Meeting Date	29 November 2018	Agenda Item	2iv.
Report Title	Update on Digital Issues and ABMU Progress		
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Presented by	Matt John, Interim Chief Information Officer		
Freedom of Information	Open		
Purpose of the Report	To provide Health Board Members with an update on the national digital issues and the progress being made at ABMU across digital projects and initiatives.		
Key Issues	The report provides: - An update on national digital issue - A progress update on ABMU digital projects - An update on boundary change with regards to Informatics - An update on the Health Board's progress in the support of Digital Inclusion		

Specific Action Required	Information	Discussion	Assurance	Approval
			✓	

Recommendations	Members are asked to: **NOTE** the latest position in regard to national digital issues **NOTE** the progress being made across ABMU digital projects and initiatives **NOTE** the significance of the boundary change and the intention to submit a case to Welsh Government for investment from 2019/20 **NOTE** the progress in supporting digital inclusion for our staff and patients

UPDATE ON DIGITAL ISSUES AND PROGRESS

1. PURPOSE
To provide Health Board Members with an update on the national digital issues and the progress being made at ABMU across digital projects and initiatives.

2. NATIONAL ISSUES
The Board received a paper in July 2018 which outlined the National and ABMU response to the Wales Audit Office (WAO)report on Information Systems in NHS Wales published in January 2018.

As a result of this report, the **Public Accounts Committee (PAC)** undertook an inquiry on Informatics Systems in NHS Wales. The [PAC report (Appendix A),](#) published on November 8th 2018, echoes the concerns of the WAO report with a focus on: national project pace and overly positive reporting; NWIS governance, leadership, capacity and capability; digital representation at local board level; national infrastructure resilience and system outage communication; levels of investment nationally and locally; and clinical engagement.

NHS Wales Informatics Service (NWIS) has published a statement on its website acknowledging the report and with full commitment to addressing the recommendations through collaboration with Welsh Government.

With regards to previously agreed actions by Welsh Government in response to the original WAO report, a draft Project Initiation Document (PID) for the planned **national architecture review** was submitted to the National Informatics Management Board (NIMB) for comment in October. The key feedback provided by the Health Board to the architecture review proposal was: the review must analyse all viable options for delivering at pace an Electronic Patient Record for the professional, the patient, and the citizen and provides a world class data source. The final version is expected for sign off at NIMB in early December, with the intention to procure an external contractor to undertake a 3 month review starting early 2019.

Another of the Welsh Government actions resulting from the WAO report was for an independent **review of NWIS and NHS Wales "Informatics" governance** to be undertaken. Local Partnerships, a joint venture between HM Treasury and the Local Government Association, were commissioned to carry out the review which commenced in October. The process required representatives from each NHS Wales organisation to attend a review meeting with Local Partnerships. ABMU had its meeting on Monday 15th October. The Health Board were represented by Matt John CIO; Sian Richards Deputy CIO; James Chess CMIO; Pam Wenger Director of Corporate Governance; and Tom Crick Independent Member. The combined contribution was a fair and hopefully helpful reflection on the current state of NHS Wales Informatics Governance, and a useful account of areas for improvement. The resulting report is expected to be presented to Welsh Government during December.

As for **national data centre outages**, the Health Board have not experienced any significant data centre outages since August. All incidents prior to this were reported

to Audit Committee. These reports confirmed that in some instances there was delay to patient care. However, there was no evidence to indicate that any delay had a negative or harmful impact on the health of patients.

NWIS have recently completed a successful failover test of the problematic WLIMS (Pathology System) environment, and have also bolstered the "Citrix" platform from which users access WLIMS. ABMU, in line with the pathology collaboration, are insisting on a consistent 90 days uptime of WLIMS before agreeing to the implementation of the Blood Transfusion Module.

The last incident in August was a situation that had the potential to cause significant disruption to services and was very well managed nationally and locally with little disruption to clinical services. However, there were still examples where communication could have been better and a need for further improvement. The recent PAC report highlighted the concerns over communication during system outages, with ABMU's use of the Emergency Services Interoperability Principles (JESIP) being mentioned as an example of best practice.

The **National Technical Standards Board** is now well established and sits alongside the existing Information Standards Board. It is envisaged that these two Boards will oversee the delivery and maintenance of a catalogue of standards and requirements to enable integration and interoperability across all health and care systems.

With regards to national informatics priorities and plans, a draft version of the 3 year **National Informatics Plan 2019-22** was submitted to NIMB in October. The Director of Informatics Planning Development has continued to work in collaboration with NWIS, Health Board Assistant Directors of Informatics and Chief Clinical Information Officers as well as other national boards and groups in order to:

- enable delivery of government priorities, inform IMTPs and support service transformation
- provide clarity on Health Boards and Trust priorities that would make demands on national resources (especially NWIS)
- inform choices on the level and use of future resources for informatics (both staff and funding)

The final draft of the National Plan for 2019-22 will be submitted to NIMB in December.

In reference to **Informatics and Clinical Informatics Leadership**, a Chief Clinical Information Officer (CCIO) development programme and network was formally launched by the Chief Executive of NHS Wales in March 2018. ABMU's CCIO and CIO both attend the corresponding monthly Wales Clinical Informatics Council.

Last year the NHS England Digital Academy started a Postgraduate Diploma in Digital Health Leadership through the Imperial College London. The course is aimed at Chief Clinical Information Officers, Chief Information Officers and aspiring digital leaders from clinical and non-clinical backgrounds within the NHS and social care. This year, through the CCIO development programme, NHS Wales has managed to

get allocation of 5 of the 100 available places. An NHS Wales panel will decide on the successful Wales applicants.

On **Finances**, in response to the WAO review, Welsh Government stated it would undertake a robust assessment of the investment required and predicted business benefits, and together with NWIS and Finance Directors evaluate alternative funding models and savings opportunities. The Welsh Government Draft Budget 2019/20 Outline Proposals indicates there will be increased investment in digital technologies under Health and Social Care. The Cabinet Secretary announced at the Digital Health and Care Conference in November that there will be £3m allocated to supporting digital inclusion for staff and patients as part of a new three year Digital Inclusion and Health programme.

From a capital perspective, there is a current commitment of £65 million capital for delivery of the digital strategy across 4 years. Through 17/18 and 18/19 only £15m of this fund was allocated. It is expected that the remaining £50m will be made available over the next 2 years.

There is also an expectation from Welsh Government that NHS Wales organisations will invest further in digital transformation. ABMU is placing digital as a key enabler in its Organisation Strategy and a new Digital Strategic Outline Programme (SOP) will be developed, led by Informatics in collaboration with Finance, for the new organisation post April.

As previously reported, the renewed SOP will need to ensure the appropriate levels of skills and resources are available to the Informatics team. We will need to review our structure to ensure it is fit for purpose and can deliver the ambitious plan. Successful recruitment and retention is fundamental to this and we must take full advantage of our links with Swansea University and other local colleges as well as collaborating with Health Education Improvement Wales (HEIW) and NWIS. Furthermore, continued partnership working with Hywel Dda under ARCH will enable us share resources and skills to drive forward digital transformation across the region.

3. **PROGRESS AGAINST DIGITAL PROJECTS AND INITIATIVES**
The Health Board continues to make good progress against digitally enabled health and care projects across the organisation. Below are a selection of the key benefits being delivered:

- **Electronic referrals**: 92% of electronic primary to secondary care referrals now prioritised electronically – 4.8wte (24%) decrease in staff resources.

- Access to **GP Summary Record** in Welsh Clinical Portal: saving of 32mins pharmacy time per patient admission. Uptake is at 6,000+ views per month across ABMU.

- **Electronic pathology test requesting** (live in 86 locations across the Health Board): supporting a significant reduction in the number of unnecessary

repeated tests - June 2018 showed 100 unnecessary repeat tests carried out compared to 1000 (pre electronic process).

- **All Wales view of pathology results and clinical documentation** is available in WCP. This coupled with electronic requesting also improves patient safety negating the need to bleed patients in ABMU whereby the relevant test has been processed in another Health Board.

- **E-Whiteboard Singleton Assessment Unit**: saves "locating" time (1hr 40mins per patient), no "misplaced" patients, handover time (40mins to 10mins), live triage updates, post take list production time (45 mins to 2 mins).

- **Patients' Know Best**: 102 patients registered, providing patients access to clinical information e.g. blood results, symptoms tracker and messaging service empowering them to proactively manage their care.

- **Mobilisation**: 1,200 devices deployed to community staff. District Health Nurses in Bridgend saw 33% more patients in Q1 2018/2019 in comparison with Q1 in 2017/2018. Number of to and from base travel routes reduced from an average of 6 to 2 return to base trips per day. Over 2,000 individual staff members mobilised with a personal device.

- **Patient text reminders**: contributing to a reduction in hospital based outpatient DNAs: New Appointments from 7.1 % to 6.7% and Follow Up Appointments from 9.0% to 6.9%

- **Patient Safety "Huddle" Dashboard**: Morriston Unscheduled Care team working with the national Delivery Unit. Provides a live overview of the hospital to support quicker decision making relating to patient flow

- **Digital dictation Morriston Outpatients**: – 30% Consultants using digital dictation for same day consultation, letter creation and transmission to GPs for urgent suspected cancer

In addition to delivering more benefit across the areas above, over the next period we expect to see progress in a number of other key areas, including: electronic prescribing and medicines administration; medicines transcribing and electronic discharge; patient reported outcome measures; a new internet site and health records modernisation.

Our business case for the Wales Community Care Information System (WCCIS) to support integrated care models has also been submitted to the ABMU Investment and Benefits Board, with the aim of commencing implementation from April 2020.

4. BOUNDARY CHANGE

Since the formation of the Health Boards in 2009, ABMU and Cwm Taf Informatics departments have worked hard to provide a fully integrated approach to ICT services in their respective organisations. This has delivered considerable benefits in terms of resilience and efficiencies, however it does now mean that the disaggregation of the

services and technologies serving the Bridgend area and the insertion into Cwm Taf is extremely complex.

The disaggregation of all informatics services and functions will take considerable effort and a plan to deliver this safely in a short a timescale as possible is being constructed between Informatics leads between both organisations. Initially, from April 2019, the majority of ICT services in the Bridgend area will be provided by ABMU under a Service Level Agreement (SLA). This SLA will reduce overtime. The plan will require investment for both Health Boards and a joint case is being prepared for Welsh Government. The majority of this is expected to be in 2019/20, however further investment is likely to be required for twelve to twenty four months thereafter.

5. DIGITAL INCLUSION

Vital to the success of our digital transformation is the important role that we must play in supporting the digital inclusion for our staff and patients. The progress the Health Board is making in supporting digital inclusion was recognised in the recently published "The Digital Inclusion in Health and Care in Wales", by Bob Gann.

As previously reported, ABMU became the first health organisation in NHS Wales to sign the Digital Inclusion Charter and we are working with the Wales Co-operative Centre (WCC) and Digital Communities Wales (DCW) to develop a programme for digital Inclusion of our staff and patients.

An ABMU workshop is being planned for December/January with DCW, which will bring together stakeholders from across ABMU to identify ways to meet the principles within the digital inclusion charter and to share progress and promote ideas for supporting digital inclusion. It is envisaged that this will kick-start the creation of a network of digital inclusion champions within the Health Board.

DCW have also offered their support in a 3-way collaboration with Health Education and Improvement Wales (HEIW). A meeting is being scheduled over the next period.

ABMU are also progressing with the recruitment of a Digital Inclusion Coordinator. DCW are again providing support on recruitment documentation.

Bob Gann's report, provides as an example the progress ABMU are making with our patient-controlled record project (Patients Know Best). ABMU is working with DCW to provide support to patients to use Patients Know Best and other online applications with help from ABMU's Volunteers. Digitally excluded staff have been supported through their online training, broadening their basic digital skills capability which will improve their life opportunities.

The Use of PKB in ABMU was presented at the NHS Wales digital conference and the Public Health Wales conference during November. The presentations were well received with much interest from other NHS Wales organisations.

The Mobilisation project is also making significant progress in upskilling our community workforce.

6. RECOMMENDATIONS

Members are asked to:

- **NOTE** the latest position in regard to national digital issues
- **NOTE** the progress being made across ABMU digital projects and initiatives
- **NOTE** the significance of the boundary change and the intention to submit a case to Welsh Government for investment from 2019/20
- **NOTE** the progress in supporting digital inclusion for our staff and patients

Governance and Assurance

Link to corporate objectives *(please ✓)*	Promoting and enabling healthier communities		Delivering excellent patient outcomes, experience and access		Demonstrating value and sustainability		Securing a fully engaged skilled workforce		Embedding effective governance and partnerships
	✔		✔		✔		✔		✔
Link to Health and Care Standards *(please ✓)*	Staying Healthy	Safe Care	Effective Care	Dignified Care	Timely Care		Individual Care		Staff and Resources
	✔	✔	✔	✔	✔		✔		✔

Quality, Safety and Patient Experience

Implementation of digital systems in healthcare can have a significant positive impact on quality, safety and patient experience. Critical to success is the wide scale adoption of an effective business change model.

Financial Implications

There are no direct implications in this report. However, specific impact, where relevant, will have been considered within individual projects.

This report does however highlight that the disaggregation of all informatics services and functions will take considerable effort and a plan to deliver this safely in a short a timescale as possible is being constructed between Informatics leads between both organisations. The plan will require investment for both Health Boards and a joint business case is being prepared for Welsh Government. The Board will be kept updated on progress in relation to this.

Legal Implications (including equality and diversity assessment)

There are no legal implications contained within this report. However, specific impact, where relevant, will have been considered within individual projects.

Staffing Implications

There are no direct implications on workforce in this report. However, specific impact, where relevant, will have been considered within individual projects.

Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015 - https://futuregenerations.wales/about-us/future-generations-act/)

Digital transformation is fully congruent with the aspirations of the future generations act.

Report History	None
Appendices	Appendix 1: Public Accounts Committee: Informatics Systems in NHS Wales Appendix 2: The Digital Inclusion in Health and Care in Wales report - Summary, Bob Gann