

# VIEWS & REVIEWS

## LAYING FOUNDATIONS

### Jet packs

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“My generation never got the future it was promised . . . 35 years later, cars, air travel—it’s exactly the same. We don’t even have Concorde anymore. Technology stopped.” In the television series *The West Wing* one of the characters was complaining about how technology hasn’t lived up to the promises of science fiction. “Where’s my jet pack, my colonies on the moon?”

The vast majority of healthcare institutions are run on paper notes and dictation. I’m used to it now, but as a generation Y, digital native-type I remember arriving at my first medical school placement and being genuinely shocked at how archaic the systems were.

I defy anyone to defend dead tree notes. Unless you are a fan of paper cuts they are inferior in every way to a well implemented computer system. Yes, well implemented. You have spotted the flaw in my utopian dream. For some reason,

information technology and healthcare seem not to mix. The NHS IT project was a fantastic idea, but has unfortunately been scaled down in ambition to be essentially the world’s most expensive email system.

Existing applications are not much better: the over-riding sense is that they’ve been created by people who have never actually set foot in a hospital. Every application that I have used falls into one of two categories: clunky and weird, or clunky and impossible.

In the first category are those pieces of software that look as if they were knocked up in an afternoon by a high school student and which crash with such astonishing regularity that you have to wonder if the design brief was to give users hypertension.

In the second are systems with interfaces so non-intuitive that they may as well be written in hieroglyphics. There are buttons for everything, and most are labelled with an icon whose function can only be guessed at. That red blob might get you blood results; it might redirect an organ to Bognor Regis.

None of this is the institutions’ fault. IT projects are expensive, difficult, and risky. So there needs to be a centralised, concerted effort, led by doctors, to create better systems. With the right technology patient care could be made so much safer and so much more efficient.

No more wasted outpatient slots because a patient was admitted. No more unreadable management plans or unknown allergy status. No more unobtainable notes. Technology, implemented well and designed by its users, would improve safety and save money. That’s got to be something that doctors should get behind.

And once that’s sorted, then maybe we can have the jet packs.

Competing interests: I have a relative who was employed on the NHS IT project several years ago.

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