A JOURNEY TOGETHER TO UNDERSTAND THE DIGITAL FUTURE OF NURSING IN THE UK

EVERY NURSE AN E-NURSE

Nursing is a profession where the human connection is a vital part of what we do.

Use of data, information and technology are becoming more commonplace in everyday work.

Technology is pervading and influencing nursing practice.
This project deployed Clever Together’s core crowdsourcing method and technology as an exploratory tool.

**STEP 1:**
Get clear on your mandate to engage – who and to what ends?

**STEP 2:**
Create a plan to generate interest from your target crowd and be clear about who took part.

**STEP 3:**
Capture quantitative and qualitative input from your crowd, turn input into insight by analysing with statistical and grounded theory methods and triangulating with literature and evidence bases.

**STEP 4:**
Turn your insight into action by triangulating data and insight with policy and evidence to produce recommendations.
EVERY NURSE AN E-NURSE

At Congress in 2016 it was agreed that the RCN should lobby for every nurse to be an e-nurse. A nurse that;

“is able to use data, information, knowledge and technology to maximum effect for patients, carers and service users”

WE WANTED TO HEAR...

The voices of nurses and midwives across the four countries of the UK.

Their ideas for a shared vision of a digitally enabled health and social care service that creates improved outcomes for patients, better experiences for staff, and more efficient ways of working.

Their examples of how data, information, knowledge and technology are helping nurses and midwives to bring that vision to life, and;

The barriers and enablers to the vision becoming a reality
WE DESIGNED A MULTI-CHANNEL COMMS STRATEGY TO WIN PEOPLE’S INTEREST

HOW WE GENERATE INTEREST

E-FLYERS
10,000+ flyers
200+ posters

WORKSHOPS
Online + 5 physical workshops across the UK

DIGITAL COLLATERAL
Websites, X4 video
Animated GIFS

EMAILED MEMBERS

SOCIAL MEDIA
Twitter, Facebook, LinkedIn
DIFFERENT REGIONS, GENDER, AND PROFESSIONAL GROUPS WERE ALL REPRESENTED

896 people participated in the online workshop

Over 2,500 ideas, comments and votes were shared

WHAT IS YOUR PRIMARY FIELD OF NURSING?

- Adult (66.3%)
- Children and young people (8.4%)
- Learning disability (2.2%)
- Mental health (3%)
- Midwifery (1.2%)
- Mix (13.5%)
- Other (5.4%)

MALE AND FEMALE COMPARISON

84%

16%

HOW WOULD YOU DESCRIBE YOURSELF?

- Registered nurse or midwife working in a practice setting (58.8%)
- Registered nurse or midwife working in a non-practice setting (18.9%)
- Nurse educator in a higher education setting (3.8%)
- Nursing/midwifery student (3.2%)
- Health care assistant /healthcare support worker (2.3%)
- Nursing researcher (0.9%)
- Retired (0.3%)
- Trainee nursing associate (0.3%)
- Assistant practitioner (0.2%)
- Other (11.2%)
More than half the participants (58.3%) reported using technology or data all the time in their everyday practice.

Nearly two out of five (39.6%) described themselves as digitally leading, compared to the rest of the nursing community.

More than four out of five (81.4%) felt that data, information, knowledge and technology would make a large positive contribution to nursing and midwifery.

More than seven out of ten (72.0%) agreed or strongly agreed that they felt satisfied with the level of responsibility and involvement at work, and a similar proportion (71.4%) looked forward to going to work and felt enthusiastic about their job.

However, fewer felt their organisation was doing a good job of supporting its nurses and midwives to develop their digital capabilities, with fewer than half (45.9%) agreeing or strongly agreeing.
IN AN IDEAL WORLD…

1. There would be one system for the whole NHS
   This was the most popular idea put forward. Contributors suggested it would be
   “…much easier for nursing and medical staff to make decisions on a person’s health if there was one system that every trust could access showing a full patient journey.”

2. Care would be supported
   “Data analysis is key in the management of the patient in practice and the full utilisation of information, knowledge and use of electronic applications and systems help us.”

3. Patients would benefit
   “Patients find themselves giving the same information to different health professionals, mainly because each professional is interested in subtly different aspects of that information … It is essential that education, training, and expectations of practitioners include an ability to record digital information accurately, succinctly and in a way that promotes inter-professional use.”

OUR CROWD SHARED THEIR CLEAR AND COMPELLING VISION

More efficient ways of working
Care could be delivered more efficiently, and that, in the best cases, a digitally enabled health service would free nurses and midwives to devote more time to the people and populations who need their services

Better outcomes for patients
Technology has the potential to improve services for people receiving care, and for populations so that they have better experiences and achieve better health and well being outcomes

Better experiences for staff
The working lives of nurses and midwives could be improved through data, information, knowledge and technology, enabling people to experience increased levels of satisfaction
A CLEAR AND COMPELLING VISION FOR THE DIGITAL FUTURE

“As a nurse, my dream would be to go online and see any patient’s records that I needed to see. They would be together, well-curated, under that patient’s name/identifier. It would include GP, acute, community interventions and interactions and all correspondence. There would be click-through contact points for details of other staff involved. As a patient, my dream would be the same…”

“Patients will be empowered to contribute to their healthcare, and their outcomes will be improved due to more effective, individually targeted resources.”

“I believe nurses would be able to plan care around the needs and changes of those in their caseload. Issue reminders, and alerts when conditions change; give real-time information so responses are well informed.”

‘Overall, this vision is clear and compelling: a digitally enabled health and social care system that improves patient outcomes, enhances nurses and midwives working lives, and makes services more efficient.

THERE IS A SIGNIFICANT GAP BETWEEN THE VISION AND NURSES’ AND MIDWIVES READINESS TO LEAD AND DELIVER IT

They may be willing to deliver but there are barriers preventing them from being ready…

Day to day problems with basic technology

Staffing issues constraining uptake and engagement

Digital skills

Those commissioning information technology often don’t understand the role of nurses and midwives

Lack of leadership at a local and national level
THERE IS A SIGNIFICANT GAP BETWEEN THE VISION AND NURSES’ AND MIDWIVES’ READINESS TO LEAD AND DELIVER IT

“The single, most fundamental problem in our trust is the inadequacy of our IT systems... I hate to think how much nursing time is wasted each day waiting for computers to switch on, load emails, bring up blood results etc. And that is if you can find one that is free. Since IT systems are now at the heart of day-to-day clinical practice, there are rarely enough computers to match demand...”

...as district nurses, we do not have access to the mobile equipment. Therefore, we have to complete paperwork in the home... then take the information back to base... This is a waste of nurses’ valuable time. I realise the financial implications for the employer but this is a false economy. If the focus of care is to treat patients in the home environment and every team working with low staffing levels, this increases the time we have to spend with each of our patients. The provision of mobile equipment would enable us to input the details in the patients’ homes.”

WHAT WE HEARD ABOUT THE BARRIERS

“The biggest barrier to any system, be it electronic or paper-based, is chronic understaffing. If staff haven’t time to take a break, use the bathroom and are struggling to deliver patient care, they will find it difficult to engage with and learn new systems.”

“Let’s not forget that some of the workforce started with pen and paper, and the support has not always been there to help them move along as new technology has been introduced.”

“They... often do not know the extent of our work and have never walked in our shoes yet they make decisions on our behalf and bring in systems for us to use. They have no idea about workflows and how information is used.”

“...we need nurses to lead and make decisions ... if we’re not leading on the systems themselves as we can’t make informed decisions if we don’t really understand the impact. Too often it is realised after money has been spent that it’s been on the wrong things...”
WHAT WE HEARD ABOUT THE ENABLERS

“E-nursing leaders need to be seen as just that, not as IT project or programme managers. They are nurses, they are leaders and they are driving improvement to quality, safety, evidence, research and patient and staff experience.”

“I have seen eHealth nurse reporting to both the IT side and the nursing side and absolutely they need to report to nursing. This is the only way you get engagement from both nursing and IT leadership … a full understanding of expectations by equally influencing the digital agenda and be fully informed with clinical and technical requirements.”

“I was the project lead on the use of a theatre system... It was clear early on that the system did not reflect the practices and processes within this environment, also staff were not fully trained in its use. Discussions with the supplier about changes needed and further training for staff resulted in a system that met the requirements of theatre staff... Moral of this tale: include nurses in the procurement and every stage of implementation if they are going to be expected to use the system.”

System facilitators “…walk the wards very day, checking in with staff to ask if they have any issues with tech and systems. Resolving issues on the spot when they can. It is a fixed term trial, but has gone down so well with clinical staff we are fighting to fund it permanently.”
CONCLUSIONS

1. Ensure adequate technology – get the basics right
2. Align priorities for future development – innovation should address the day-to-day challenges faced by nurses and midwives
3. Support and protect nursing leadership in data, information, knowledge and technology – this will help address the first two issues.
NEXT STEPS FOR THE RCN

These findings will form the basis of the next phase of our Every Nurse an e-nurse initiative.

We will raise awareness of the need to speak up about technology and how it supports practice.

We will share case studies that illustrate the use of technology in practice. We have a strong foundation with the examples shared as part of the consultation.

We will work with our professional forums, executive nurses, student representatives and health practitioner membership to develop nursing leadership on this agenda and advocate nursing involvement in design and implementation.

We will broker a conversation between nurses, informaticians and designers that can be recorded and shared among these communities.
THANK YOU

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For further information about this consultation and the detailed research paper go to:

https://www.rcn.org.uk/clinical-topics/ehealth/rcn-digital-ready