Diagnostic Digital Pathology at Nottingham University Hospitals: Moving from Implementation to Business as usual

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Clinical Lead NUH Digital Pathology Implementation
Consultant Haematopathologist





Personal - no conflicts of interest

Conflict of Interest

Indica Labs are suppliers of Digital Pathology systems to Nottingham University Hospitals NHS Trust





Nottingham University Hospitals (NUH)

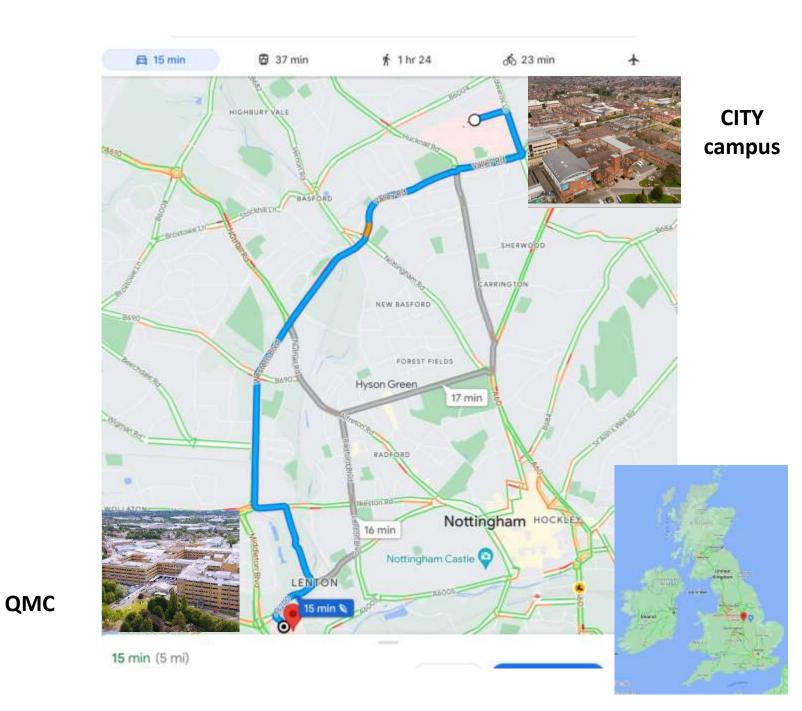
 Large acute teaching hospital NHS trust

- 2 campuses
 - Queens Medical Centre (QMC)
 - City Hospital





Nottingham University Hospitals (NUH)



NUH Cellular Pathology

Laboratory on QMC campus

- 72,000 cases
- 355,000 slides

Consultant teams at both QMC & City

- 33 consultants in 8 subspecialty teams
- Regional referral centre
 - Haematopathology, Renal, Neuropathology, Sarcoma, Perinatal pathology

Background

PathLAKE plus

- 21 Trusts in 6 work packages
- Lead Prof David Snead at UCWH

Innovate UK funding

- NUH grant £2.3 million (WP1)
- NUH bid led by Prof Emad Rakha
- Summer 2020
- Goal >80% digital reporting by Dec 2023

High level objectives



Improve efficiency of reporting

Increase reporting capacity by increasing overall productivity

- TARGET >12% increase in productivity
 - 80% cases reported using digital platform

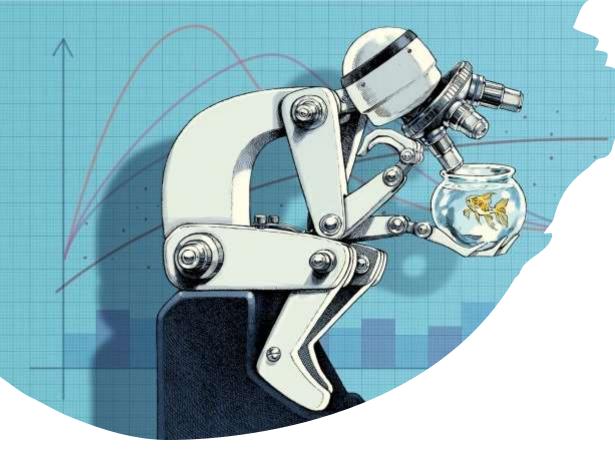


Improve effectiveness of reporting

Increase accuracy and Reduce variation

Quantitative & Qualitative Standardisation

Reduce error

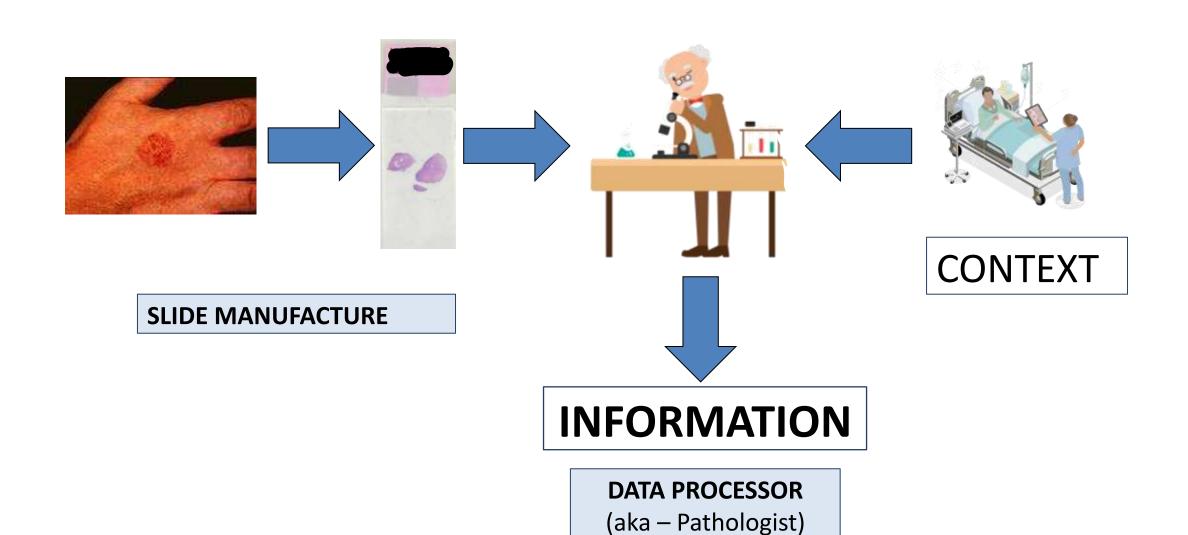


It's not just a Digital Microscope....

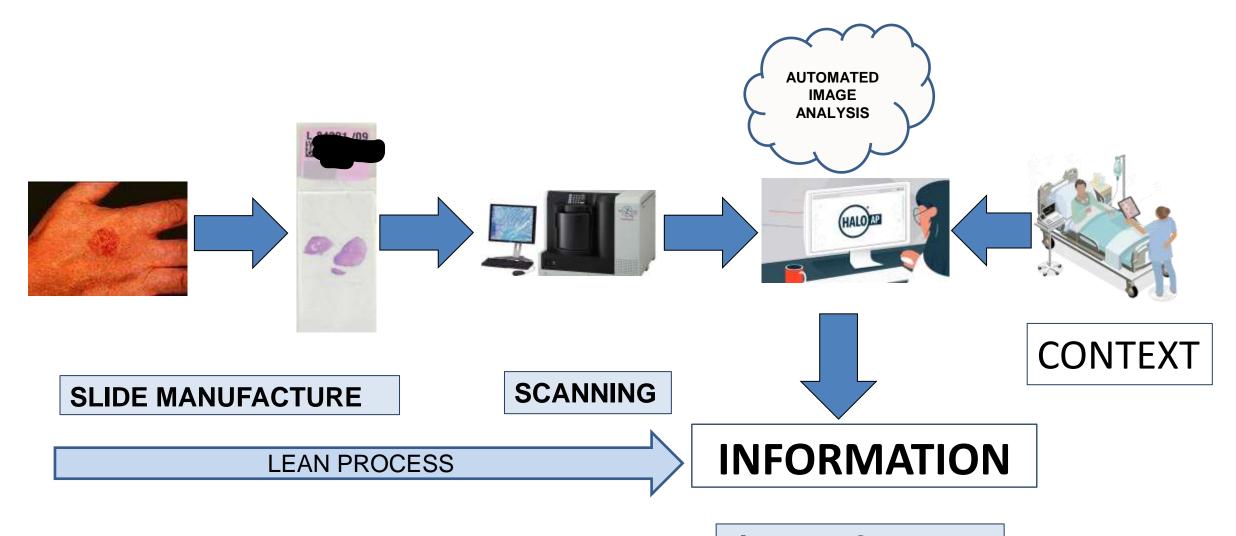


it's about transforming the way Cellular Pathology is delivered as a service

HISTOPATHOLOGY



DIGITAL HISTOPATHOLOGY



Improve Outcomes

70% of change programs fail to achieve their goals

McKinsey

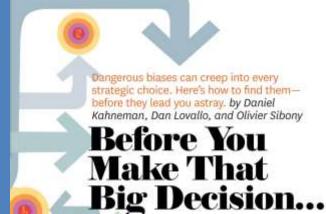
Managing Transformational Change

Change management

- Leadership
- managing the people side of change

Project management

- Management
- Framework to plan, execute, & deliver projects



THARMED TO a slew of popular new books, many executives today realise have blane can descet reasoning in business. Conferenctive has, for instance, leadpropile to ignow evidence that contradicts their perconceived notions. Ambring causes there to veryll one piece of information to be heavily as suiting of eciclotes, for average makes their too caustions. In our experience, however, averages of the effects of bisses has done first to a topow the quality of business dockboos at within the individual or the organinational leads.

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American restaurations from gr

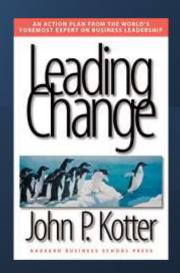


www.hbr.org

Leading Change Why Transformation Efforts Fail

by John P. Kotter

Kotter Change Model



Kotter, J. P. (1996). Leading Change. Harvard Business Press.

- 1. Establishing a Sense of Urgency The "WHY"
- 2. Forming a Powerful Coalition
 - Build a team of people to lead change.
- 3. Creating a Vision for Change
- 4. Communicating the Vision
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- 8. Anchoring New Approaches in the Culture
 - Embedding the changes into the organization's systems, processes, & values, making it permanent

Project Phases

Leadership & governance

Procurement

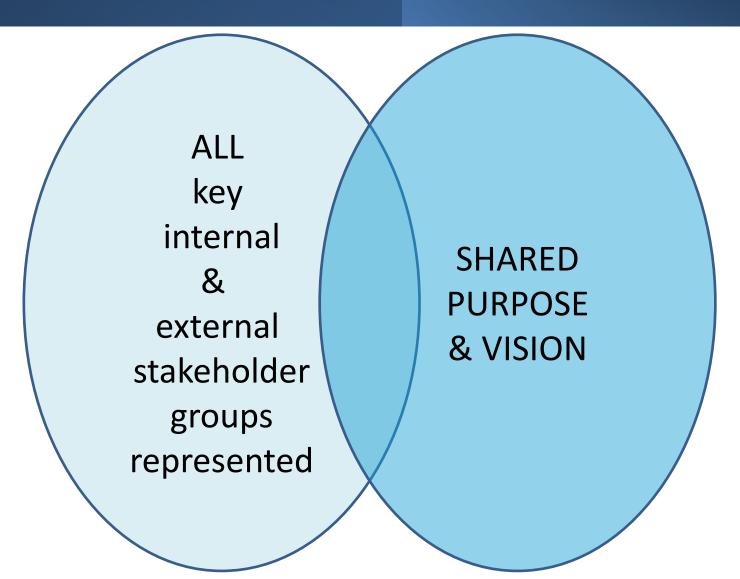
System Implementation

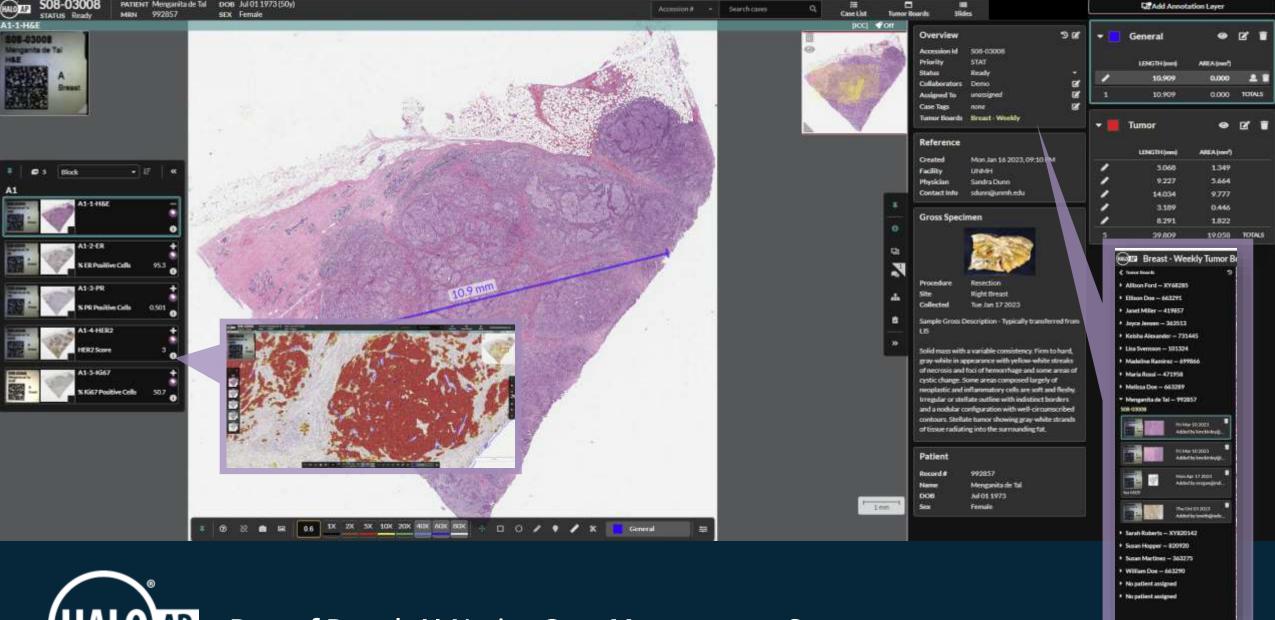
Clinical Deployment

NUH Digital Pathology Implementation Group

- Cellular pathology manager
- Clinical lead
- Project manager
- Clinical workstream chair
- Cellular pathology section leads
- Lead Biomedical scientists
- A&C manager
- Pathology IT manager
- Finance manager
- Procurement manager
- Trust Digital services representatives
- HR manager
- NUH Estates

Indica Lab representatives







PATIENT Menganita de Tal DOB Jul 01 1973 (50y)

Best of Breed, Al-Native Case Management System

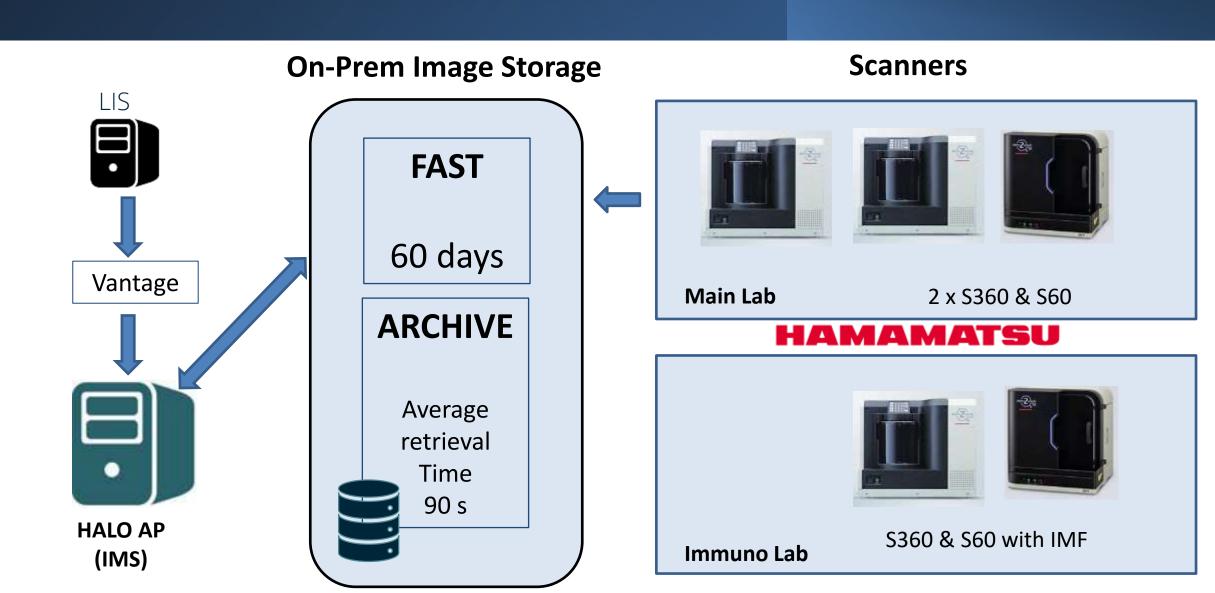
Indica Labs HALO AP

Implementation plan overview

(NUH)



NUH system overview



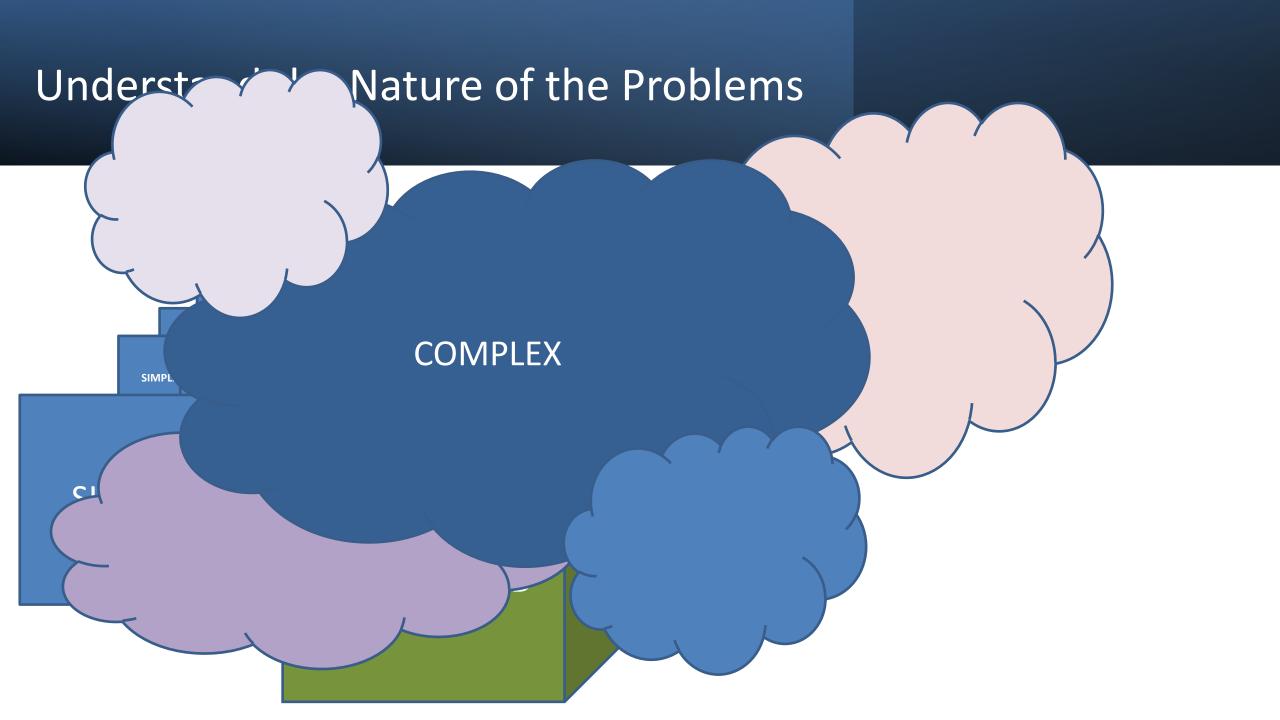
Project Phases

Leadership & governance

Procurement

System Implementation

Clinical Deployment



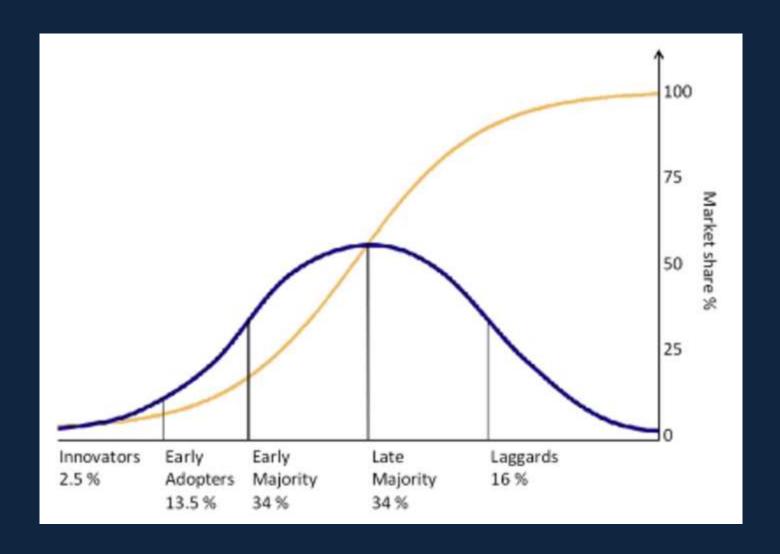
UNPREDICTABLE

- Multiple Interdependencies
- Unclear Cause & Effect relationships
 - Often non-linear
- "Uknown Unknowns"

Experiment when it's safe to "fail"

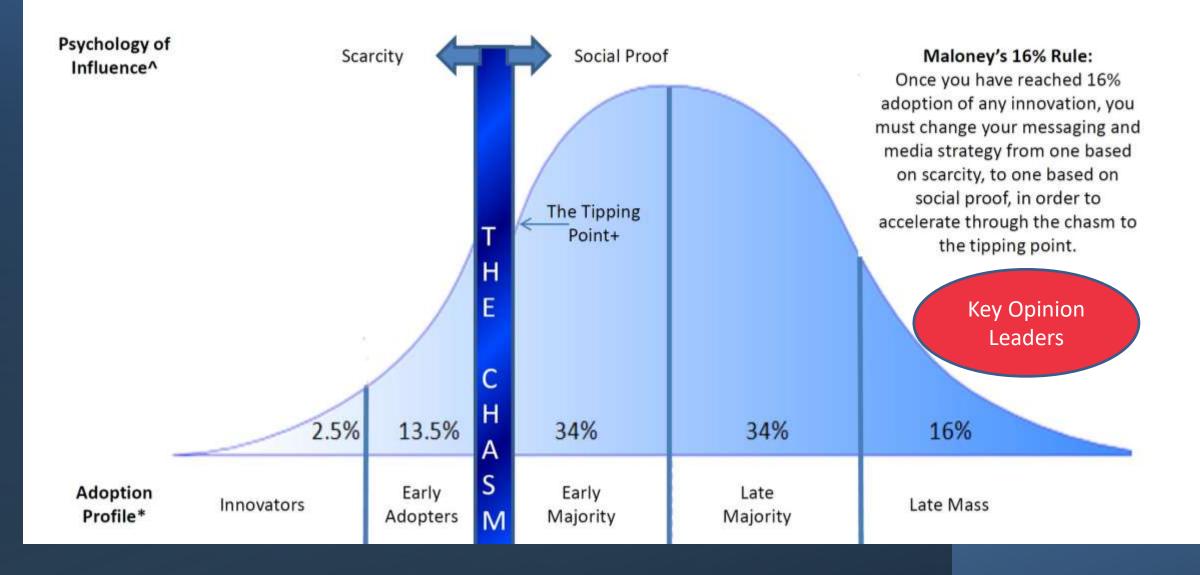
- Discover & Harness "Emergent" properties
- Probe, Sense, Respond
- Example: Transforming the way cellular pathology is delivered using digital pathology

COMPLEX

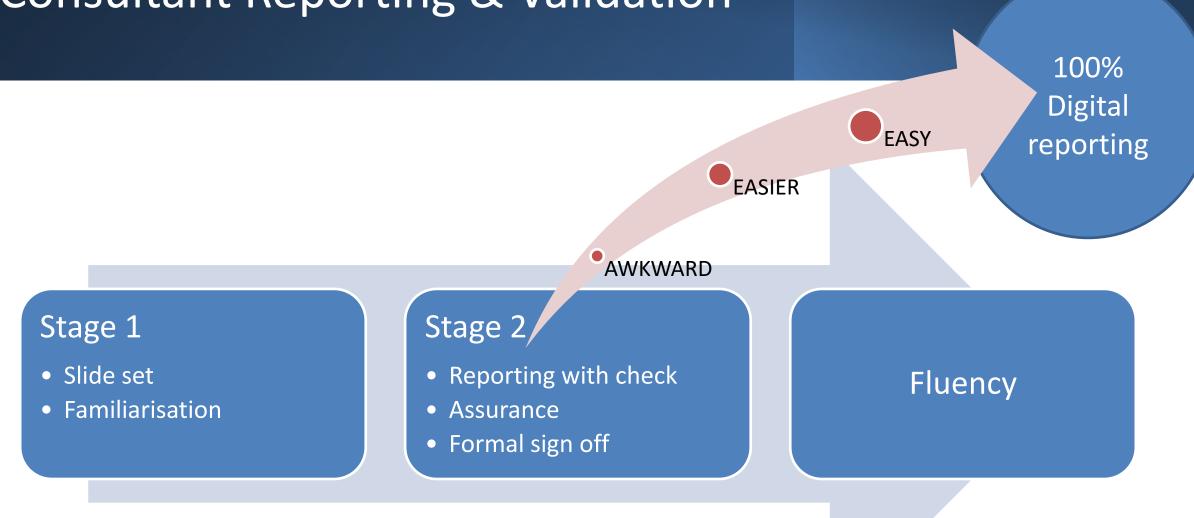


Diffusion of innovation

Accelerating Diffusion of Innovation: Maloney's 16% Rule®



Consultant Reporting & Validation

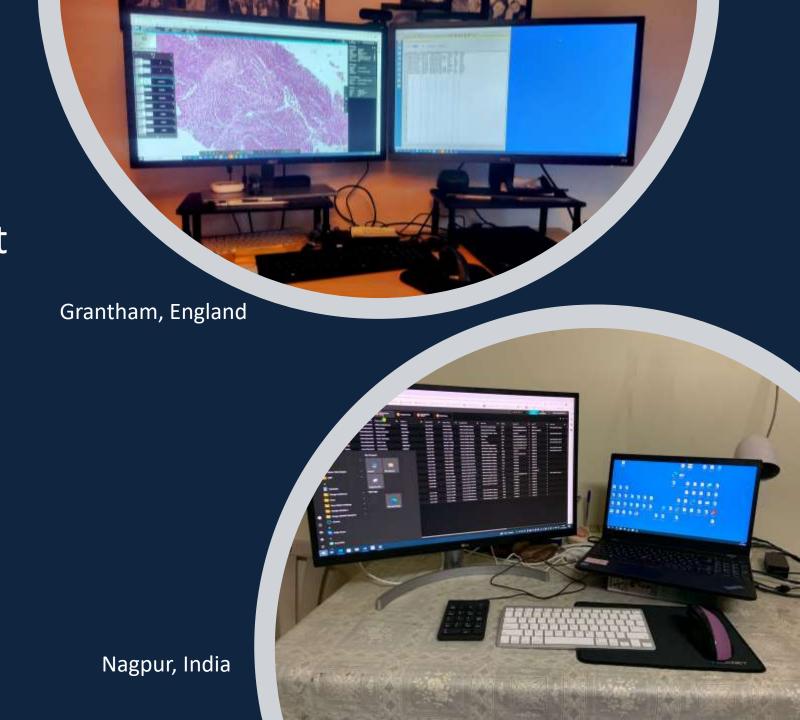


Digital workflow (Glass-lite)

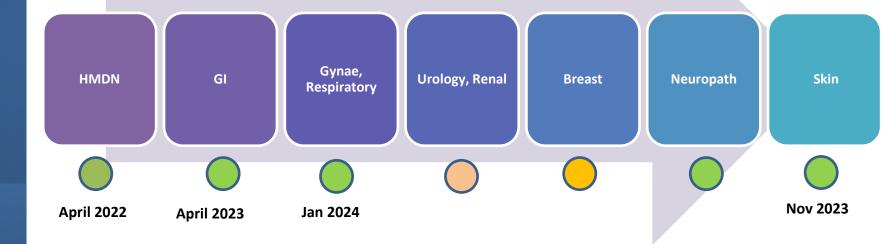
Specialty teams workflow driven by HALO AP

- "Pull" worklists on HALO AP
- Glass slides & report cards remain in lab
- Haempath, GI, Skin teams glass-lite
- Renal, respiratory & urology teams in planning

Moving to a virtual working environment



Consultant validation progress



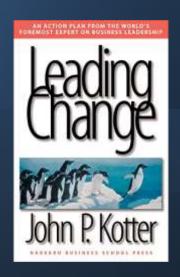
NUH consultant validation summary

	Stage 1 Validation	Stage 2 Validation	
Started	35	35	
%	100%	100%	
Completed	35	32	
%	100%	91%	
32 consultants in 2022 + 3 new starters			

Milestones

Milestones	
Contract signed with Indica labs	May 2021
Hamamatsu scanners installed	Aug 2021
HALO AP sandbox installed	Sept 2021
HALO AP production server installed	Oct 2021
Storage servers installed	Nov 2021
System Validation completed	Dec 2021
Reporting Go-Live	Jan 2022
HMDN team 100% digital reporting (glass lite workflow)	April 2022
Digital Pathology UKAS accreditation to ISO151898	Jan 2023
50% consultants complete digital reporting validation	Feb 2023
Renal biopsy immunofluorescence validated on HALO AP	Feb 2023
Glass lite workflow GI pathology	April 2023
>80% consultants complete digital reporting validation	May 2023
Glass lite workflow Skin pathology	Nov 2023
94 % consultants complete digital reporting validation	Nov 2023

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Benefits



Greater Flexibility

Faster review of cases

Much easier 2nd opinions

Home working

Improved TAT



Productivity

Falls during validation Rises with experience



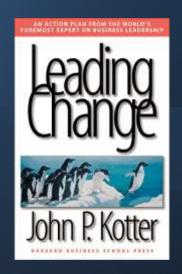
Team Morale

Sense of shared achievement

Closer relationship between lab and

consultants

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Institutionalize changes in the culture

- Anchoring New Approaches in the Culture
 - Embedding the changes into the systems, processes, & values

Making it permanent

Maintaining momentum

Institutionalize changes in the culture

COMMUNICATION **CULTURE SYSTEMS STRUCTURES STRATEGY**

End of implementation planning



SYSTEMS

SOPs

Training

Business continuity plans



STRUCTURES

Digital Pathology Management Group

Computational Pathology group



STRATEGY

Future vision

Direction of travel

Short, medium and long term goals

NUH Image analysis/Al strategy

Short term – 3-6 months

- Integrate Grant funded IBEX Galen prostate & breast
- Set up Computational pathology group

Medium term – 6-12 months

- Develop business case for HALO AP core analytics
- Collaborate with indica to develop and validate assays

Long term - > 12 months

 Continually develop business cases for novel assays

Transitioning the Team

"Off-boarding"

- Key team members will not be around to manage BAU
- Knowledge and skills need to be shared
- New relationships need to be built internally & externally

PARTNERSHIP WITH SHERWOOD FOREST HOSPITAL'S TRUST

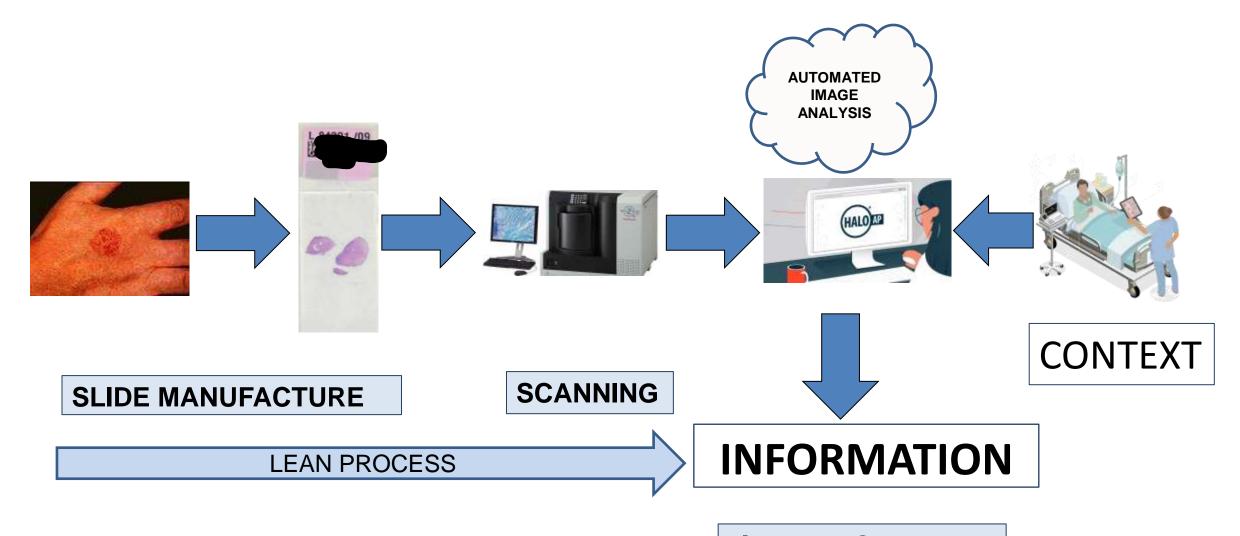


Strategic Pathology Partnership

Joint LIMS

- Single Deployment of HALO AP
- Vision seamless Cellular Pathology Service

DIGITAL HISTOPATHOLOGY



Improve Outcomes

Systemic Problems (NHS-wide)



LIMS capability

NHS infrastructure old
Integration with IMS & AI problematic



Pathologist Training

Transition from glass to digital RCPath exam still on glass.
Still need glass slides for training



Future Funding

Soft money ending

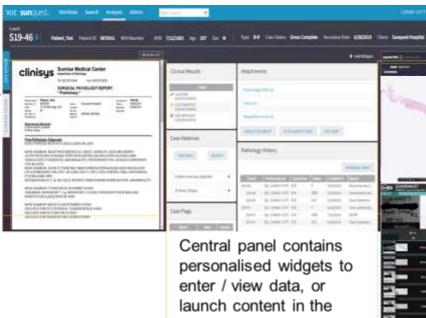
Trust business cases

Difficult NHS-wide financial situation

Fully Integrated Digital Reporting

VUE

Left hand panel is the dynamic report preview, refreshing after new changes are made e.g. report edited, synoptic data entered



Right hand panel is the response pane presenting widget content.

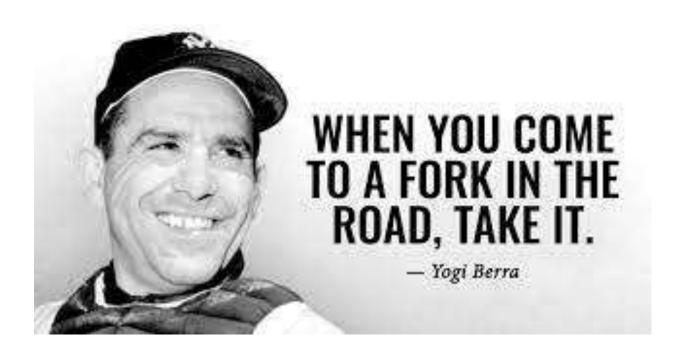
This window can launch on a second monitor.

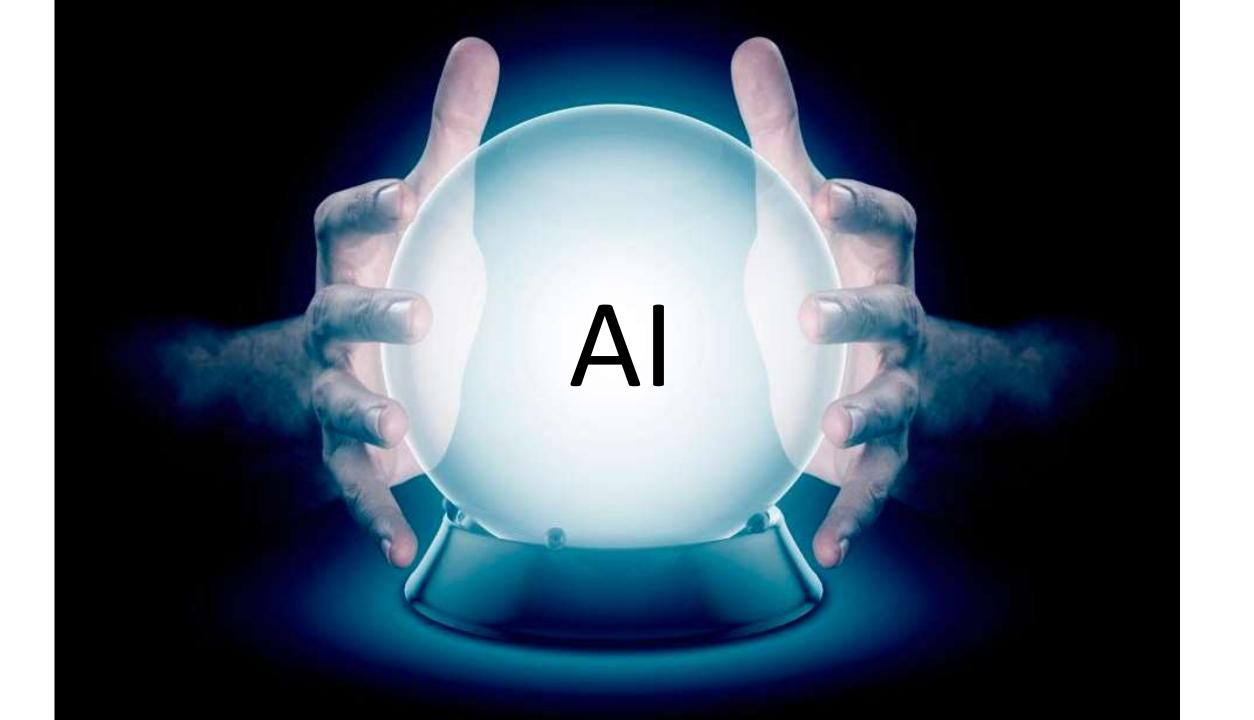
HALO AP

interactive window.

"It's difficult to make predictions....

especially about the future "







Thanks to

- NUH Cellular Pathology Team
- Wider NUH Trust Digital Pathology Implementation Team
- Katie McKinley & Indica Labs Team
- Rob Turner and Hamamatsu Team
- PathLAKE plus Team
- Innovate UK

Any Questions

