

E-Health Insider's special reports examine new technologies and how they can be used by the NHS to improve efficiency and safety and so deliver better care to patients. Each special report consists of a journalist written feature above updates from leading companies.

We are happy to consider ideas for experts and customers to interview; please send these to **Lyn Whitfield**. To advertise and secure a company update, please contact **Lauren Poole**.

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January: Business Intelligence:

In July 2010, the government published a white paper that sets out plans for a radical shake-up of the NHS. Around 80% of NHS spending will be handed over to new GP consortia, while NHS providers will be expected to operate in a more competitive environment, in which patients have far more choice. If organisations are to thrive in the post-white paper world, they will need far better information about what they are spending and what they are getting for their money. This special report will look at how the BI market is responding.

February: Security/information governance:

The Information Commissioner's Office can now fine businesses and public sector organisations up to £500,000 for wilfully or recklessly breaching the Data Protection Act. The ICO has yet to use its new powers; but it has often complained about the NHS' poor record on data security, so it can only be a matter of time. This special report will look at how trusts can secure their data, both inside their networks and when it has to leave those networks on vulnerable laptops and USB sticks.

March: Systems integration:

Getting systems to work together so organisations and healthcare teams can share and use the information they contain has been a long-term goal of NHS IT. However, the drivers for systems integration have changed over time, and so have the technologies available for doing it. This special report will look at the implications of the NHS white paper, Liberating the NHS, at how this changes the integration challenge for trusts, and at how vendors are responding.

April: Digital dictation:

The health service must make £20 billion of 'efficiency savings' over the next four years, just to cope with 'medical inflation' and rising demand from an ageing population. Over the past few years, a number of trusts have deployed digital dictation solutions to improve the production and distribution of reports and other documents. Now, some are looking to 'go beyond' digital dictation with systems that streamline workflows and drive out costly delays and replication. This special report will look at these developments.

May: Document management:

The Liberating the NHS white paper expects GP commissioning consortia to demand high standards in the contracts they place with NHS trusts. One area that is likely to be of particular interest to GPs is getting high quality discharge summaries out of hospitals, fast. An increasing number of trusts are employing IT solutions to manage the production of these documents. This special report will look at some of them.

June: Blood, medicines and asset tracking:

The Operating Framework for the NHS in England 2009-10 stressed the need for trusts to roll out and improve their wireless infrastructures. With a good network in place, trusts can not only improve staff access to computers and communications devices, but deploy tracking technologies that can significantly improve efficiency and patient safety. Examples include systems that match medicines and blood products to patients, monitor the status and cleanliness of beds, and locate staff and equipment. This special report will look at what can be achieved.

July: E-prescribing:

It's been more than a decade since auditors first called for e-prescribing to be introduced to hospitals to cut medication errors. Progress has been slow, but the spread of wireless infrastructures and the focus of successive governments on improving both the efficiency and safety of NHS services, has started to change things. This special report will look at the technology that is now available on e-prescribing and at the challenges that remain.

August: no special report this month.

September: PACS/RIS:

Picture archiving and communications systems were one of the big successes of the early years of the National Programme for IT in the NHS; and they have revolutionised imaging in most hospitals. Nothing ever stands still, however, and there is now a growing awareness that PACS images need to be more closely integrated into other electronic patient record systems. Trusts also need to prepare for the storage and integration challenges posed by next generation PACS. This special report will look at the issues.

October: Voice Recognition:

Voice recognition is traditionally associated with digital dictation systems. But there is more to it than that. Voice recognition can be used to support many other document and information production processes, to transform staff communications, and even to help them find equipment and other assets. This special report will look at what's happening and how trusts are using these technologies now.

November: Systems integration:

This edition of our regular special report on systems integration will look at the new demands that the Liberating the NHS white paper makes on sharing between NHS organisations, between NHS organisations and other providers, and between NHS organisations and patients. What are the new standards and technical challenges that this poses? And what solutions are healthcare economies starting to find?

December: Mobile on the wards:

An increasing number of NHS trusts have good, wireless infrastructures. These should allow staff to work more productively and to improve patient safety. However, finding the right devices and the right software to let them access records at the bedside, receive alerts during treatment, or update systems in real time has not always been easy. The popularity of consumer devices with medical staff may be changing things. This special report will look at the state of play.