

# What do we want IT to do?.... Everything

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**Well, why not? We need to make things easier and more transparent for patients and their families as well as for nurses, doctors, midwives, GPs, to support safe effective care, and make it a better experience for everyone.**

The future of our NHS depends on us being smarter with what we've got. Directing resources appropriately, targeting areas where we can really make a difference, focusing on promoting health and preventing illness. We need to be breaking down invisible barriers – your health and wellbeing doesn't have a conventional beginning and an end, it's continuous, lifelong.

**If we prioritise what we need technology to do, we can summarise as:**

- **KNOW** your population – having access to a person's health and care data whether they've visited a local GP, been a

hospital inpatient, had an outpatient clinic appointment, seen the community midwife, or have a social care package. If I had some blood tests and blood pressure check last week at an outpatient appointment, wouldn't it be useful to see those results and monitor my blood pressure this week when I'm visiting my GP?

Technology can pull those strands together and present us with a meaningful summary which says 'I know this person' – instant improved patient experience plus you have the relevant clinical and social history at your fingertips.

*... prioritise what we  
need technology to do*

- Be creative with ways to **ENGAGE** not just active patients but what about those potential future patients. There are technology solutions already out there to help identify and even predict where there might be future health problems. Technology can support us to actively prevent illness and promote wellness. Let's use the data to be proactive and think outside the box for ways in which we employ technology to reach that teenage diabetic, connecting him with peers and devise less clinical ways to help him manage his condition.
- Once we know who we're talking about and how to find them and we understand what interests them and how best to approach them, we can really start to **MANAGE** our populations – holistically.

Rather than waiting for Terry to arrive in A&E in crashing pulmonary oedema, we already knew he had congestive heart failure and he's been regularly measuring and recording his own health data at home – any unexpected weight gain triggers his care team to intervene, preventing the blue light emergency and keeping Terry at home.

How did we look after Terry? Technology enabled us. It already exists, it's out there and other industries are using this kind of stuff right now.

What's not quite there is the belief that health care is (to put it bluntly) another industry – like banking, like retail, like travel – that can and should embrace technology. Technology and social media are part of our everyday lives already – we should be using methods that are already proven to be effective and ride that wave to revolutionise healthcare enabling whole new models of care.

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