

# ANCILE Solutions and uPerform®; Helping NHS Organisations to Support the Deployment and Optimisation of Major IT Systems

ANCILE Solutions is bringing its content creation and in-app learning tool, uPerform, to the UK health sector. EMEA sales director, Jonathan Pascall, explains how it can help chief information officers and their clinical colleagues with some of their biggest challenges; how to effectively deploy and optimise the use of EPR and major IT systems; and how to bring new and locum staff up to speed on them.

When IT leaders hear the words 'learning' and 'training' they may think we are talking about something that does not affect them. After all, most trusts have education departments and training teams; and very effective they can be.

However, chief information officers and their clinical colleagues lead on the deployment of major IT systems. The success of these projects depends on engagement and adoption; and learning and training can be critical to both.

## **IT success depends on adoption**

Research suggests that 70% of the success of an electronic patient record can rest on achieving rapid and effective user adoption<sup>1</sup>. When this doesn't happen, it can take a long time for IT to change ways of working and deliver the benefits expected of them; something that US 'digital doctor' Professor Robert Wachter refers to as the 'productivity paradox'.

In NHS trusts, this may be experienced as an EPR project that is rolled out in a few areas, but which then stalls. Or that staff use, but with 'work arounds' that mean it doesn't deliver the efficiency or safety benefits anticipated.

Even when a deployment project goes well, IT teams face the ongoing challenges of supporting users with upgrades and changes and of getting new, locum and bank staff onboarded and up to speed. These are all areas in which ANCILE Solutions can help.

## **ANCILE Solutions and uPerform**

ANCILE Solutions has a best-in-class content creation and in-app learning platform called uPerform that is used by 4,600 global customers to train and support users on more than 200 business applications. It's already well-

<sup>1</sup>Achieving Enterprise Software "Success" by Sandhill.com and Neochange.com

established in US healthcare, where it is used by 8 organisations to support over 85,000 users on IT systems that include Epic, Meditech, Kronos, Salesforce, and Microsoft solutions.

uPerform enables IT departments, training teams and subject matter specialists to quickly record lessons, guides and tips and make them available to system users from any internet-connected device.

Epic customers who download uPerform from the App Orchard can also access context or role-specific content at the click of a mouse; and we are looking to create a similar level of integration with other, major EPRs.

### **The draw-backs of classroom training**

EPRs are not the only systems that CIOs and their clinical colleagues will need to deploy and support. There is a shift towards hub and spoke working in NHS clinical services, imaging and pathology, and the implementation of a new network often requires the implementation of new or upgraded IT.

In all of these cases, though, CIOs, CCIOs and others will face similar challenges. There may be a degree of resistance from staff who have been through failed deployments, or implementations from which they have not seen any benefit.

Even when that is not the case, it is often difficult for staff to fit training into their busy work schedules, when the NHS is facing such unrelenting demand. Ideally, people would go for training on a new system with their colleagues from the same ward or department; but in practice, in the NHS, that can rarely happen.

Instead, people are called into classroom training, given the basics, and perhaps handed a manual or encouraged to take an e-learning course, in the hope that this will be enough to reinforce what they have learned, with the support of floor walkers on the day.

Unfortunately, it is unlikely that people will retain what they are taught in a classroom. In education, there is a concept called the Ebbinghaus' 'Forgetting' Curve, which describes the brain's decreasing ability to retain information over time. After six days, people forget over 75% of information received in their training.

How soon we forget is a particular issue for an EPR deployment or major IT upgrade, because training can often take place weeks before a planned go-live date. So how, exactly, can ANCILE Solutions help?

### **Simulating real world scenarios**

uPerform is not a replacement for classroom training, which is often mandatory for good reason. It is true that our US healthcare customers have found that they can reduce the amount of classroom training required by up to a third, which saves time and money.

However, it can help with the engagement challenge, by demonstrating goodwill. Staff can see that their trust leadership is investing in something that will make it easier to learn a new IT system and investing in their professional skills.

uPerform can also be used to make training more engaging. Many trusts lack a sandbox or training environment for their major IT systems, so in a classroom staff may have to watch a trainer working through a script. uPerform

The way in which uPerform can be used to support system roll-outs was demonstrated by Infirmary Health, the largest non-governmental health system in Alabama. It used uPerform to create a learning environment for Epic. In eight weeks, more than 850 physicians and more than 500 support staff were trained in the software, ahead of a seamless roll-out.

provides a simulation environment in which staff can try out a system out for themselves, so they can test out the actions they will need to perform for real.

### **Cutting helpdesk calls**

At the same time, uPerform makes it easy for trainers to create content. Putting together an e-learning course is time consuming; it may take a week to get one ready. With uPerform, trainers can go through a system workflow and turn into a lesson, or a reference guide, or a simple tip.

All that content is available from the 'help' button, so the next time a user needs something explained, they can click, type in a question, and pull up the information they need. One of the direct benefits for IT and training teams is that this can cut helpdesk calls.

It may also reduce the number of 'workarounds' that staff devise to avoid a slow or unfamiliar bit of workflow. Workarounds can be hard to pick up, but there is plenty of anecdotal evidence that they get passed around departments and become established practice. uPerform content can be used to reinforce the best, most efficient and safest way to use a system.

### **Handling upgrades and changes**

Even when a system has been deployed and adopted effectively, it might be subject to upgrades and changes. Some EPR vendors update their systems on an annual, or even a quarterly basis. The 'next generation' imaging and pathology systems that are being deployed to support networks are very different to the systems they are replacing, even when they come from the same vendors.

All of the content that is created for uPerform is held in a central repository, so it can easily be accessed, edited and pushed back out to users if something changes.

End users can make a piece of content a 'favourite', so if something about it changes, they can be informed and encouraged to train-up proactively, without being pulled into a new round of classroom training and e-learning, or left to figure it out for themselves.

### **The ongoing challenge of onboarding**

A further challenge for CIOs and their clinical colleagues is that most hospitals have a significant turnover of staff, so they have to spend a lot of time onboarding junior doctors, student nurses, staff relocating from other trusts, and locum and bank workers.

Some of our US healthcare customers use the uPerform platform to make key learning and training available to staff before they arrive on site. That way, people will have some familiarity with a system before they arrive for on-site training, which reinforces what they learn in the classroom.

Or, they will have had the chance to practice a workflow with which they need to be familiar, and perhaps take a test, before they start on a ward. uPerform can be used to re-enforce what they need to know whilst in work.

### **Getting the most out of IT investments**

When IT leaders hear the words 'learning' and 'training' they may think we are talking about something that does not affect them; but we are, because they are critical to the successful deployment and adoption of the IT systems for which they are responsible.

Traditional classroom teaching and e-learning has its place; but they also have significant limitations. Staff may not want to engage with IT, they may not feel they have the time to do training, and even if they engage the amount of knowledge that they will be able to retain by go-live may be quite small.

Back in the clinical environment, that might mean that the work done on a new or upgraded system might not be done as quickly and effectively as it could be done, which will reduce the value of that IT investment.

The payoff for CIOs and their clinical colleagues is that uPerform can help to support deployments, reinforce what is learned in the classroom, and constantly remind staff of the best and most efficient way of using systems day to day. Trusts can't have floor walkers out there, 24/7 forever; so uPerform may be the next best thing.

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#### **About ANCILE Solutions**

uPerform from ANCILE Solutions is used by more than 4,600 global customers, including half of the Fortune 100. uPerform drives user adoption of more than 200 of the world's leading business and healthcare applications, through support for onboarding, continuous learning, process compliance and change management. Independent customer interviews have shown that uPerform can: reduce authoring time by up to 50%, reduce classroom time by 30 to 70%, cut help desk calls by a quarter, and improve the efficiency of users by up to 16%, by giving them faster access to relevant information.

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