

Notes from DHACA Presentation-Digital Content Prescribing

Academic Health Science Networks

Each of the 15 [Academic Health Science Networks](#) (AHSNs) in England focus on working in genuine partnership with local people and organisations to improve the health of the local community and contribute to building a thriving local economy. Collectively, as a national network, AHSNs support improvements around common themes such as improving patient safety.

Health Innovation network

The [Health Innovation Network](#) is the AHSN for South London. We connect academics, NHS commissioners and providers, local authorities, patients and patient groups, and industry in order to accelerate the spread and adoption of innovations and best practice, using evidence-based research across large populations.

Working as catalysts of change across health and social care economies, we enable health improvements and economic growth.

Digital content prescribing

The Health Innovation Network are working with IMS Health to explore digital content prescribing in a variety of health care settings, with the aim of developing working practices for clinicians in South London, as well as being a forerunner in the national discussion. This work reflects the changing nature of the patient and clinician relationship, with patients increasingly involved and engaged in their care.

As part of this project we have introduced AppScript into several pilot sites in different care settings. AppScript is a mobile health tool that allows clinicians to recommend health apps and content to improve patient engagement, satisfaction and outcomes. This pilot has provided an opportunity to learn about how apps and other digital content can be recommended to patients in different clinical settings

See our animation to understand how digital content prescribing could look in the future: <https://vimeo.com/163237799/474b4c1ff5>

Context:

- Technology increasingly permeates many aspects of everyday life
- Despite this, only 2% of transactions with the NHS are digitally enabled
- interest has been growing in the potential for mobile digital health apps to play a role in condition management and health and wellbeing improvement
- Market of health apps shows demand is there
- The public are already using these and are increasingly asking their clinicians for support and recommendations.
- The huge number of apps available makes it difficult for clinicians to identify quality in a timely fashion.

NIB 1.2 work stream reflects this need for some form of accreditation process and our work is complimentary to this.

The Health Innovation Network recognises the potential for the spread and adoption of digital content prescribing in benefiting both patients and clinicians in South London and beyond.

- Digital content prescribing provides an additional offer for patients in a range of interventions
- Providing on going information and support, after the patient has left the consultation room.
- Benefits range from supporting behaviour change through management of long term conditions.
- Empowering patient to take ownership of their care.
- Apps recommended by a doctor are more likely to be taken up and used for longer

Opportunity:

- Opportunity to compliment the NIB 1.2 work stream- contributing to agenda and start some practical work to recognise real world implementation.
- Wanted to answer -How can this concept help the system and if it can then how can it actually be adopted by the system.
- Want to help clinicians be a part of the solution, learning together how to implement in practice

OUR aim is to spread and adopt and we identified our industry partner to work with to understand some of the issues

IMS Health Partnership and product

The Health Innovation Network partnered with IMS Health to trial their Appscript tool.

2 parts to AppScript tool:

- a) it's a portal from which clinicians can prescribe apps and other digital content and then records prescriptions/ can see feedback-mechanism for clinicians to prescribe from a list-send straight via email/phone number
- b) Apps are 'rated' through the AppScript scoring system-made up of six parts: Professional, patient, functional, clinicians, endorsement, developer and clinical.

Lessons from Phase 1 pilot

- Cannot underestimate the importance of training
- Community pharmacy quite successful at digital content prescribing, they have the behaviour change related discussion regularly
- Importance of this concept being implemented as a part of the existing consultation discussion. It cannot be a tag on at the end. This became apparent in the role play discussion
- Learning opportunities identified for phase 2.

For any more information please contact: alice.morrissey@nhs.net