Community services slow to adopt new technology

Attitudes and professional concerns are to blame, not availability, says Queen’s Nursing Institute

By Nick Lipley

NURSING SERVICES vary enormously in their approach to improving care through information, care and medical technology, according to the Queen’s Nursing Institute (QNI).

In a report into IT and community nursing, published last month, the QNI says: ‘There are still many instances of the healthcare system being remarkably resistant to the potential of technology… when important information still travels slowly and unreliably by letter or fax… and where multiple written records are used in the same episode of care.’

The report, entitled Smart New World: Using Technology to Help Patients in the Home, is based on discussions with nurses around the country, and a review of pilot projects that use new technology.

The most likely blocks to the adoption of existing technology, it says, are attitudes, assumptions and professional concerns rather than cost or availability.

In her foreword to the report, national director for nurses, midwives and allied health professionals in the Department of Health Informatics Directorate Susan Hamer says: ‘The cultural change required to move forward technology as a key aspect of our community services is our biggest challenge.

‘The technology in many ways is the easy bit but the key to culture change rests within our own behaviour.’ She adds: ‘Already we have examples of community nurses successfully deploying a range of mobile solutions for themselves and their patients.’

Institute director Rosemary Cook said:

‘Technology is transforming the way care is delivered, as well as the relationship between the patient and the professional.

‘Yet it doesn’t replace the nurse, or the need for a high level of clinical skills and interpersonal skills. Technology only works for patients when it is combined with expert, relationship-based care.’

Telemedicine nurse specialist nurse Sharon Levy contributed to the report. He said: ‘This publication gives a fascinating insight into highly innovative practice where nurses offer and provide optimal care in this digital age.

‘We must continue to deliver services that offer compassionate and highly skilled nursing care, with the aid of modern technology.’

Dr Hamer is among the speakers at HC2012, a health informatics conference being held in London in May.

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Doubts raised over incentives for using safety thermometer

SOME NURSES and patient groups have questioned the government offer of financial incentives to hospitals if they use a safety tool to measure basic patient care.

Trusts will get an extra 0.5 per cent of their contract income, if they use the NHS safety thermometer to improve standards. The move is among measures announced by the government in January.

Details about the safety thermometer and accompanying guidance have been published by the NHS Information Centre, after an early version of the tool was piloted across 170 trusts in England last year.

It enables nurses to record harm, such as patient falls and urinary tract infections, and venous thromboembolism treatment. Staff can also record if patients have pressure ulcers on admission or whether they develop within 72 hours or more.

Nurse Deilah Hasling, safety ombudsman at Brighton and Sussex University Hospitals NHS Trust, said many trusts already record such data. ‘Hospitals should be collecting the data without the need for a government incentive,’ she said.

Patients Association director Katherine Murphy asked: ‘How many measures and benchmarks must we have before it is realised that what we really need is to allow individual nurses time to care for patients?’

Find out more
To view the tool, go to: www.ic.nhs.uk/services/nhs-safety-thermometer

Figures show low uptake of flu jab by front line staff

LESS THAN half the front line health care workers in England received the seasonal flu vaccine this winter, but the figure is up on last year. A total of 43 per cent have been vaccinated, compared with only 26 per cent 12 months ago. Department of Health figures show regional variations in uptake, with 38 per cent of front line health care staff in NHS South West having had the jab, compared with 54 per cent in NHS North West.

In trusts with the lowest uptake, about one in ten front line staff have been vaccinated. For details, go to http://tinyurl.com/7lgpfrr