Nurses need to embrace new technology to meet future demands on healthcare. A programme is helping senior nurses to develop leadership skills.

Strategic leadership skills for nursing informatics

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Abstract

Nursing informatics involves using information and technology to support practice, education and research. In the UK, it has often been seen as the province of specialists. Although the Royal College of Nursing has run a group called the “information in nursing forum” for some years, informatics still seems to be missing from mainstream practice and education.

In other countries, nursing informatics is thriving. The Canadian Nursing Informatics Association promotes it across the workforce, while in the US the Technology Informatics Guiding Educational Reform (TIGER) initiative is in its third phase.

Nursing informatics seems to have become the province of so-called “nurse geeks”, with a focus on more technical aspects such as classification systems and informatics standards. Today, information and information technology are routinely used in all areas of life, so nurses need to understand and integrate them into routine practice to improve and manage care in new ways.

Patients’ expectations are changing, so we need to share information to help them understand the guidance, often called “information governance”, that ensures we practise using information in safe and secure ways (National Information Governance Board for Health and Social Care, 2011).

Consumer health informatics is about how we can bridge the gap between patients and health-information resources, for example giving them access to health records and information that enables them to take more responsibility for managing their own needs. Although this should be part of routine nursing practice, we do not seem to be embracing this area as extensively as will be required in the near future.

Why is informatics a leadership challenge?
Demographic changes in the nursing and midwifery workforce mean we are likely to lose experienced nurses in the coming years (Huston, 2008). However, technology can help to ameliorate this loss by providing high-quality clinical content in systems and aids; these include decision support systems that guide staff through evidence-based care pathway with individual patients.

There will need to be many changes in how we use information; support patients and carers to use information; and develop information systems to support clinical decision-making (Deloitte, 2009). While none of this is new, some of the skills and vision that need to be embedded in systems now require our leaders to take a more active approach to making it happen.

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Leadership for informed practice
The Leadership for Informed Practice (LIP) development programme is designed to link leadership to informatics in nursing and midwifery, and to give participants time to develop new strategic leadership behaviours and apply these to informatics. It is aimed at senior nurses, including those in the independent sector, from a wide range of specialties including mental health, acute care, community services, NHS Direct and commissioning. Its content is designed to address key areas for practice and policy development.

Content management and data quality
The clinical content in nursing records influences care processes and provides information at the point of care, which in turn supports clinical decision-making. (Deloitte, 2009). Examples include:
- Templates (for data collection, supporting assessment);
- Risk-assessment frameworks (to bring evidence to care processes);
- Care pathways to support clinicians in making optimal decisions about care plans with patients.

These help nurses to provide expert, measurable care. Without good-quality content, variation cannot be assessed or evidence of expert decision-making and care provision demonstrated (Liang, 2010).

The programme highlights this area and explores the governance of clinical content, whether in paper or electronic records.

Information sharing and governance
Although there is guidance on record-keeping and sharing (Nursing and Midwifery Council, 2009), the increasing use of electronic patient records makes it more important than ever that they are accurate, as electronic systems make poor data quality more visible and attributable to individual staff. In addition, practitioners and patients have raised concerns about information-sharing, particularly across organisational boundaries (RCN, 2010).

As more patients access their records and use different communication channels to share these, decision-making could become more complex. Good local and national guidance will be needed on information governance.

Although information governance is built into the LIP curriculum and modules are available to NHS staff, they are often not presented in a way that addresses practice realities, such as the needs of children. Most training is based on system transactions such as high-security passwords, and does not address complex decisions about individual patients’ care.

These developments may mean existing professional governance processes must be used in different ways and advice must be interpreted differently. The NMC is reviewing its record-keeping guidance (NMC, 2009).

Supporting patients
Ensuring that the public receive the information they need and are informed about what they should expect requires different ways of thinking. It is important to consider the role of patient reported outcome measures (PROMs) and feedback.

Responses to the Information Revolution consultation repeatedly suggested the need for credible “navigators” and “navigation skills” (DH, 2011). The potential is huge but this is a new aspect of practice and many nurses will need support in this.

Social media have great potential to help patients self-care yet there is little evidence of nurses and midwives using them with this in mind. The LIP programme highlights this possibility and encourages participants to have greater confidence in social media.

Feedback on the programme
The LIP programme has been enthusiastically received by more than 250 senior nurse participants. With time to review the impact of information and technology on practice, they leave with a sense of empowerment and ownership of informatics. Most see nursing informatics as part of all nurses’ and midwives’ daily work (Box 1).

The future
A better understanding of information and its vital part in nursing practice is an exciting challenge. All nurses need to keep up to speed as opportunities and developments emerge, embracing these and looking for new ways to deliver care.

Supporting new leaders will not be enough. They need a framework in which to operate and those who may be interested in taking a bigger role in informatics need to be able to see a career path.

With time to develop new strategic leadership and many nurses will need support in this. It is aimed at senior nurses, including those in the independent sector, from a wide range of specialties including mental health, acute care, community services, NHS Direct and commissioning. Its content is designed to address key areas for practice and policy development.

References
National Information Governance Board for Health and Social Care (2011) NHS Care Record Guarantee. tinyurl.com/NIGB-care-record

Box 1: Feedback from Senior Nurses
- “Technology is not all about geeks and it can be used to influence change”
- “Made me question how things are done and how we can utilise our younger workforce for growth”
- The programme “benefits you by looking at leadership in terms of technology and how it can aid increasing nursing time to care”
- “Realising that IT can change nursing and that nursing can change IT!”

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