

# Mobile working knowledge centre for the NHS

## Key points:

Mobile working can increase the number of patient visits per clinician.

More time is spent talking to patients after adopting mobile working technology and practices.

Pre-configured devices for use in mobile working to access N3 services are available from the N3 team.

Example security policies and device guidance are available from the mobile working knowledge centre

Material exists to help with creating a case for change.

Implementation guidance is available to ease deployment. This includes project planning, risk assessments and resource planning.

Where can I go to discuss mobile working with NHS colleagues?

A group has been setup on [LinkedIn](#) to support discussion on Mobile Working and further sharing of best practice.

## What is mobile working?

Mobile working is the ability to work anywhere and at any time to access and update information from a supported mobile device. For health service staff critical activities can now be completed in real time, from accessing calendars to viewing patient test results, without needing to return to a desk.

The use of mobile technology is seen as a key enabler for improved quality and more efficient working practices. However, significant challenges still exist in developing applicable strategies and implementing solutions to achieve the required results.

The DH Informatics Directorate, working with frontline NHS staff and the DH Mobile Health Worker project have created the Mobile Working Knowledge Centre web site. The site pulls together benefits evidence, good practice guidance and NHS experience of mobile working and presents this in one easy to access place, with links to further guidance where appropriate.

The target audience for the Knowledge Centre is directors, service improvement leads, change managers and project managers responsible for initiating and facilitating transformational change. It not only provides advice and guidance but practical tools that can provide a 'head start' with essential activities.

## Why should I use mobile working?

Current Government policy increasingly advocates that patients are treated at home. The adoption of mobile working practices and devices by community service providers can support this policy driver by enabling care professionals to spend more time with patients, improve productivity and save costs.

The Mobile Health Worker Project found evidence of cost savings from reductions in admissions and referrals alone. Clinicians spent more time with patients and productivity was increased.

Providing mobile access to schedule information, email and other basic functionality can make a positive difference. For example if an appointment changes the clinician can be notified saving a wasted journey to a patient and a trip back to the office.

## Who is using Mobile Working and have they seen benefits?

**NHS Calderdale** is an evenly split 50/50 urban and rural geography.

They use TPP SystemOne as the clinical system and Microsoft Windows XP, Microsoft Office and other tools for additional requirements such as email and internet access.

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NHS Calderdale have found:

- Over 17% rise in the number of patient visits per day and a 14.5% increase in the amount of time spent with patients.
- Over 21% reduction in the number of admissions
- Specialist nursing saw a drop of over 68% in data duplication.
- Patients reported increased peace of mind and reduced anxieties.

**NHS Tower Hamlets** is 100% urban. The care record is accessed via a web interface, EMIS Web, requiring a secure connection back to the office. A variety of software was installed on the devices to support remote working, e.g. Map of Medicine and Cerner PAS System. NHS Tower Hamlets found

- Clinicians increased the number of contacts per day by over 14% and the amount of time spent with patients increased by 39%.
- Due to access to mobile working a 72% reduction in saving on referrals was made and 100% reduction in admission numbers.
- Data duplication was reduced by over 63%
- Clinicians report much less 'dead time' periods in between patient appointment.

Consult the [National Mobile Health Worker Project: Progress Report](#) for full details and additional case studies.  
[http://www.dh.gov.uk/prod\\_consum\\_dh/groups/dh\\_digitalassets/documents/digitalasset/dh\\_129596.pdf](http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/documents/digitalasset/dh_129596.pdf)

## Key questions

**Q:** Where can I find more information on mobile working?

**A:** From the [NHS mobile working knowledge centre web pages](#).

<http://www.connectingforhealth.nhs.uk/systemsandservices/icd/assessment/mobile>

**Q:** Will I need to run a procurement exercise to start using mobile working?

**A:** Not necessarily, you should follow your local purchasing guidance. Existing arrangements, for example via N3, may remove the need.

**Q:** Can I buy an assured mobile working device?

**A:** [N3 offer a choice of preconfigured and assured devices](#) for off the shelf purchase to accelerate mobile working practice adoption and reduce implementation risks.

<http://www.n3.nhs.uk/ProductsandServices/N3Applications/MobileHealthWorker>

**Q:** Are there any good practice guides for securing mobile devices and protecting data at rest?

**A:** Yes – the DH Infrastructure Security team have created a number of [Good Practice Guides](#). In particular the "Use of Tablet devices in NHS Devices" and "General Principles for Securing Information Systems".

<http://www.connectingforhealth.nhs.uk/infrasec/gpg>

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