Digital IT Strategy

2017 - 2019

Contents Page

1.0 Foreward

'IM&T is a key enabler for Sandwell and West Birmingham Commissioning Group.

To realise all our commissioning ambitions to improve patient care, the use of technology will improve our internal processes and most importantly provide better access to our services by patients by realising the better use of technology.

What is certain in healthcare and in the NHS is that there will always be change. The NHS needs to constantly evolve to take advantages of the opportunities that both new clinical knowledge and innovative technologies can offer.

The NHS five year forward view, published in late 2014 places a commitment for all in the NHS to work differently and more decisively to seize new opportunities that exist.

At the heart of the 5 year plan message is to move forward with integrating services and ensuring patients are able to take more control of their own health and pathways of care. It is recognised that there is no 'one size fits all' approach within England to do this and local regions are encouraged to develop solutions that fit the local structures that have the potential to exist.

Sandwell and West Birmingham CCG commits in its Operating plan to develop primary care and also support new integrated ways of working within the locality in order to provide residents access to safe, high quality, effective care, delivered locally.

This Digital IT Strategy is to set out the direction of travel the CCG will take over the next 2 years with respect to IT.

Innovation in information technology is a key enabler in improving care and supporting professionals in the process of caring for patients and the CCG is committed to supporting the change required through the use of IT wherever possible.'

Dr Inderjit Marok, GP and Governing Body IT Sponsor

2.0 Introduction

Supporting the NHS against new demands and national driver requirements requires digital reform. The key role that digital transformation plays is widely recognised in plans set out both locally and nationally. Since the early introduction of computerised health records, the NHS has continued to invest in technology transformation and especially in the way that patient care is delivered more effectively, promptly, efficiently and both reactively and proactively. The new age of digital in more recent years has allowed patients to exploit the use of growing technology to live more means of social interaction. Social media and access to information more promptly and easily continues to play a big role in the way in which society is evolving.

The NHS is also evolving in such a way that one of its primary aims is to focus on exploiting the 'information revolution'. Better use of digital technology, plans for integration, increasing interoperability, and efficient use of data has the power to support people to live healthier lives and use care services less. It has the capability of transforming the cost and quality of services when they are needed deliver an overall better patient experience whilst reducing unnecessary demand that could have been dealt with via other equally effective means and methods.

The CCG will use this strategy framework to make the information revolution outlined in "The Power of Information" a reality, delivering substantial benefits for our key stakeholders, so that:

- **Patients and the public** have information to help them understand how to improve their own health, to know what their care and treatment choices are, and to assess for themselves the quality of services available;

- **Health professionals** have information to better understand the needs and health history of the people they treat and how their individual clinical behaviour affects the outcomes and quality of service for patients; and,

- **Commissioners** have information to understand the needs of the population they serve, and how well different services and treatment work.

This strategy aims to promote:

- A culture of transparency, where access to high-quality, evidence-based information sourced and compared internationally, nationally and locally about the quality of care is openly and easily available;

- An environment in which clinicians are encouraged and empowered to evaluate their decisions against the latest evidence and peer behaviour;

GPs need ready access to information that helps them understand and make informed decisions about the type of care and support that is best suited to individual patients, patient groups and the health economy as a whole. This includes the ability to compare the relative quality and efficacy benefits of different pathway options for patients.

This strategy needs to deliver:

- The widespread use of modern technology to make health and care services more convenient, accessible and efficient;
- Information systems built on innovative and integrated solutions and local decision-making, within a framework of national standards that will ensure that better quality information can move freely and safely around the system.

The CCG needs to exploit opportunities provided by new technologies, such as

- 'Cloud' technology
- Cost effective and efficient web-based storage and hosted software solutions
- Hand-held devices which allow input and access to records at the point of care
- Online tools and services for patients, the public and professionals

To take full advantage of new technology and new information:

- Users need support and training. Greater recognition of the importance of information and informatics skills for all those working in health and care will be critical within and across organisations.
- Clear leadership and focus to grasp the opportunities afforded by modern technology will be required.
- All organisations serving the same community need to adopt common standards and strategies. There may also be economic benefits of combined procurements for major systems.

3.0 Approach

In order to establish a clear set of priorities and objectives for the strategy, this strategy has undergone input from senior managers, executive team and lead clinicians to ascertain where critical strategic issues for the business could be better supported through the use of digital technology. The individuals selected below were chosen on the basis they were either:

- Senior Managers or representatives with a business interest in Sandwell & West Birmingham CCG
- Senior Clinical Leaders with an interest in IT and sufficient grounding to comment technically on solutions and fit together with issues affecting the wider health economy
- Those with a leadership responsibility for IT

The strategy has also undergone review and input from the CCG IT Strategy group and the ongoing review and update (when appropriate to do so) will be primarily discussed and mandated via this group in the first instance.

In order to establish a clear set of priorities and objectives for the strategy, national policies were reviewed. The purpose of this was so that deliverables whereby IT held some and/or influential levels of responsibility for enablement could be included in the CCGs overall objectives of digital IT transformation over the next 5 years. Influencing factors included timescales for delivery, IT dependencies, understanding what is required of Sandwell & West Birmingham CCG, its member

GP Practices and the   also care providers who serve our patient population to ensure these deliverables are realised were all taken into consideration.

An assessment against the Universal Capabilities defined in the Digital Roadmap to identify any specific gaps, including comparison with neighbouring CCGs IT strategies, was also completed.

The outputs of this will be fed into the Local Digital Roadmap (LDR), working in collaboration across the footprint for economies of scale on key priority projects as well as using it strategically to supplement LDR and incorporate their strategy into ours.

This document also sets out the following key elements that will be necessary to support the effective delivery of GP IT:

- The operating arrangements including financial procedures and associated controls;
- Governance arrangements, including roles and responsibilities;
- The leadership required to achieve excellence;
- The responsibilities that NHS England will carry out directly in relation to Primary Care Enabling Services

This document also provides a useful referencing framework detailing:

- Core and mandated GP IT services (available to all general practices)
- Enhanced primary care IT services (optional service funding dependent)
- Transformational primary care IT services (supporting new models of care)
- Primary Care IT Enabling Services
- General practice business support systems (GP practice funded out of scope)

4.0 Strategic Context

The CCG has its own unique challenges. It has a diverse, rapidly changing population covering a population of approximately 525,836 residents that, historically, comes from an industrial background but has more recently seen the growth of ethnic minority groups.

This strategy aims to identify the priorities and the high level digital transformational requirements across the CCG. Local digital roadmaps, based on requirements and recommendations of the Sustainability and Transformational plans (STP), are recognised to hold a significant impact on the IT Strategy for the next 3 to 5 years. The strategies other primary aims are to deliver better use of technology across primary care and corporate estate and contribute towards the wider population served across the bordering health economies. This includes recognition of the impact the CCG may have on other local health community organisations such as social services (local authority) and commissioned community services.

It is intended that this strategy will be used to obtain the agreement of the CCG Governing Body to a direction of travel. The strategy will also provide a series of mandates to begin initial programme development work to meet the CCG's strategic objectives.

The CCG digital IT strategy will also be responsive and living document which provides a process for on-going development and framework against which the informatics delivery programme can

be prioritised and assessed. The strategy will be subject to an annual refresh to ensure it remains relevant to CCG strategic objectives and national policy whilst continuing to be ambitious and innovative in the light of the wider informatics and technical development environment.

This strategy is driven by CCG's strategic objectives to improve quality of care, patient health and care outcomes, reduce inequalities and increase productivity and efficiency.

5.0 National and local policy drivers

The introduction of reforms in the NHS recommended changes to the NHS encompassing the following domains:

- Putting Patients and public first
- Improving healthcare outcomes
- Autonomy, accountability and democratic legitimacy
- Cutting bureaucracy and improving efficiency

The health and social care bill was developed in support of this and was published in March 2012.

In addition to core changes in commissioning arrangements the Act placed an emphasis on a number of other areas including huge improvements in efficiency and the way in which the NHS both manages and uses information. Increasingly patients will have a far greater say in making informed decisions about their care. The Department of Health sought to add further clarity around Information Management and published The Power of Information, which set a ten year framework for transforming information for the NHS, public health and social care.

The intention is for clinical staff to access, contribute to and choose to share health and care records, supporting a culture of 'no decision about me without me' for the patient. Better use of information and innovative technology can help professional teams to prioritise more face-to-face support where that is needed, and can also enable local areas to design integrated health and care services, and improvement strategies that reflect local need.

Implicit within these service enhancements is an aspiration to ensure communications between the NHS and its patients is "Digital by default".

The success of The Power of Information depends as much on a culture shift – in the way patients, users of services and professionals think, work and interact – as it does on data or IT systems. It depends on making the shift to give patients more control of our health and care and on recognising that collecting and sharing of good information is pivotal to improving the quality, safety and effectiveness of patient care, as well as patient experiences of care.

The NHS Five Year Forward View was published in October 2014. It takes a longer term view to consider the possible futures and the choices the NHS faces. It sets out how the health service

needs to change, showing why change is needed and what it will look like. It argues for a more engaged relationship with patients, carers and citizens so that we can promote wellbeing and prevent ill-health. It sets out a vision of a better NHS, the steps we should now take to get there and the actions we need from others.

Delivering the transformational changes set out in the Forward View and the resulting annual efficiencies could, if matched by staged funding increases, close the £30 billion gap by 2020/21. There are viable options for sustaining and improving the NHS over the next five years, provided the NHS does its part.

The NHS Five Year Forward View makes three main arguments:

1. Future health of millions of children, the sustainability of the NHS and the economic prosperity of Britain all now depend on a radical upgrade in prevention and public health.
2. When people do need health services, patients will gain far greater control of their own care, including support for unpaid carers and better partnerships with voluntary organisations and local communities.
3. The NHS will take decisive steps to break down the barriers in how care is provided between family doctors and hospitals, between physical and mental health, between health and social care.

It also acknowledges that England is too diverse for a one size fits all approach, that radical new care models will be required, including integrated out of hospital care in the form of multispecialty community providers and integrated hospital and primary care providers.

The General Practice Forward View, published in April 2016, sets out a plan, backed by a multi-billion pound investment, to stabilise and transform general practice. It has been developed with Health Education England and in discussion with the Royal College of GP's and other GP representatives. The plan also contains specific, practical and funded steps to grow and develop workforce, drive efficiencies in workload and relieve demand, modernise infrastructure and technology, and support local practices to redesign the way modern primary care is offered to patients.

During February 2016 NHS Employers and British Medical Association's General Practitioners Committee (GPC) announced changes to the GMS Contract. There have been a number of key changes including further development of data collection and specific targets for EPS, electronic discharge summaries and patient access to records.

Personalised Health and Care 2020 is a vision developed by the National Information Board, published in November 2014. It is a framework for action that will support frontline staff, patients and citizens to take better advantage of the digital opportunity. It sets an expectation for

the NHS to be paper free at the point of care and for care professionals and carers to have access to real-time digital information on a person's health and care by 2020.

It is clear that 'digital' technology has a significant role to play in sustainability and transformation. This includes delivering primary care at scale, securing seven day services, supporting new care models and transforming care in line with key clinical priorities. Local health and care systems have developed Sustainability and Transformation Plans (STPs) and they included setting out plans and ambitions on how they will harness the opportunities that digital technology offers.

In September 2015, a three-step process began to allow local health and care systems to produce Local Digital Roadmaps (LDRs) that support STP plans. The LDR set out how it will achieve the ambition of 'paper-free at the point of care' by 2020. The first step was the organisation of local commissioners, providers and social care partners into LDR footprints. The second step was for NHS providers within LDR footprints to complete a Digital Maturity Self-assessment. Both of these steps have now been completed and Sandwell & West Birmingham CCG has submitted its Local Digital Roadmap to NHS England. A signed off LDR was also a condition for accessing investment for technology enabled transformation.

To achieve this NHS England has recently updated the GP IT operating model 2016-18 Securing Excellence in GP IT Services. This document provides a description of the specific arrangements that NHS England will put in place for GP IT services to:

- Inform general practice of what to expect in terms of the provision of GP IT services;
- Provide a framework which ensures digital technology fully supports and enables new models of care, service integration, extended working and new forms of primary care organisations;
- Underpin the IT provision required to build on local accountabilities for digital primary care and for Local Digital Roadmaps (LDRs) and strategies ensuring these become embedded within local commissioning responsibilities and plans;
- Define the role of NHS England and its arm's length bodies in supporting this operating framework;
- Provide assurance that quality and value are being maintained and delivered consistently across primary care services within the NHS.

This document also sets out the following key elements that will be necessary to support the effective delivery of GP IT:

- The operating arrangements including financial procedures and associated controls;
- Governance arrangements, including roles and responsibilities;
- The leadership required to achieve excellence;
- The responsibilities that NHS England will carry out directly in relation to Primary Care Enabling Services

This document also provides a useful referencing framework detailing:

- Core and mandated GP IT services (available to all general practices)

- Enhanced primary care IT services (optional service funding dependent)
- Transformational primary care IT services (supporting new models of care)
- Primary Care IT Enabling Services (NHS England funded RA, IG, clinical safety and NHS mail support)
- General practice business support systems (GP practice funded out of scope)

6.0 GP Systems of Choice

The GPSoC-R framework governs procurement of GP clinical systems with a range of national suppliers, including a number of tiers, some setting out centrally funded components and others where items have been tested and certified with a centrally negotiated approach to procurement. The revised framework brings about a number of changes including:

- An improved alignment between primary care IT and the national strategy for Primary Care
- Improved levels of engagement between all parties in designing and continually improving the procurement framework
- Incentives for use of systems as opposed to remuneration linked to deployment targets
- Commoditisation – e.g. national procure certain line items – at least one provider for national infrastructure
- Achievement of equity (whilst ensuring that people operate within governance standards and meet minimum specifications)
- Delivering value for money
- Determining a "maturity index" to help identify areas of greatest need
- Ensuring the GMS contract obligations are fulfilled
- Local CCG level responsibility for the management of GP Primary Care IT budgets through a yet to be finally determined process of delegation from NHS England

It is widely recognised there are some significant national challenges with the current arrangements for supporting GMS IT in General Practices. These include an inequitable distribution of budgets, a separation between budget holders and service commissioners which causes confusion, a lack of clarity on responsibility for some items, capacity and capability issues at a locality level, confusion around complimentary items and legal ownership of assets and depreciation. These issues all currently affect the CCG and its general practices to a greater or lesser extent.

The GPSoC-R framework provides a tiered procurement solution. Core (mandatory) services are included in a Tier one or "Core Service Provision" offering. This is the standard core service offering specified in the Securing Excellence in GP IT Services Operating Model. SWB CCG will ensure member GP Practices have the opportunity to utilise products in GPSoC-R Lot 1, we will review what is available and not miss opportunities to achieve our strategic aims.

The future arrangements for funding have meant a re-baselining of local GP IT budgets. The effect of this combined with a suggested real terms increase on overall funding for GP IT is unknown, but given the increased expectations around Primary Care IT and particularly the delivery of Patient Online will inevitably mean the pressures around managing Primary Care IT budgets will not subside.

7.0 Vision

Our vision is simple to understand but more challenging to deliver - Healthcare without boundaries. Our mission is to work across boundaries to improve the health of the communities we serve, and the quality of health and social care services provided to those communities.

We will do this by:

- Giving patients and the wider population the opportunity to benefit from healthier lifestyles
- Bringing appropriate elements of care closer to home
- Designing services to meet the needs of the local population.

There are two key strategies which provide the drivers against which the informatics programme needs to be prioritised and assessed:

- **The CCG's Strategic Commissioning Plan 2012-2017** describes the CCG ambitions and how they will be achieved. It flags up Informatics as a key enabler.

- **The Department of Health Power of Information Strategy (2012)** sets a ten-year framework for transforming information for the NHS, public health and social care. The strategy has identified the four key areas for strategic Informatics, which have been developed to provide a set of Ambitions for our CCG Informatics Strategy

The vision of SWB CCG is "Working together with our partners and communities to improve long-term health and wellbeing of our citizens, through clinical excellence, innovation and person-centred leadership – best care, best place, best time…"

As a principle Sandwell and West Birmingham CCG wishes to increase the use of digital technology in the delivery of healthcare services to patients in order to bring about improvements in the quality, safety and the efficiency of the NHS services it commissions on behalf of the population we serve.

More specifically the CCG will strive to:

- Provide secure access to high quality up-to-date clinical information accessible at the point of care, improving interoperability of systems across the health care, legitimate relationships;
  - Implement the strategic aims of national policies to empower patients and support healthcare professionals deliver new models of care;
  - Ensure that the IT programmes are fully aligned to enable and support the clinical needs and priorities of and member practices;
  - To support our members in having 21st century IT provision and support in primary care and support users with their IT skills to utilise this provision;
  - Review new and future technologies, introducing these at the appropriate time in a well-planned and managed implementation to ensure strategic benefits are realised;
  - Commitment to achieve national targets;

8.0 Values

Sandwell and West CCG has identified a number of core values against which it has assessed priorities for investment in Information technology solutions. In no order of importance or priority they are:

- Strive to utilise information to aid commissioning and shared with all relevant parties, whilst observing the Data Protection Act and being vigilant of Information Governance
- Risk stratification to shape services appropriately, commissioning, patient care, reduce costs
- We will share IT knowledge about best practice, training, new innovations, IT skills amongst members and practices

9.0 Education and training

Sandwell and West Birmingham CCG recognises the need to ensure users of IT systems are appropriately trained in order to ensure the systems can be used safely and appropriately and that the CCG is able to extract the maximum return for its investment for the benefit of patients.

This strategy requires the introduction of new systems and processes covering a range of areas. For the introduction of new systems to be a success it is imperative that our users are appropriately skilled and trained in their usage.

As the project to develop and implement each new system commences an appropriate training needs analysis will be undertaken to ensure the necessary resources to support the training required are available. Staff will be provided with training from a variety of sources including:-

- On-line training material
- Supplier based on site training
- Off-site workshop style training
- Self-study\learning

10.0 Information Governance

Information Governance (IG) provides a framework to bring together all the legal rules, guidance and best practice that apply to the handling of information. Due to the range and complexity of the standards and legal rules, the Department of Health has developed sets of information governance requirements which enable NHS and partner organisations to measure their compliance.

In order for the CCG and the General Practices within its boundary to comply with NHS Information Governance requirements the CCG (via direct NHS England support arrangements) will provide training and support in the following areas:

- General awareness training;
- Information sharing management protocols;
- Caldicott requirements guidance;
- End to end data protection compliance;
- Freedom of Information Act compliance;
- IG audits and Toolkit completion support;
- Development of yearly IG improvement plans;
- Incident management support;
- Data Protection;

The IG Toolkit is a DH policy delivery vehicle that NHS Digital is commissioned to develop and maintain. It draws together the legal rules and central guidance set out by DH policy and presents them in a single standard as a set of information governance requirements. It is an online system which allows organisations to assess themselves or be assessed against Information Governance policies and standards. All developments proposed within this strategy will meet IG standards and be implemented to ensure maximum IG Toolkit ratings.

11.0 CCG GP Practice Agreements

The CCG will provide annual opportunities to review the GP IT service that member practices receive. This will include:

- Feedback about of the performance of the IT services;
- Exploring ways to improve and develop IT services
- Implementation plans for new services;
- IT training initiatives;
- Support for business continuity and disaster recovery arrangements;

These reviews will be conducted through a variety of methods, including electronic survey, to maximise consultation with, and responses from, the membership. The network events will act as an additional forum to discuss any IT requirements or concerns. Any IT issues requiring escalation can be escalated to the CCG IT Lead and IT Account Manager.

12.0 General Practice IT

Responsibility for the operational management of primary care IT services is delegated to the CCG from NHS England. Funding to support this has also been delegated, currently at 2012/13 levels. The approach to be taken by the CCG is that we will invest in primary care IT if we foresee a demonstrable improvement in either the quality of service provided or commissioning outcomes.

The following initiatives are proposed over the next 3 years:

Fig 1.0 The Power of Information Areas for Development

		The Power of Information Areas for Development:		
		Information about me and my care	**Connected information for integrated care**	**Better access to better information**	**Quality Driven Information Systems**

'To realise the enormous potential benefits of informatics to improve patient outcomes and experience, and reduce inequalities by ensuring that high quality information is available anywhere and when required, supporting good decision-making by clinicians, patients and managers.'

	Information about me and my care	**Connected information for integrated care**	**Better access to better information**	**Quality Driven Information Systems**
Ambitions	We will develop patient centered information systems, around the GP record. We will develop information and knowledge systems which enable and empower patients to become proactive partners in their health and care.	We will aim to avoid islands of information and instead make relevant and real time clinical patient-centered information available along the care pathway and across care boundaries to provide seamless high quality and safe care.	We will improve the quality of management information and reduce costs by deriving it from linked clinical information to provide an integrated picture of service provision, quality and patient experience. We will deliver a single point of reference for clinical and commissioning knowledge and guidance to help deliver care that is based on best practice clinical knowledge.	We will establish governance processes to ensure we can work collaboratively with the local health community and continue to support the business needs of the CCG. We will enhance the common IT communication infrastructure.
Delivery Methods	GP Systems Hosted, federated if required with data sharing. Links to acute providers Links to Community providers Links to health and social care Links to Public health Links to 3rd party commercial providers	The CCG will use national systems that are appropriate and mandated Use Summary Care Records Use Your Care Connected local enhanced record system	Use Aristotle to provide intelligence on our patients Use risk stratification tools to help 'plan' our services and commissioning models	Implement an internal IT governance process Work collaboratively with the local health economy in the midlands and beyond Establish links with our local acute, community and social services

This strategy is primarily about achieving transformational change and building on the current systems and infrastructure whist reviewing and recommending new technologies; however its success depends critically on the following elements being in place:

- Robust IT Infrastructure that delivers information where needed
- Sound governance arrangements
- High quality information management and good quality data
- Training and awareness to ensure information and systems are used effectively
- Sound project management and procurement processes
- Working in collaboration with other NHS organisations.

Section 7 "Getting the Essentials Right" looks at how these elements need to be maintained and developed in respect of:

- Primary Care Support and Development
- CCG Corporate Business
- Common IT Infrastructure
- Governance and Programme Management

Section 10 "Prioritising Transformational Change" outlines the programmes of work required to achieve the CCG's Informatics Vision and Ambitions. These projects will need to be prioritised by the CCG.

Fig 1.2 – Informatics Vision and Ambitions

Information about me and my care	Connected Information for Integrated Care	Better Access to Better Information	Quality Driven Information Systems
Online Access to Records and Services for patients	Your Care Connected Use of Summary care Records	Aristotle	Review SWB CCG infrastructure
Health Information Portals / Web sources (i.e. Route2Wellbeing)	Care co-ordination system to share Advanced Care Plans Safeguarding systems Continuing healthcare systems Primary Care Offer	Point of Care Decision Support	Virtual Desktop Infrastructure for Corporate CCG & Primary Care
GP Systems	Electronic Documents Management Electronic Prescribing GP2GP Diagnostics, electronic order communications and integrated results messaging. Two way Text messaging	Use of SUS Aristotle	Quality Outcome Framework DES/LES /CQRS Public Health Requirements

Fig 1.3 Power of information Areas

Power of Information Areas			
CCG Strategic Objectives	**Information about me and my care**	**Connected information for integrated care**	**Better access to better information**
Keeping our local population healthy.	Information for patients to support lifestyle choices.	Integration and analysis of clinical data across care boundaries to provide information about effectiveness of care pathway provision	Information for commissioners to identify health needs and inequalities.
Providing accessible care.	Information to signpost patients to most appropriate service choices.	Information about patients is available where and when required to support scheduled and unscheduled care.	Information to signpost professionals to most appropriate service choices. Information to support planning and commissioning
Providing high quality care	Patients have access to information about their health and care to enable them to be pro-active partners in care.	Integrated clinical records which support continuity of care and avoid unnecessary and inappropriate interventions.	Managers, commissioners and planners have access to good quality, relevant information which shows outcomes across care pathways
Involving patients and the public	Patients should have improved options for communicating with clinicians and commissioners	Integrated information is needed to produce outcome information for patients about the whole care pathway.	Patients and the public have access to good quality information about the performance of services as well as information about their own health and care.

13.0 Local Strategies

SWB CCG as part of their commissioning plans intends to support a number of local strategic developments which should change the landscape for clinical service delivery in the next 5 years. This will involve a number of service re-design across the local health economy and are outlined below:-

13.1   Right Care Right Here

This programme is a partnership between the NHS and the Local Authority in Birmingham and Solihull. It is committed to improving healthcare in the Sandwell and heart of Birmingham areas, ensuring that care is delivered in high quality environments closer to where people live. It is also striving to make Sandwell and the heart of Birmingham healthier places to live and work. It supports the development of a new hospital within the west Birmingham area which will eventually require the consolidation of the current City Road Hospital and the Sandwell Hospital. This programme will also look to re-provision services possibly focused on more Primary care or community led services.

To support the above programme the informatics will need to considered very carefully and in particular the development of a shared electronic patient record.

13.2 Business Intelligence to support Commissioning

SWB CCG is currently data rich but information poor. The ability for clinicians and commissioners to access accurate information is imperative for a successful CCG. We will seek to continually improve the operational effectiveness of systems already in use.

13.3 Primary Care Commissioning Framework

The scheme represents a joint pledge by practices and the CCG to work together to enhance primary care, improve quality and deliver consistent and fair services for our patients. The standards we have designed reflect areas where we know performance could be improved and the experiences of patients and clinicians. Our members told us that these initiatives should be brought together into a single, easy to administer scheme that is realistic but challenging.

13.4 New models of care

Throughout the new models of care programme, individual organisations and partnerships were invited to become vanguard sites. These Vanguards will have the opportunity to work with national partners to co-design and establish new care models so that the NHS is sustainable for the future and better able to meet the needs of patients, tackling national challenges in the process. Sandwell and West Birmingham CCG will support the implementation of the benefits and lessons learnt from the New Models of Care Programme.

13.5 Transformation plans as part of GP Five Year Forward View

Formerly known as the Prime Ministers Challenge Fund the £150m fund across two waves will help improve access to general practice and stimulate innovative ways of providing primary care services. Sandwell and West Birmingham CCG will support the implementation of the benefits and the lessons learnt from the Prime Ministers GP Access Fund.

13.6 Data Quality

SWB CCG is committed to improving data quality in all areas, in particular within Primary Care and through our commissioning agreements with local service providers.

The CCG, in partnership with the commissioning support unit, will develop a data quality programme for General Practice to ensure data quality principles are correctly applied and that General Practices within SWB CCG are compliant with appropriate legal and NHS governance requirements. GP Practices will work CARAT (Clear, Accurate, Relevant, Accessible and Timely) principles. SWB CCG will also provide a continual reminder to GP practices of the 8 principles of the data protection act:

1. Fairly and lawfully processed;
2. Processed for limited purposes;
3. Adequate, relevant and not excessive;
4. Accurate and up to date;
5. Not kept longer than necessary;
6. Processed in accordance with individual's rights;
7. Secure;
8. Not transferred to countries without adequate protection.

Whilst all General Practices use their Clinical Systems for the capturing of contemporaneous notes on patient consultations this strategy will not only reinforce the importance of this work, but further enhance it. New developments including protocols to support the consistent recording and management of disease registers, templates for data capture, receipt of electronic clinical correspondence, guidance on clinical coding and developments to enhance the current

scope of current clinical messaging arrangements will all   help improve the depth and quality of the clinical record held in General Practices.

SWB CCG will support General Practices by undertaking a baseline audit in each surgery and agree a number of actions which will form part of an overall development plan to be reviewed annually.

13.7 Medicines Management
SWB CCG recognise the importance of providing coherent advice to its member Practices and regularly review prescribing policy based on national standards and local health economy patient requirement.

13.8 Continuing Health Care
This service currently utilises a standalone database to capture patient information. The data is captured on paper and retrospectively entered onto the system, care plans and assessments are then generated from the system.

13.9 Safeguarding
SWB CCG has developed a large network to help with safeguarding issues across the west midlands and actively use a number of incumbent systems to gain intelligence on patients; cases are considered using conference facilities. There is however a strong need to integrate systems where possible and extend the use of the national Summary Care Records systems and also the newly deployed 'Your Care Connected' service. Also by using better BI tools and intelligence across different service providers will help reduce risk to patients and also provide earlier intervention if required.

14.0 GP IT Technology

GP Practices operate under a number operating models outlined below:--

- Standalone Practices, single system
- Formal/informal: collaboration, separate GP systems with joint working
- Federated model: multiple sites, single GP system, data sharing agreements, back office administration consolidated
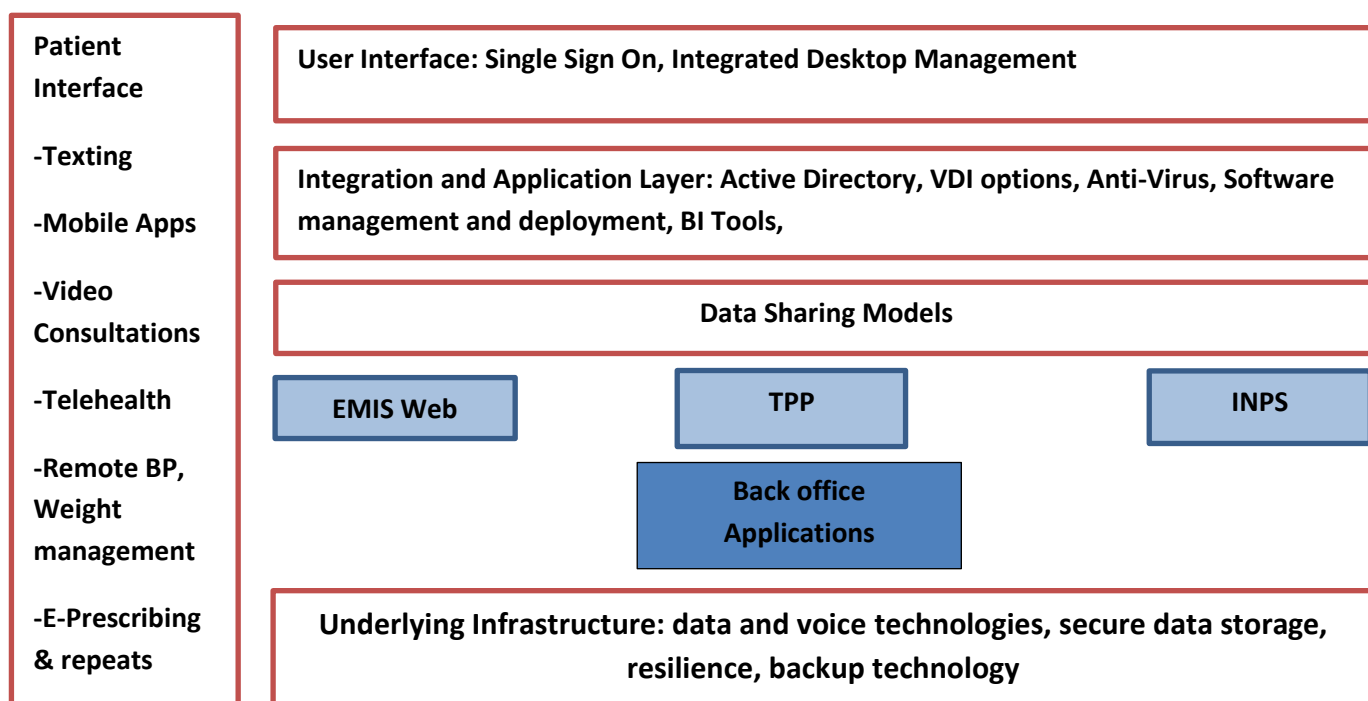
All clinical systems are hosted solutions provided by EMIS, TPP, and INPS and were procured via GP System of Choice arrangements. The local infrastructure that resides in each practices consists of a mixed economy of managed Domains or local work grouped domains.

All sites have structured cabling linking back to either Cisco POE switches or standard CISCO switches. The wide area connectivity is provided by N3/NGa provided nationally.

Some group of practices have installed local private data circuits between sites that provision VoIP and local data transfer.

SWB CCG is supporting future GP technical operating models which enable future Primary care services to improve efficiencies and improve back office workflow, this should be coupled with improved Business Intelligence capability. SWB CCG will provide support to the emerging 'Accountable Care Organisation's (ACO) which will allow more autonomy for primary care. The key enabler for making sure ACO's are successful is by having robust IT services which are flexible, secure and quick to mobilise.

Fig 1.4 Strategic Model to Support Future Models of Primary Care

Patient Interface -Texting -Mobile Apps -Video Consultations -Telehealth -Remote BP, Weight management -E-Prescribing & repeats

User Interface: Single Sign On, Integrated Desktop Management

Integration and Application Layer: Active Directory, VDI options, Anti-Virus, Software management and deployment, BI Tools,

Data Sharing Models

EMIS Web   **TPP**   **INPS**

Back office Applications

Underlying Infrastructure: data and voice technologies, secure data storage, resilience, backup technology

15.0 National & Local Requirements for Primary Care GP IT

Responsibility for the management of primary care IT services is delegated to the CCG from NHS England. Funding for GP IT support for 2015/16 and beyond is now provided to CCG's by NHS England based on population size.

There is also an additional central pot of transitional money available which CCG's can apply for if it can be demonstrated that running costs are higher than the budget available. The approach to be taken by the CCG is that we will invest in primary care IT if we foresee a demonstrable improvement in either the quality of service provided or commissioning outcomes.

15.1 Electronic Shared/Single Care Record

Numerous organisations play key roles in the delivery of care – and so effective communication between GP and provider is extremely important; as is the sharing of data and records so that we can support better and seamless delivery of care. We will therefore expect all providers to contribute to the development of a **single care record** in Sandwell & West Birmingham CCG.

This will build on the nationally mandated summary care record, and will be a locally defined patient record with the ability to combine primary care, secondary care, community care and social care information.

Better communication is at the heart of improving the care for our patients. A centralised electronic shared care record will help create a safer and more joined up NHS in Sandwell & West Birmingham CCG helping make vital information more accessible at the time of need.

Your Care Connected is the pan Birmingham, Sandwell and Solihull solution for local record sharing. Phase 1 will make a summary of a patients GP record available to NHS Service providers involved in the patient's care, subject to the patient's permission to view the record.

15.2 Electronic Document Management

EMD enables GP practices to quickly process electronic documents and provides instant access to information. This enhancement of access for General Practices to clinical information generated in local Hospitals and other providers is a high priority for the development of local system interoperability. This will improve the efficiency of GP practices and the quality of discharge letters from hospitals. Sandwell & West Birmingham CCG will continue to work with local hospitals to maximize the use of this technology to achieve maximum efficiencies across the health economy.

15.3 Patient Text Messaging Services

Automatically sending electronic appointment reminders to patient's mobile phones is proven to reduce non-attendance in General Practice by between 26% and 40%. Mobile phone users (90% of adults own a mobile phone) have constant access to their devices and SMS messages can be received nearly instantly – usually within four minutes.

Sandwell & West Birmingham CCG will continue to take advantage of nationally agreed SMS tariffs to promote the use of this SMS technology and explore the use of social media as a means to effectively communicate with patients in ever changing technological landscape. SWB CCG will procure a two way text messaging solution for the GP Practices and fund its use for up to 3 years.

15.4 GP2GP Messaging

GP2GP enables patients' electronic health records to be transferred directly and securely between GP practices. It improves patient care as GPs will usually have full and detailed medical records available to them for a new patient's first consultation. Within Sandwell & West Birmingham CCG each of the current GP Clinical Information Systems are GP2GP compliant and we will support practices to ensure the technology is used to maximise nationally recognised efficiency gains.

GP2GP version 2.2 is all about increasing the number of transfers and bringing improvements to the process. It will introduce two main changes to existing functionality. Version 1.1 of GP2GP prevented transfers where electronic health records (EHRs) exceeded 5Mb in size, or contained more than 99 attachments. Version 2.2a provides a solution to this restriction, allowing systems to send and receive larger sized messages including increased numbers of attachments.

For patients that re-register at a practice (returning patients), v2.2b will transfer their record via GP2GP and when received, and allow it to be fully integrated into the clinical system.

15.5 Electronic Prescribing Service

This enables prescriptions to be sent electronically to a dispenser of the patient's choice, making the prescribing and dispensing process safer and more convenient for patients and staff. The deployment of EPS to GP practices and pharmacies in the area will enable a better and more efficient service for patients. Sandwell & West Birmingham CCG will continue to support practices to implement this functionary where required. Changes are required to both prescriber and dispenser contracts and these negotiations are led by NHS England.

15.6 Patient Access to Electronic Records

The NHS and care services are undergoing rapid transformation of business and communication opportunities enabled by digital technology. In England, General Practice remains at the forefront of opportunity, with a widespread deployment of electronic record systems, paper-lite practices and a history of adopting and adapting new technology for direct clinical and business benefit.

The 'Power of Information' and NHS Mandate specify the policy requirements to deliver electronic booking/cancellation of appointments, repeat prescription ordering, secure electronic communication and record viewing. Multi-professional, patient and supplier input into the RCGP

led patient online road map provides an evidence based template on which to incentivise the delivery of these policy aims, focusing on benefits for patients, supporting clinicians and practices and the wider care services.

The ambition for General Practice is to enable new, efficient, convenient ways of working through technology to support patients to safely and independently manage and take more responsibility for their own health issues and choices. There are many ways of delivering this including the wider spectrum of Digital Primary Care. It is expected that the delivery of new technology will enable and encourage clinician and patients to interact in different ways that enhance the patient experience and begin to relieve the pressure on clinicians from the traditional service models.

Underpinning the ambition for 'digital options' to become universally available in the General Practice environment, is a need to sustain the momentum for introduction of technology. Evidence based implementation of innovative new pathways will drive professional and public support for convenient, safe and effective new options as replacements for face-to-face contact.

There is clear evidence that online services have potential to increase capacity and efficiency. But part of the implementation challenge is persuading practices of the value of these potential benefits versus the effort and cost required to realise them. Mindful of variation in appetite and capacity between practices, as well as competing priorities, there will be a national support and training offer, that will be developed in partnership with the profession and taking account of the of the recommendations in the RCGP Roadmap.

Sandwell & West Birmingham CCG will work with compliant system suppliers to progress practices to switch on the following functionality for all practices (where available):

- Online patient booking of GP Appointments;
- Online repeat prescriptions;
- Online access to a patient's own medical record.


15.7 Agile Working

The CCG's Remote Working policy provides the ability for CCG staff to work off site as required. To facilitate this, the ability to work effectively off-site is required. Sandwell & West Birmingham CCG will continue to make use of Cloud based technology such as Microsoft Office 365 to further strengthen a collaborative approach that is robust, cost effective, and meets the requirements of the wider health economy.

16.0 Governance & Programme Management

The CCGs within Birmingham, Solihull and Sandwell have created a single IT Programme Board where key strategic projects are discussed and agreed. The M&LCSU as the incumbent IT provider attend the meetings and provide project updates and also operational progress and/or issues. This Board discusses and agrees programmes of work that are of interest for all the CCGs presents such as the deployment of the new e-referrals system. The Board is chaired by one of the GP IT leads.

Within each CCG local IT Boards operate and predominantly discuss local programme of work and progress for locally agree work priorities.

Birmingham, Sandwell and Solihull Governance Diagram
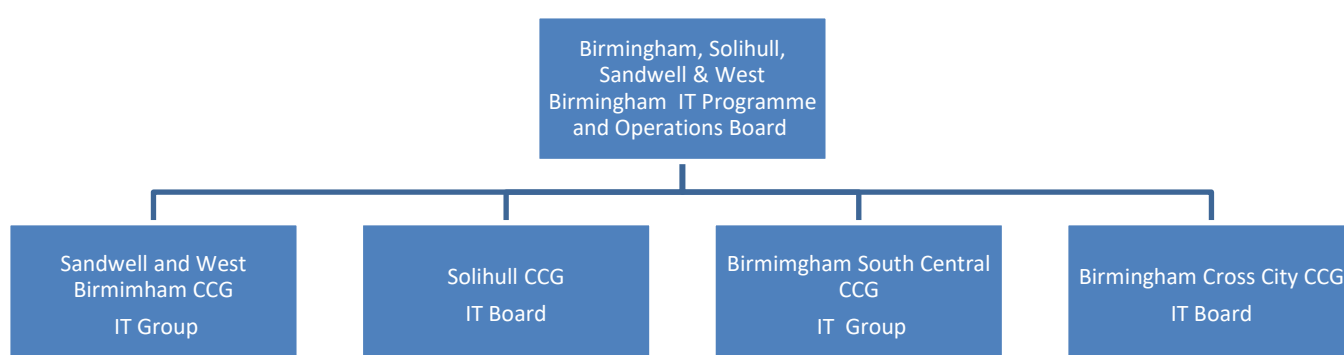
17.0 Prioritising Transformation Change

Being able to access, add to and share health records can help patients take part in decisions about their own care.

A key objective "The Power of Information"[1] is for all patients who want it to have secure online access to GP records and services by 2015. A first step towards making all this happen is to ensure patients have access to online transactional services such as appointment booking and ordering repeat prescriptions online. The CCG needs to develop a better understanding of the potential risks and benefits of patient online records access, including access to test results, letters and consultations. Local pilots across a range of GP system will help inform the CCG approach and the support required for GP practice members and patients.

Online access for patients needs to bring efficiency benefits to practices from reduction in administration and better use of clinical time.

The CCG will work with patient reference groups, providers, technology suppliers and information governance specialists to ensure that public awareness campaigns are put in place alongside technology changes to ensure patients can make informed decisions about how their information is shared and processed.

Patients also need access to knowledge and information about their condition, lifestyle choices and the healthcare and services available to them. The CCG will expand the existing range of information services and work with provider and commissioner partners to signpost patients to:

- Local information on services commissioned by CCGs;
- Information to support informed choice including quality and outcome measures; and
- National, accredited knowledge bases on health and conditions

The use of technology to consult with, support and monitor patients outside the consulting room is growing both in extent of use and the functions it can provide. The CCG will evaluate the potential for Telehealth and assistive technologies to support better patient self-care.

18.0 Connected Integration for Integrated Care

Integration of information across care pathways is a key theme of this strategy; it is an essential pre-requisite for joined-up and high quality clinical care but also underpins the delivery of meaningful information for patients and for managers.

Initiatives are being taken forward nationally to ensure clinical systems for the future will be interoperable, using framework specifications such as the Interoperability Toolkit. These nationally defined standards will allow information to move freely between services and organisations in the local health community and enable systems to connect up, rather than every organisation using the same technology or product, so that:

- **Clinicians** will have tools which enable them to reference patient data, where consent has been provided, along the whole care pathway, unconstrained by organisational boundaries.

- **Providers of healthcare services** will be able to increase their efficiency, for example from reduced duplication of work, by being able to view all the relevant health records for those patients under their care. This ability will also enable providers to improve quality of services, for example by minimising the risk of errors and improving the continuity of services provided.

- **Patients** will benefit from the quality improvements in the services provided to them as well as experiencing increased continuity of care.