

My journey through IT as a Clinician

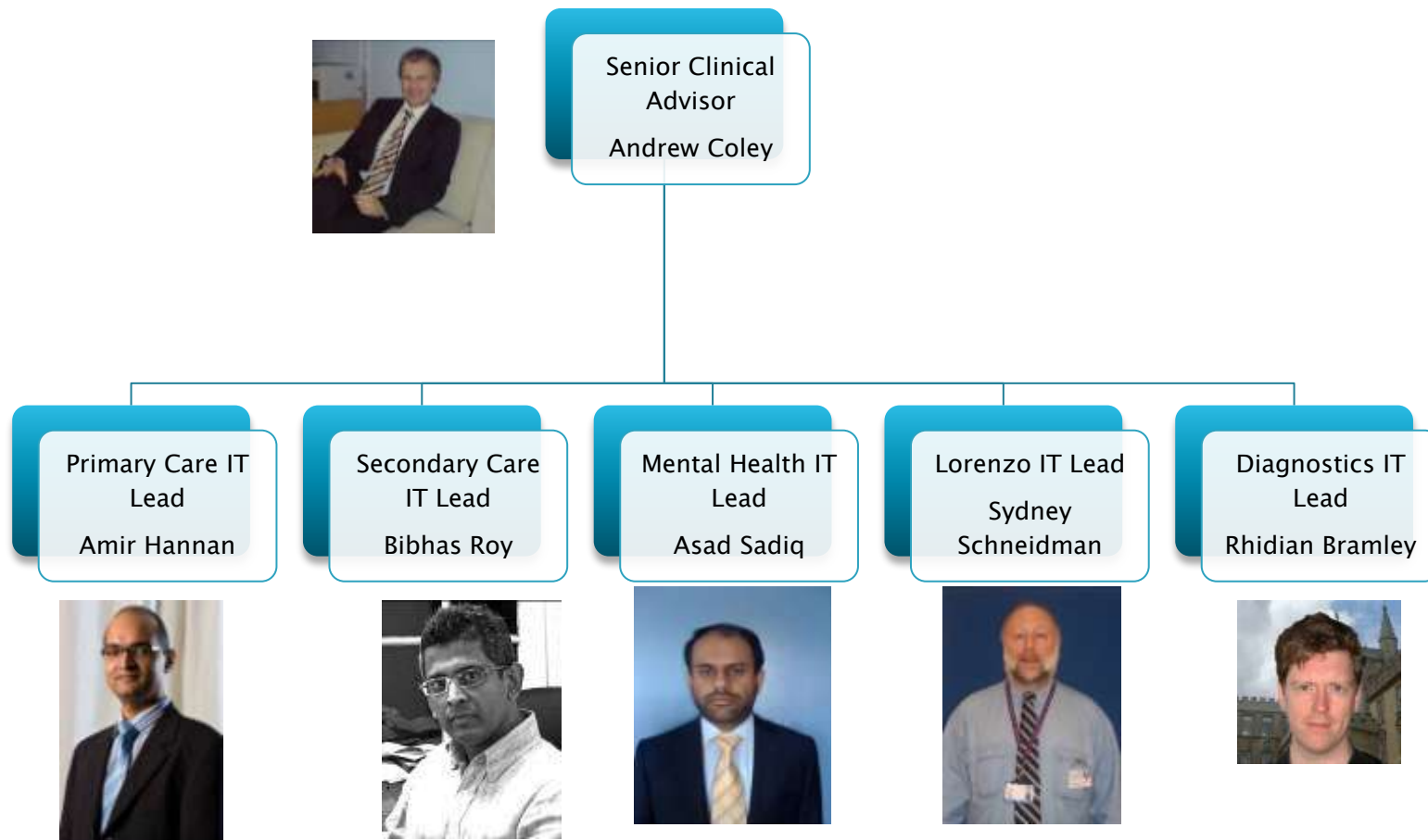
Dr Asad Sadiq
Consultant Psychiatrist
NHS NW Mental Health IT Lead

Me



Lorenzo Care Management

NHS North-West: The HICAT



The HICAT Mission Statement

The Health Informatics Clinical Advisory Team works across the complete healthcare spectrum ensuring that the people of the North West enjoy better care, better health and a better life, through the innovative and efficient use of Information Technology.

The team aspires to:

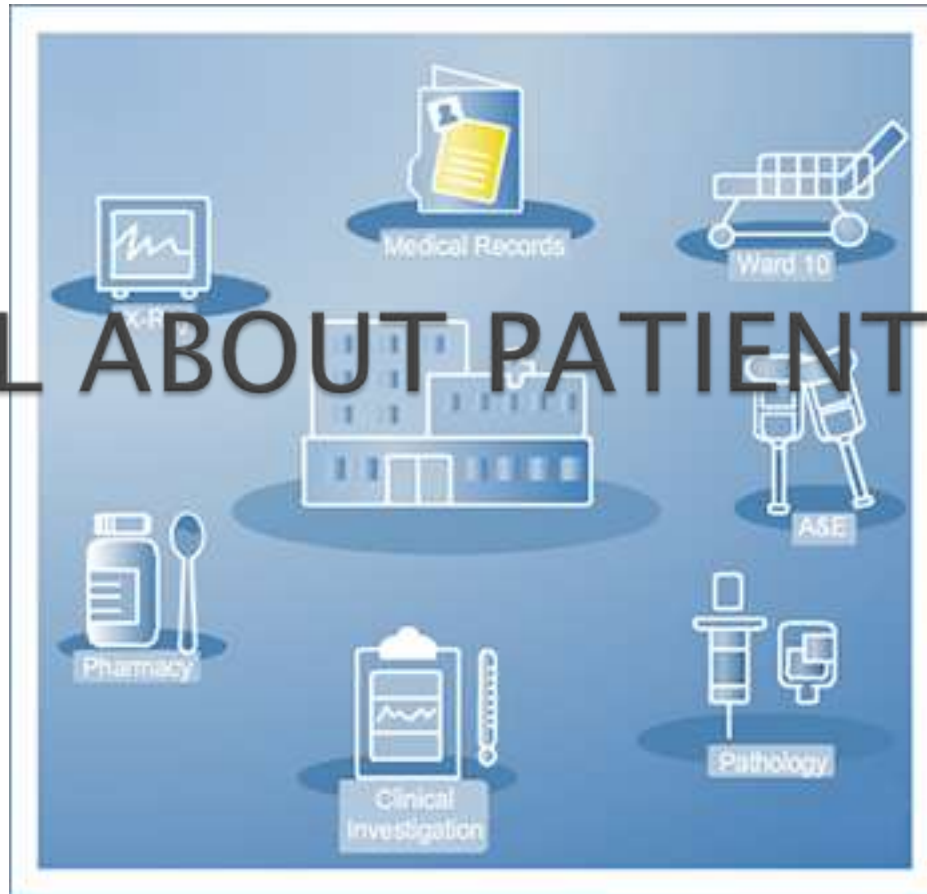
1. Ensure that the North West leads the country in terms of setting a regional structure of expert clinicians for championing the use of Information Technology
2. Engage and empower clinicians to enable them to play a central role in the development and deployment of IT Systems & solutions
3. Reduce the IT related bureaucratic and administrative mess that clinicians find themselves in
4. Assess and promote the piloting and implementation of *new to the market* Information Technology
5. Ensure organisations use systems that are inter-operable
6. Ensure that Health Informatics is embedded into the undergraduate and postgraduate medical curriculums
7. Put patients at the heart of Health Informatics by empowering, educating and enabling them to make informed decisions about their own health, through accessing personal and clinical information

Why I joined the National Programme for IT?

Dr Asad Sadiq




IT'S ALL ABOUT PATIENTS




IT'S ALL ABOUT PATIENTS!

IT has changed the World! Why should our
patients come last?


What I've seen! (1)

- ▶ PACS
 - ▶ PROMS
 - ▶ NHS Mail
 - ▶ North West Health Informatics Workforce Training Board
 - ▶ MSc in Health Informatics
 - ▶ Digital Dictation & Voice Recognition
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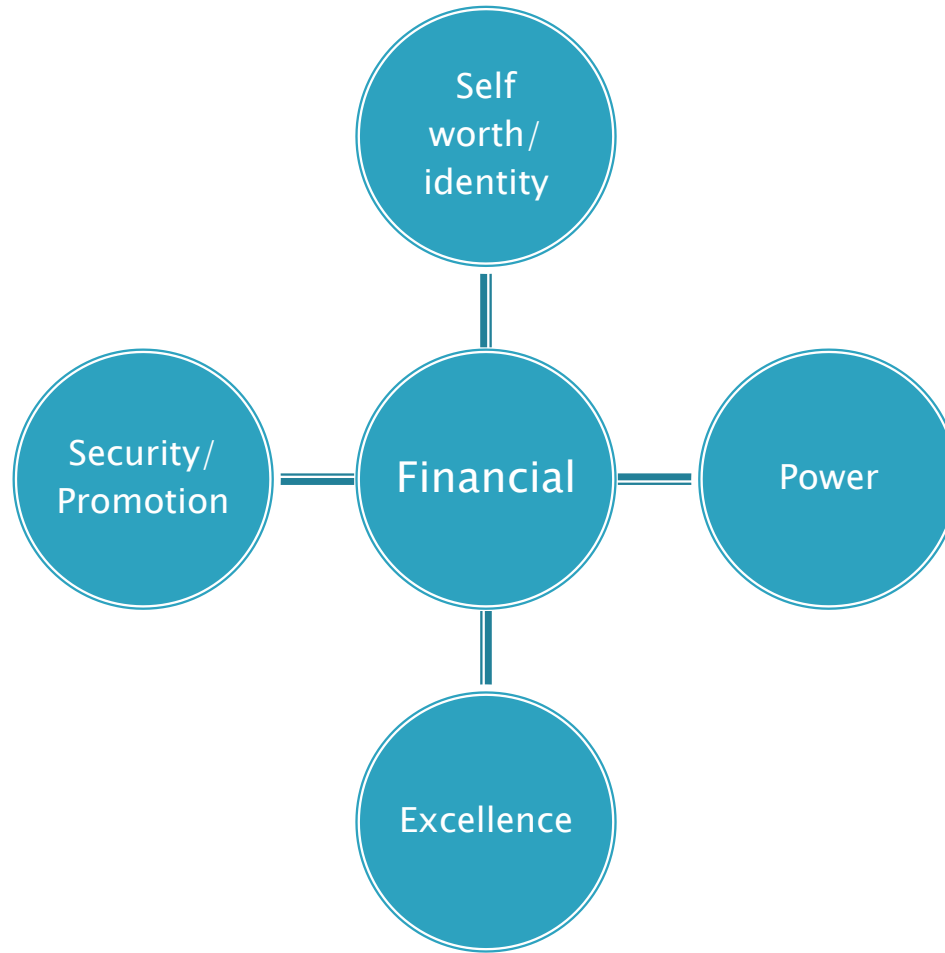
What I've seen! (2)

- ▶ Summary Care Record (Bury)
 - ▶ Map of Medicine
 - ▶ Patient access to records
 - ▶ Communication with patients
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The main success factor

- ▶ In the NHS we are not very good at working across organisational boundaries for the benefit for patients
 - ▶ (SCR; Map of Medicine; Interoperability)
 - ▶ Misaligned incentives
 - ▶ Large Foundation Trusts & CCG's
 - ▶ Most successful IT projects are where there hasn't been a need for cross-organisational cooperation (i.e. DD/VR/ EPR)
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Why do we go to work?



What about patients?

- ▶ As career progression occurs, somewhere down the line the patient focus is lost
 - ▶ Even amongst clinicians
 - ▶ To really improve healthcare through IT there is a need for a patient-centred approach
 - ▶ All projects need an ethical and moral framework which centres on patient care
 - ▶ They need the link to patients and those who advocate for them
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Digital Dictation– What I used to do?



Problems (1)

▶ Problems with Cassette

- Lost Cassette
 - Clinical Safety
 - Redoing Clinic Letter & problems with accuracy
- Can't find cassette
 - Delay in dictating decreases accuracy
- Urgent letters
 - Secretary has to go through whole cassette to find it
- Poor cassette quality–
 - Secretary has problems hearing the dictation


▶ Problems with Dictaphone

- Low battery results in poor quality dictation
- No batteries available leads to a delay
- Someone borrows Dictaphone and doesn't return it

Problems (2)

- ▶ The Admin Manager has no way of telling who does what and if each individual secretary is pulling his/her weight in terms of Dictation turnaround
- ▶ Secretaries?

The Process

- ▶ HC2009– Harrogate
 - ▶ Meeting
 - Consultants
 - IT Manager
 - Secretaries
 - Admin Manager
 - ▶ Agreement for pilot
 - ▶ Key success factor– interaction between Lead Clinician & IT Director
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Solution

- ▶ Digital Dictation
- ▶ Dictation goes straight to Secretary
- ▶ Admin Manager can check workload
- ▶ It's safe, quick and efficient
- ▶ Bury Pilot–
 - Doctors– “What did we used to do before?”
 - Secretaries– “The voice quality is so much better than before”.

What I do now!



Additional benefits



The IT Clinician

- ▶ Full time IT (FT)
- ▶ Part Time IT (PT)
- ▶ Full Time Clinicians (CL)

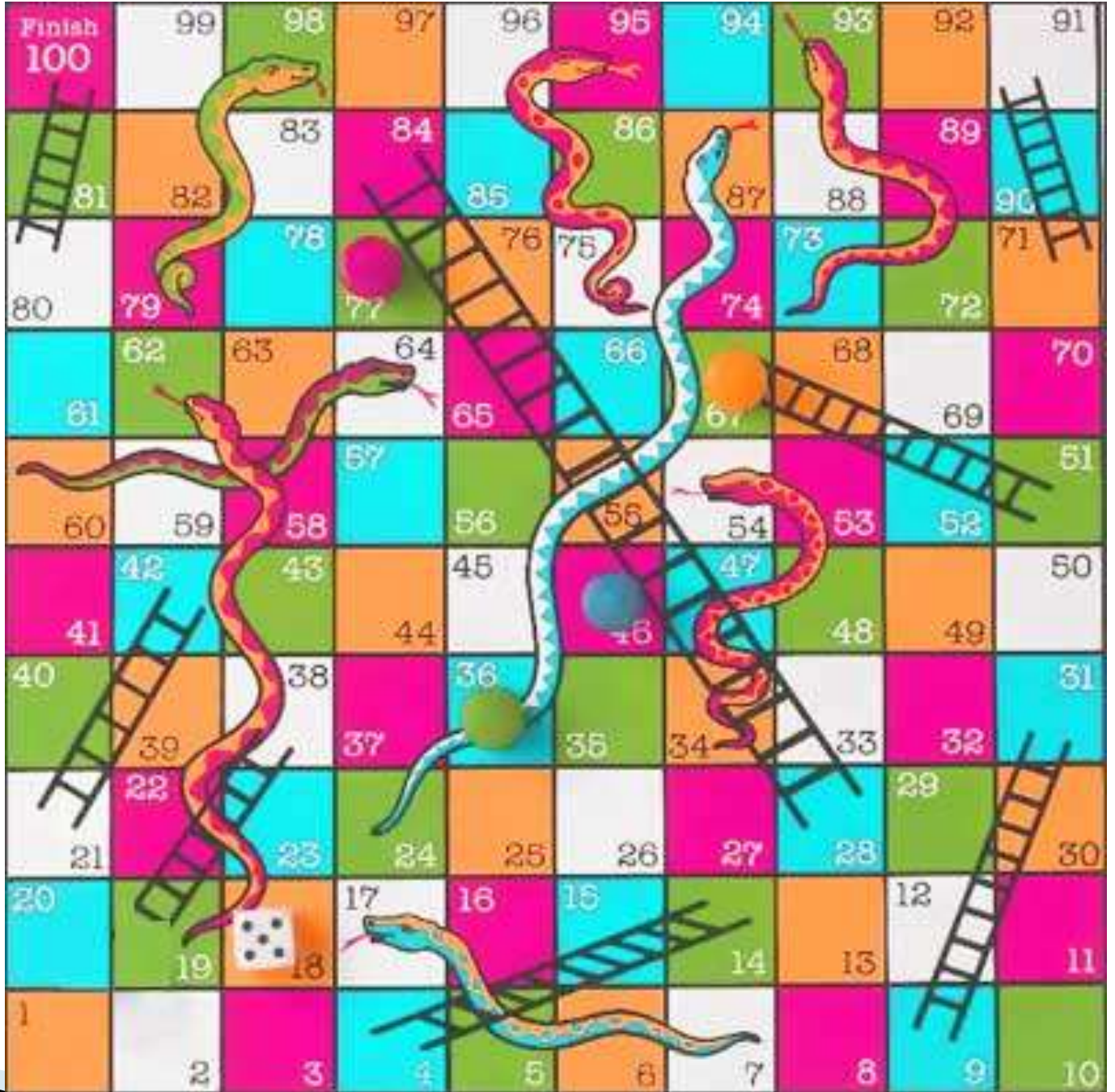
Credibility– $CL > PT > FT$

Imperative to engage the front–line




The Pennine Care NHS
Foundation Trust
Experience with Lorenzo





Our lessons learned

- ▶ Great advantage when Clinical Staff are embedded in IM&T function – integral to any IT project
 - ▶ Control of Issues Management is vital
 - ▶ Adequate Change management resource is critical
 - ▶ Trust need direct relationship with supplier
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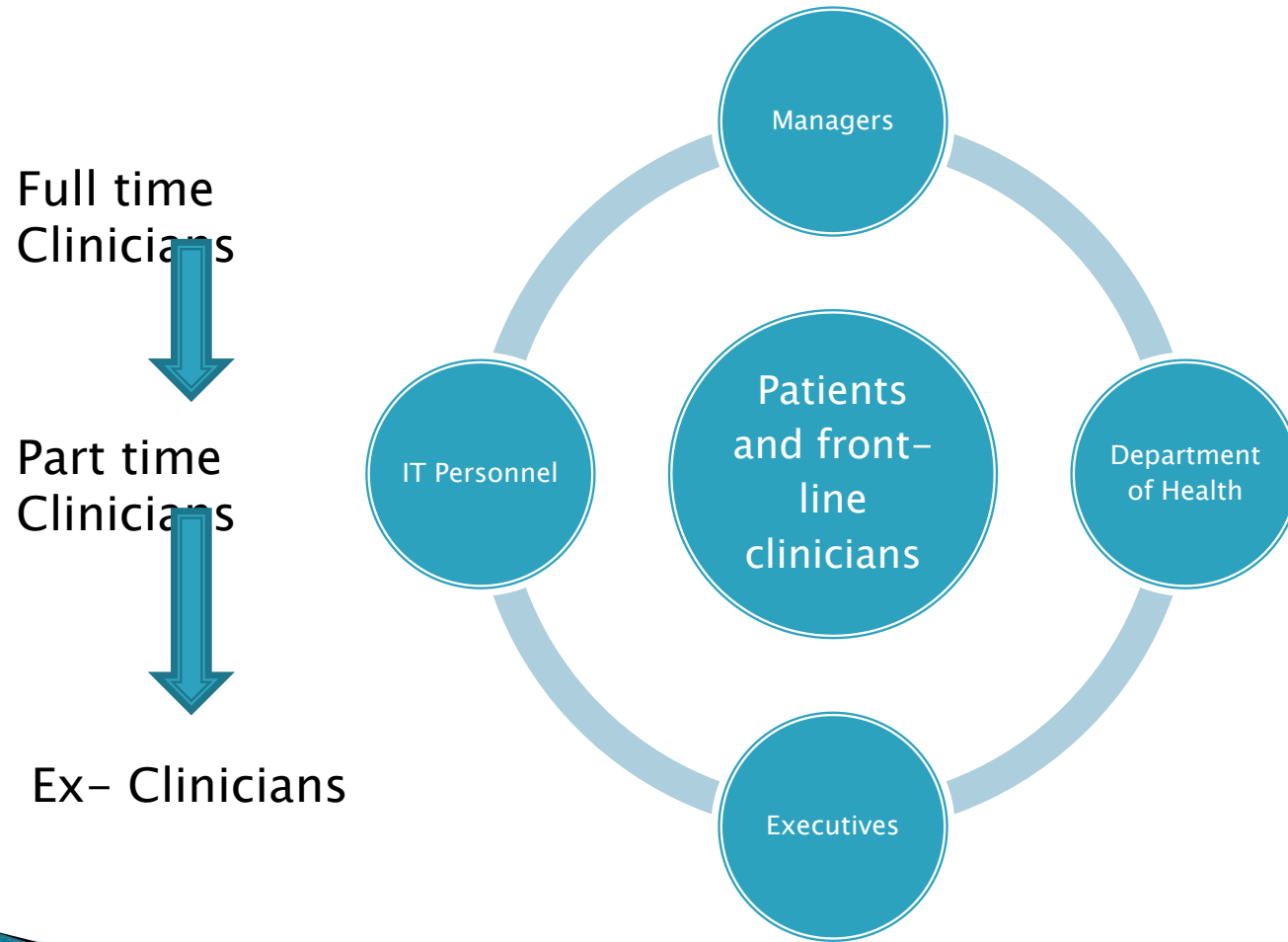
To end on a positive ...

- ▶ The whole experience, though extremely painful, has strengthened our team and built up exceptional skill set within the Trust which will be used to support the deployment of our new clinical system and future projects


Back to.....



The Key Message



Lesson Learnt

- ▶ Every pound we spend is hard-earned tax payers money
 - ▶ Our patients are the most vulnerable in society and we have a duty to them when we allocate increasingly scarce resources
 - ▶ It is essential for all projects to have that emotional bond with patients and to have a sense that whatever we do is for patients; those most vulnerable and those we need to put first always.
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Clinicians help link projects to the front line

