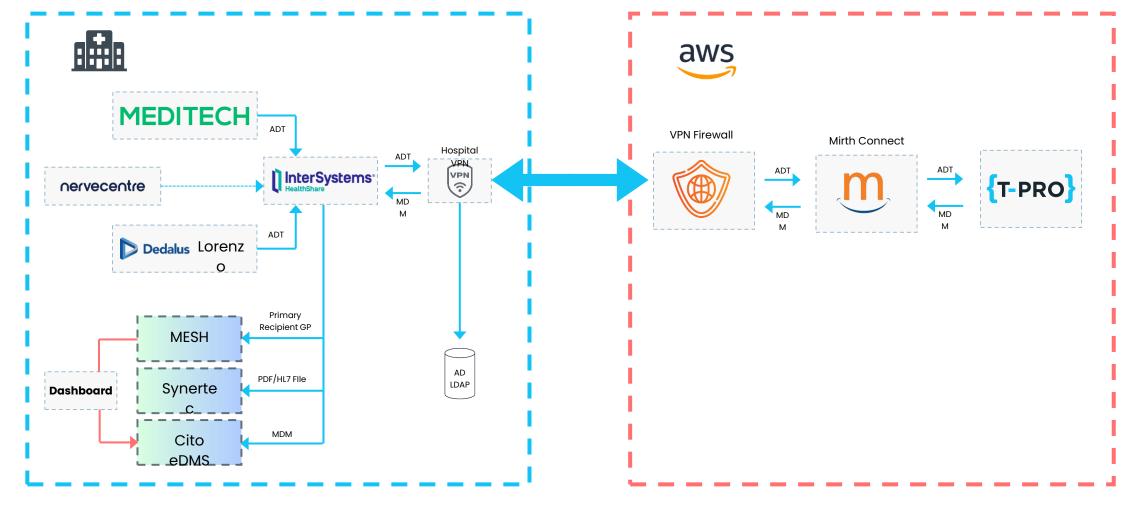
Standalone functionality, maximising flexibility. Closed loop attendance feedback with EPR / PAS.



#### Human-in-the-Loop Review

A human-in-the-loop review service reduces administration costs and ensures 100% accuracy of notes.





## Seamless Integration

T-Pro's solutions seamlessly integrate with over 250 PAS/EPRs



## T-PRO Demo

#### Globally Trusted by over +1,000 Healthcare Organisations

































































**Worldwide Team of Specialists** 

## {T-PRO}



#### **Your Contact:**

- >> blayne.scott@tpro.io
- >> +44 20 8064 1504
- >> info.tpro.io

## Thank You





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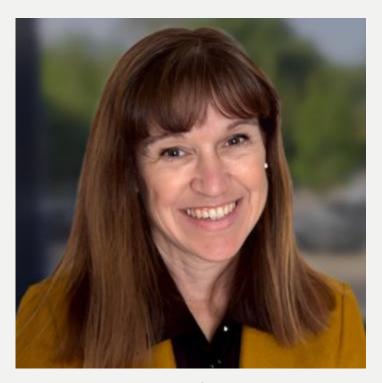
## **Case Study**







## **Case Study**



Jane Stephenson CEO SPARK TSL



## How Digital Bedside Platforms Unlock Value in NHS Trusts

Enhancing Patient Experience, Staff Wellbeing, and Operational Efficiency for a Sustainable Future







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## **Keynote Presentation**

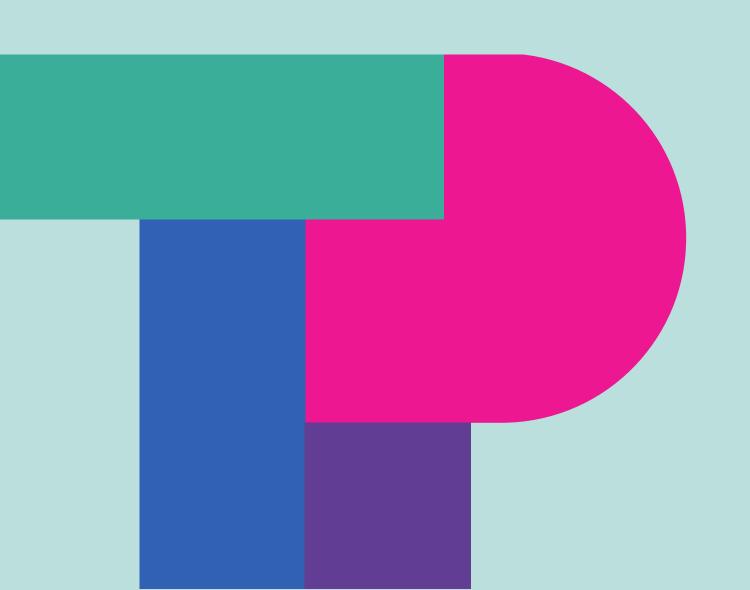


James Davies
Head of Digital Productivity,
Transformation Partners in Health
and Care (TPHC)
Royal Free NHS Foundation Trust



Jo Bowers ChMC
Associate Director (Digital,
Data, Analytics and Digital
Productivity), Transformation
Partners in Health and Care
(TPHC)
Royal Free NHS Foundation
Trust





### **Digital Productivity**

Applying lessons learned for a digitally productive future

#### **James Davies**

Head of Digital Productivity,

#### Jo Bowers ChMC

Associate Director (Digital, Data, Analytics and Digital Productivity)



#### TPHC - Supporting clients in transformation and improvement goals

- Transformation Partners in Health and Care (TPHC) delivers high-quality bespoke consultancy, programmes and projects from neighbourhoods to a national level, with a demonstrable track record in achieving positive and tangible results for populations.
- Hosted by the Royal Free London NHS Foundation Trust, we share NHS values and strategic priorities to improve patient care and outcomes.
- We offer a full-service transformation and improvement capability for the health and care system through our Consulting, Digital Productivity and Partnerships teams, who work autonomously, and come together to co-support programmes, share expertise and devolve learning.
- We listen to your problems and can help you find actionable solutions.

We understand the challenges health and care organisations face as they strive to make improvements for large and diverse populations and workforce, whilst improving access, quality of care and tackling inequalities.









#### Our impact and track record

We have a long track record of successful bespoke programme delivery and advisory services to health and care organisations, including NHS England and NHS Regions, Integrated Care Boards, NHS trusts, primary and community care providers, and local authorities. We also provide consultancy services to public sector organisations including London Councils and Sport England.

With expertise in data and technology, productivity, patient safety, mental health, primary care, large-scale change, and tackling health inequalities. We have delivered outcomes for clients including:

- 85% of NCL care home providers <u>using remote</u> <u>monitoring tools to detect early signs of deterioration</u> <u>and illness</u>,
- making over 200,000 more primary care
   appointments available each year in north east London,
- having a positive impact on London trust maternity staff through <u>delivering the award-winning CapitalMidwife</u> <u>Anti-Racism Framework</u>.

Using automation to improve productivity and reduce avoidable human error in referrals for Chronic Kidney Disease

TPHC's Digital Productivity team deployed a robust automation system to standardise North Central London's chronic kidney disease referral service and help reduce manual burden and the risk of human error. The results:

- 30 Min saving per referral = 142 working days.
- Reduced manual burden and window of human error.

## Digital Productivity

Website

www.transformationpartners.nhs.uk

**Email** 

rf-tr.dpp@nhs.net





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## **Case Study**













Ty Baines
Network Manager
Royal Devon University
Healthcare NHS Foundation
Trust



Frank Weyler
European Sales
Silex Technology

7 X
minutes

5 times /day 300 devices





### Speakers

1. Silex Technology Introduction

Royal Devon University Healthcare NHS Foundation Trust

2. Secure Wireless Connectivity for Medical Devices

3. Q&A



Ty Baines
Network Manager





Frank Weyler
European Sales



#### Introduction





In Germany, Austria and Switzerland

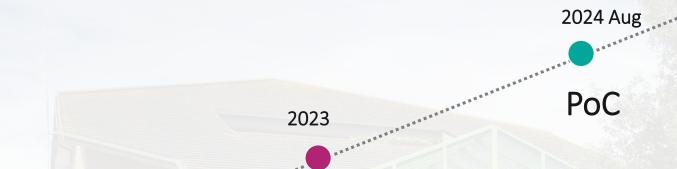
8 out of 30 largest hospital groups use Silex

Global Medical Manufacturers

7 out of 10 top medical device makers use Silex

#### Digitalisation and Wi-Fi Challenges

2024 Present



Wi-Fi Issue

Deployment

MY CARE
Epic EPR system

2020

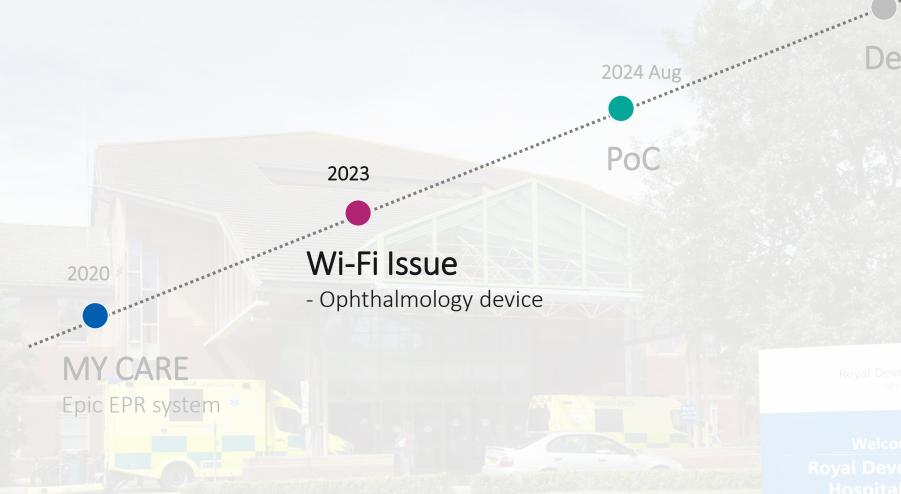
Royal Devon and Exeter

NHS Foundation Trust

Royal Devon and Exeter
Hospital (Wonford)



#### Digitalisation and Wi-Fi Challenges



Present
Deployment

Royal Devon and Exeter

Welcome to the Royal Devon and Exeter Hospital (Wonford)



### Ophthalmology device

- DHCP issues with multisite use

Ophtalmology device





#### Digitalisation and Wi-Fi Challenges

2024 Aug



PoC: 1 week

- Franking machines
- Ultrasound machine

Royal Devon and Exeter

NHS Foundation Trust

2024 -

Welcome to the
Royal Devon and Exeter
Hospital (Wonford)



MY CARE

Epic EPR system

NHS Royal Devon University Healthcare,. All rights reserved.

#### PoC: Silex BR-330AC-LP

IssueExisting solution "Wi-Fi USB dongle": No reliable connection

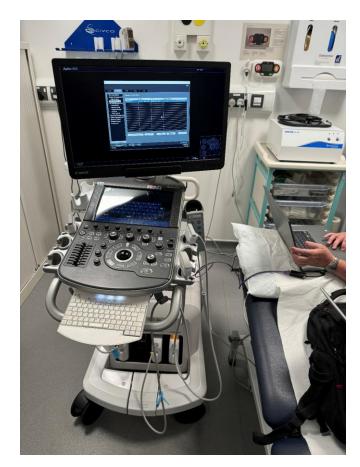
#### PoC

- Franking Machine and Ultrasound machine tested with Silex BR-330AC-LP for a week

#### Improvement

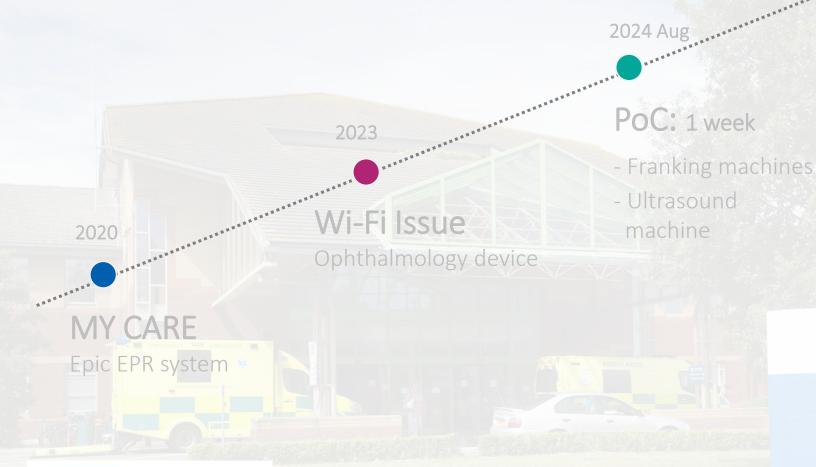
- Instant connection
- Reliable roaming







#### Digitalisation and Wi-Fi Challenges



Royal Devon

NHS Foundation Trust

University Healthcare

2024 - Present

#### Deployment

- Ophthalmology device
- Ultrasound (3 brands)
- Franking machine
- C-Arm
- ECG
- OBS/Blood pressure
- Wi-Fi solution for Honiton doctors' emergency decant
- Out of Support OS devices

- USB printers

- Defibrillator Monitoring

#### Deployment: One Stop Solution

- One Wi-Fi Interface for various devices

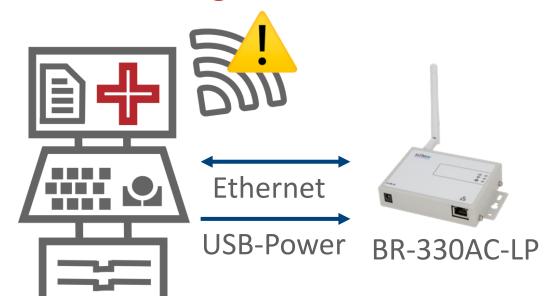






### Silex Ethernet-to-Wi-Fi Bridge

**Connectivity Challenge** 



#### **Solution**



Retrofit: Plug & Play, Mobile



**Reliable:** Stable performance in 2.4GHz & 5 GHz, Fast roaming



**Secure:** Enterprise security, MAC address binding



Manageability: Remote management, 1 interface for all devices



**Low TCO:** Easy maintenance, No MDR re-certification

# 7x5x300x260

=1883

Downtime: Days / Year

Save life, time & cost



## Questions?





When it Absolutely Must Connect

"どうしてもつなげたい" そのときに





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# Lunch & Networking









**Dr Avi Mehra**Associate Partner & Clinical Safety Officer IBM





## **Case Study**

## ]pexip[





## **Case Study**



**Tom Jones** Pexip

## Jexip

**Video Conferencing Interop Solutions** 





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### Fireside Chat



Andy Meiner
Chief Technology Officer
Healthcare Innovation Consortium



Mr David Hancock
Director and Chair
INTEROPen





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## Workshop



Steve Dunkerley
Chief Commercial Officer
NHS London Procurement
Partnership (NHSLPP)



Andrew Stradling
Chief Medical Officer
NHS LPP; M&S H&CP; HCSA
National Council





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Mr David Hancock
Director and Chair
INTEROPen



David Crawford

NED Group Trust - Norfolk and Waveney
Community Health and Care NHS Trust

AND Cambridgeshire Community
Services NHS Trust



Linda Watts

Associate Director of Digital Transformation – Imperial
College Healthcare Trust Programme Director – Digital
Outpatients – Barts Health
Imperial College Healthcare Trust / Barts Health





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# Food, Drinks & Networking