BMJ 2011;343:d6484 doi: 10.1136/bmj.d6484

## LETTERS

## THERE IT GOES AGAIN

## NHS IT requires the wisdom of the crowd not the marketplace

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In his recent upbeat article on IT in the NHS, Cross reverses some of the recent press nihilism.<sup>1</sup> Why then did the recent Department of Health (DH) IT consultation only garner responses from seven clinicians and 21 health professionals?<sup>2</sup> Are they disillusioned because of past failures to involve frontline clinical staff? Arguably, those failures to harness their expertise might explain the NHS England IT fiasco.

Cross draws attention to an agile iterative approach and the need for a mature debate about what constitutes success and failure. We favour a Hippocratic revolution in medicine<sup>3</sup> involving clinical wisdom, participation, and collaboration (in keeping with Greenhalgh and colleagues<sup>4</sup>) and disagree that more leadership, oversight, and accountability are required.<sup>1</sup> Creating a national electronic patient record of one size that fits all was always an illusory solution.

Dekker recently wrote, "Converting to electronic databases that are accessible independent from the physical location of a patient record makes a whole host of assumptions about what makes human work and interaction easier," therefore "reading a patient record or adding something to it is never going to be a simple conversion from paper to computer screen."<sup>5</sup> The possibilities may be great but so are the opportunities for failure.

A different approach to design considers paper-electronic hybrids, and focuses on input, interconnectivity, and the keystroke burden of data collection by asking the right questions in a logical, flow-patterned sequence. In our specialty of maternity care, a wiki approach encouraging global interaction and interconnectivity in organising input questions has recently been launched (http://eepdwiki.org.uk). This may be a blueprint for other shared care specialties that, like the recent DH Maps and Apps initiative (http://mapsandapps.dh.gov.uk), taps into the wisdom of the crowd rather than the marketplace.

Competing interests: RF has served on virtually all UK national maternity notes and IT projects in the last 30 years. From 1990-2001 he was reimbursed by Protos (now iSoft Evolution) for the use of his medical knowledge. He has had no commercial connection with them, or any other company, since 2001 and has entirely self funded the open EEPD website. The authors declare no other interests.

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## Cite this as: BMJ 2011;343:d6484

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