Conference Abstract

Coordination of specialist care with clinical social networking

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Abstract

Introduction: Significant advances in Information Technology (IT), with increasing power of computing devices, ease of access to the Internet and the proliferation of smartphone technology allows more effective collaboration in real time to improve communication and ultimately patient safety.

Professor Sir John Lilleyman, Medical Director of the National Patient Safety Agency, states, 'Handover of care is one of the most perilous procedures in medicine, and when carried out improperly can be a major contributory factor to subsequent error and harm to patients.' Professor Peter Rubin, Chairman of the Education Committee of the GMC, suggests, 'Effective communication lies at the very heart of good patient care…… The changing face of medical practice – and particularly the introduction of shift working – makes that requirement more important than ever.'

Here we report the use of clinical social networking via smartphone and tablet technology to manage specialist referrals across multiple provider sites. A collaboration between clinicians at EKHUFT and the healthcare specialist IT company DocCom.

Aims and Objectives: Shift working, cover across multiple sites and providers created difficulty in ensuring every member of the multi-disciplinary team (MDT) had access to up-to-date patient information, including advice already given by other members of the specialist team. There was no consistent way of ensuring clear communication and documentation of referrals.

The aim here was to develop a robust, accessible real-time clinical social networking platform to manage tertiary renal referrals across multiple providers via mobile technology.

Methods: DocCom have developed a secure clinical social networking platform, 'Careflow'. All medical staff, along with specialist nurses in the renal MDT at EKHUFT, are supplied with Apple devices to which Careflow was deployed. The app connects to the DocCom service in the cloud. Risks of holding patient identifiable data in the cloud (allowing access both within and outside of

N3) are mitigated by appropriate use of encryption. DocCom is ISO 27001 certified and holds an NHS Information Governance Statement of Compliance (IGSoC).

A referral group was created to allow the MDT to communicate and collaborate around referrals.

Results: All renal tertiary referrals at EKHUFT are now documented in the "renal referrals" group in Careflow. As an example of a typical patient pathway; a referral is received to the on-call renal registrar who then documents the referral on Careflow allowing other members of the MDT to instantly view. For referral from another site the nephrology consultants covering that site are then alerted to the referral, may then perform a clinical review of the patient and document findings and management plan on Careflow. This allows clear and transparent clinical conversation around the patient's care. This referral may result in transfer to the renal ward, arranged by the ward manager who is already involved in the conversation.

Conclusions: This system provides efficient communication and collaboration for a tertiary referral centre via mobile technology for a mobile workforce, demonstrating potential gains in both improving quality of care and patient safety by clinical innovation and use of IT in healthcare achieved by an active collaboration between clinicians and IT specialists.

Keywords

clinical; social; networking; mobile; smartphone

PowerPoint presentation:

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