

Media pack

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provides insight into
the wider picture.”

“Digital Health
is my ONLY
source of
information.”

NHS IT spend projected at £3.7 billion for 2019-2020.

Digital Health provides the best opportunities for your business to promote and engage with NHS IT Leadership, with our market leading 50,000+ unique monthly users and 3,300+ members of our CIO/CCIO and CNIO Leadership Networks.



Why work with us?

Digital Health is the leading online publication for the healthcare IT sector in the UK, serving 50,000+ unique monthly users. As the information hub for all things Health IT, our daily updated news, features and debates attract the largest senior audience of NHS IT leaders in the UK.

Our dynamic and targeted range of sponsorship, content and advertising options put your company's brand, solutions and differentiators in front of the UK's largest clinical IT and NHS IT leadership community.

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leadership
campaigns

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per month

Over
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impressions per
month



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Whether your business is looking to generate leads, promote brand awareness, build a thought leadership position, or target audience for a specific event or product launch, we have the solution for you.

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- Branding and messaging in our Special Reports, to align your solutions to key market drivers
- Dedicated and targeted mailshots sent to specified segments of our registered reader base
- Case studies and white papers to promote your solutions and attract new customers
- Position your company as a leader in the space by participating in our NHS Advisories.

Digital Health content is fully accessible across multiple platforms. Whether using their laptop, tablet or smart phone, our readers get the very best insight into IT and technology within the NHS updated as the news happens.

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"We will definitely be using this service again in the future."

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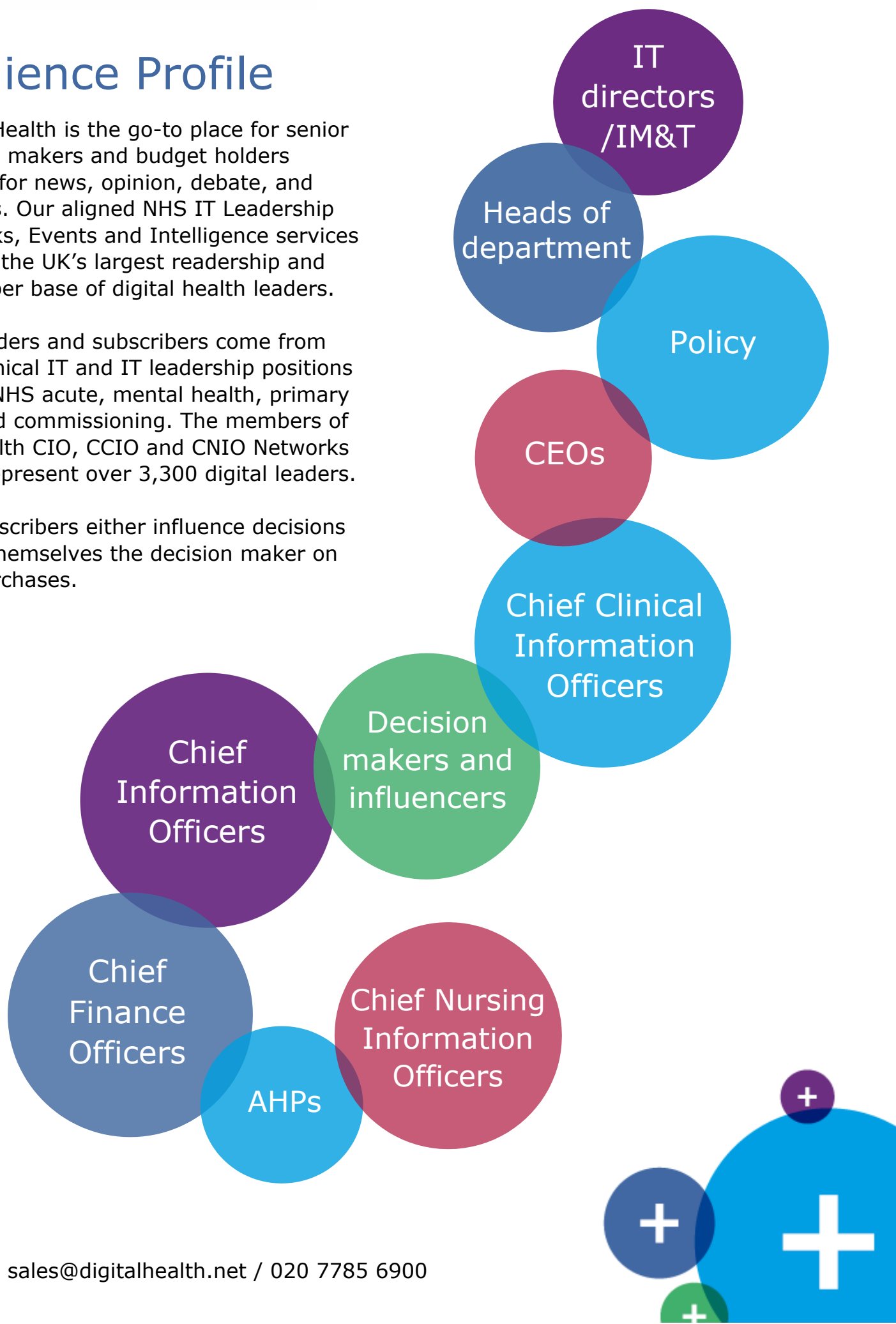


Audience Profile

Digital Health is the go-to place for senior decision makers and budget holders looking for news, opinion, debate, and features. Our aligned NHS IT Leadership Networks, Events and Intelligence services provide the UK's largest readership and subscriber base of digital health leaders.

Our readers and subscribers come from both clinical IT and IT leadership positions across NHS acute, mental health, primary care and commissioning. The members of our Health CIO, CCIO and CNIO Networks alone represent over 3,300 digital leaders.

Our subscribers either influence decisions or are themselves the decision maker on new purchases.



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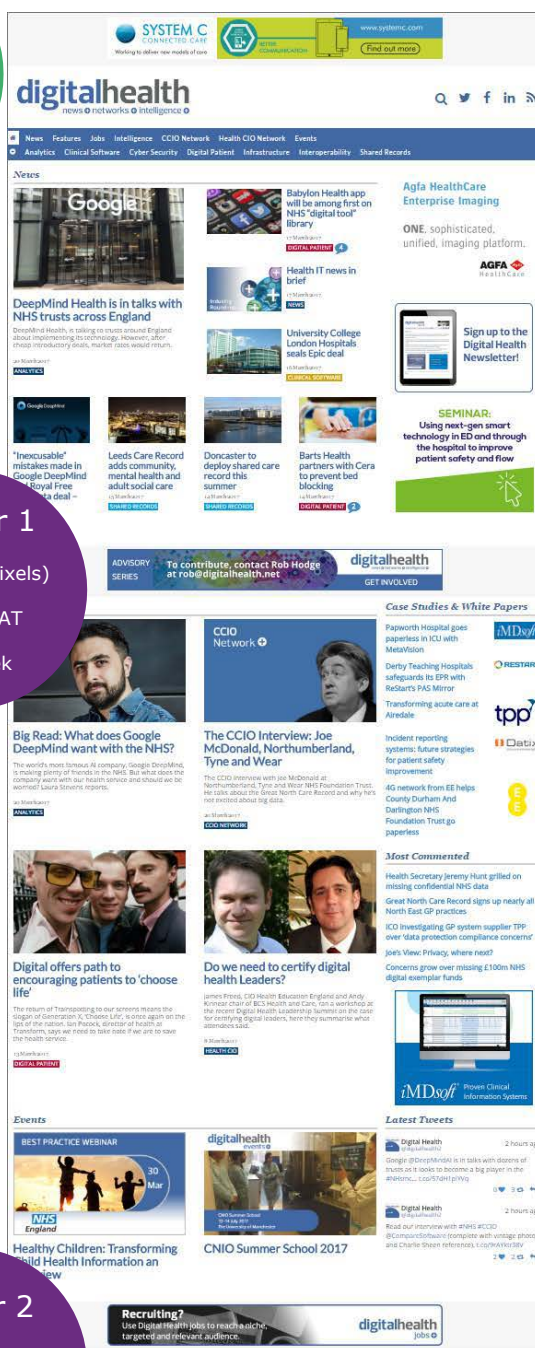
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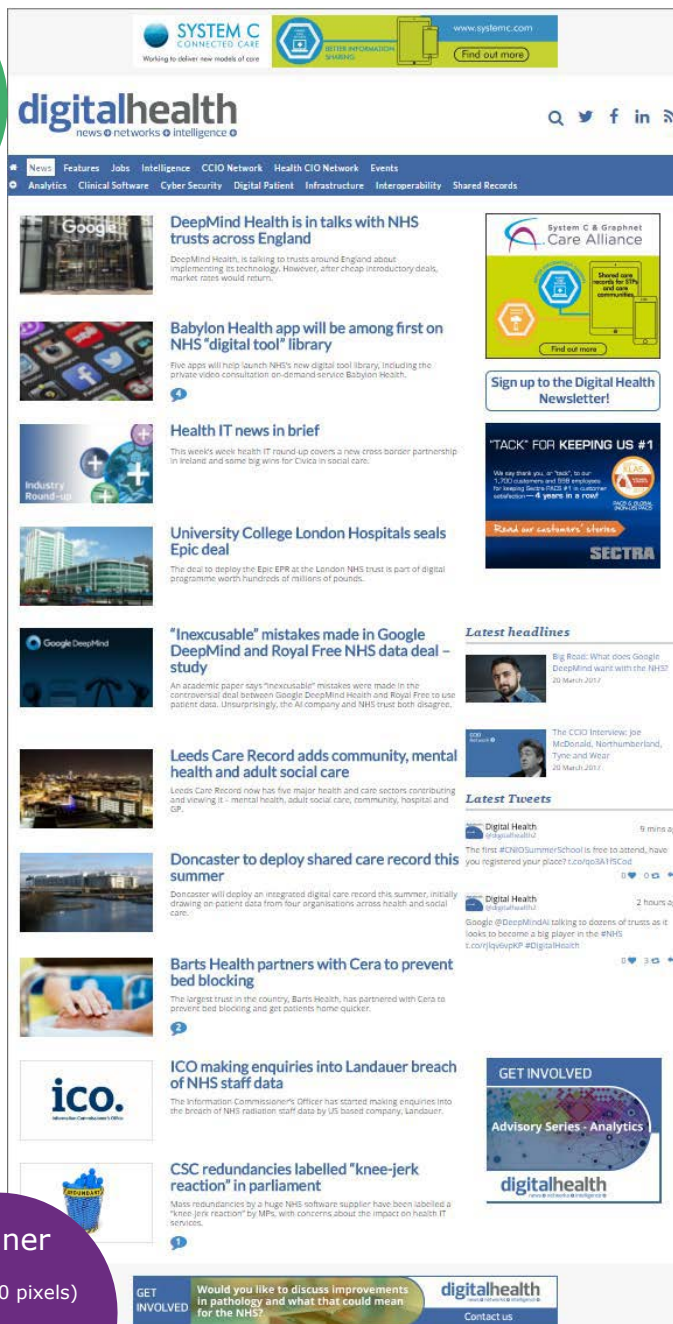
The Digital Health news channel features breaking headlines and news stories from across the digital health market. Our stories are published as they happen, drawing regular readership throughout each day.

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Directly target your key audience

The Digital Health hubs bring news, intelligence and comment together by topic – making them a very effective channel for reaching a targeted audience. Choose from our 7 hubs; Analytics, Clinical Software, Cyber Security, Digital Patient, Infrastructure, Interoperability, and Shared Records.

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3 min+
average
read time
(200 word
feature article)

Transforming acute care at Airedale



Papworth Hospital goes paperless in ICU with MetaVision



Papworth Hospital is one of the largest specialist cardiothoracic hospitals in Europe and includes the country's main heart and lung transplant centre. The trust treats more than 24,000 inpatients and outpatients each year.

Papworth identified a need for an Intensive Care Unit clinical information system that would enable them to help identify and reduce variations in the quality of care, support care processes and increase the continuity of care.

They also sought to remove the need for paper and ensure that all documentation would be captured in one location, could not be lost and could be viewed and used by multiple people in multiple locations at the same time to enable new ways of working.

The clinical information system the trust chose was IMDSoft's MetaVision ICU, in support of 25 level 3 ICU beds. The system was installed in November 2006.

The linked IMDSoft case study provides a succinct and informative overview of the results and benefits achieved by Papworth through use of MetaVision.

These have included elimination of several types of prescription errors, improved patient care due to standardization, improved guidance at the point of care, increased production of research and compliance for local and national reporting.

[Read the full case study](#)

ide an integrated care IT solution in West Yorkshire, reemploying the system at its hospital.

a community setting since 2011 and in an acute greater integration and information sharing across the using SystemOne across the region.

both care settings has had a dramatic impact on the it comes to honouring patients' end-of-life

are in hospital, compared to national average of home, compared to a national average of 22.4%.

With Record & IT Clinical System Manager, said the reduce prescription errors and manage medicines stock

e shared record. Being able to seamlessly integrate live services, means that all the vital information is arrives for treatment."

er enhance the links across care settings enabled by the particularly through strengthening the e-Prescribing

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Digital Health's weekly News and Digest newsletters are sent to our **24,000** strong database of Health IT professionals and key decision makers on Thursdays and Fridays focusing on key content and hot topics from the week.

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- Brand recognition by getting your message in front of key buyers
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Digital Health Newsletter - 21 December 2017 | Share: [Twitter](#) [LinkedIn](#) [Facebook](#) | Follow: [Twitter](#) [LinkedIn](#) [Facebook](#)

Editorial

Though Christmas is just days away it's been a busy week in NHS IT. Digital Health News exclusively report on plans for the launch of five new Local Integrated Care Record Exemplars at the start of 2018 and three new Digital Innovation Hubs, and a new enterprise licensing agreement with Microsoft. Plus, how Santa has gone digital.

The Digital Health News Review of 2017, provides an acronym filled roller-coaster ride of the past 12-months of news. It was the year of Wannacry, GDEs, Fast Followers, the NHS Digital Academy, of digital health apps going mainstream and coming under scrutiny; of the ICO, CQC, of the departure of the first CCIO and a new boss at NHS Digital.

So, join us for our whistle-stop review of the year's news and share your highlights. And look out for our 'most read stories of 2017' and 'look ahead to 2018' features over the festive period.

We wish all of our readers a very Merry Christmas. We'll be back with daily news on 2 January 2018

Jon Hoeksma
Editor, Digital Health News

Allscripts
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KING
Read about Mr Jones
An elderly diabetic patient whose life was saved due to smart infrastructure

News

Cisco brings festive cheer to children in hospitals
The network and IT company brought some well-deserved Christmas cheer to children in hospital by giving them the chance to video call with Santa.
DIGITAL PATIENT

NHS England negotiating new enterprise wide licensing deal with Microsoft
NHS England is said to be in negotiations with Microsoft to put in place a new EWA for Office 2010, with a view of eventually migrating to Outlook 365.
DIGITAL PATIENT

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DIGITAL PATIENT
NHS England negotiating new enterprise wide licensing deal with Microsoft
NHS England is said to be in negotiations with Microsoft to put in place a new EWA for Office 2010, with a view of eventually migrating to Outlook 365.

CLINICAL SOFTWARE
NHS seeks the Amazon appeal with Virtualstock expansion
Sheffield Teaching Hospitals has implemented Virtualstock's The Edge for Health, which aims to bring Amazon-like simplicity to the NHS's supply chain.

CLINICAL SOFTWARE
NHSquicker app reveals busy schedule of local health services
NHS trusts in Devon and Cornwall are trialling an app which shows patients how busy local health services are.

DIGITAL PATIENT
GDPR: Which NHS trusts are ready for 25 May 2018?
New data from Digital Health Intelligence reveals 55% of acute trusts 47% of mental health trusts have an implementation plan prepared for GDPR.

NEWS
NHS England getting set to launch Local Integrated Care Record Exemplars
NHS England is getting set to issue invitations to apply to become one of five expected new integrated care record exemplars.

NEWS

Spaces Limited
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Features
The march of the robots
Robotics can help the healthcare sector deliver better care with limited resources, argues Jeremy Russell. But for uptake to accelerate, companies will need to find ways to make products affordable, and organisations will need to earmark money for investment in the area.

FEATURE

Advisory Series

The Digital Health Advisory Series is an extension of the Special Reports we have been delivering for 10+ years. Focused on topics of interest to the NHS, the series offers exclusive thought leadership and insight into the current and future challenges in specific fields.

Each Advisory is published into the relevant hub on digitalhealth.net and promoted across our channels, informing our market leading audience of key factors and developments plus forward view, future potential for improvement and alike. Suppliers can sponsor a particular topic and a Digital Health Journalist will interview the chosen company and/or client representative, and will then write a 300-400 word feature piece which is included in the Advisory. This is an opportunity for market positioning and engagement with senior/top level role holders in the NHS, such as members of our CIO/CCIO/CNIO Leadership networks and wider.

Coming up in 2019:

Interoperability – 23 January 2019

Interoperability is far from a new challenge for healthcare IT, with the inability of primary and secondary care systems to 'talk' to one another regularly bemoaned.

Primary care – 27 March 2019

Increased demand, greater complexity, and a workforce often not growing or evolving in line with either – primary care is under pressure.

Population health management – 26 June 2019

An expert look at one of the key potential innovations in healthcare. How are population health approaches being introduced in the NHS?

Mobile and modern working – 17 July 2019

Many of those employed in the NHS – particularly on the frontline – have become used to mobile technology not being a consistent feature of their working lives.

AI – 18 September 2019

We speak to leading NHS experts to get a sense of the realities around AI – what it can currently do, what it can't and how we get between the two.

Clinical messaging – 20 November 2019

How can platforms be established which allow helpful communication while offering appropriate levels of security for highly sensitive data?

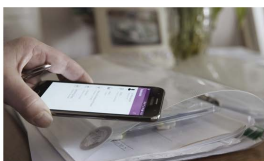
New models of care – 11 December 2019

We explore the role digital technology might play in developing new models of care, and look at those who are leading the way.



By Claire Read - Digital Health

Making mobile work – securely



By Gregg Hardie - Head of Public Sector, Samsung

At Samsung, we are keen for those working in healthcare to be able to reap the benefits of mobile working. We believe it can and will make a real difference to their level of efficiency and the satisfaction they take in their job.

We also know, however, that its introduction is not without challenges. While there are already numerous examples of care being improved through the use of mobile technology – whether community nurses are able to better manage their administrative workload, doctors able to remotely view observations data and quickly spot and respond to deterioration, or even patients able to more easily share information with their clinicians – there can also be risks to mitigate? Chief among them is security.

It's a concern which is perhaps particularly pressing for information technology departments. The growth of clinical uses for smartphones and tablets means more devices to manage within an organisation. And the desire for staff to use at work the technology they take for granted at home means those devices aren't always just the ones carefully selected and procured by the department. Meanwhile, the WannaCry global cyber-attack has put cybersecurity in the NHS – or the failings thereof – on the front pages of national newspapers.

At Samsung, we want to ensure that mobile technology is used to improve healthcare. But we also want to ensure staffs are able to use such technologies in a way which keeps patient data safe. We know our colleagues in healthcare IT departments want both those things too.

That's why Samsung's security platform, Knox, is built into every mobile device we provide. It's also why we offer additional Knox solutions which make it quick and easy to tailor devices for use in healthcare settings.

It is vital to have ensured the confidence risks of data breaches are mitigated. But creating devices which are so secure as to be impenetrable to users is not an option. Data needs to be easily accessible at the point of care to the people who need to see it, and easily updatable. Security cannot become a byword for unusable. If it does, one of the major benefits of mobile working – increased efficiency – is negated.

The issue of keeping patient data safe is of course not a new one. But it's becoming more complicated as information is stored on devices which move around with the people using them. There is also the issue of needing to share information with a wider number of users over a wider geography.

To address the challenges, healthcare organisations will need devices which have sophisticated security settings which can be easily tailored to the healthcare environment. The ability to perform over air updates will be essential, so as to be able to quickly apply security patches and relevant settings for specific staff groups without the need to directly access the device. Organisations might also consider devices which offer the ability for 'dual personal' setups, through which personal and work applications on a smartphone or tablet are separated: a valuable way in which to make bring your own device a more manageable prospect.

Mobile suits the way healthcare operates now, but it will only be viable if we get security right. Healthcare professionals and patients will expect nothing less.

SAMSUNG

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Special Reports

Each year we publish a number of focused Special Reports looking at the topics of most interest and importance to those in the NHS, providing an informed outlook and insight surrounding key developments / forward view. Published into the relevant Hub of digitalhealth.net and pushed to our full 50,000+ monthly users including network members, participation offers the opportunity to directly engage with those who work in the field of focus and hold a vested interest.

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Special Report: Vendor Neutral Archive (VNA)

With the ease for easy data sharing within healthcare being made frequently and at high levels, vendor neutral archives (VNAs) should equally be enjoying their moment in the sun. The, as Jennifer Trustford reports, there is still a sense that healthcare trusts could go further in their use of such systems.

When Matthew Sennels addressed the 2017 Health and Care Innovation Expo in Manchester last month, he had a very clear message for IT vendors and for those working in the NHS.

Software providers should not be protective about data they considered "their", he warned, and NHS bodies should be likewise. "Really grippy" was his phrase – about only choosing vendors who helped to drive openness and data sharing into the system.

On the face of it, this should mean that the vendor neutral archive is about to have its moment in the sun. As a means of allowing all organisations' data to be stored in a single repository, and accessed by all who need it – regardless of the piece of software in which the data was created – the VNA is surely ideally placed to drive the openness that Sennels wants.

But even if this is the message from the top, there is little evidence that it is being universally heeded on the ground. While some trusts are forging ahead and using VNAs as part of a wider strategy to transform record-keeping, it seems others are failing to make the most of the technology and risk being left behind.

"We're at an interesting stage in maturity," says Mark Portlock, vice president for the DMSA region with Calgary Software. "In the UK, you have some organisations that have a clear vision and understanding of what they want the VNA to do for them. But there are still a lot that are trying to work out what it really is and what it can do."

At its most basic, a VNA is a store for standardised files that can be accessed by a range of applications. In England, many trusts bought them after the National Programme for IT came to an end in 2011 as a facility for storing radiology images. In many cases, the aim was to "future-proof" the archive, because it would not have to be converted to different formats if the trust then changed its picture archiving and communication system (PACS).

But Portlock believes that some trusts bought a VNA as a "point solution" – tied with a specific issue – rather than as part of a wider strategy. Indeed, the lack of strategic thinking is an issue that is cited by many in the VNA and PACS space.

"A few years ago VNAs were the buzzword, but how many are being used to their full potential beyond DICOM and radiology?" asks Charlie McCaffrey, managing director with Corestream Health UK Limited. "Yes, yes, and today you don't have a lot about it. There's a lack of forward strategy."

Forwarding those working in the NHS that they should move to the next level with their digital archiving is understandably tough, he says. "NHS managers are flat out anyway – you can see the fire in their eyes if you ask them to do more. They could make greater use of their asset, and bring it into the fire in their eyes if you ask them to do more. They could make greater use of their asset, and bring it into the fire in their eyes if you ask them to do more."

Chris Campbell, sales director with Huma, believes it is important to look at the bigger picture. "A lot of what we do comes back to the Five Year Forward View. Health services have to be much more efficient and there's a lot less cash around."

VNA can help, he says, because they contribute to care and quality. "Better diagnostics and better information, kept in a single place, lead to money saved down the line."

Typically, trusts are using their VNA for radiology, cardiology and breast images, he says. "They're typically getting these images in place, and it's a good place to start, but there are the way ones. Later trusts are looking beyond traditional borders and are spreading their wings, bringing in other areas such as dermatology, medical physics and interventional – and some and some of others."

This isn't as easy, he says, because the information isn't organized to the same degree. "This is where we are seeing a lot of stalling. Trusts have done the low-hanging fruit – the biggest producers of medical imaging. But the smaller departments – often still paper based – are much harder."

Janine Offroy, vice president product management and solutions at **Brightplan** also urges trusts to think and act more strategically, but understands the challenge.

"I've very rarely seen individuals who don't get excited about the potential benefits of making better use of the VNA," he says. "But clinical teams and IT departments are still the fighting force. They are asking 'what's most on fire today?' and dealing with that. It's not always, it's not that they don't get it."

When trusts do get to grips with it, McCaffrey says the benefits can be huge, not least in allowing the sharing of records across boundaries, including between multi-disciplinary teams within the one department or hospital, or region-wide.

He points out that the ability to share images across the Mersey region, for example, is a winning combination for the patient experience. Quoting Dave White, a consultant radiologist at Anfield Hospital in Liverpool, he says that having a shared network and data sharing agreements means that from his office in Liverpool, White can report on a scan taken south of the Mersey in Chester by the time the patient has got off the table.

This kind of instantaneous, real-time reporting is good for the patient, who benefits from expert clinical input without having to travel far from home. It's also good for the NHS, because it can deploy its clinical expertise over a wider area and cut down on diagnostics.

McCaffrey believes that as STPs (sustainability and transformation plans) bed in throughout the NHS in England, bringing together groups of partners across wider localities, the benefits of interoperability and working at a greater scale will be realised. "The Chester and Merseyside there are 10-12 trusts all in the STP. Sharing services across networks has been a major success story."

So what else could be done to persuade trusts to take a more strategic approach and make the most of VNA technology? Offroy identifies a problem with the way systems are purchased. "The tendering process for buyers is a closed approach," he says.

Standardised says that another reason is who is doing the purchasing. "If the decisions are being taken at an IT level, then they will look at the needs of a hospital. But when the purchasing decisions are taken by the interested department, they look after themselves."

He also points to a lack of clarity about what a VNA is and does – and says the name doesn't help. "There are a lot of different opinions about vendor neutral archiving. Ask 10 different people what a VNA is and you'll get 10 different answers."

Whatever it is called, however, the VNA has the potential to make life easier for health professionals and improve the quality of patient care, and nobody should lose sight of that. "What the clinician wants is to have as much information about the patient, available in the right place at the right time," says Sennels.

He describes a scenario where a junior doctor, alone on a ward at night, can share an image with a senior colleague in real time, and get support to make clinical decisions. "That's the type of thing that needs to be implemented."

With benefits of more than three decades in the industry, McCaffrey has a mixed verdict on whether the VNA will come into its own and help meet the demands set out at Expo by Sennels.

"There's too much focus on the short term – it's about coping with next winter's flu, rather than looking more strategically about how you can do things better for the future," says McCaffrey.

"But I'm optimistic – there are some visionaries out there, and they are working to make a difference. At the end of the day we are all patients, and it's all for our interests to get it right."

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Guidelines and Specifications

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For maximum impact, we recommend you use an animated GIF, or HTML ad.

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- Animation: Yes

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