

digitalhealth

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UNIVERSITY HOSPITALS OF LEICESTER NHS
TRUST



**BEST PRACTICE
SHOWCASE
STAGE**

Poor communication is a public health issue. Can technology help?

The global challenge

- Up to **88% of the population** does not have sufficient health literacy
- **20% of hospital readmission** is due to a communication barriers
- They also contribute to **delays** in care, **increased** levels of anxiety, and **accessibility issues**.

The UHL challenge

- University Hospitals of Leicester NHS Foundation Trust (UHL) serves a high proportion of ethnic minority patients, with **59.7% of babies being born to non-UK parents**. As a result, there is a large proportion of the population at risk of experiencing a communication barrier, such as limited English proficiency.
- **Communication barriers contribute to poorer health outcomes** for maternity service users, and some service users **do not know how to access maternity care**.

One team shared values



Poor communication is a public health issue. Can technology help?

- At UHL, we understood that gaps in communication were having a **negative impact on maternity care**. These barriers were affecting women and pregnant people, their families and staff.
- One of the big issues is having quick conversations with non-English speaking patients – e.g. ‘can I take a urine sample?’ or ‘can I listen in to your baby’s heart rate?’. Namely, short conversations you **probably wouldn’t call an interpreter** for but are **important conversations** to have to help **promote good care experiences and understanding**.
- We wanted to investigate how the Trust could **use digital tools to overcome** these communication barriers, starting in the maternity department. Our focus was on MAU and Delivery areas.
- The Trust chose to deploy **CardMedic**, a digital health app that enables healthcare staff to communicate safely and effectively with service users, whatever barrier may exist.

One team shared values



Poor communication is a public health issue. Can technology help?



The solution: the CardMedic app

- Available on mobile/tablet/desktop in over 45 languages. It has a chat function and 1000s of pre-prepared, clinically reviewed scripts.

The test: a short term evaluation study

We conducted an evaluation of the App – staff members who had access to phones and tablets used the App in various maternity settings, to have simple conversations.

It was important to **gain staff engagement** and we nominated **user champions** to encourage its use.

The outcome; bridging a gap

47% of staff found CardMedic useful to relay short and simple instructions e.g., “can I check your blood pressure?”. Some midwives used it to help with baby examinations (NIPE checks)

One team shared values



The big question: does using digital tools help improve communication?

From our evaluation, **CardMedic is an important piece of the puzzle**. It is a tool that's always with you when you need it, especially in acute settings like labour suite, **there is not always time to wait** for interpreters.

With existing translation services in our Trust, staff and patients can find the processes **slow and frustrating**. This can lead to poor experience, **increase in complaints and poor outcomes** for the women, pregnant people and their families.

It is also important to **consider the needs of service users with visual and cognitive impairments** or literacy issues, all of which CardMedic can support with.

Ultimately, **embracing digital tools will improve patient communication and reduce health inequalities**, which will relieve pressure on the system as a whole.

We know that using digital technology such as Cardmedic, **we can bridge the gap**, support staff to provide the best care and improve experiences and health literacy.

One team shared values



Scan to view our case study about the evaluation



One team shared values

