

TIMES HEALTH COMMISSION

# Inaccurate NHS digital data 'is putting patients at risk'





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Georgia Lambert Monday May 01 2023, 12.00pm, The Times

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**B**etter digital records could avoid mistakes in the NHS, the Times Health Commission's Patient Panel has been told.

Scrapping junk food ads and taking politics out of health and social care were also among topics mentioned by the 11 patients and service users.

Care centred on the patient has long been a goal for [the NHS](#) but failure to diagnose and treat the “whole person” and dealing with inaccurate data has left patients such as Vipani Maini in danger.

Maini, 57, a career coach, has suffered three heart attacks over the past decade. During his third admission to hospital 18 months ago, an error in his notes left clinicians thinking he had undergone a quadruple heart bypass.

“Luckily I was still conscious,” Maini said. “I didn’t have a quadruple bypass. I had nine stents through the various heart attacks that I have had.”

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“The dangers of what could have happened due to the inaccuracy of data became clear to me on that occasion.”

Before being diagnosed, Maini was told by his GP that his symptoms probably had a psychological cause and suggested he and his wife needed marital counselling.



Some of the members of the Times patient panel, from top left: Donna Cook, Vipani Maini, Nick Richardson, Nick Hartshorne-Evans, bottom, Gloria Nelson, Elvira Wynn, Ismail Kaji and Martin Emmerson

Maini also spoke of the racial bias attached to clinical trials and said medication was often tested only on white people. “If you don’t fit the mould, it causes chaos within

the system,” he said.

Maini is not alone. Gloria Nelson, 58, had to wait three years for her breast cancer to be diagnosed because her symptoms were similar to those of menopause.

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And Elvira Wynn, 63, a former nurse who has chronic migraines, suggested that patients should be given the “right consultant, first time”, to avoid delayed care or misdiagnosis.

Nick Richardson, who suffers from degenerative arthritis, said this problematic one-size-fits-all approach extended to pain-management services, hindering collaboration between departments.

He was medically retired from the Royal Navy in 2012 and enrolled on a specialist pain-management course at the Stanford Hall Military Rehabilitation Estate in Loughborough, Leicestershire.

“I received state-of-the-art care where I could see a physiotherapist, a consultant, a sports rehab, an occupational therapist and a social worker,” he said. “They treated me in a holistically-rounded way but that is not the case with the NHS – they are very siloed.”

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Tim Atkinson, 57, an author from Lincolnshire, said nuance was important when treating persistent pain. He said that giving patients the tools to manage their own condition improved the lives of people with persistent pain “immeasurably”. He added, however, that doctors should think twice before prescribing treatments such as gardening or music lessons instead of painkillers.

“Ten years ago, I was routinely prescribed strong opioids and the dose escalated without any hesitation,” he said. “Then the brakes took hold and I found myself unable to get them at all.”

Donna Cook, 35, from Lanarkshire, was diagnosed with heart failure when she was 26. She praised the My Diabetes My Way app that she was using to monitor her kidney function and view test results.

While digital patient records were welcomed by the panel, Ismail Kaji, 45, hopes their design would be accessible to those with learning disabilities. Kaji, the parliamentary affairs officer at Mencap, the charity that works with people with learning disabilities, said the NHS and the Department of Work and Pensions needed to send easy-read documents.

Norman Phillips, 71, who supports a Hospital at Home team to care for his wife who has dementia, said the government was hesitant to tackle the flow between emergency and social care because it wasn't "sexy".

He added: "Older people in hospitals are a problem and we need to get them out of acute care . . . it's the worst place for them because they get no stimulation. That's the problem with my wife, if you don't keep talking to her she goes downhill very quickly. You pride yourself that you've done 20,000 operations but what happens if 5,000 of those need never have been done because the person was looked after at home?"

"We've still got this war between social care and hospital care . . . let them throw more money at the NHS but that's not understanding the system. We're losing care workers because they are not being paid enough. We've got away from what it was intended to be and we've settled for an ever-growing National Sick Service."

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*The Times investigates the crisis facing the health and social care system in England.  
Find out more about [The Times Health Commission](#).*

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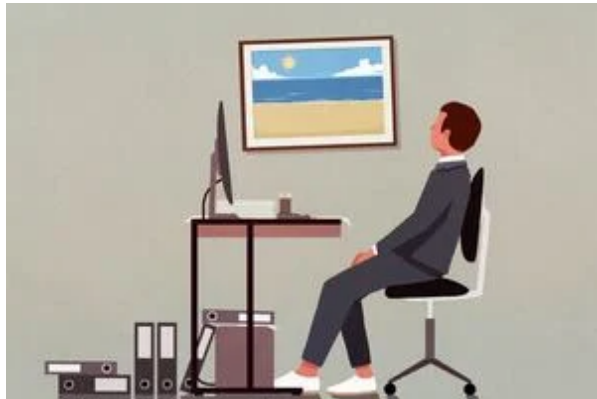
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**Timothy Swietochowski**



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**W Brown**

1 DAY AGO

Patients are at risk just now because the unions and some people employed by the NHS hate the government more than they care about patients.

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**Richard Carlson**

22 HOURS AGO

Wake up, the NHS does not, and will not work no matter how much cash is thrown at it or pay rises are given..

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**Rob Parkes**

23 HOURS AGO

They have been at progressively increasing risk day in day out for over three decades because the politicians on behalf of the public refuse to provide the funding, staff and facilities required. The strike effects are in number are so small as to be irrelevant.

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**A**

**Alan Hope**

1 DAY AGO

...

Maini complains that "medicines are only tested on white people". Can you imagine the outrage from black communities if they were only tested on black people?

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**K**

**Keith Sutton**

1 DAY AGO

...

Clinical trials are often very specific and considerations may be age, sex, sexual preferences, and yes race. People are excluded from the cohort for very good scientific reasons, none of which have to do with prejudices.

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**S**

**S White**

1 DAY AGO

...

But he doesn't complain that they're only tested on men.

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**S**

**S White**

1 DAY AGO

...

And people being allowed to misstate their sex on their records is an outrage.

**D** **Deborah Steed** ...  
1 DAY AGO

There are so many issues with the NHS it's difficult to know where to start . It needs more than money .

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**K** **kenneth molloy** ...  
23 HOURS AGO

Changing the culture so that staff could speak openly about ways to improve the system and admit where mistakes were/are being made would be a great start. Too much of the current culture is far too defensive and protective which prevents healthy change.

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**A** **Alan Hope** ...  
22 HOURS AGO

Above all it needs clinical staff.

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**J** **jc wood** ...  
1 DAY AGO

Strong opioids stopped being routinely prescribed because of the OxyContin and Fentanyl addiction scandal in the US, not because of NHS problems.

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**C**

**C Hutchby**

20 HOURS AGO

Fentanyl is still used in hospital settings. It is a very good painkiller but has to be carefully monitored/prescribed.

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**R**

**Richard Carlson**

22 HOURS AGO

When will the British people get their heads out of their rumps and understand the NHS does not work and is unrepairable. It is just a pit to pour money down. But then again how do you expect the Whitehall and #10 incompetents to do anything but raise taxes, poke their fingers in the air over the wi...

**See more**

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**S**

**S Hill**

19 HOURS AGO

The British people have been aware of this for many years, believe me. Regardless of which party was in power. It's the 'Our NHS' doctrine which keeps it going. Total waste of money and dangerous inefficiency

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**A**

**Alex Gasson**

20 HOURS AGO

It's a lot cheaper than private to the end user. Look at dentists.

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**F**

**Fiona McAnena**

19 HOURS AGO

The NHS England central directive on data recording now says patients' self-declared "gender", not their actual sex if that is different. What a nonsense. Energy is being poured into not offending people who think they've changed sex, potentially creating obstacles to the right healthcare for them....

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**P**

**Peter Knox**

1 DAY AGO

Due to a one off illness I had in 2012 the NHS seems to have decided I am permanently immunocompromised and is forever offering me extra covid vaccinations. They must be just scanning health records and assuming conditions are permanent.

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**M**

**Mhairi Brown**

21 HOURS AGO

I have the opposite issue. Due to no record of my immunocompromise (and someone elses illnesses on my records, I was not contacted at sll during covid.

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**D**

**D Blackwell**

11 HOURS AGO

Yes, similar situation with my mother, who was previously immunocompromised because of medications, but she is no longer on those meds, and hasn't been for years!

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**J**

**J Yates**

1 DAY AGO

I would advise anyone who can, to install the NHS app on their phone, tablet etc. It is a useful way of checking your health record and correcting any mistakes that may arise.

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**J**

**J Allwood**

1 DAY AGO

This only works if your health records are on the app. Our GP surgery seems to have a minimalist approach to it, with only prescription and vaccination information available, whereas my sister who lives elsewhere in the same county can access test results, etc...

Mrs A.

*(Edited)*

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**A**

**Alan Hope**

22 HOURS AGO

Although the website is on "nhs.uk" the App only works in England. As usual, we in Scotland get none of this. Useless Humza and cronies.

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C

**C D Caplan**

23 HOURS AGO

...

In a letter from from a consultant It said that he noted a previous occasion part of me had been confirmed cancer free I corrected him but the same misinformation cropped up at a later date.

In 2012 I was told my mammogram was clear only to be told seven years later that as there were previous micro...

**See more**

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D

**Dilys Nottingham**

17 HOURS AGO

...

My sister in law was admitted as an acute emergency about 6 weeks ago. The consultant told her she probably needed a gall bladder removal. The notes were in front of him which CLEARLY stated that the operation had been done 18 years ago!!

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