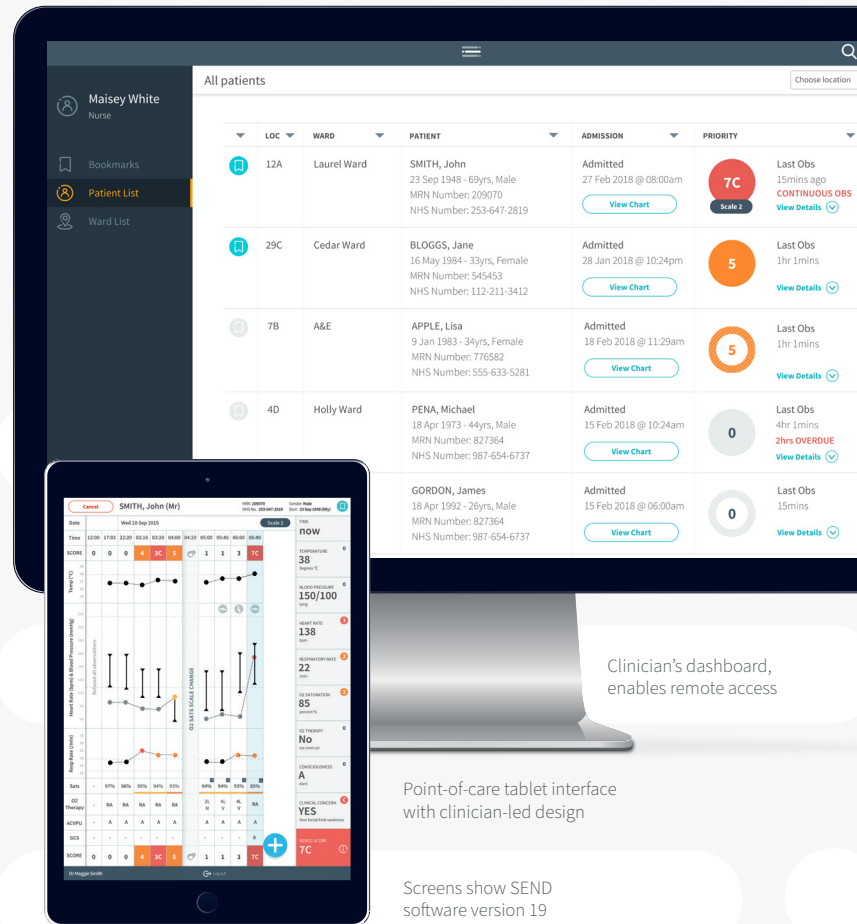



SEND™

The evidence-based, digital charting system for vital-signs observations in hospital and for the automatic calculation of Early Warning Scores (NEWS2)



Invented in the NHS for the NHS, as a direct response to clinical need



Releasing Time to Care – SEND reduces time to take observations by 30%, saving equivalent of 3.5 FTE per 24 hours¹



Makes deteriorating patients immediately visible to appropriate clinicians to inform clinical decision-making



8 scientific publications³



195,000 patients since Jan 2015, 22m patient observations²



In use at 120 wards across Oxford University Hospitals and at South Warwickshire NHS Foundation Trust



Evidence-based human factors approach has supported clinician adoption in the NHS

40,000 patients are admitted to Intensive Care per year after spending at least 48 hours in hospital - 1 every 15 minutes⁴

Opportunities to spot deteriorating patients can be significantly increased if patient observations are captured digitally and Early Warning Scores (EWS) automatically calculated. To do this doesn't have to be hard, or costly.



Empower your clinicians with greater opportunity to spot deteriorating patients at the point of care

- Charts that look the way they always did and remaining in clear view, hands-free
- Clear on-screen clinical guidelines, which reflect local protocols
- Designed by clinicians to be faster than pen and paper
- At-a-glance information so clinicians can prioritise care to patients most in need
- Always available - all physiological monitors in one place, alongside the patient chart
- Real-time EWS calculations can inform clinical decision-making and reduce errors
- Simple - not buried in an EPR or over-complicated with an array of features/functions
- Highly-intuitive - very fast on-boarding for new users and bank staff
- Fast and easily accessible - no searching for equipment or handhelds or dealing with flat batteries

Supports improved clinical management and governance at ward, hospital and Trust levels

- Displays real-time tracking information on observation timeliness and completion for each ward
- Increased patient safety - positive patient ID via wristband barcodes linked to clinician ID and patient record
- Interoperable with your hospital EPR to support a complete patient record and audit trail
- Provides real-time NICE Clinical Guideline 50 compliance data, highlighting potential problems and saving time for ward managers.*
- v19 automates the new Early Warning Score (NEWS2) which comes into force in 2019
- Supports clinical governance and safety auditing
- Affordable, highly competitive costing structure

Tablet computers are used for data entry and mounted on the same stands as the physiological monitors used to measure patient vital signs.

This design is intended to minimise barriers to timely data entry and facilitate viewing of current and historical observations at the point of care.

“ The SEND system offers lots of benefits to patients and clinicians. It was developed by clinicians for clinicians and we are seeing dramatic improvements in clinical efficiency and safety. We have data that was previously captured on paper now digitised, enabling greater support to clinical care delivery to our patients and in tandem, the potential to support future medical discoveries. ”

Glen Burley, CEO, South Warwickshire NHS Foundation Trust



SEND is classified as a Medical Device and is registered as such with the UK National Competent Authority (MHRA).

1. 'SEND: a system for electronic notification and documentation of vital sign observations' Wong et al. BMC Medical Informatics and Decision Making (2015) 15:68. Study used SEND v1.3.

2. Company source.

3. International Journal of Medical Informatics, Quantitative Metrics for Evaluating the Phased Roll-out of Clinical Information Systems.

Journal of the American Informatics Association, A ward-based time study of paper and electronic documentation for recording vital sign observations.

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Developing NHS Digital Roadmaps, London, Implementing an Electronic Early Warning Scoring System, December 2015.

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Digital Health and Care Congress, King's Fund, London, User-centred design for optimum development and deployment of an e-Health intervention, July 2015.

NHS England case study, January 2015.

4. Data access request to ICNARC (Intensive care national audit and research centre).

* Available in SEND v1.3

For more information on availability, please contact
info@sensynehealth.com

Note: Not all Sensyne Health products are available in all geographies, for further information contact head office.

www.sensynehealth.com

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Public Information. CORP-019-02