

Support and strengthen your workforce with Oxevision

Oxevision was designed to address the challenges faced by staff in inpatient psychiatric settings. The system opens the door to new ways of working, enabling clinical teams to deliver safer and higher quality care to patients, whilst increasing efficiency.

An improved experience for frontline workers

Staff who use Oxevision report feeling less stressed and anxious, more reassured and better able to do their jobs.

"We couldn't be happier having the system on the ward... It's made our jobs a lot easier and makes patients feel a lot safer."

"[Oxevision] without doubt is probably one of the best introductions of technology that I've seen in hospital... it's just so helpful and fantastic. I do really think it has a positive impact on our daily work."

"[Oxevision] helps a lot with our own stress and anxiety, especially with measuring the [patients'] breathing and pulse rate."

87% of staff reported that Oxevision helps them to provide better patient care¹

More time to engage with patients

Research with Oxehealth's partners suggests that augmenting clinical practice with Oxevision can save staff time. This time can be reinvested in therapeutic patient interaction. Staff time is saved through:

Fewer incidents occurring

44% reduction in self-harm (Acute)²
48% reduction in falls (Older Adult)³
37% reduction in assaults (PICU)⁴

Fewer restrictive interventions

40% reduction in rapid tranquillisation (PICU)⁴

Faster night-time observation rounds

47% reduction in time taken (Acute, Older Adult, PICU)^{5,6}

Decreased need for enhanced observations

32% reduction in 1:1s (Acute, Older Adult, PICU)⁵⁻⁹

Overall, these findings show that a typical ward can save over 2000 hours per year, which equates to approximately 3 hours per 12-hour shift^{7,10}

Reduced spending on agency staff

Providers who have deployed Oxevision report cash-releasing benefits.⁵ Savings are primarily from reductions in bank and agency spend as a result of reductions in 1:1 observations.

	Older Adult	Acute	PICU	Weighted average ⁷
Annual agency staff cash savings per ward (relating to reductions in 1:1 obs only)	799,750 SEK	679,050 SEK	734,200 SEK	734,200 SEK

Exchange rate used to convert estimated savings from GBP to SEK was 12,5.

ABOUT



oxehealth®

Oxehealth is a leader in vision-based patient monitoring. The company is a spinout from the University of Oxford Institute of Biomedical Engineering and is dedicated to helping mental health clinicians deliver safer, higher quality and more efficient inpatient care.



oxevision®

Oxevision is Oxehealth's vision-based patient monitoring system. The technology, which was developed in collaboration with patients and NHS nurses and doctors, incorporates a regulated medical device that operates with an infrared-sensitive camera. Oxevision enables staff to visually confirm a patient is safe, measure a patient's pulse and breathing rate without disturbing their sleep, and document digital observations. It also delivers location and activity based insights which support staff to intervene proactively and to plan better care in inpatient psychiatry.

For more information about Oxevision, contact Martin Lehmann

martin.lehmann@oxehealth.com | +46 708 893380

¹ Data compiled from NHS-led surveys at seven NHS mental health Trusts, $N = 255$.

² Ndebele, F., et al. (2023). Non-contact health monitoring to support acute care in mental health. *Journal of Mental Health*. Advance online publication.

³ Wright, K., & Singh, S. (2022). Reducing falls in dementia inpatients using vision-based technology. *Journal of Patient Safety*, 18(3), 177-181.

⁴ Ndebele, F., et al. (2022). Non-contact health monitoring to support care in a psychiatric intensive care unit. *Journal of Psychiatric Intensive Care*, 18(2), 95-100.

⁵ York Health Economics Consortium. (2023). *Economic Impact Case Study: Oxevision*.

⁶ Average reduction in night-time observation hours across three wards (one Older Adult, one Acute, one PICU).

⁷ Weighted average for a typical ward, calculated by estimating the proportion of wards that are Older Adult, Acute and PICU in NHS England (20%, 70% and 10% respectively). Older Adult results are standardised for a 16-bed ward with 90% occupancy; Acute results are standardised for a 16-bed ward with 90% occupancy; PICU results are standardised for a 12-bed ward with 90% occupancy.

⁸ Malcolm, R., et al. (2022). Economic evaluation of a vision-based patient monitoring and management system for working-age people in psychiatric intensive care units in England. *Journal of Medical Economics*, 25(1), 1101-1109.

⁹ Malcolm, R., et al. (2022). Economic evaluation of a vision-based patient monitoring and management system in an acute adult and an older adult mental health hospital in England. *Journal of Medical Economics*, 25(1), 1207-1217.

¹⁰ Total number of hours (2060) saved was calculated by adding together hours saved for: fewer incidents occurring (202 hours for self-harm, 232 hours for falls, 132 hours for assaults); fewer restrictive interventions (400 hours); faster night-time observation rounds (379 hours); and reduced 1:1 observations (1,440 hours). Hours saved per shift = 2.82.