ETHICAL
HEALTHCARE CONSULTING

NHS UX Arch Collaborative
MEASUREMENT TO IMPROVEMENT
REALISING VALUE

NHS UX Arch Collaborative

From Measurement to Improvement

Improving digital experience, workforce productivity and value realisation through collaboration, evidence and shared learning

A partnership between Ethical Healthcare Consulting and KLAS Research

KLAS RESEARCH

Continuous improvement

Measure
Establish a baseline understanding of clinician experience, identifying what works well and where improvements are needed.

Act/Improve
Use benchmarking insights and shared learning to prioritise and implement targeted improvements

Track Benefits
Monitor the impact of changes on clinician experience, workflows and organisational priorities.

Re-measure
Repeat the assessment to demonstrate progress, identify remaining challenges and inform the next cycle of improvement.

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Foreword

A message from Tracey Watson, CEO, Ethical Healthcare Consulting

Over the past five years, Ethical Healthcare Consulting has helped NHS organisations understand how healthcare professionals experience the digital systems they use every day.

Alongside our work supporting national usability and digital experience programmes, we've heard directly from tens of thousands of healthcare professionals about what helps them deliver great care and what gets in their way.

The challenge facing the NHS is no longer implementation. It's optimisation.

Across acute, mental health, community and primary care settings, organisations are asking similar questions: how do we improve digital experience, productivity, adoption and value realisation?

The NHS UX Arch Collaborative has been created to help answer those questions. This is not simply another benchmarking programme.

It is an opportunity to bring NHS organisations together to learn, share practical solutions and build one of the most comprehensive evidence bases for digital optimisation in UK healthcare.

The organisations that achieve the greatest value from digital transformation will not necessarily be those with the newest systems or the largest budgets.

They will be the organisations that listen to their users, learn from evidence and commit to continuous improvement.

Through our partnership with KLAS Research, we can combine international learning with deep NHS experience and create a national community focused on improvement.

Together, we can move **from measurement to optimisation, from benchmarking to improvement, from insight to action and from implementation to value realisation**. In doing so, we can create a national movement focused on learning, improvement and better digital experiences for the people who deliver care every day.

I hope you'll join us.

Measure. Improve. Track Benefits. Re-measure.

Tracey Watson
Chief Executive Officer
Ethical Healthcare Consulting

A Message from KLAS Research

At KLAS Research, our mission is simple: To amplify the voice of healthcare providers and help organisations make better decisions about technology.

Through the Arch Collaborative, we have spent more than a decade studying the relationship between digital experience and organisational success, building the world's largest evidence base focused on the user experience of health technology.

Technology alone does not determine success.

Organisations using the same systems often achieve very different outcomes. The difference is rarely the technology itself.

The Arch Collaborative helps uncover what high-performing organisations do differently and where others can improve. The organisations that achieve the strongest results are those that listen to users, engage clinicians, measure experience and continuously optimise.

For the past five years, KLAS Research and Ethical Healthcare Consulting have worked together to bring these insights to healthcare organisations across the United Kingdom.

The NHS UX Arch Collaborative represents the next stage of that partnership.

By combining the international evidence base of the Arch Collaborative with Ethical Healthcare Consulting's understanding of the NHS, we have an opportunity to create something unique: a national learning community focused on improving digital experience and realising greater value from digital investment.

What makes this initiative different is that every participant contributes to the learning.

Every survey, every success and every challenge helps strengthen the evidence base and accelerate improvement for others.

Together, we can identify what works, share it widely and improve the experience of the people who rely on digital technology every day.

We are proud to continue our partnership with Ethical Healthcare Consulting and look forward to supporting organisations across the NHS as they work together to improve experience, productivity and value realisation.

Adam Gale
Chief Executive Officer & Founder
KLAS Research

Moving from Measurement to Improvement

For many years, the challenge was implementation. Today, the challenge is optimisation.

The organisations that achieve the greatest value from digital transformation will not necessarily be those with the newest systems or the largest investments.

They will be the organisations that best understand how technology is experienced by the people who use it and act consistently on those insights.

The NHS UX Arch Collaborative exists to support that journey.

Together we can move:

- From measurement to Improvement
- From insight to action
- From implementation to value realisation

Together, we can create better digital experiences for the people who deliver care every day. The Collaborative builds on extensive national experience and a growing evidence base for digital optimisation across UK healthcare.



Built on National Experience

The NHS UX Arch Collaborative is founded on one of the most extensive programmes of digital experience measurement undertaken within UK healthcare.

Since 2021, Ethical Healthcare Consulting and KLAS Research have supported NHS England's National Acute EPR Usability Survey programme, helping organisations understand how clinicians experience the digital systems they use every day.

Beyond acute care, EHC is also delivering national digital experience programmes across:

- Acute services
- Mental health services
- Community services
- Tertiary care providers
- General practice
- Healthcare organisations across Wales
- EPR suppliers

These programmes have generated a substantial and growing evidence base around digital experience, usability, adoption, workforce engagement and optimisation.

National Insight, Local Action

National surveys provide a consistent, comparable view of digital experience across the NHS. They reveal wider trends, highlight variation between organisations and create a shared evidence base for understanding what influences usability, adoption and workforce experience.

Local surveys serve a different but complementary purpose. They explore the specific systems, workflows, services and staff experiences within an individual organisation. This enables teams to identify local priorities, understand the reasons behind their results and target improvements where they will have the greatest impact.

National surveys show how an organisation compares. Local surveys show what it needs to change.

Together, they connect benchmarking with practical action: national evidence provides context and shared learning, while local insight supports targeted improvement and measurable outcomes.

Why Digital Experience Matters

Technology increasingly shapes every aspect of healthcare delivery.

Digital experience is often viewed as a technology issue.

It influences clinical, operational and financial outcomes across an organisation.

Digital Experience Is Not Cosmetic

It affects:

- Workforce wellbeing
- Clinical effectiveness
- Operational efficiency
- Productivity
- User adoption
- Staff retention
- Benefits realisation
- Return on investment

Improving usability is therefore not simply a technology objective.

It is a strategic organisational priority.

Delivering Digital Value

Implementation is an important milestone.

It is not the finish line.

Many organisations have already made significant investments in electronic patient records and digital technologies. The greatest return on those investments is often realised after go-live through optimisation, adoption, workflow redesign and continuous improvement.

The NHS UX Arch Collaborative supports organisations in understanding how digital experience[8] contributes to:

- Benefits realisation
- Productivity
- Adoption and engagement
- Clinical efficiency
- Workforce satisfaction
- Organisational performance

KLAS research found 63% reported increased clinician efficiency, **63% reduced burnout, 50% improved patient safety or clinical outcomes, 38% reduced staff turnover and 31% improved patient experience**.

Investment in clinician experience was associated with measurable operational and workforce benefits[9].

Burnout and Wellbeing

Healthcare organisations increasingly recognise the relationship between digital experience and workforce wellbeing.

Improving usability is not simply about making systems easier to use.

It is about helping create working environments that reduce frustration, improve efficiency and support staff satisfaction.

The survey identified **6,809 clinical staff reporting feelings of burnout**[3]**.**

Among respondents experiencing burnout, **26% planned to leave their current organisation within two years and 18% planned to leave healthcare entirely**[4]**.**

Training and EPR Mastery Matter: **60% of clinicians wanted additional EPR training; 70% of nurses wanted additional EPR training; 44% reported receiving no ongoing EPR training following implementation**[5]**.**

Workforce Productivity

Healthcare organisations face increasing demand while managing workforce and financial pressures.

Digital systems have a direct impact on productivity.

When technology supports workflows effectively, staff spend less time navigating systems and more time delivering value.

The NHS UX Arch Collaborative seeks to identify and share the optimisation approaches most strongly associated with improvements in workforce productivity.

Only 34% of respondents reported that their EPR made them more efficient[6].

Respondents estimated that **5.2% of all working time** was lost to unproductive charting activity[7].

Workforce Experience

Digital systems have become one of the most significant determinants of day-to-day staff experience.

When systems support clinical workflows and reduce unnecessary complexity, they enable healthcare professionals to focus their energy on patient care.

When they create friction, the impact can be felt across teams, services and organisations.

The national survey gathered feedback from **23,662 healthcare professionals**[1] across multiple care settings.

Results demonstrated a strong relationship between usability, workforce experience and organisational performance[2]**.**



Patient Care

Improving the experience of healthcare professionals ultimately supports better patient care.

When clinicians spend less time negotiating systems and more time focusing on patients, organisations are better positioned to deliver safe, effective and person-centred care.

Half of interviewed organisations reported improvements in patient safety or clinical outcomes following clinician experience and EPR optimisation initiatives[10].

[1-7] NHS England, '2024 Electronic Patient Record (EPR) Usability Survey for secondary care – key findings', available at: **https://www.england.nhs.uk/digitaltechnology/digitising-the-frontline/2024-electronic-patient-record-epr-usability-survey-for-secondary-care-key-findings/**

[8-10] KLAS Research, *The ROI for Improving Your Clinicians' Experience 2025: Championing Your Clinicians' Experience Drives Crucial Outcomes! (May 2025).*

Why the NHS UX Arch Collaborative?

Most organisations already collect data.

Many receive survey findings.

Some have access to benchmarking information.

The challenge is rarely access to insight.

The challenge is understanding how to **use that insight to create measurable improvement.**

The NHS UX Arch Collaborative exists to bridge that gap.

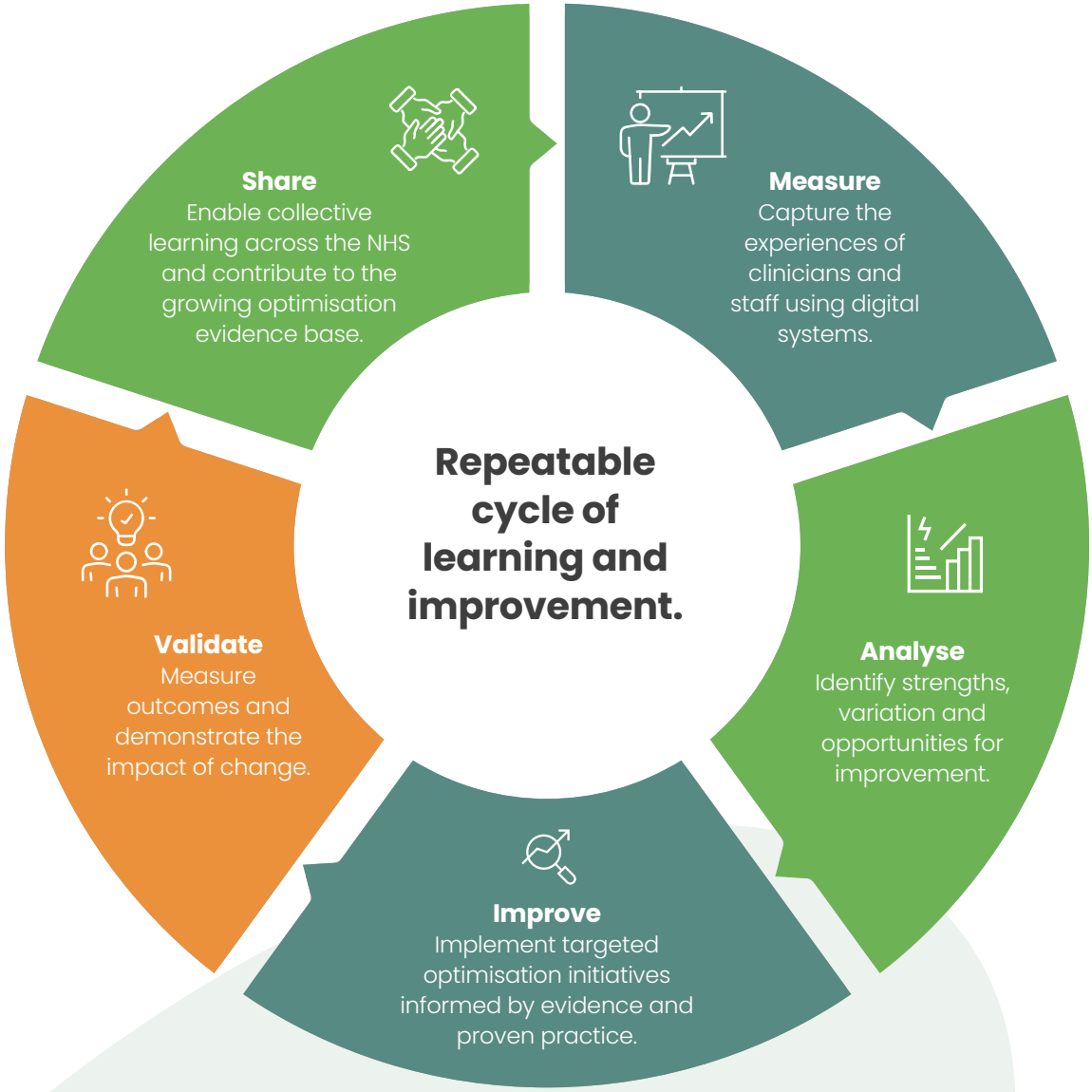
It creates a structured environment in which organisations can learn not only from their own experiences, but also from those of peers facing similar challenges.

By bringing together evidence, benchmarking, optimisation expertise and shared learning, the Collaborative helps organisations move from insight to action.



A Continuous Optimisation Cycle

The NHS UX Arch Collaborative is built around a repeatable cycle of learning and improvement.



This creates a sustainable cycle of optimisation, productivity improvement and value realisation.

Technology Alone Does Not Determine Success

National survey findings consistently demonstrate variation in user experience between organisations using the same digital platforms.

This suggests that outcomes are influenced by far more than software selection alone.

Factors including:

- Leadership
- Clinical engagement
- Governance
- Local configuration
- Training and support
- Workflow design
- Optimisation capability

can all have a significant impact on digital experience and organisational outcomes.

Key Insight

The organisations achieving the strongest outcomes are not necessarily those with the newest systems. They are often those with the strongest optimisation cultures.

National survey findings demonstrated substantial variation in user satisfaction between organisations using the same EPR supplier. The mean variation between the highest and lowest-scoring organisations using the same supplier was **51 points on the Net EPR Experience Score scale (+100 to -100)**[11].



[11] NHS England, '2024 Electronic Patient Record (EPR) Usability Survey for secondary care – key findings', available at: **https://www.england.nhs.uk/digitaltechnology/digitising-the-frontline/2024-electronic-patient-record-epr-usability-survey-for-secondary-care-key-findings/**

Why Join the Collaborative?

Membership of the NHS UX Arch Collaborative provides access to a growing community focused on understanding, improving and optimising digital experience.

Benchmarking That Drives Action

Go beyond understanding how your organisation performs to uncovering what drives performance and where improvements will make the greatest difference.

Use comparative insight to identify what works well elsewhere, learn from higher-performing organisations and prioritise the changes that will have the most impact.

National benchmarking reveals significant variation between organisations using similar technologies, highlighting the opportunity to learn, improve and optimise.[12]



An Optimisation Community

Learn from organisations that have successfully improved:

- Digital experience
- Clinical workflows
- User adoption
- Workforce satisfaction
- Productivity
- Value realisation

Shared Learning

Connect with peers facing similar challenges through:

- Learning events
- Webinars
- Communities of practice
- Improvement showcases
- Peer networking opportunities

The goal is simple: **reduce duplication and accelerate improvement by connecting with organisations facing similar challenges, learning from their experiences and applying what works to your own improvement priorities.**

[12] NHS England, '2024 Electronic Patient Record (EPR) Usability Survey for secondary care – key findings', available at: **https://www.england.nhs.uk/digitaltechnology/digitising-the-frontline/2024-electronic-patient-record-epr-usability-survey-for-secondary-care-key-findings/**

Evidence-Based Improvement

Access practical guidance informed by:

- National NHS programmes
- International Arch Collaborative experience
- Emerging research
- Real-world case studies
- Proven optimisation approaches

Expert Insight

Translate measurement into action through access to specialist analysis and interpretation.

Focus effort on the interventions most likely to deliver measurable value.

Continuous Improvement

Track progress over time and assess whether improvement initiatives are delivering meaningful results.

Improvement becomes an **ongoing capability rather than a one-off activity.**



Learning from International Experience

The Arch Collaborative has helped healthcare organisations around the world better understand and improve digital experience.

The NHS UX Arch Collaborative builds upon those global insights whilst creating a model designed specifically for NHS priorities, structures and challenges.

This combination of international learning and NHS experience provides participating organisations with access to a broader evidence base while maintaining a strong focus on practical implementation.

Guided by NHS Leaders

The NHS UX Arch Collaborative is supported by a Steering Group bringing together expertise from across healthcare, digital transformation, clinical leadership and research. Its founding members are:



Beverley Bryant
Chief Digital Officer, University Hospitals Dorset NHS Foundation Trust



Matt Connor
Group Chief Digital and Information Officer, NHS University Hospitals of Liverpool Group



Dr Jim Ritchie
Chief Clinical Information Officer, NHS Greater Manchester



John Llewellyn
Regional Director of Digital, Data and Innovation - NHS England (NW region)



Sarah Barr
Chief Digital Information Officer, The Clatterbridge Cancer Centre NHS Foundation Trust

These leaders are the founding members of the Steering Group. The Collaborative is continuing to recruit additional members to broaden its representation and expertise as it develops.

The Steering Group will help ensure the Collaborative:

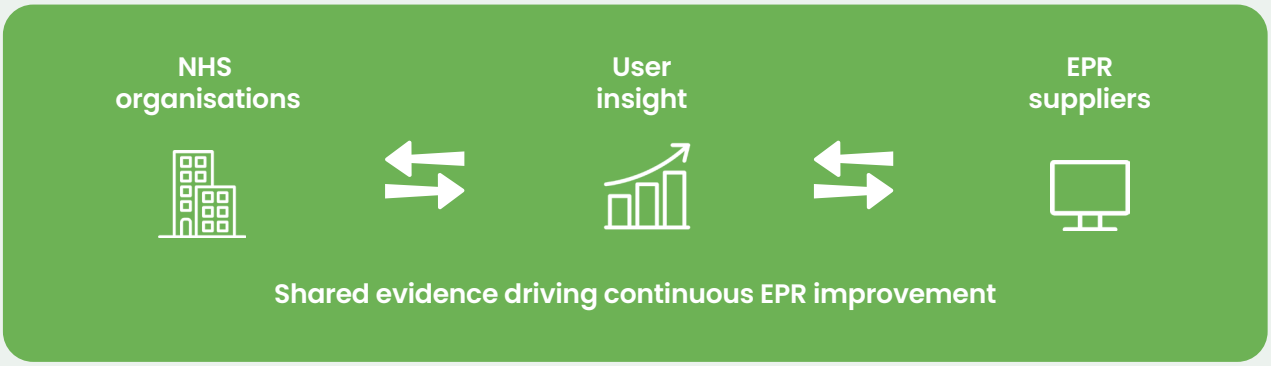
- Remains aligned to NHS priorities
- Reflects frontline experience
- Focuses on practical improvement
- Builds a robust evidence base
- Supports meaningful collaboration

Liverpool Group: Building an Evidence-Led EPR Programme

"The implementation of our new EPR presents a significant opportunity to improve the digital experience of our workforce. By partnering with Ethical Healthcare Consulting and KLAS Research, we're establishing a baseline understanding of usability across the Liverpool Group, giving us the evidence and insight needed to shape a successful implementation and optimisation programme.

Taking a collaborative approach enables us to understand common challenges across organisations, align improvement priorities and ensure staff experience remains at the heart of our digital transformation. By measuring usability before and after go-live, we'll be able to demonstrate progress, understand where further optimisation is needed, and maximise the value of our investment for both staff and patients."

Matt Connor
Group CDIO, NHS University Hospitals of Liverpool Group



Birmingham Case Study

From Insight to Improvement

How Birmingham and Solihull Mental Health NHS Foundation Trust improved clinician experience through targeted EPR optimisation

Understanding the challenge
Birmingham and Solihull Mental Health NHS Foundation Trust joined the Arch Collaborative to better understand clinicians' experiences of its Electronic Patient Record (EPR) system and identify opportunities for improvement.

Initial measurement revealed significant opportunities to improve satisfaction, with a Net EHR Experience Score of 3.9 among physicians and 25.1 among nurses.

Turning insight into action
Using insights from the Collaborative, the Trust focused on two proven improvement practices: ongoing education and stronger relationships and communication with clinicians.

It introduced a series of practical changes:

- More accessible training: Breaking training into manageable, role-specific topics that clinicians could access on demand.
- Improved access to information: Introducing a new intranet to make EPR resources easier to find.
- Stronger communications: Increasing the frequency and consistency of updates to clinicians.
- EPR improvements: Upgrading the system alongside improvements in training and support.

These interventions focused on helping clinicians make better use of the EPR and improving their day-to-day experience.

Measurable improvements in clinician experience
Following these changes, the Trust recorded substantial improvements in Net EHR

Experience Scores:

PHYSICIANS

+28.8

point improvement
From 3.9 to 32.7

NURSES

+13

point improvement
From 25.1 to 38.1

What this demonstrates
The Trust's experience shows how independent measurement can provide a foundation for targeted improvement.

By combining insight into clinician experience with practical changes to education, communication and EPR support, organisations can take meaningful steps towards improving digital experience.

It illustrates the central principle of the NHS UX Arch Collaborative: **measure experience, learn what works, take action and track improvement.**

Source: KLAS Research, International Arch Collaborative Improvement Case Studies (supplied case study).

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Get Involved

To find out more about the NHS UX Arch Collaborative, including membership, upcoming events and opportunities to participate, visit our website or get in touch.

Email: **info@ethicalhealthcare.org.uk**

Website: **www.ethicalhealthcare.org.uk/nhs-ux-arch-collaborative**