


Digitally-enabled care:

How we turn a better understanding of technology
into improved patient care outcomes

A report by National Health Executive



Medical professionals want to care for people. They don't want to be pulled away from delivering the best possible patient care to battle with technology. That's not a new thought, but as we rapidly move into an increasingly digitally-driven world we must ensure solutions are reliable, integrated effectively and achieve their ultimate goal: supporting transformational care.

In the pursuit of these goals, there are three key priorities which National Health Executive was able to track among respondents to a recent audience research project carried out: compliance, cost effectiveness and reliability.

As Ged Cairns, Head of Auto ID Business Unit, Brother UK explained:

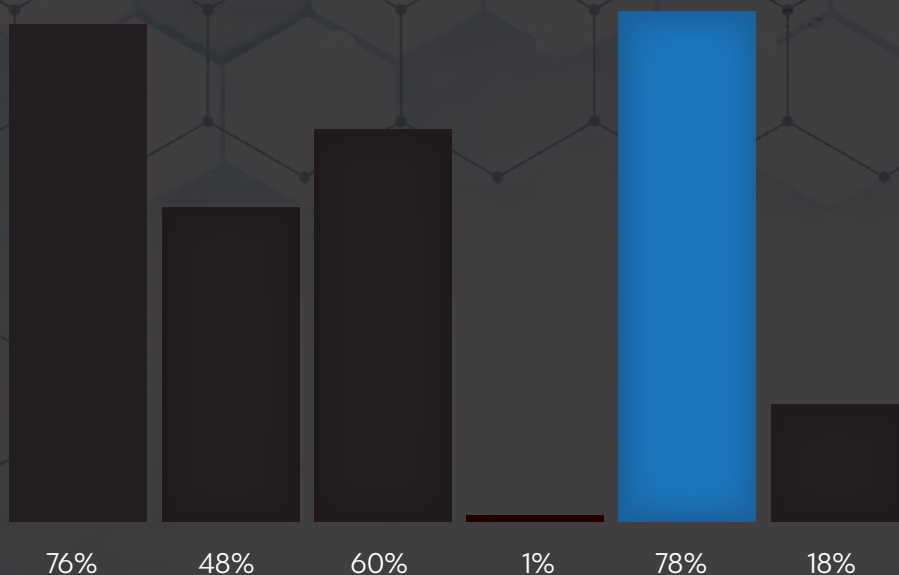
"It was interesting to see reliability as one of the top priorities pulled out by respondents to the survey."

Working alongside technology solutions provider Brother, NHE surveyed our primary and secondary care audiences to better understand the challenges faced by health professionals in understanding their technology and its best applications. Immediately, despite a healthy split between the two aspects of care, there was a commonality in challenges faced and sentiment to overcome them in order to improve patient care.

In places, we saw much of what we had expected. When asked what single, most important improvement people wanted to see with their organisations' wristband solutions, for example, more than half of respondents (55%) answered upgrading to newer technology. Given the common reliance in many parts of the healthcare service on legacy tech, that is perhaps unsurprising.

Yet equally, with 12% of respondents reporting that they still handwrote their medical wristbands, there were aspects which came as something of a surprise to both NHE and Brother. In a time when a quarter of those filling out the audience survey had robust solutions in place, to still have one in eight working in a written format suggested the health service still had a way to go to achieve a fully digitally-enabled environment.

How has Covid-19 changed the way you deliver care?



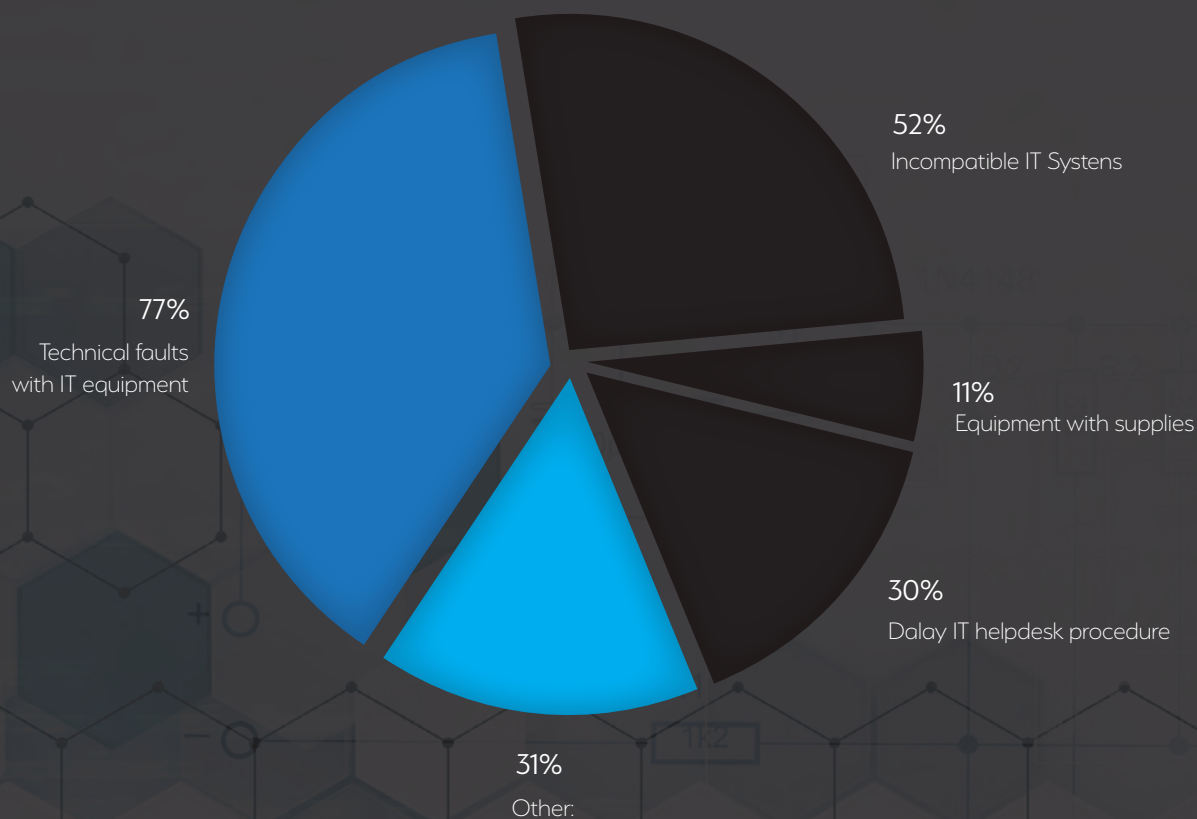
Patient appointments take place via telephone **(76%)**

Patient appointments take place virtually via video conference

(48%) Patients are admitted to the clinical at designated times to ensure fewer people on site at any time **(60%)**

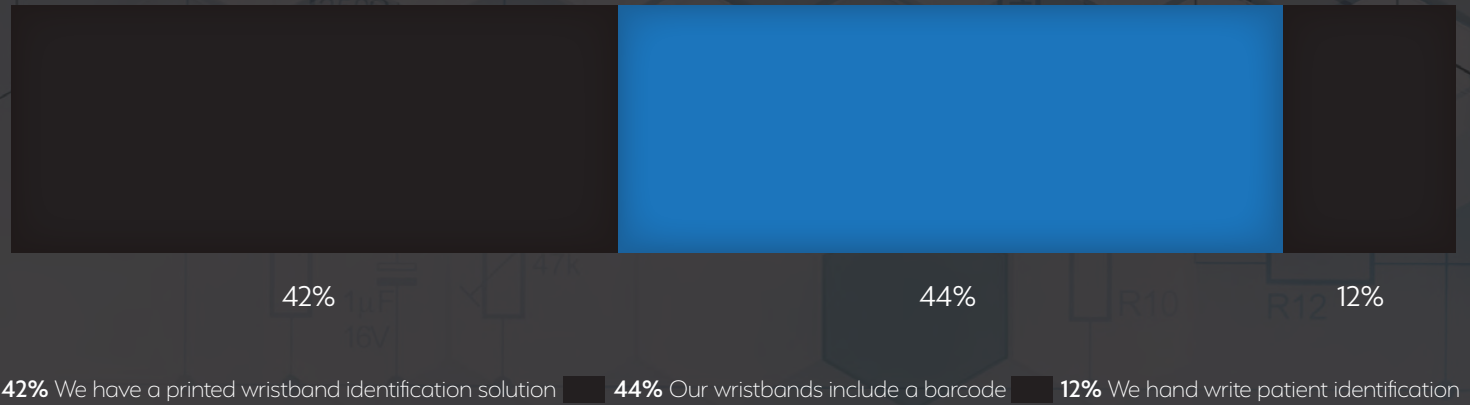
We have digitised patient identification **(1%)** We wear PPE during patient appointments **(78%)** Other **(18%)**.

What takes you away from patient care?

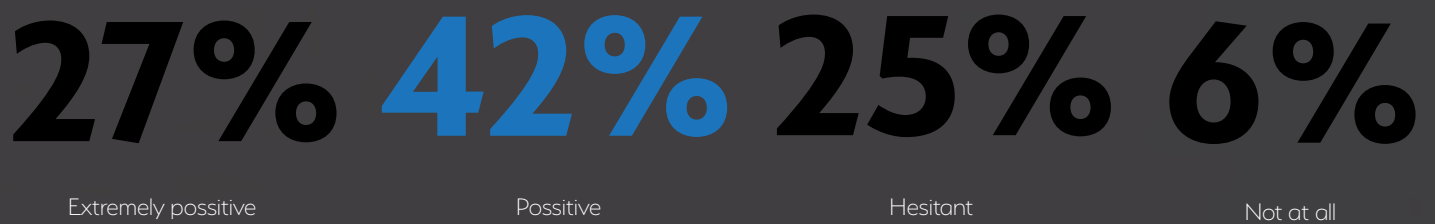


"Data and reporting capability is time consuming" "IT training for counter-intuitive systems" "patients details not being recorded correctly; patients not answering or having blocks to 'anonymous' calls; patients still fearful of attending face to face appointments."

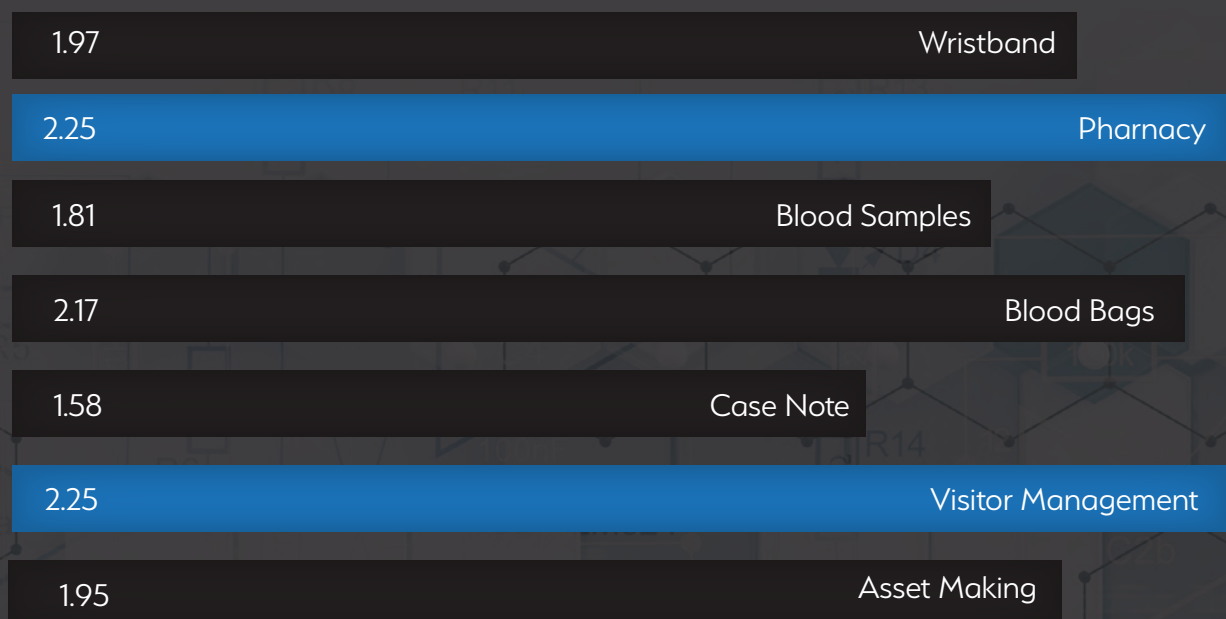
Which statement best describes your wristband solution?



How confident are you in the reliability of your writiband solution / patient identification



What are the highest volume label application on your ward or in your clinic?



The ambition is there, though. Across the country, our survey demonstrated a desire to modernise and digitise. As ever, cost and resource proved a limiting factor. But it was not the be-all and end-all; other factors such as finding a reliable solution, one which would provide the most efficient patient care, and achieving that gold standard of GS1 compliance (which some 81% of respondents stated they looked for in a solution) were marked as vital in the decision-making process too.

As a regular supplier into the healthcare sector, it encouragingly lined up with what Brother typically saw. When services and solutions were procured, there was an added confidence in its reliability and functions because of these high standards being kept.

Ged added: "More than 80% said GS1 compliance is incorporated [into their digital plan]. That's positive. People are looking for the solution which is best. A solution which can improve patient care; is reliable. There's real consideration. It's not just a pressing concern over the price."

It fits with the state of play in UK healthcare too. Right from appointment, Health Secretary Matt Hancock has been a huge advocate of utilising technology to better patient care, but in a way that likewise supports the staff and end users operating the solutions.

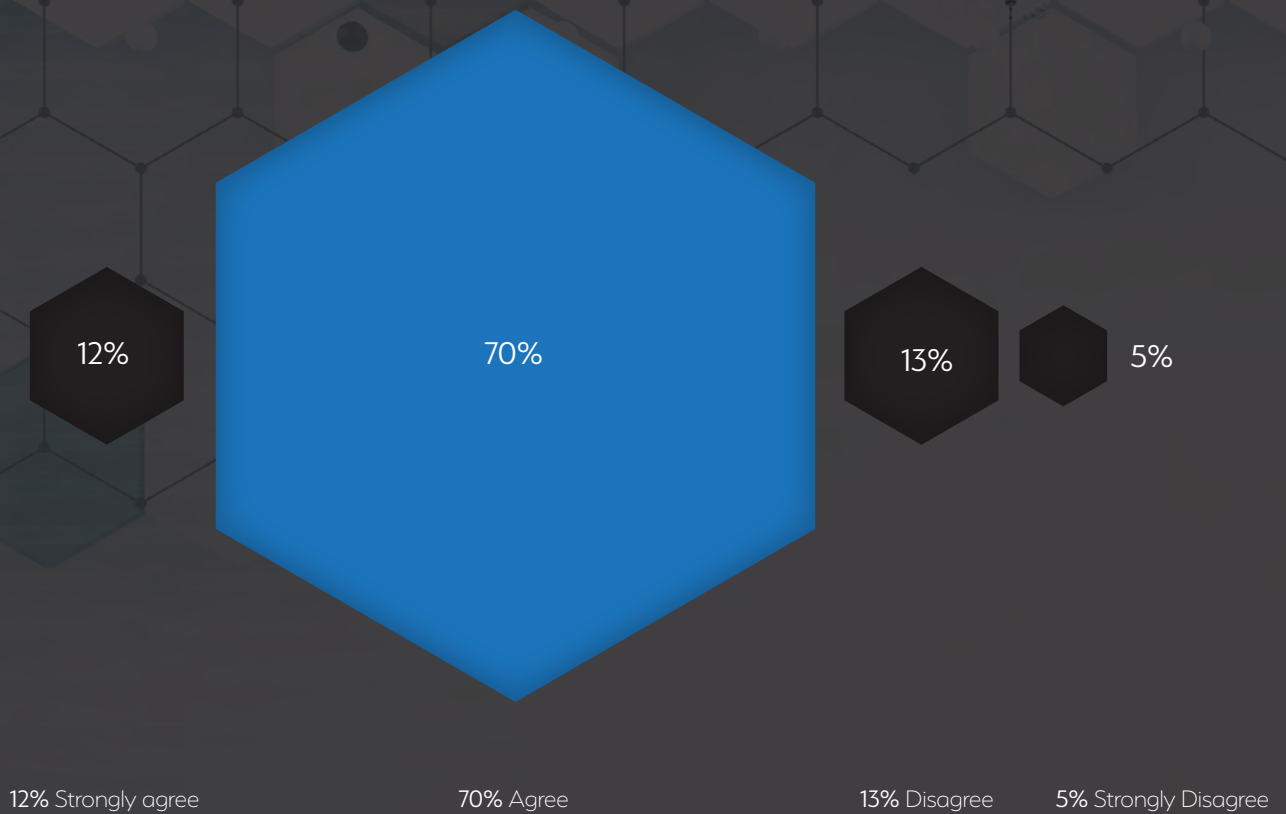
Back in 2018, he said: "We are one NHS. Our health system is uniquely placed to become the most advanced health system in the world – one where technology addresses the user need – making care better for patients, but just as importantly making life easier for staff."

"For too long, decisions on health and care have seemed to involve a trade-off – improving patient outcomes at the expense of placing ever more pressure on staff, while reducing the demands on staff has been seen to have an impact on patient care."

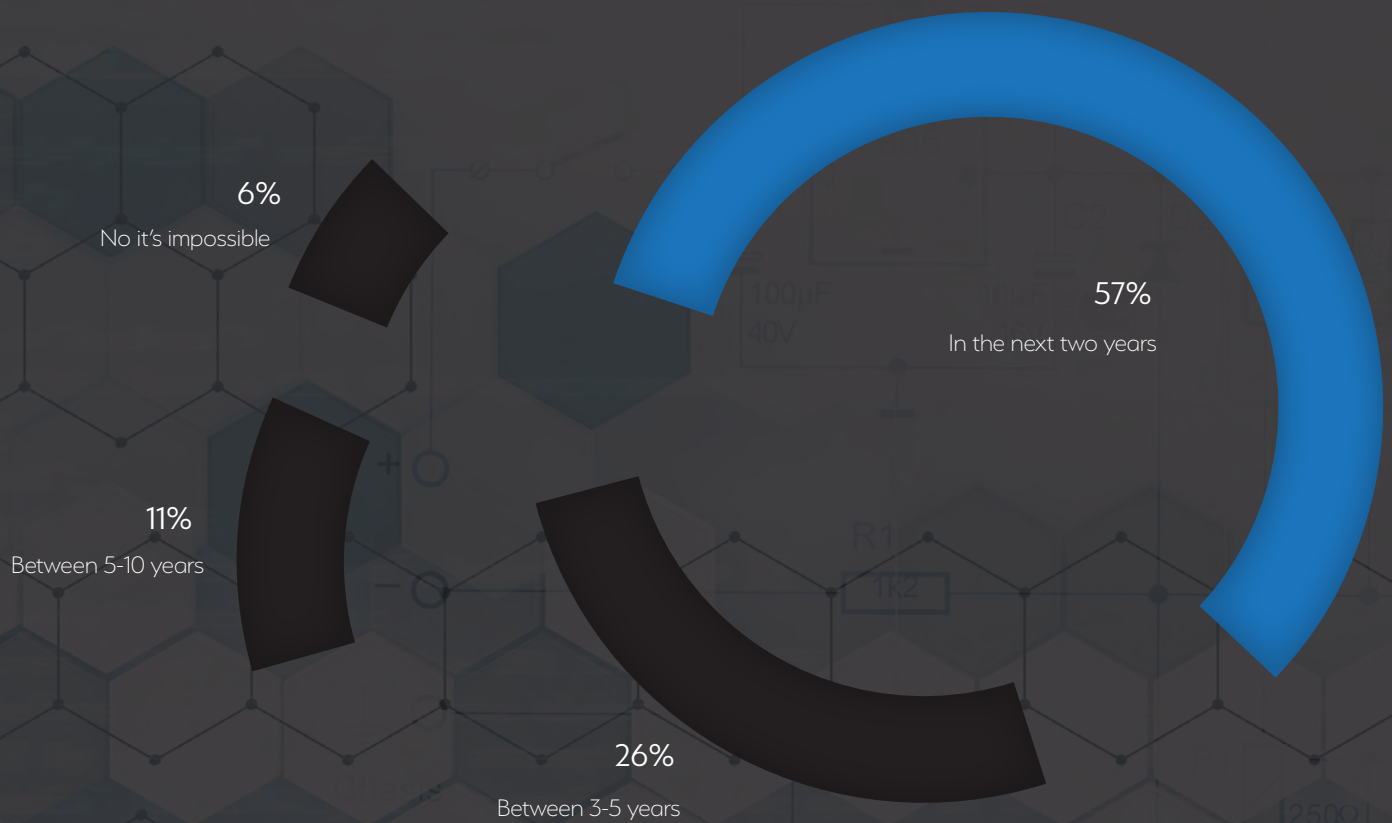
"Technology and data innovation offer us an opportunity to move past this binary approach."

But, even the best solution in the world will eventually find itself having a problem or needing support. And that raises the question of where end users typically went to source support. Leading the way, as expected, were internal and service desk support, but there too remained a healthy number of respondents who sought support direct from the vendor: something which Brother expected to see, in keeping with the focus and resource they had invested themselves into being able to offer clients this kind of support.

Would you say GS1 compliance is incorporated into your trust digital plan?



Is the paper light policy projected to be achieved?



What are you looking to achieve through IT technology?

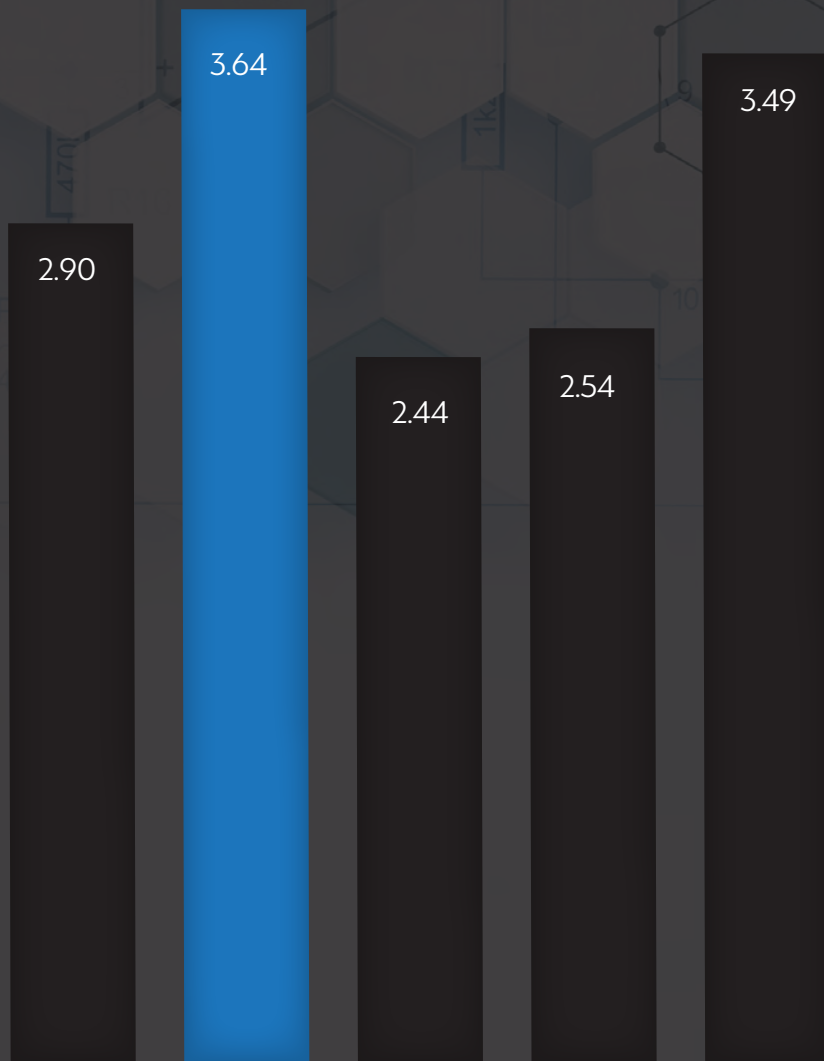
2.90 Enhanced security

3.64 Cost efficiency

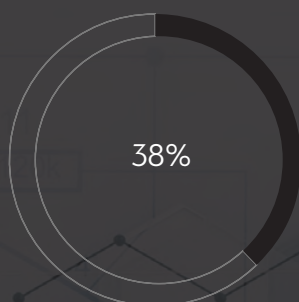
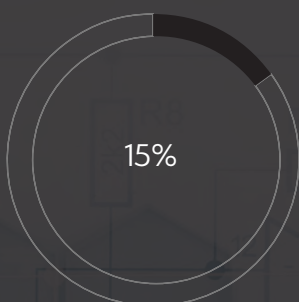
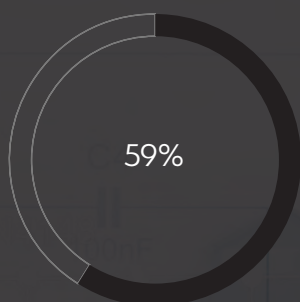
2.44 Improve patient care

2.54 Reliability

3.49 Digital transformation



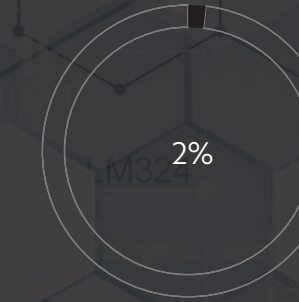
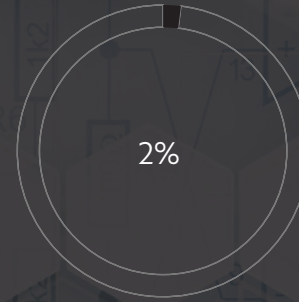
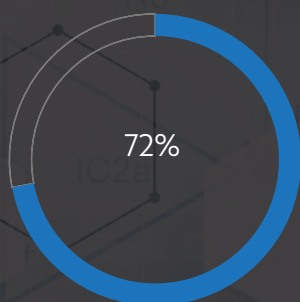
If your IT technology fails what methods do you have to resolve failures?



59% Internal helpdesk

15% Vendor helpline

38% Remote fix



72% Service desk

2% back to base warranty

2% Break fix replacement

"It wasn't too surprising. Often, we'll see users coming to vendor for support. It's something Brother has in spades – we're well-positioned to offer plenty of support [to our customers]."

And the other big area we saw conversation around was paperless and paper-light policies. Especially as the health service becomes increasingly environmentally conscious and digitally-enabled, there has been a strong desire to shift away from vast banks of paper records, information and documentation – which are not just costly to store and transport, but also limiting for interoperability and data sharing between services and NHS bodies.

Four in every five respondents were apparently well on their way to implementing paper-light strategies, expected to achieve their ambitions by 2025, with more than half of respondents (57%) said to be just two years away.

As an organisation working to support and facilitate these paper-light ambitions too, it mirrored the conversations Brother had seen with NHS parties over recent months. In particular, the overwhelming positivity towards reaching paper-light status – compared with just 6% of respondents who felt it was impossible to achieve – suggested a new, fresh group of digitally-partisan thinkers and decision-makers within the health service driving forward this shift.

It's an agenda with, according to the data, significant traction behind it. Over the next few years, the move to paper-light is highly likely to come to the forefront and capture conversations around boardroom tables; and in turn, improve the end user experience to deliver effective, transformational patient care as standard.