

Harnessing the power of digital data: so obvious, but increasingly obviously not straightforward

Welcome to the October edition of *FHJ*. As editor-in-chief of both the *FHJ* and *Clinical Medicine*, my focus is on getting the best for our patients, 'blending' the benefits of specialist driven care and processes with the general medical reality and requirements we all face at the front line. This issue addresses this directly in oncology patients¹ and through a couple of excellent papers on 'care bundles'. Pioneered in sepsis in the ICU setting, care bundles are increasingly ubiquitous in all areas of medicine. Some are complex and concerns have been raised about service reallocation and the opportunity costs of following these recommended approaches. The data presented suggest that resource allocation fears may not necessarily be borne out in reality, while simple bundles addressing challenging but compassionate areas such as feeding can have a dramatic positive effect for all concerned, likely reducing length of stay in many cases.

This is also the second of our series looking at the role of digital technology in healthcare. The manuscripts within this edition again offer a glimpse into the diversity of digital issues that can, and almost certainly must, be addressed by the healthcare sector if we are to deliver optimal healthcare to our patients.

Harnessing the power of digital technology seems so obvious, but the careful use and appropriate analysis of personal data at scale has evaded us, to a greater or lesser degree, to date. Using data to improve care does not need to be complex or technically challenging and initiatives either directly delivered in developing countries, such as MedNav,² or with global reach that includes developing countries, such as digital journal clubs,³ show how simple use of technology can make a significant difference, both in clinical care and medical education. Harnessing the power of this technology relies on the workforce to embrace it; and as is pointed out in numerous papers throughout this edition, this requires a cultural shift (both inter- and intra-generational), a much better understanding of and education in medical technology (both the technical aspects and its appropriate use for patient benefit), and a system that can enable its use.

We already collect much data electronically; however, as highlighted in several papers, we do not always use our existing

data in the most effective or joined up way. This maybe because we use a blunt analysis that lacks the necessary context, granularity and nuance (as highlighted by Eatock et al⁴) or because we do not join up our systems either internally or across primary, secondary and social care.

As the article by Johnston reminds us,⁵ digital maturity of the workforce is as vital as organisational technological digital maturity. This must include organisations knowing and acknowledging that, as with almost all of healthcare, one size will not fit all. To that end, we must not be seduced by technology, and, while Jeremy Hunt stated at the Health and Care Innovation Expo in September that all patients should be able to book appointments, order their repeat prescriptions and access their medical records online, we are reminded correctly by the RCGP that many patients do not have this immediate access to IT, nor necessarily wish to take this impersonal approach to their care. Overall, I think it is clear that we are making progress, albeit slower than many would like, and the issues that make it slow are clear to see in the offerings contained in this edition. ■

References

- 1 Cooksley T, Al-Sayed T, Ray S *et al*. Acute medical and specialty support at a tertiary cancer centre: a collaboration to achieve high-quality care for acutely unwell patients with cancer. *Future Healthcare Journal* 2017;4:213–5.
- 2 Duffy S, MacLaren E, Phillips D, Letchworth P. MedNav – helping midwives manage neonatal resuscitation in resource poor settings. *Future Healthcare Journal* 2017;4:178–83.
- 3 McGinnigle E, Francis R, Warriner DR, McAloon CJ. Journal clubs in the digital age: twitter for continuing professional development. *Future Healthcare Journal* 2017;4:160–6.
- 4 Eatock J, Cooke M, Young TP. Performing or not performing: what's in a target? *Future Healthcare Journal* 2017;4:167–72.
- 5 Johnston D. Digital maturity: are we ready to use technology in the NHS? *Future Healthcare Journal* 2017;4:189–92.

Wing Commander Ed Nicol
Editor-in-chief

Members of the editorial board

Wing Commander Edward Nicol
Editor-in-chief

Professor Tom Downes
Deputy editor-in-chief

Editorial board

Dr Na'eem Ahmed

Debra Armstrong

Dr Mohsin Choudry

Dr John Dean

Professor Paul Jenkins

Dr Robert Klaber

Dr David Morgan-Jones

Dr Victoria Simpkin

Dr Joanna Szram

Dr Emma Vaux

Dr Louella Vaughan

Ms Sheena Visram

Dr Katharine Warburton

Dr Stephen Webb

Future Hospital Programme

Dr Frank Joseph

Dr Mark Temple

RCP Wales

Dr Andrew Freedman