"Digitising is C-Suite Concern": NHS Digital Chief

Uncertainty is hanging in the air over what Brexit, the British departure from the European Union (EU), will bring to the UK economy but Beverly Bryant, Director of Digital Transformation, NHS Digital is optimistic about what the country has to offer in globally healthcare.

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"There is a huge demand with what the NHS is doing in digital healthcare in Canada and Australia," Bryant told an audience of delegates at FT Live in London. Post-Brexit Britain will have digital healthcare models that can be exported around the globe, Bryant said citing an example of a recent healthcare trade visit to Brazil.

The FT Digital Health Summit took place in London on Tuesday. It was attended by about 200 HIT delegates with themes such as patient and clinician engagement with HIT, health tech investment and the need for CIO and CCIO upscaling in healthcare boards on the agenda.

But Bryant was realistic about the state of the healthcare C-Suite in the NHS. "We may be world leading in our digital models but in requisite skills we are lagging," she said.

Referring to the 2016 Wachter Review, led by hospitalist Prof. Robert Wachter, Bryant said that the healthcare board level needed a major injection of HIT professionals.

One of ten Wachter Review recommendations was to strengthen and grow the Chief Clinical Information Officer field and increase the general presence of personnel trained in both clinical care and informatics and health IT.

"Digital transformation is a board level matter," Bryant said. "The NHS response to recent terror atrocities and emergency scenarios in the UK has been outstanding but can we say the same about the response to Wannacry?"

The May cyber attack affected 300, 000 organisations worldwide including 60 NHS Trusts.

"It showed a weakness with people at board level scrambling and wondering what to do," said Bryant.

Bryant said that the collaboration between healthcare and industry mitigated the impact of Wannacry.

"The reason it didn't do more damage was the collaboration between local organisations and suppliers," she said.

Bryant also spoke of the need to make HIT indispensable.

"Tech is useful and usable," she said. " We need for clinicians to say they cannot do their job without it."

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