**The development of PatientView**

PatientView when first established in 2006 was known as RenalPatientView (RPV).

The concept of RPV had been developed by the Renal Information Exchange Group (RIXG) - an inclusive group with representation from professional and patient kidney organisations which from 2003 met to discuss IT developments in UK healthcare and identify fruitful new IT initiatives for the kidney community[[1]](#footnote-1).

The initial notion of RPV was unique in UK healthcare, a digital system allowing patients and carers to have password-protected access to their clinical information held in their local renal unit IT system through an intermediate web server. A £75,000 grant to establish proof of principle was obtained from the Department of Health. Under the leadership of Neil Turner (Edinburgh) and Keith Simpson (Glasgow), collaborating with an independent web development company, a working model for RPV soon emerged and by early 2005 was working as a pilot scheme in four renal units which used Proton. It was immediately welcomed by patients and carers as an effective and user-friendly means for patients to access their own clinical information. A minority of RA members were cautious that such access may generate anxiety and increase demand for communication with patients between clinic visits that would be hard to sustain, but this did not materialise. RPV steadily grew to full national coverage as technical links with all renal unit IT systems were established. Originally offered to those receiving RRT, its application expanded to all patients with information held on renal unit IT systems.

In 2008 a sustainable technical and governance future for RPV was secured by co-locating its administrative support in the Registry offices. A capitation funding model was agreed – initially £2.50 per RRT patient for every unit in England where patients used RPV. Growth was rapid - by 2009 there were already 10,000 RPV users. The RPV committee, vigorously led by Turner and Simpson, continued to improve the interface and increase its functionality.

A change of name to PatientView in 2014 was decided since the system was now being offered to other specialties (and was first taken up for inflammatory bowel disease).

RPV is a unique development which placed the renal community at the forefront of digital clinical applications.

1. RIXG was chaired by John Feehally (Leicester) from 2003 to 2010, and then Afzal Chaudhry (Cambridge) until it was disbanded in 2014 and its remaining activity subsumed into a new RA Clinical Informatics Standards Committee. [↑](#footnote-ref-1)