



Common concerns and suggestions to help resolve them

Missing urgent calls from patients

Concern among clinicians varies depending on whether the health condition can become serious quickly. In all services studied, healthcare professionals reported very few missed contacts and knew of no adverse outcomes:

- ▶ Give clear instructions to patients about hours of service and what to do out of hours (via leaflet as well as digital)
- ▶ Remind service users frequently about parameters of the service
- ▶ Set up answerphone messages and email bounce back messages, which automatically kick in when the service is not operational
- ▶ Access training on how to set up automatic messages on all clinic communication systems

"Someone emailing us at 8 o'clock at night because they had got severe abdominal pain - we would want them to be seen straight away, not the next day. That's what worried us about the safety of email. But we've never, ever had that problem and patients actually use it very safely and effectively."

Physiotherapist

Emails and text messages could be misinterpreted by clinician or patient

There is no immediate feedback and no cues such as tone of voice.

"If you're trying to assess their mental health it's quite hard to gauge through text, whereas if you can hear them over the phone, you can hear how they sound and whether they sound flat or not."

Specialist Nurse

Building good relationships with patients enhances text based communications.

Who is receiving the digital communication - is it the patient?

- ▶ Clinical services must pay attention to their contact record keeping
- ▶ Ensure patients have agreed to be contacted by digital means
- ▶ Some uncertainty will remain so consider the nature of the information being shared

Will the communication technology work?

- ▶ Seek training as needed
- ▶ Ask advice about network coverage, particularly in rural areas and within NHS premises
- ▶ Many patients like to receive a text first so they know you will be calling
- ▶ If a patient phones, offer to ring them back to conserve their credit

"I always offer to ring them back... I'm always mindful that their money is their money and it's already quite expensive."

Advanced Nurse Practitioner

Management may see use of digital communication with patients as a means of cost saving

Clinicians who use digital communication with patients are convinced of its value as an adjunct to seeing patients face to face, not a replacement.

"I worry that it could be part of a streamlining process that would see less clinicians on the ground."

Senior Mental Health Practitioner

"It's time saving for me because I can impart information really rapidly in an accessible format. I can point people towards resources and so on in a helpful way so I find it actually acts as an addition to any therapy I might be doing."

Psychologist

Clinical care for people living with long term conditions - the role of digital communication between NHS clinical teams and their patients

Evidence based practice



These points for you to think about when using digital communication with patients come from a research study funded by the National Institute of Health Research.

We observed and interviewed nearly 200 members of specialist clinical teams from across the UK working with young people living with long term conditions.

We interviewed over 150 young people living with a range of conditions including diabetes, cancer, mental illness, liver disease, kidney disease, blood disorders, cystic fibrosis, inflammatory bowel disease and arthritis.

Young people and their clinical teams used text, mobile phone calls and emails to communicate about clinical issues. A few clinical teams engaged on social media sites with their patients.

The clinical teams were using digital communication to improve the engagement of the young people with their services. There is good evidence that improved engagement leads to improved health outcomes.

These young people and their clinical teams have worked out where and when it works well to communicate digitally about clinical matters such as symptoms, drug regimes and emotional distress. From their experience, they know what needs to be discussed and planned before using digital communication about clinical matters.

Their experience can be applied to working with other people with long term conditions who are accustomed to using digital communication (mobile phone, text, email), particularly if they have a smartphone, so access to this communication is straightforward.

If you are planning to communicate digitally with patients, talk about the points we raise with your team and with your organisation's Information, Governance, IT and Patient Safety Leads.

The study name is:

Improving health outcomes for young people with long term conditions: the role of digital communication in current and future patient-clinician communication for NHS providers of specialist clinical services; the LYNC study

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Further details about the study are available at:
www.nets.nihr.ac.uk/projects/hsdr/1220951

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