Response to NHS Chief Executive’s Open Call for Evidence and Ideas

Respondent ID: 12

Organisation name: N/A

Type of response: Email
Dear Sir/Madam,

As a midwife working in the NHS there are many ways new innovation can be used within maternity services to save managerial time and expense.

1. **Having national maternity hand held notes that are used across the UK.**
   All Trusts should be encouraged to use the national notes and to encourage this use, they would be provided at just over cost, reducing the printing costs to the NHS to say nothing about the development time. What a cost saving that would be!!!

   **Why would this save time and further money?**

   a. because health professionals, particularly managerial tiers, would no longer need to waste time redesigning notes again and again. What a waste of resources this is!

   b. all health professionals would know where to find information and this would assist them in providing care for all pregnant women in their care. Confusion when women move from one trust to another would no longer happen. All forms would be the same, all filing in the same place and all information found on the same page.

   c. when women move area they will no longer have to care two sets of notes or have one set discarded or sent back to the hospital they first booked with.

2. **Have all trusts use NICE guidelines, regarding maternity care.**
   Some trusts that I have worked in use some of the guidelines but not all, some screen women for bacterial urinary tract infection at booking of maternity care and some don't. Why is this. A lead consultant in one hospital will agree with the guidelines another will not. IS CARE ABOUT EGO'S in the NHS or is it about research based practice. Evidence based practice. Why is it that one trust can use one way of giving a drug but another will use a totally different way of administering the same drug. How can this be safe when we have such a mobile workforce. Practitioners will undoubtably make more mistakes when moving from one trust to another when drug administration is so varied, surely.

3. **Have all trusts use the same computer software and all GPs using the same software.**
   Then all the confusing ways patient recording is administered would be a thing of the past. I use four different systems in GP surgeries in my small area. It is simple not helpful to patient care or helpful when trying to provide continuity of care. WHY do we have so many EGO's in the NHS. What is the point of so many different computer systems, EMIS, SYSTEM ONE, etc etc............. How about the right of health professionals who work from several GP surgeries to have continuity of software, how about the patients right to have GP's using the same system so that there is no confusing when their records are transfered from one GP to another because of incompatible software.

   Why would GP's want individual software packages for their clinics...... WHY? It is for patient care and administration of care, not for them to play with or to have incentives to purchase.

   quote from [http://www.gpchoice.org/gps'-right-to-choose.aspx](http://www.gpchoice.org/gps'-right-to-choose.aspx)

   ‘Systems will be accredited against national standards. Each practice will have guaranteed choice from a number of accredited systems that deliver the required functionality. Such
choices will be consistent with local development plans (or their equivalents) and in line with local business cases and service level agreements. From 1 April 2003 every practice in the UK will have the choice of RFA-accredited systems. Practices will not subsequently be expected to exercise this right more frequently than every three years.’

At the end of the day what do I know, I work as a midwife, in the community. I get fed up trying to work out the common sense practices of GP’s who have different software from the one in the next village. I also get fed up transferring information onto difficult software that makes no sense to me, transferring patient information from one set of notes to another….. where will it all end!!

Probably with me resigning and having more time to play on my Apple computer which at least I understand.

I know the NHS wastes a lot of money, I have a friend who services the back up generators and hear about the poor management of the NHS resources from him…… why are the managers who waste our public funds not held to account.

Best wishes

Judith Bradfield