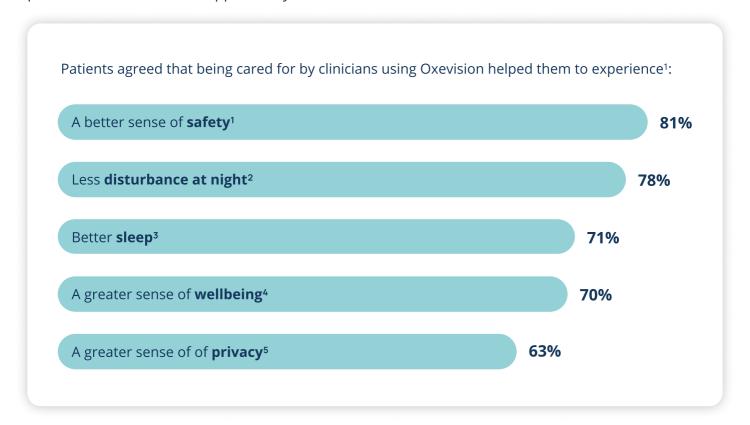# Patient experience with oxevision®

Oxevision helps clinicians in mental health hospitals to improve the experiences of the patients they care for, including their sense of safety, wellbeing, privacy and dignity.

This report uses data compiled from NHS-led surveys, focus groups and interviews — conducted with over 75 patients across five NHS England mental health trusts — to illustrate the experiences of patients whose care was supported by Oxevision.

Patients agreed that being cared for by clinicians using Oxevision helped them to experience[1]:

A better sense of **safety**[1]	**81%**
Less **disturbance at night**[2]	**78%**
Better **sleep**[3]	**71%**
A greater sense of **wellbeing**[4]	**70%**
A greater sense of of **privacy**[5]	**63%**

What is Oxevision?

Oxevision is a non-contact, vision-based patient monitoring and management platform. It enables staff to take spot-check pulse rate and breathing rate observations without the need to enter patients' rooms and disturb them.

Using location and activity based alerts, it can notify staff when patients may need help or assistance, for example, if they have been in the bathroom for a long time, if other people have entered their room, or they have left their room at night. It also provides reports that staff and patients can use together to support care planning.

Oxevision supports compassionate and dignified care. Patients are informed by staff of the system when they arrive in hospital, and engaged about its use throughout their stay. It is an extra tool for staff in caring for their patients and does not replace therapeutic interaction or personal care.

[1] Fractions refer to the proportion of patients who agreed or strongly agreed with the statement. Of those who disagreed with the statement, there is no indication that they felt the system had an adverse (rather than neutral) impact.
Sample size: [2] N= 78; [3] N=77; [4] N=76; [5] N=60; [6] N=78. Data compiled from five NHS Mental Health Trusts.

Feeling safer

Patients reported that the staff caring for them were sometimes able to help them sooner when using Oxevision, making them feel safer.

They also felt that, when staff could safely check on them remotely, they were given space and independence which was helpful for their recovery.

> " I think Oxevision **increases safety for patients** because staff carry around the tablet with Oxevision on it. They can see an overview of what's going on on the ward, without knocking on the patient's door. "
>
> **Patient**

> " Having Oxevision makes me have a **better sense of wellbeing** because I feel more secure. "
>
> **Patient**

Richard's Story

Proactive caretaking

Read story ›

Matt's Story

Greater safety and privacy

Read story ›

A better night's sleep

When patients are in hospital, staff must check that they are safe and well, sometimes as often as every 15 minutes, even throughout the night. This involves opening door hatches, switching on lights and entering bedrooms — all of which disturbs patients' sleep and wakes them up.

Oxevision enables staff to take observations without entering a patient's room, which can be especially useful at night when they are asleep.

Patients who took part in this research reported being able to sleep better when being cared for by clinicians using Oxevision, due to being disturbed less. Some patients said that having better sleep made them less anxious and improved their mood the next day.

> " It's good for a **rested night's sleep**. It stops the nurses checking on you [in person at night]. I have been woken by torch light shining through my window at night which did panic me and made me think of the police coming to my property. "
>
> **Patient**

> " I've been in the mental health system for a total of 7 years, since I was 18. Before, the staff would come in all the time during the night, turn on the lights, and would wake you up. It was very stressful, especially when on medication. Now, they **don't disturb sleep as much** and I think Oxevision is great for that. "
>
> **Patient**

> "It was nice to get a **good night's sleep**. I sleep better [in the room equipped with Oxevision] than the other room where the lights are turned on and the shutters are opened a lot of the time."
>
> **Patient**

> "I like Oxevision because the staff **don't disturb my sleep** at night any more. They used to come in every 10-15 minutes even at 6am in the morning to check that I am breathing. I think **the system has been a good thing** and it doesn't bother me."
>
> **Patient**

More privacy and dignity

The Oxevision Vital Signs module allows staff to take contact-free measurements of a patient's pulse and breathing rate when they are resting or still. This means that clinicians don't have to disturb patients as often when doing their observation rounds and safety checks. The platform doesn't replace therapeutic interaction or personal care and is only used to support observations when there is an associated patient and/or safety benefit.

Though not all patients who took part in this research agreed, most reported experiencing a greater sense of privacy and dignity while being cared for in bedrooms equipped with Oxevision.

> "At first, I was paranoid Oxevision would be able to see me getting undressed, but now it's been fully explained I'm much more at ease and have **more dignity** from staff not having to constantly come in my room."
>
> **Patient**

> "Since Oxevision was installed, I'm **disturbed much less at night.** It's much better because **no one watches you** trying to do everything."
>
> **Patient**

> "I don't think the system has impacted much on my privacy. **I don't feel undignified.**"
>
> **Patient**

> "I don't really care [that there's a camera]. It's a little bit like "oh there's a camera there"."
>
> **Patient**

> "**I feel dignified** with staff using the system at night. It does not disturb my sleep."
>
> **Patient**
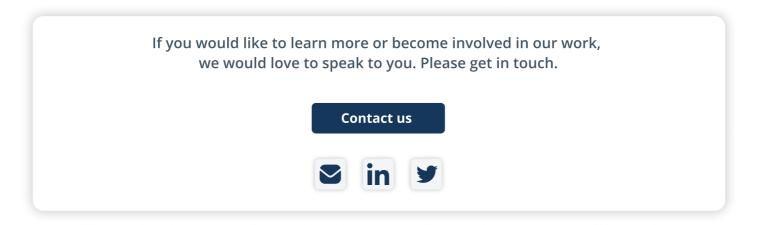
Listening to and learning from patients

Patient and carer engagement is a fundamental part of the work we do at Oxehealth.

Working closely with healthcare providers, we aim to ensure that patients and carers are involved in the process as early as possible, often before the decision is made by the organisation to engage in a partnership with us.

Patients and carers are engaged throughout the implementation process and, once Oxevision is live, there is regular engagement to ensure their feedback and experiences are listened to and learned from to help improve care on the ward.

Patients' views and those of their carers are actively represented within our organisation through our partnerships with NHS trusts, academic institutions and leading research centres across the country both within our day-to-day work the work done by our academic research organisation — the Oxehealth Clinical Research Forum. This includes co-design, co-production and testing of new developments to the platform.

Patient engagement is an ongoing, living process. We are actively looking to expand the scope of our work by forming active partnerships with patient and carer organisations, charities and other parties representing patient and carer communities and their voices.

**If you would like to learn more or become involved in our work,
we would love to speak to you. Please get in touch.**

Contact us

Methodology

Data presented in this report was compiled from early insight reports from five mental health trusts across NHS England. Data was collected between 2019 and 2021 from patients who were staying in hospital. It includes representation from 13 wards, including the following services: female working age acute, male working age acute, mixed working age acute and psychiatric intensive care units.

Patient surveys, focus groups and individual interviews took place on the ward after staff had been using Oxevision for 3-6 months (between 2019 and 2021) in order to evaluate patient perceptions. Patient information, including names, has all been changed or removed to protect patient data and anonymity.

A variety of topics were covered, including: patient safety, patient care, risk management, staff safety, staff experience and patient privacy and dignity. The surveys asked patients to answer on a scale of 1 to 5: 1 strongly disagree, 2 disagree, 3 no opinion, 4 agree, and 5 strongly agree. The number of total surveys and results analysed excluded 'no opinion' responses.