

# **EMIS Group plc**

2013 Final results presentation

*Supporting longer and healthier lives*

Chris Spencer – CEO

Peter Southby – CFO

“ An **exceptionally**  
productive year ”

Introduction

**Chris Spencer**

Financial review

**Peter Southby**

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**Chris Spencer**

Summary and outlook

**Chris Spencer**

## Financial review

Peter Southby  
Chief Financial Officer  
EMIS Group



## Financial highlights

### Overall results in line with expectations

Positive initial contribution from 2013 acquisitions  
 Net debt reduced from pro forma £18.7m to £13.5m

**Total revenue £105.5m (2012: £86.3m), up 22% (organic 12%)**

**Recurring revenue of £81.4m (2012: £69.4m), up 17%**

### Group operating profit:

- Reported - £24.9m (2012: £24.1m), up 3%
- Adjusted<sup>(1)</sup> - £26.1m (2012: £22.8m), up 14% (organic 10%)

**Cash generated from operations<sup>(2)</sup> of £32.6m (2012: £27.4m), up 19%**

**Net debt at £13.5m (2012: net cash of £7.7m)**

### EPS:

- Reported – 32.6p (2012: 32.5p)
- Adjusted<sup>(1)</sup> – 34.0p (2012: 30.8p), up 11%

**Total dividend 16.0p (2012: 14.2p), up 13%**

- Including final dividend of 8.0p (2012: 7.1p)



<sup>(1)</sup> Excludes exceptional items, capitalisation and amortisation of development costs and amortisation of acquired intangibles. EPS calculations also adjust for related tax and non-controlling interest impact.

<sup>(2)</sup> Adjusted to exclude internal development costs capitalised of £6.1m (2012: £5.3m).

## Financial review - income statement

£m	H1 2013	H2 2013	FY 2013	FY 2012	% Increase
Revenue	47.1	58.4	<b>105.5</b>	86.3	<b>22%</b>
Adjusted operating profit	11.6	14.5	<b>26.1</b>	22.8	<b>14%</b>
Capitalised development costs	2.7	3.4	<b>6.1</b>	5.3	
Amortisation	(2.2)	(3.9)	<b>(6.1)</b>	(3.6)	
Finance costs	(0.1)	(0.2)	<b>(0.3)</b>	-	
Exceptionals/other	-	(1.2)	<b>(1.2)</b>	(0.4)	
Profit before tax	12.0	12.6	<b>24.6</b>	24.1	<b>2%</b>
Tax	(2.7)	(2.0)	<b>(4.7)</b>	(4.6)	
Non-controlling interest	(0.2)	(0.3)	<b>(0.5)</b>	(0.6)	
Earnings	9.1	10.3	<b>19.4</b>	18.9	
Adjusted EPS	14.9p	19.1p	<b>34.0p</b>	30.8p	<b>11%</b>
Reported EPS	15.6p	17.0p	<b>32.6p</b>	32.5p	-

- Revenue increase driven by EMIS Web GP roll-out (organic increase 12%) and three acquisitions
- Adjusted operating profit up by 14% (10% organic) despite 27% increase in staff costs (13% organic)
- 2013 underlying tax rate 23% excluding deferred tax rate change

## Financial review - segmental analysis

£m (rounded)	2013				2012				% Increase
	Primary & Community Care	Community Pharmacy	Secondary & Specialist Care	Total	Primary & Community Care	Community Pharmacy	Total		
Revenue	<b>80.0</b>	<b>17.0</b>	<b>8.5</b>	<b>105.5</b>	69.8	16.5	86.3	22%	
Of which recurring revenue	<b>62.3</b>	<b>14.3</b>	<b>4.8</b>	<b>81.4</b>	56.7	12.7	69.4	17%	
Segmental operating profit	<b>23.6</b>	<b>3.0</b>	<b>0.3</b>	<b>26.9</b>	22.5	3.0	25.5		
Capitalised development costs	<b>(5.3)</b>	-	<b>(0.8)</b>	<b>(6.1)</b>	(5.3)	-	(5.3)		
Amortisation	<b>3.9</b>	<b>0.9</b>	<b>1.3</b>	<b>6.1</b>	2.7	0.8	3.5		
Adjusted segmental profit	<b>22.2</b>	<b>3.9</b>	<b>0.8</b>	<b>26.9</b>	19.9	3.8	23.7	14%	
Group costs				<b>(0.8)</b>			(0.9)		
Adjusted operating profit				<b>26.1</b>			22.8	14%	

- P&CC growth driven by EMIS Web GP roll-out including hosting, training
- Community Pharmacy growing estate offsetting loss of one-off £1.6m EPS R2 revenue in 2012
- Secondary & Specialist care includes H2 Ascribe and Digital Healthcare acquisitions – solid start building momentum into 2014

## Financial review - revenue analysis

£m	2013	% of revenues	2012	% of revenues
Licences	<b>40.0</b>	<b>38%</b>	38.2	44%
Maintenance & software support	<b>17.7</b>	<b>17%</b>	13.3	16%
Hosting	<b>14.3</b>	<b>14%</b>	9.0	10%
Hardware	<b>6.9</b>	<b>6%</b>	5.2	6%
Training/consultancy/implementation	<b>12.1</b>	<b>11%</b>	6.5	8%
Other support services	<b>14.5</b>	<b>14%</b>	14.1	16%
<b>Total</b>	<b>105.5</b>	<b>100%</b>	86.3	100%

Recurring	<b>81.4</b>	<b>77%</b>	69.4	80%
Non-recurring	<b>24.1</b>	<b>23%</b>	16.9	20%
<b>Total</b>	<b>105.5</b>	<b>100%</b>	86.3	100%

- Good visibility through recurring revenue growth of £12.0m – organic £7.2m, acquisitions £4.8m
- EMIS Web roll-out driving growth in Hosting and in Training/Consultancy/Implementation
- Acquisitions impact mainly in Maintenance and software support and Training/Consultancy/Implementation

## Financial review - cash flow

£m	2013	2012
<b>Operating profit</b>	<b>24.9</b>	24.1
<b>Depreciation and amortisation</b>	<b>12.8</b>	8.5
<b>Working capital</b>	<b>1.0</b>	0.1
<b>Cash flow from operating activities</b>	<b>38.7</b>	32.7
<b>Development costs capitalised</b>	<b>(6.1)</b>	(5.3)
<b>Cash from operations</b>	<b>32.6</b>	27.4
<b>Business combinations</b>	<b>(57.5)</b>	(0.8)
<b>Placing proceeds</b>	<b>26.3</b>	-
<b>Net capital expenditure</b>	<b>(8.7)</b>	(12.8)
<b>Transactions in own shares</b>	<b>0.6</b>	(1.8)
<b>Tax</b>	<b>(5.1)</b>	(4.6)
<b>Dividends</b>	<b>(9.1)</b>	(7.7)
<b>Other</b>	<b>(0.3)</b>	-
<b>Change in net debt in year</b>	<b>(21.2)</b>	(0.3)

Cash from operations up 19% at £32.6m

Business combinations:

- Multepos (£0.7m)
- Digital Healthcare (£3.0m)
- Ascribe (£53.8m), part funded by placing of 4.4m shares at 615p

Capex includes:

- Hosting assets (£5.3m)
- Buildings purchase (£1.6m)
- Motor vehicles (£0.6m)

Net debt at £13.5m



## Financial review - balance sheet

£m	2013	2012
<b>Goodwill</b>	<b>60.1</b>	22.0
<b>Acquired intangible assets</b>	<b>46.9</b>	15.1
<b>Development costs</b>	<b>19.5</b>	15.2
<b>Property, plant &amp; equipment and purchased intangible assets</b>	<b>25.4</b>	22.6
<b>Associate and other current assets</b>	<b>25.6</b>	19.2
<b>Deferred income</b>	<b>(25.4)</b>	(15.9)
<b>Contingent consideration</b>	<b>(4.0)</b>	-
<b>Other current liabilities</b>	<b>(19.0)</b>	(14.3)
<b>Deferred tax</b>	<b>(11.5)</b>	(7.5)
<b>Net (debt)/cash</b>	<b>(13.5)</b>	7.7
<b>Net assets</b>	<b>104.1</b>	64.1

Strong balance sheet with low gearing (£4.2m in cash / £17.7m debt)

Bank facilities secured to 2017 (£15m RCF unutilised at 31 December 2013)

Acquisition impact on Goodwill, Acquired Intangibles, Deferred tax

Working capital improvement

Deferred income growth provides good revenue visibility

Cost of final proposed dividend £5.0m

## Financial review - financial guidance and trends

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### GPSoC new framework

- Not expected to have material effect on 2014
- Further opportunities in 2015 based on performance and delivery

### 2014 reduction in EMIS Web GP roll-out revenue and associated costs

#### Acquisitions benefit

- Digital Healthcare annual revenue c. £3.4m p.a., expecting double-digit margin in 2014
- Ascribe annual revenue c. £27m, expecting adjusted profit of at least £4.0m in 2014
- Acquired intangible amortisation increasing to £6.1m

#### Share-based payments

- Charge to increase with recent awards and Remuneration Committee review of senior incentivisation

#### Tax rate

- No further deferred tax rate change anticipated (£1.0m benefit in 2013)
- Presentational change with “Above the line” R&D tax credits – full year in 2014

#### Development costs

- Continued capitalisation only where IFRS criteria met but increasing investment with Ascribe, new Community Pharmacy product
- Amortisation increasing in line with EMIS Web GP estate

#### Capital expenditure

- Likely to be at similar level for enlarged group

## **Operational review**

Chris Spencer

Chief Executive Officer

EMIS Group





### Primary & Community Care

- UK primary care software market leading position maintained - market share 53.0% (5,232 GP practices) (2012: 51.2% (5,113 GP practices))
- Doubling of GP practices live with EMIS Web to 3,327 (2012: 1,635)
- CCMH focus showing results - contract wins and unprecedented level of bid activity



### Community Pharmacy

- High street pharmacy numbers increased - 4,781 community pharmacies, 35.3% of the UK market (2012: 4,595 pharmacies, 34.8%)
- Medicines Manager - developed, piloted and ready for launch



### Secondary & Specialist Care

Acquisitions deliver strategic platform for integrated care:

- Ascribe - substantial UK presence in PAS, A&E, Pharmacy and Mental Health
- Digital Healthcare - England's market leader for diabetic eye screening software

Post acquisition - Ascribe secured several significant contracts - Digital Healthcare rolling out upgraded software

### **Primary Care – market leading position maintained**

#### **EMIS remains clear UK GP software market leader:**

- UK market share grew to 53.0% (5,232 GP practices) (2012: 51.2% (5,113 GP practices))
- Primary care user base remains loyal - 76% of English GP practices have used an EMIS system for over 10 years

#### **Renegotiation of expanded English GPSoC Framework continues:**

- intended conclusion of Lot 1 by 31 March 2014
- discussions have begun regarding GPSoC Lots 2 and 3 and renewal of the GP system framework for Northern Ireland

#### **Following phased withdrawal of CSC's iSoft product from UK primary care market:**

- 269 former iSoft practices migrated to EMIS in England
- Group ultimately expects to win circa:
  - 75% of former iSoft English estate, and
  - 66% of the total iSoft estate of 492 practices

#### **NHS Wales began rolling out a centrally hosted IT service to its GPs:**

- EMIS Web customer acceptance testing concluded in March 2013
- first EMIS Web practice went live in June 2013

### EMIS Web GP

EMIS Web rollout to GP practices continued

#### By end of 2013:

- 3,327 live EMIS Web practices in England and Wales
- 74% of EMIS's total GP estate in those countries, an increase of 1,692 practices during the year
- Remaining 1,196 practices all either placed an order or in the EMIS Web familiarisation service



### EMIS Web Mobile

Completed, tested and released in early 2013

Enables GPs, and others in CCMH and other integrated care settings, to access core elements of EMIS Web on a tablet when working away from their clinical base



### EMIS Web CCMH - growing presence with unprecedented tender activity

- Growing presence in CCMH where the procurements are led by CCGs
- Experienced Director of CCMH joined the Group in June 2013
- Enhanced CCMH and integrated care functionality released
- EMIS Web now used in at least 205 clinical settings beyond primary care:

#### **Camden**

EMIS Web integrating care including community, diabetes, kidney disease, geriatrics, heart failure, COPD and memory service

#### **Pan London**

Signed T30 Framework to supply clinical information systems to 30 community and mental health trusts in London and the South

#### **Glasgow**

Implemented first phase of a project securely to share information on 240,000 children across community services

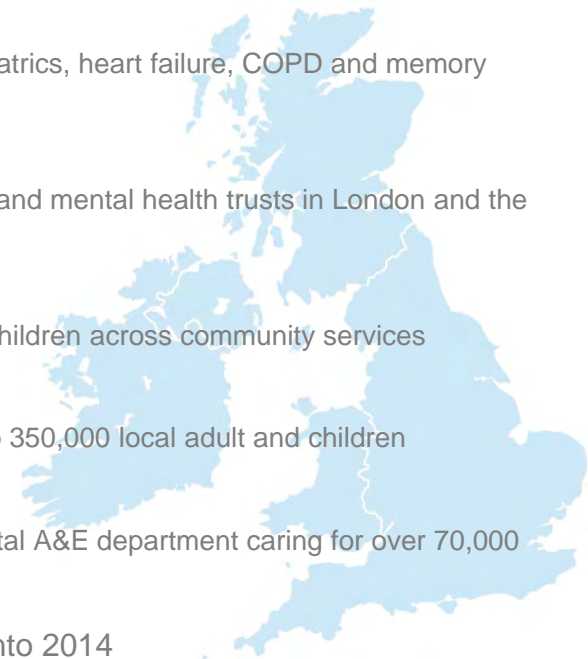
#### **Bromley**

Contracted to replace Servelec RiO system providing all community services to 350,000 local adult and children

#### **East London Urgent Care Centre**

EMIS Web installed to help prevent unnecessary admissions to Newham Hospital A&E department caring for over 70,000 patients a year

- Unprecedented tender activity continued throughout the second half and into 2014



### Patient Services - preparing accelerated uptake of transactional services

#### Patient.co.uk:

- Helps patients play a key part in their own care through access to clinically reviewed health and well-being information
- Gateway for transactional healthcare services - limited revenue benefit in late 2014 but greater impact in 2015 and beyond

#### Rapid growth in patient and clinical visitors:

- Further enhancements to content and functionality
- January 2013 - 5m unique visitors and 11m page impressions
- December 2013 - 11m unique visitors and 21m page impressions

#### Released UK's first Patient Access App





**Rx Systems** – maintaining and extending market share and product platform

Provides healthcare IT, software, and services to 35.3% (2012: 34.8%) of UK high street pharmacies.

**ProScript**, Group's community pharmacy software, the single most widely used dispensary management system in the UK.

**Multepos Computer Systems** acquired on 14 January 2013 to complement and expand **ProScript** into pharmacy retail systems:

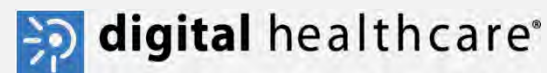
- Net cash consideration of £0.7 million
- Financed from Group's existing cash resources
- Quickly integrated within the first half of the year

**Successful year:**

- Organically growing user base
- Creating, piloting and preparing for formal launch of Medicines Manager facilitating information flow between GP practices and community pharmacies
- Drawing up detailed plans for development of next generation integrated community pharmacy software

### Digital Healthcare– extending the product platform in specialist care

- Acquired 5 August 2013 for £3.1m net cash consideration
- Leading provider of diabetic eye screening and other ophthalmology-related solutions
- English market share 80% and well-established international presence
- Strong position in a profitable specialist niche market, adjacent to Group's presence in primary care, CCMH, community pharmacy, secondary and specialist systems
- Also provides opportunities for hosting and delivering fully managed ophthalmology-related services



### Ascribe– extending the product platform in secondary care

- Acquired 16 September 2013 for initial enterprise value of £57.5m:
  - Further cash payments contingent on performance of up to £3.0m
- Well-established UK based healthcare software and IT services provider, principally focused on Hospital Pharmacy, A&E, Mental Health and Patient Administration Systems (PAS)/Electronic Patient Records (EPR)
- High level of penetration into NHS secondary care organisations
- International reach with 18% of recurring revenue derived from Australasia



### **Integration** – organisational and product

### **Organisational and product integrations of both Digital Healthcare and Ascribe progressing well**

#### **Since acquisition:**

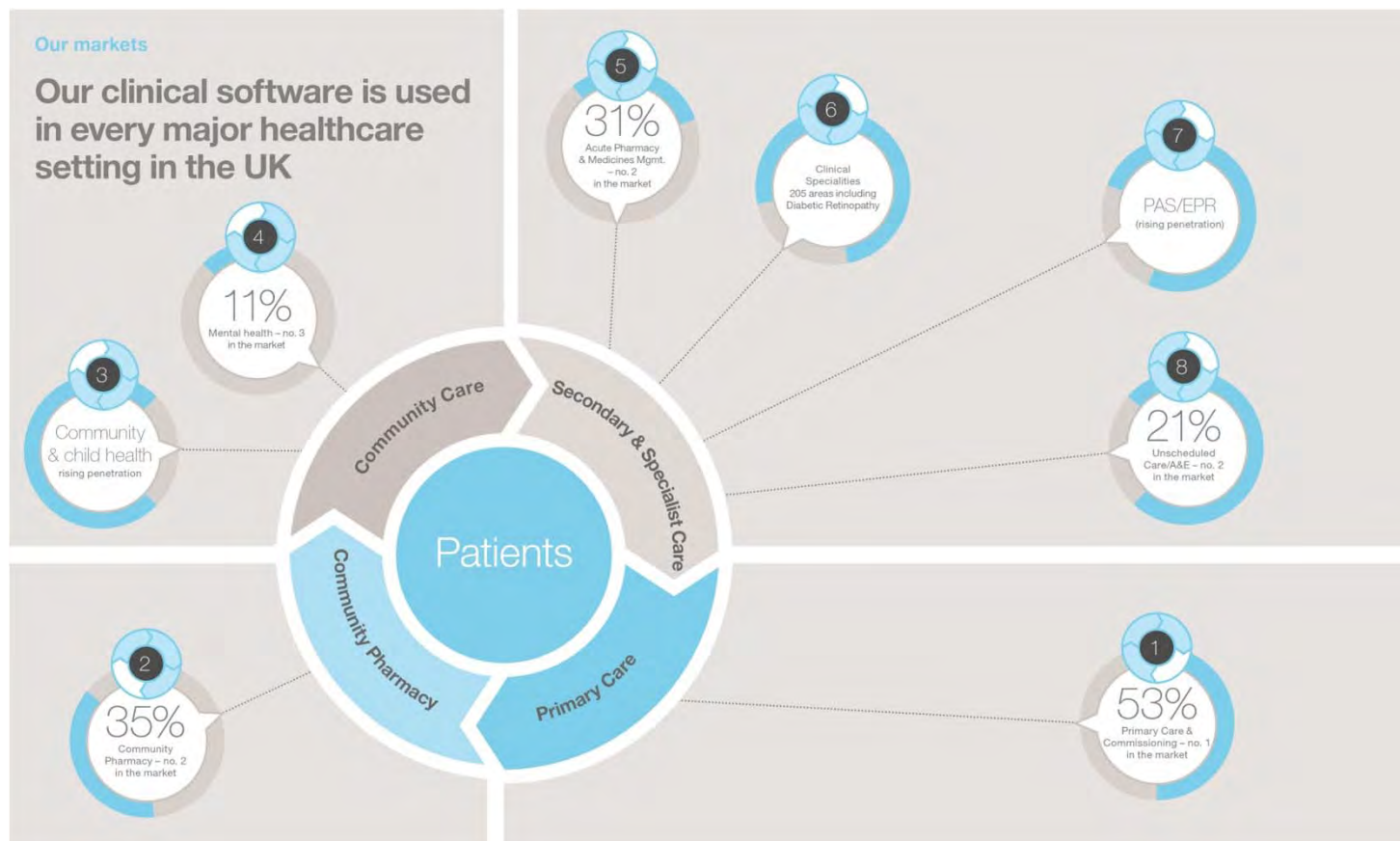
- Secured significant contracts with major NHS hospital trusts including Doncaster & Bassetlaw and South Devon
- Digital Healthcare first supplier to widely roll-out Common Pathway software plus clinician requested enhancements

#### **Both businesses:**

- Operate similar business models to EMIS, with a high proportion of recurring revenues
- Expected to enhance earnings in the first full year of ownership in 2014

### **Acquisition of Ascribe expected to deliver £0.5m savings from synergies this year**

## Strategic platform for integrated care



### Delivers:

- Unique platform facilitating integrated care in all major care settings
- Medium and long term growth opportunities

**Group continues to trade in line with management expectations, with continuing strong revenue visibility**

**EMIS Web GP practices currently installed is 3,453 with:**

- All remaining English estate having either placed an order or currently using the familiarisation service
- Balance of English EMIS Web GP installations expected throughout 2014

**GPSoC Lot 1 negotiations expected to conclude shortly**

**CCMH presence and pipeline strengthening further**

**Organisational and product integrations of both Digital Healthcare and Ascribe progressing well including interoperability of the acquired product sets with EMIS Web for GPs**

**Group confidently expects to remain at the heart of healthcare IT taking further and significant steps towards our strategic vision of integrated healthcare systems joining primary, community, secondary and specialist care**

# Appendix

## Primary care market lead maintained

Country	EMIS estate	%	InPS estate	%	iSoft estate	%	TPP estate	%	Other	%	Total
England	<b>4,364</b>	54.2	1,200	14.9	6	0.1	2,325	28.9	154	1.9	8,049
Scotland	<b>511</b>	51.4	484	48.6	-	-	-	-	-	-	995
Wales	<b>159</b>	33.9	263	56.1	43	9.2	-	-	4	0.8	469
Northern Ireland	<b>198</b>	56.4	125	35.6	-	-	-	-	28	8.0	351
<b>UK Total</b>	<b>5,232</b>	53.0	2,072	21.0	49	0.5	2,325	23.6	186	1.9	9,864

(EMIS and competitor data estimated based on company records showing customers installed as at 31 December 2013)

## Core business analysis (old basis)

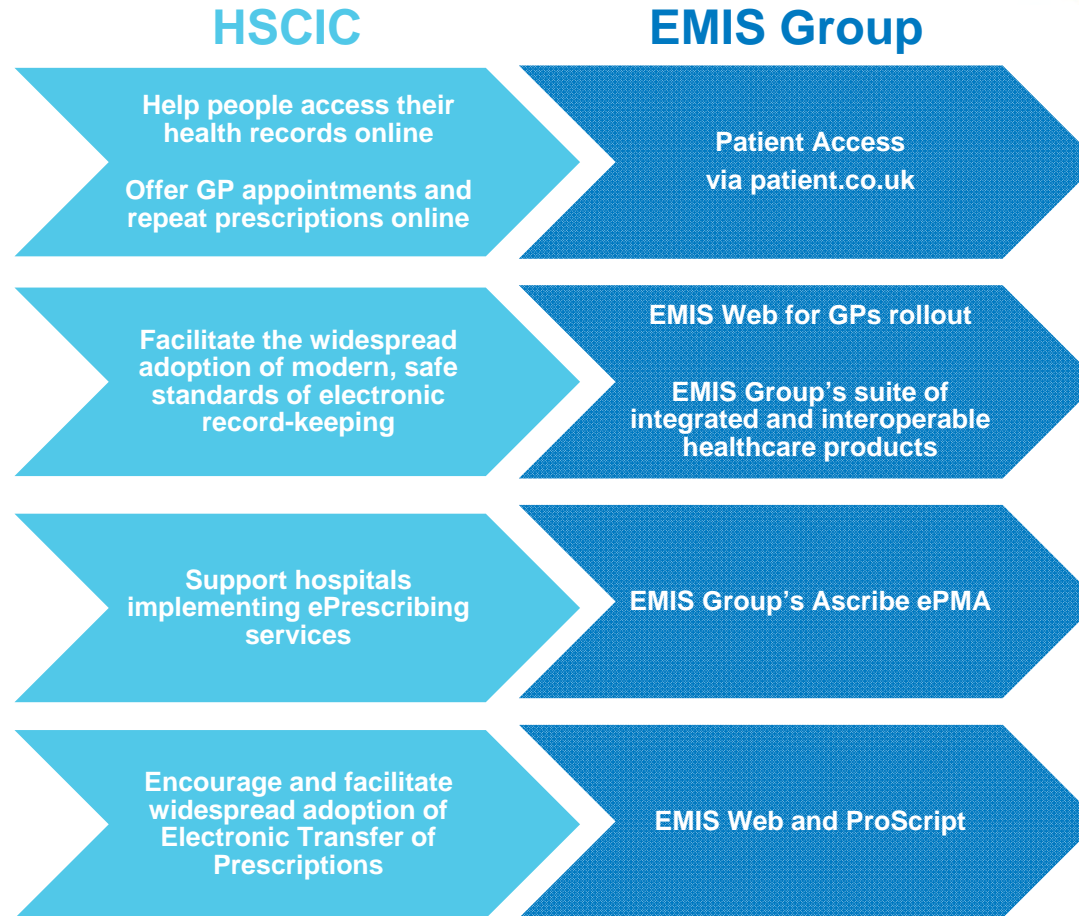
£m Year ended 31 December	H1 2013	% of sales	H2 2013	% of sales	2013	% of sales	2012	% of sales
Licences and software support	19.1	40%	25.7	44%	44.8	42%	36.4	42%
Other support services	11.6	25%	10.7	18%	22.3	21%	22.1	26%
Hosting	6.3	13%	8.0	14%	14.3	14%	9.0	10%
Hardware and training	7.9	17%	11.0	19%	18.9	18%	13.1	15%
Other	2.2	5%	3.0	5%	5.2	5%	5.7	7%
<b>Total</b>	<b>47.1</b>	<b>100%</b>	<b>58.4</b>	<b>100%</b>	<b>105.5</b>	<b>100%</b>	<b>86.3</b>	<b>100%</b>
Recurring	36.0	76%	45.4	78%	81.4	77%	69.4	80%
Non-recurring	11.1	24%	13.0	22%	24.1	23%	16.9	20%
<b>Total</b>	<b>47.1</b>	<b>100%</b>	<b>58.4</b>	<b>100%</b>	<b>105.5</b>	<b>100%</b>	<b>86.3</b>	<b>100%</b>



## Organic/acquisitions income statement

£m	Organic 2013	Acquisitions 2013	Total 2013	FY 2012	Organic % Increase
Revenue	96.3	9.2	<b>105.5</b>	86.3	<b>12%</b>
Recurring revenue	75.9	5.5	<b>81.4</b>	69.4	<b>9%</b>
Cost of sales	(11.0)	(0.8)	<b>(11.8)</b>	(10.9)	<b>1%</b>
Staff costs (including capitalised dev costs)	(43.0)	(5.6)	<b>(48.6)</b>	(38.1)	<b>13%</b>
Other operating expenses	(10.6)	(1.8)	<b>(12.4)</b>	(9.5)	<b>11%</b>
Contract asset depreciation	(3.3)	-	<b>(3.3)</b>	(2.6)	<b>25%</b>
Depreciation	(3.2)	(0.1)	<b>(3.3)</b>	(2.4)	<b>35%</b>
Adjusted operating profit	25.2	0.9	<b>26.1</b>	22.8	<b>10%</b>
Development costs capitalised	5.3	0.8	<b>6.1</b>	5.3	
Amortisation of development costs	(1.8)	(0.1)	<b>(1.9)</b>	(0.7)	
Amortisation of acquired intangibles	(2.9)	(1.3)	<b>(4.2)</b>	(2.9)	
Operating profit (pre-exceptional costs)	25.8	0.3	<b>26.1</b>	24.5	<b>5%</b>

## Alignment with HSCIC strategy – 2013-15



### A strategy

for the Health and Social Care  
Information Centre  
2013 – 2015



# Myth vs Reality – online patient services

### Patients

**MYTH** Only young IT savvy people will use online patient services

**FACT** 64% of users are over 35  
Almost 1 in 4 users are 55+

Age	Percentage
18-24	17%
25-34	19%
35-44	21%
45-54	19%
55+	24%

**MYTH** Online services will only catch on in big cities

**FACT** 1 in 6 users live in small towns or villages

**MYTH** People don't trust online patient services - it's a fad that will fade

**FACT** The use of Patient Access has increased by 63% (Jun-Sep 2013)

**MYTH** Those less well off won't use internet services

**FACT** 1 in 5 users are low income, social housing residents

# Myth vs Reality – online patient services

**MYTH** GP practices think their patients won't use online services

**FACT** 9 in 10 GP practices think their patients want online services

**96%** of GP practices recognise that patients want online services

**Health Professionals**

**MYTH** Doctors don't want online patient services

**FACT** 74% of healthcare professionals support online records viewing

**77%** support the use of online services such as appointment booking and repeat prescriptions

**79%** support asking a healthcare professional a question online

**60%** of EMIS practices in England intend to enable Patient Access in the near future

**16%** of practices say lack of time is the biggest obstacle for implementing online patient services

**FACT** It can take as little as 3 minutes to set up

**60%** Patient access

# Will the future Really be online?



**MYTH** You'll never get patients to take a more active role in their own healthcare

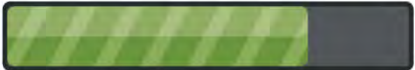
**FACT**



It's predicted that by 2020 **40%** of healthcare will be online

**FACT**

**61%** of Patient.co.uk visitors want to find out about a medical condition. And 23% want to find out about a healthy lifestyle



**75%** of patients wish they could update their record with information on conditions they can monitor home

**MYTH**

Patients will always want to see their doctor face-to-face



**85%** of patients support viewing records online

**FACT**

**57%** of patients want online GP consultations



“ EMIS Web is **intuitive**  
and **easy to use** ”

## Primary Care and Commissioning Improving group practice performance with EMIS Web

Yvonne Waddingham, practice manager at the Pelham Medical Group reports improved practice performance since moving to EMIS Web. **“EMIS Web is essential to us in bringing all the information and work processes together so that we can develop and improve services. We certainly expect to make economies of scale, improve clinical governance and streamline care as we share templates and protocols among all of the staff.**

**“Our new patients will be able to book appointments and order repeat prescriptions online as well as viewing their medical records, via Patient Access. All of these online services are very popular with our existing patients.”**

Yvonne also likes EMIS Web’s search and reports, which help her to run large-scale data reports with just a few clicks of the mouse. **“There’s no comparison with the previous IT system. It was difficult to access data and the GPs found the system rather cluttered. EMIS Web is intuitive and easy to use. All of the information that you need flows to you.”**

## Community Pharmacy

### Pioneering integration between pharmacies and GPs

A pilot project in East London is helping to deliver direct electronic communication between GP practices and pharmacies throughout the locality.

Jiguesh Patel, Pharmacist at Rohpharm Pharmacy in Plaistow, East London says: **“We can now see the full list of the patient’s repeat medication that is held on the GP system, which makes it easier for us to respond to patient requests.”**

Technology is key to integrating repeat prescribing between GP surgeries and community pharmacies and the East London pilot project is delivering promising results to enable direct electronic communication between EMIS GP practices and Rx Systems ProScript pharmacies - rather than via the Spine.

The results of the pilot are encouraging - including clearer communication, more informed patient care and even reduced drugs wastage. There is huge potential for further integration between GP and pharmacy systems. For example, giving pharmacists access to elements of the patient’s GP record - with consent - would enable the profession to play its fullest possible role in patient care, giving Clinical Commissioning Groups (CCGs) new options for creating efficient patient pathways.

“ We can now see the **full list of the patient’s repeat medication** held on the GP system ”

“EMIS Web has  
**totally changed**  
the way we work”

## Community, children’s and mental health care

### Bringing community care into the 21st century

A community rehabilitation team in Cheshire is providing more coordinated care to vulnerable elderly patients. The team at the Cheshire and Wirral Partnership NHS Foundation Trust provide vital care to ensure that approximately 750 patients – mostly frail, elderly people aged over 65, who have suffered strokes or falls – remain independent in their own homes and avoid admission to hospital.

**“I would highly recommend EMIS Web. It has totally changed the way we work – we are in the 21st Century now,”** said administration manager Mandi Harvey. **“For the first time, all the information about patients’ care is there in front of us.”**

The team used paper patient records before switching to EMIS Web. **“Caseload management is much improved. We can now very easily see who is providing what for patients, and that means their care is much better coordinated and effective,”** said Kate Sharp, community rehabilitation team leader.



“Ascribe has helped us gain trust-wide engagement”

## Secondary and Specialist Care Introducing a fully integrated pharmacy solution

Ascribe ePrescribing and Medicines Administration are streamlining East Lancashire Hospitals NHS Trust's prescribing and dispensing workflows, saving money and freeing up time for staff to spend with patients throughout the trust.

The go-live of Ascribe's ePrescribing and Medicines Administration at East Lancashire Hospitals NHS Trust marks the final stage in the Trust's strategic partnership to implement a fully integrated Pharmacy solution. With Ascribe Web Pharmacy and eMedicines Management already in place, the move to ePrescribing is enabling a single workflow of information from the prescriber to the dispensary staff, using a single patient record, which eliminates the need to transcribe routine medications, and provides decision support to clinicians.

Neil Fletcher, Chief Pharmacist said: **“Ascribe has helped us gain trust-wide engagement, as electronic prescribing is not just for the pharmacy department. The ePMA solution will deliver benefits including integrating with trust-wide systems, cost savings from drug spend, reduce time spent in the dispensary for more time at patient bedside, reduce errors of handwritten notes, and help to achieve a paperless status - all of which will ultimately help us deliver better patient care.”**

“ OptoMize is helping to prevent loss of sight among **19,000 people** with diabetes in our local community ”

## Secondary and Specialist Care

### First for national diabetic eye screening programme

Leading innovation across the sector, Digital Healthcare is the first to widely roll out software to help clinicians to comply with new protocols for managing the early identification and treatment of patients at risk of sight-threatening diabetic retinopathy. Dr John Hosker, Consultant Physician for Diabetes at Doncaster & Bassetlaw Hospitals' NHS Foundation Trust, is one of the first clinicians to adopt the new software to comply with the common pathway.

“We have been pleased to be early adopters of the OptoMize V4 software to support our local implementation of the new national common pathway for diabetes eye screening. The common pathway reduces unnecessary referrals to hospital eye clinics – improving patient care and saving money. More patients remain within the eye screening environment so that clinicians can address the background risk factors - the root cause of diabetic eye disease. This is helping to prevent loss of sight among the 19,000 people with diabetes in our local Doncaster community.”