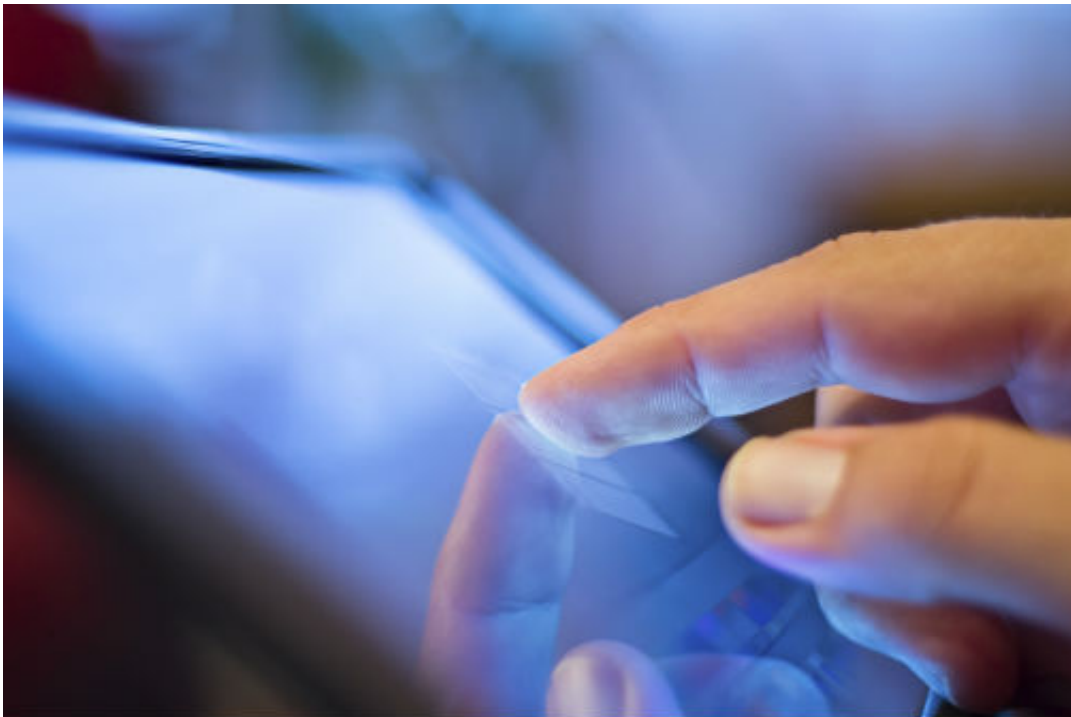# Review shows limited progress in digitizing NHS records

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The review addresses progress of electronic record implementation in NHS secondary care organisations. Credit: University of York

Health scientists at the University of York have shown that in the 25 years since the NHS was tasked with digitising patient records there has been limited progress made.

The review, the first of its kind to address progress of electronic record

implementation in NHS secondary care organisations, showed that limited guidance on IT implementation and underestimating the level of change to the working lives of staff members, were some of the reasons why little progress has been made towards becoming a fully digitised NHS.

Researchers argued that the high number of challenges that were uncovered, which also included confusion over how policy ambitions would be funded, highlighted the scale of the complexity in implementing technology in healthcare systems.

Dr Arabella Scantlebury, research fellow at the University's Department of Health Sciences, said: "It is difficult for those outside of the NHS system to visualise the scale of this project; there are hundreds of departments and healthcare organisations, using different IT systems, trying to share important information about a patient.

"One way of understanding the complexity, is if we imagine inviting a number of friends to an event using one system, a text message for example, only for them to post their answers back on several different portals, Facebook, voicemail, and so on; this would become a difficult communications exercise.

"And what if one of the portals used was a portal you didn't have? Add in the fact that permission might be needed before you share your response and it starts to get very complicated. If we scale this problem up significantly, then we get some insight into the digital communications challenges faced by the NHS."

The team reviewed policy documents and evaluations of policy to explore the extent of progress that has been made and to try and understand whether common mistakes were being repeated.

The review showed that progress was limited to the introduction of IT infrastructure, such as NHS Spine, which provides network support for electronic records, allowing information to be shared across the many different systems used by NHS departments.

Dr Scantlebury said: "There have been attempts to implement electronic records since 1992, but as so many have failed, it is time to ask why? Hospitals need to make informed decisions about introducing new systems, but guidance, underpinned by research into the pros and cons of such systems, is lacking.

"Previous attempts to implement electronic records have involved decision making at either a central NHS level or a local one, but there is also an argument for decisions to be controlled at both levels.

"Our review, however, suggests that we cannot recommend one approach or produce guidance because there is no real understanding or robust evidence into the pros and cons, as well as cost, of different implementation processes. Rigorous analysis of future policies is needed and should be conducted in a timely way to ensure the results are valuable.

"It costs money every time a policy fails to achieve its purpose, so it is essential that going forward the same mistakes are not made. The more information and guidance on IT implementation there is available, the more likely hospitals can start to make progress in digitising patient records to improve healthcare provision."

The research is published in the *British Medical Bulletin*.

  More information: *British Medical Bulletin* (2016). DOI: 10.1093/bmb/ldw055

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