

What you haven't heard: Lessons from 130 years of health technology innovation

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Abstract

Many technology innovations in health have failed, so why is healthcare such a difficult area?

And how does the social nature of mobile help?

UCL & Mobile Health Innovation

- Ranking: 4th best university in the world
- CHIME: only UK health informatics department in a medical school
- NHS relationship:
 - Provides teaching on the prestigious NHS Graduate
 Management Training Scheme
 - Close links to The Whittington NHS Trust
- Projects: electronic patient records, screening mammography, HIV+ databases, pandemic flu
- Mobile Health: appointment reminders, medical teaching via mobile, assessing pain over time
- Collaboration: commercial & technical reality with Galit Zadok (ex-Vodafone/EMAP)



Technology is not new to health



Heart signals sent by telegraph (1860); first advert of medical services by phone (1878)

To diagnose by telephone rather than in person is "not in accord with the true ideal of professional duty" (1887)

Late 1900's

First online support groups (late 1970s? No later than 1982)

Cyberchondria (term coined 2001): the Internet as a new way to spread "pathogenic ideas" (1997)

Medicine can be quick to adopt new technology, but the waves of enthusiasm are soon followed by concerns, and even moral panic

Why healthcare is difficult

- Medicine slow to adopt technology
- Highly regulated
- High safety, duty-of-care
- Litigation threat
- Organisational culture, embedded working routines
- Who benefits, and who actually does the work?
- Focus on evidence-based medicine (at least, in theory)
- NHS not structured or operates like a corporate
- Funding and budget models are fragmented
 - For health
 - For research



NHS: A Mishmash of Fiefdoms

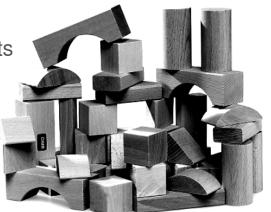
3rd largest workforce in the world (after Chinese Army, Indian Railways)

4 devolved services: National Health Service (England), NHS Scotland, NHS Wales, Health and Care NI

England:

- 10 Strategic Health Authorities
- 152 Primary Care Trusts
 (together control 80% of NHS budget, but that's <1% each)
- 297 acute hospital and foundation Trusts
- 60 Mental Health Trusts, 12 ambulance trusts, a few Care Trusts
- NHS Special Health Authorities
 (NICE, NHS Litigation Authority, NHS Blood and Transplant)
- Certain national (England) services, including NHS Direct

Scotland, Wales and NI = similar fiefdoms



Where have there been failures of adoption?

- Diagnostic decision support
- Kitemarks for online sites
- Telemedicine
- Electronic patient records

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S B Freedman ECG transmission to yacht by fax

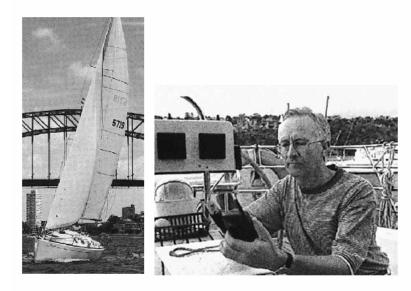


Fig 2 The author aboard a yacht in Middle Harbour, Sydney. The mobile telephone is open for viewing an ECG.

Looking at the NHS

NHS Connecting for Health

Biggest civilian IT project in the world ever; many successes, however...

"Seven years after the launch of the National Programme for IT in the NHS, essential technology does not meet the needs of doctors, local cost estimates are unreliable, many NHS staff remain unenthusiastic, and the programme's future is far from certain."

"The **delays** are despite the programme's having spent £2.4bn by March 2007"

"few successful
deployments of
the scheme's two
main hospital
systems [...]"



"An NHS trust at
the forefront of
work on the £12.7bn
NHS IT scheme has
called in police
after a breach of
smartcard security
compromised the
confidentiality of
hundreds of
electronic
records."

So why has health technology failed?

Disconnect between technology providers and healthcare reality **Imposed top-down solutions** rather than working with clinical stakeholders with a bottom-up approach

Rigid solutions that fail to address the changing and fluid nature of healthcare work practices

All made worse by Government, policy makers and management seduced by the promise of big computer or some Shiny tech

"if you think IT is the solution to your problem, then you don't understand IT, and you don't understand your problem either."



Roger Needham, CBE

What works: the social aspect of tech

- Wii Fit: Nintendo succeeds (and gets paid!) where Department of Health has failed for years.
- Online support groups (used by tens of millions, bigger than faceto-face support groups)
- Case Study: FHM Mobile
 - Social aspect more popular than babes in bikinis
 - CHANGED business and revenue model. Subscription → Advertising

Most popular area 12m Pl/month (2005)

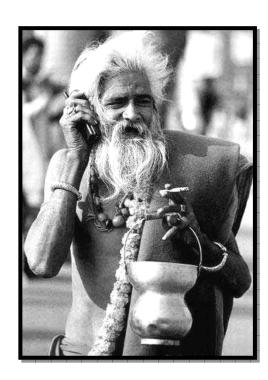


Mobile is the most social of all tech

Always-On-Me device, puts the connected user in the centre

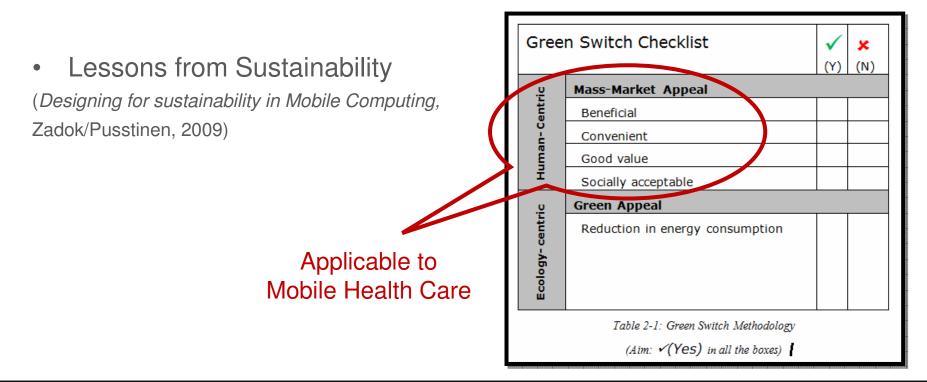
- ... thus Mobile has great relevance for health care
- Ideal for education
- Ideal for social support, and Self Management
 - Behaviour Change
 - Mental Health
 - Quality of Life (support of chronic diseases)

But still need to qualify funding models...



Mass Adoption require Human-Centric approach to service design

- Mass adoption = 30% of addressable user base
- Needs, wants, and limitations of end users need extensive attention
- For a mobile service to be adopted, it must fulfil *Human*-centred criteria



In Summary

- Health is difficult and complex
- NHS and tech a challenge; lessons to be learnt
- Scalability/Mass Adoption challenges
- IT is not a panacea, but IT can surprise and be transformative
- Sociality of health and mobile
- Mobile is the most socially-oriented tech platform of all



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Thank you. Questions?

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