

Assessment 2: Research skills for healthcare (report writing 2000 words)

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CerTHE (Certificate of Higher Education in Health and Social Care)

Module: Digital Skills and Research Methods

Module code: LCHS4002

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Use of technology in the modern healthcare workplace (GP surgery)

Nowadays the technology had a big impact, and it is developing day by day, and the benefits of digital communication in health care are too much. Technology it became a main part of health care sector regarding the E- health. The E-health is the use of ICT in healthcare sector and with e-health, the patient information is stored in one place, while healthcare staff can log in and view at any time and everywhere and they can modify health information or write about patient's health. It's important to know, how the technology is used in every different sector in healthcare, regarding how patient details are stored, how important is the security of personal data and all laws that applies concerning the privacy and protection of patient confidentiality information.

Why I chose to discuss about the GP surgery sector in the UK. (How the system is organized and how the technology works at the GP surgery).

I want to discuss in particular about the sector of the GP surgery, because I'm working in a pharmacy and I find really interesting how the pharmacists work as a path of the prevalent practice of health staff, to upgrade value and outcomes from drugs: consulting, advising and treating the patients, talking directly. In this way the patients are advised firstly from the GP and also from a pharmacist, about their medications and other issues, in such a way they get also greater access to health records.

About the GP: the main roles and responsibility of a GP

The GP surgery is the medical centre where a patient can meet the GP (general practitioner) and get treatment, advice and being provided with preventive care. The GP take all notes of the patient's health information such as physical, emotional and all health factors, diagnosing illness, disease and recommending necessary treatments. The GP is a family doctor and it's a principal part of contact for general healthcare for NHS patients. All residents of the UK are allowed to the service of the NHS GP. The general practitioner has knowledge about all type of illness, disease and sickness. He/she treats the patients of all ages (the babies and children are treated and diagnosed from the paediatrician). GPs are doctors that support patients around their lives. They help patient to manage their health and prevent illness, they are trained in every aspect of the general medicine. These includes all diagnosis, management of every medical issue, surgical problems and about the management of long term or permanents health conditions like diabetes, asthma, problems of ear, nose, throat, dermatological and ophthalmology/optometry. Some GPs also do and provide for practical strategy like minor surgery. GPs assess, diagnose, treat and manage all type of illness and they provide special appointment in different sector of NHS, if is needed, such as physiotherapy appointments or gynaecology appointments. So, they also provide the connection to additionally health services and they collaborate closely with other health care professionals, helping to develop the services. They perform and effectuate screening for some type of cancers, and they upgrade general health and patient wellbeing. GPs do their best, supporting, the patient's best interests, being sure that they receive the greatest and apposite health treatment. They can also arrange hospital admission or appointment to specialists, and they connect with secondary health care professional services, taking, giving and sharing information's if is needed. They collect, share and send important record of patient to other health care professionals, for improve the treatment of the patient and make the best for prevent their illness and issues. GPs are trained and have the knowledge/education and the skills of doctors, and also of some other health care professional. Some GPs, work every day or every week in different place, so they to their job as a locum GP, giving their time to different surgery, instead many other, do their job also directly for the NHS, or for private health care sectors.

Regarding the main responsibilities of a GP: is to monitor the health condition of the patients and their wellbeing, then diagnosing and do clinical examinations, carrying out test to diagnose and check (an example urine test or blood test), practice management and administration and collaboration with other health care professional (like pharmacist, physiatrists and midwives).

How is organized the GP surgery?

A GP works and collaborate with a big team of health care practitioner and other staff in a GP practice/surgery. This mean that a GP can collaborate with a nurse, nurses' practitioner, practice managers, physician assistant and receptionist. Other health care professionals like pharmacist, occupational therapist, midwives, physiotherapist and many other professionals they can be in a same building as the GP surgery.

I'm going to explain in general how the GP surgery system is organised.

The general service offered by GPs are defined under a contract that is called the General Medical Services Contract. These services are divided into three groups: **essential services**, **additional services**, **enhanced services** and **other services**.

The **essential services** must give service for patients that have health conditions from which they need to get better treatment, chronic disease management and also general management if is needed. The services include:

- ✚ GP consultations
- ✚ Asthma clinics
- ✚ Diabetes clinics
- ✚ Coronary heart disease clinics.

The **additional services** give an extra help to the patients, if is needed, and they include:

- ✚ Child health surveillance
- ✚ Maternity services
- ✚ Certain minor surgery procedures
- ✚ Vaccinations and immunisations
- ✚ Contraceptive services
- ✚ Cervical screening.

The **enhanced services** are a combination of essential and additional services, and they are sended to a higher quality of services or more specialised. Specialised services can provide for health issues like depression, sclerosis or some group of patients like homeless people, immigrants, violent patients and patients that have learning disabilities. So, enhanced services usually include:

- ✚ Anticoagulant monitoring (medication that help with blood clotting)
- ✚ Childhood vaccination and immunisations
- ✚ Contraceptive coil fitting (IUD)
- ✚ Extended minor surgery
- ✚ Sexual health
- ✚ Minor injury service
- ✚ Flu immunisation
- ✚ Immediate care/first response care
- ✚ Care to women in labour (extra care during pregnancy)

Then there are some services that offer **other needs**, and they include:

- ✚ Child health and development
- ✚ Counselling
- ✚ Dermatology
- ✚ Dietician support
- ✚ Dressing clinics
- ✚ Monitoring disease-modifying anti-rheumatic drugs
- ✚ Ear wax and syringing
- ✚ Epilepsy
- ✚ Lung testing
- ✚ Medication review clinics
- ✚ Men's health
- ✚ Mental health
- ✚ Pregnancy testing and contraceptive advice
- ✚ Ring pessary replacement
- ✚ Stop smoking support
- ✚ Women's health

At the GP surgery there is an extra path of service, but they aren't NHS professionals, they give advice, or they give other services and they are paid from their company or also they can be paid from the patient, and they include:

- ✚ Insurance claims forms
- ✚ Passport signing
- ✚ Prescription for taking medication abroad
- ✚ Private sick notes
- ✚ Vaccination certificates.

The service and the staff in a GP surgery varies between practices and some roles, that I'm going to explain now:

Practice managers: the responsibilities of a practice manager are different, depend on the practice and the activity. Usually, practice manager provides to the patient high standards of patient care, human resources, finance, patient safety, so they make sure that patients are safe and that patients can have the best services.

Practice nurse: Practice nurses have the qualification of nurses, and they are also registered on the NHS as nurses. They assist with health issues like healthy living advice, blood pressure check and dressings. They usually go on clinics for long-term health conditions like asthma and diabetes. Nurse may have extra skills and they can train as nurse practitioners. Some nurse can prescribe drugs and they are called supplementary practitioner.

Receptionist and administrative staff: they provide an important connection for patients, an example they give basic information on services and results, and they send the patients from their GP or from the person that the patient needs, regarding their health issue. The reception staff is the main that is occupied to make appointments with the GPs and nurses. They also provide for other important duties, an example deal repeat prescription issues, or problems with patient medical records.

Locum or sessional doctors: a locum or sessional doctor have a full qualification of GP studies and works at the surgery on temporary period, covering the regular doctors when they are not in the surgery, an example if they are in holiday.

GP registrars: A GP registrar or GP trainee is a practitioner that have the qualification of a doctor, who is training to become a GP between the period of working and training period.

What is a health record?

All notes of health issues, that is took from the GP they are stored in each patient medical record and every health care practitioner can log in with telemedicine tools device (an example the PC).

A health record is made and held by a health professional, normally the GP, have in possess information about physical and mental welfare of a patient. Under the Data Protection Act 1998 and The Human Rights Act 1998, all information received about a patient is carried in full confidence, including after the death. So, every information collected in patient medical records, also if is online or if is in normal notes must be private and confidential.

Health record, which are carried on computer, they include information like:

- Notes made during consultation.
- Prescribed drugs and treatment.
- Test result.
- Correspondence between health professionals such as referral letters.
- Medical data such as X-ray films, photographs, video and audiotapes.
- Hospital admission and discharge information.
- Patient's views about disclosure of their record or other people.
- Reports written for third party companies, for example insurance companies.
- Third party information, an example when someone is worried about the patient, and he/she contact the GP.

Digital health services: electronic medical records system

The GP take patient consultation online or in the surgery; patients who needs daily visits or they need to stay at home for their particular health issues, they can take online consultation with the GP via online app or in a website, with telemedicine tools like smartphones or computer and they can get assessed and talk about their problems easily. In health care sector, in particular at the GP surgery the use of internet, email and telemedicine permit the patients to access to their medical records, to programme appointment with the General Practitioner, log on to see test result, to send text messages or email to the GP surgery or to the GP directly and research health care possibilities.

The digital health service like the artificial intelligence of things (AIoT) is the coordination of artificial intelligence (AI) they are used for analysing in a best way, learn and make choice without the necessity of a human. These two helps clinical decision-making and use of best practices. Technology is becoming more advanced and sophisticated at doing what humans do, but more efficiently, more quickly and at lower cost.

At the GP surgery they have the GP surgery apps or websites, for the patients. They can check usually their tests results and they can take appointment via website. Every GP surgery have their own apps and the websites are related with NHS service.

Accessing to patient health records/ Data protection of patient's information's

Under the Data Protection Act 1998 the patient has the rights to ask for access to the patient medical records.

Children and young people can request access to their medical records, as the parents can. The access to medical health records can be given or nominated by the patient. Usually, in

most of the situation, third parties like the police, insurance companies or solicitors they can't have access to their medical health unless the patient give written consent. The Medical Reports Act 1988 provide the patient right to see any medical reports written about the patient for employment and insurance purpose.

1. Data protection of patient's information

Personal data is a patient information that is sensitive and confidential, according to law, data, is every information of a patient that is identifiable. Data can be divided in primary sources and secondary sources.

- Primary sources: a primary data source is an original data; they are collected by the researcher for particular research.
- Secondary sources: it's a use of data that is already collected by somebody else for another purpose.

If a patient doesn't want that the confidential information will held on the GP surgery, in the medical record sector, the patient can ask if the information it can be use for other reasons other than the individual care. This request is called 1 type opt-out and can be recorded by the GP surgery.

In another case if the patient doesn't want to share confidential patient information, he can say to the surgery, in this way the service of NHS digital will collect the information across the health and care services but for reasons other than the individual care. This request instead is called type 2opt/out.

There should be a consent as a lawful part to processing data of patient and the consent must be:

- ✚ Given without any unjust pressure.
- ✚ For a limited and clearly defined reason.
- ✚ The patient needs to be informed.
- ✚ The consent should be easy to withdraw if the patient requests.

The consent is a lawful basis, so the individual must give the rights and the full consent.

2. Common Law Duty of Confidentiality

To respect the requirements of the CLDC there's needed to must follow one condition such as:

- Explicit or implied consent.
- Legal support for the use of confidential patient information without agreement under the Health Services (CONTROL OF PATIENT INFORMATION) Regulations 2002, under section 251 of the NHS Act 2006.
- A court order, where a judge has testimonials about relevant and particular information and that they must be given.

3. What patients need to know about their data and sensitive information

As well there's a must to be fair and lawful, all organisation oh health care sector must be transparent. Transparency is the main component of data protection. The health care practitioner must make sure if patients know how their information's and data are used and for which purposes, they are shared.

Also, the transparency has some lawful requirements such as:

- Who is the authority of the data security and how to contact them if is needed.

- Reason of the processing of data.
- The lawful basis for data processing.
- Any third parties with whom the data is shared.

4. Data sharing agreements

Personal data are given from institution to institutions for reasons, and an **individual care data sharing agreement** should be set with terms and conditions, such as:

- ✚ The retention period for the data.
- ✚ The security requirements for the organisation receiving the data.

5. Organisational and professional standards and guidelines

All institution terms and conditions of employment involve strict guidelines on how health care staff should handle and protect patients' information, with rights procedures and laws including dismissal, for any member or practitioner that doesn't respect those guidelines. The staff is also be trained in information governance responsibility.

After this Research about this topic, I choose between this topic, something that I find interesting, and I did a little research.

I came from another country where's every patient has one GP that remain the same as long the GP works with the contract, and I came in UK and I knew that here for each patient the GP changes every time, so there's a different GP in every appointment or in every phone consultation. So, I want to do research about this and discuss it briefly.

Why am I seeing someone who is not my GP?

Many GP works away and everyday for different patient, and for the covid, GP surgeries are open, but they are working differently for protect patients and staff. For the protection of the patients, the most clinically vulnerable people who are in contact with patient health services, some physical distancing requirements remain at the place. Most practices are using the telephone as first service now, in such a way that helps to ensure that everyone get appointment that they need and, in the time, as they need. In such a way that patient can remain safe from house and get assessed with their needs. (GP staffs try to do the possible for emergency case appointments).

For my chosen research I considered the qualitative research while doing, because I wanted firstly to know the opinion, perception and analysis about this topic.



QUALITATIVE RESEARCH = want to describe and talk about the topic and want to show the people perception, their attitudes and analysis.

When you write a report, start to write your consideration, your opinion and you should write something that is a credible source that you know already and you know that is real, search information on websites like google scholar, where you are sure that those information's come from books. Take information from books in this way you are sure that you are writing credible sources. This was my report about the use of technology at the GP surgery, who is the GP, what is the GP surgery and how is organized, what are online health medical records and handling patient sensitive

data in GP surgery. At least I did research about the different GP that you can meet while an online consultation or when you meet your GP. The last page was about sources that I used for my report. I hope that this report will be also a remind for you, that you are reading, about the technology in the GP surgery.

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- Royal college of General Practitioners, July 2011. Some information that I took from this booklet has been sources from the following organisations:
BBC health, British Medical Association, Department of health, General Medical Council, National Association for Patient participation, NHS Choices, NHS Northern Ireland, NHS Scotland and NHS Wales.

Contents for each page

Page 2 of 8:

- ***Use of technology in the modern healthcare workplace (GP surgery) (introduction)***
- **Why I chose to discuss about the GP surgery sector in the UK. (How the system is organized and how the technology works in the GP surgery).**
- **About the GP, the main roles and responsibility of a GP:**

Page 3 of 8:

- **How is organized the GP surgery?**

Page 5 of 8:

- **What is a health record?**

- **Digital health services: electronic medical records system**
- **Accessing to patient health records/ Data protection of patient's information's**

Page 6 of 8:

- **Data protection of patient's information**
- **Common Law Duty of Confidentiality**
- **What patients need to know about their data and sensitive information**

Page 7 of 8:

- **Data sharing agreements**
- **Organisational and professional standards and guidelines**
- **Research topic of my choice about this topic that I think there's need to do research**