

Information Technology (I.T.) Strategy Progress - Year 1

Trust Board	Item: 14
Date: 29th November 2017	Enclosure: J
Purpose of the Report: To update the Board on progress against the I.T. Strategy	
For: Information <input checked="" type="checkbox"/> Assurance <input type="checkbox"/> Discussion and input <input type="checkbox"/> Decision/approval <input type="checkbox"/>	
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Risk Implications – Link to Assurance Framework or Corporate Risk Register:	
Legal / Regulatory / Reputation Implications:	The 'Five Year Forward View' (2014) provides strong support for the Trust EPR vision and paperless by 2020 target.
Link to Relevant CQC Domain: Safe <input type="checkbox"/> Effective <input checked="" type="checkbox"/> Caring <input type="checkbox"/> Responsive <input type="checkbox"/> Well Led <input checked="" type="checkbox"/>	
Link to Relevant Corporate Objective:	
Document Previously Considered By:	Executive Management Committee
Recommendations: The Board is asked to : <ul style="list-style-type: none"> ▪ Note the progress against the strategy. ▪ Note the progress towards an Electronic Patient Record and the deployment of an Electronic Document Management solution in 2018/19. 	

Information Technology (I.T.) Strategy Review of Progress - Year 1

1. Introduction

- 1.1. This paper outlines progress against the Trust's I.T. strategy which was approved by the Board in January 2017. In 2014 NHS England published its new 'Five Year Forward View' which defines new models of care and an 'information revolution' underpinned by Electronic Patient records.

2. Kingston Hospital NHS Foundation Trust I.T. Strategy

- 2.1. This describes the Trust's vision for IM&T:

"IM&T will enable the delivery of excellent care by providing easy access to systems and data to staff and patients wherever and whenever it is needed to support the patient journey"

At the heart of the Trust's five year strategy is making developing Care Records Service (CRS) and using this to develop an Electronic Patient Record (EPR). An EPR effectively means all patient data, digitally stored, accessible immediately from anywhere on site. This means, *inter alia*, Information is more likely to be legible, accurate, safe, secure, and available when required.

- 2.2. We are striving to reduce the amount of paper that is generated across the Trust and move towards being a 'paper-light' Hospital. A major component of the Trust's EPR will be the provision of an Electronic Document Management (EDM) system. An EDM system enables large volumes of records to be stored centrally and to be made available across the Organisation. Hospitals have traditionally implemented an EDM system to reduce the amount of paper records that need to be stored in medical records libraries, and also at off-site storage facilities such as 'Iron Mountain'.
- 2.3. Underpinning the delivery of our strategy is a secure, robust I.T. infrastructure service that enables the organisation to both keep the day-to-day operations running and support future technology developments.
- 2.4. To deliver our aim of the 'right information, in the right place, at the right time' we will be working with our stakeholders in the Sustainability and Transformation Partnership (STP) in south West London (SWL) across health and social care to enable information to be accessible in all care settings.

3. Five Pillars

- 3.1. Our strategy is built on 'Five Pillars';
- i. Electronic Patient Record (EPR)
Completing the delivery of our EPR to deliver clinical benefits
 - ii. Integration
Extending capability across the local health economy.
 - iii. People
An effective resource pool delivering real change
 - iv. Technology
Harnessing technology for staff and patients

- v. Service Delivery
Robust, secure and cost-effective service delivery.

4. Progress Report

4.1. Good progress has been achieved against our plan (appendix A provides fuller details):

- i. EPR

An e-prescribing pilot has commenced in outpatients with a view to deploying across the service in 2018 and plans for Paediatrics prescribing are under development. Once these remaining areas have gone live, the Trust will have completed the circle of e-Prescribing.

The outline business case for an EDM system was given approval to proceed to procurement. An EDM system is a significant transformational project for the Trust and drives our journey towards 'paperless by 2020'. A full business case will be taken to the Board in early 2018.

- ii. Integration

The Trust secured funding from the Estates and Technology Transformation Fund (£400k) for local integration of a Cerner Health Information Exchange, Medical Interoperability Gateway and Graphnet. This functionality will be shared across SWL to enable our STP colleagues to view data across settings. Kingston Care Record functionality will be available in our Cerner Millennium application in 2018.

The Trust signed-up to the Healthy London Partnership Data Controller console to simplify information sharing agreements and we worked with the Cancer Teams to share MDT information between ourselves and the Royal Marsden.

- iii. People

Whilst recruitment to specialist roles has proved challenging, we have developed our security skills and bolstered our team focusing on Cyber threats.

To aid recruitment we have started working on 'packages' to attract new staff and development programmes to retain them.

- iv. Technology

The Trust migrated to "NHS Mail" in August and September and this provides a platform to allow secure email communication between Health and Social Care.

The draft Hospital master development plan will require staff to work in a flexible way and use technology to support this. A project group has been formed to look at flexible and remote working.

The trust provides Wi-Fi for staff and patients, but the model is a chargeable one, and work is underway to identify how we can make this 'free'.

- v. Service Delivery

A Cyber Security Strategy and Security Patching Strategy have been developed and ratified. The Patching strategy is aimed at providing clarity to suppliers on the Trust expectations of them. There has been good progress on accelerating the patching

of I.T. desktops and servers, but suppliers have been slow in responding to requests for information. NHSE/I/D need to support the Trusts in holding suppliers to account.

New Service Desk software has been procured and will go-live in January '18, which will improve the user experience.

Good progress has been made on identifying 'Legacy' systems and assets.

5. Sustainability and Transformation Partnership (STP)

5.1. The SWL Digital Board has been established to support the STP aims, and there is good engagement with all the stakeholders. The Local Transformation Boards are working with the Digital group to focus on the local CCG/Borough requirements and it is expected that this will start to ramp up over the coming months.

5.2. Estates and Technology Transformation funding has enabled the early stages of deployment of a 'tactical' solution to allow data to be shared across primary and secondary care.

6. Other challenges

6.1. Our annual business plan requires I.T. technical resources from within the Department and this creates a tension between project delivery and 'business as usual' activities. The balance between competing priorities is a challenge to maintain, and there are ongoing threats such as Cyber Security which will require additional knowledge and skills to manage. The I.T. infrastructure is growing and technology is developing at a rapid rate, and over the coming years difficult decisions will need to be taken to balance business as usual and development.

6.2. Recruitment and retention of I.T. staff continues to be a challenge. Highly skilled technical staff in areas such as networks and servers are in short supply, and we have to compete against commercial companies who offer better salaries and more attractive packages. Traditional recruitment routes such as NHSjobs have proved largely unsuccessful and we often have to use agencies to source candidates with an accompanying finders-fee. The Agenda for Change framework makes it difficult to be flexible and therefore we have to look at other ways of recruiting and retaining staff.

7. Recommendations

7.1. The Trust Board is asked to:

- Note the progress against the strategy.
- Note the progress towards an Electronic Patient Record and the deployment of an Electronic Document Management solution in 2018/19.

Appendix A – Progress against our pillars

<p>Goal: EPR Complete delivery of EPR to deliver clinical benefit</p>	<p>Goal: Integration Extend capability across the local Health Economy</p>	<p>Goal: People Effective IT resource pool delivering real change</p>	<p>Goal: Technology Harness technology for staff and patients</p>	<p>Goal: Service Delivery Robust, secure and cost-effective service delivery</p>
<p>Objectives:</p> <ol style="list-style-type: none"> 1. Complete Electronic Prescribing Outpatients pilot started, Paediatrics plan in development for delivery in 2018 2. Clinical documentation Development of forms 3. Electronic Document Management (EDM) Outline business case developed, procurement underway, full business case due in March '18 4. Continuous programme of Millennium optimisation ED, Pharmacy, discharge summaries 5. Champion User Programme Under development 	<p>Objectives:</p> <ol style="list-style-type: none"> 1. Share data across Acute Cerner sites HIE funded at £400k, IG support provided by NEL CSU 2. Acute access to GP records for continuity of care EMIS data part of SWL STP delivery 3. Align to and implement pan-London integration (HLP) Cancer MDT pilot in place, KHFT have joined the HLP data sharing console architecture 4. Support the delivery of patient access to health records Limited progress 5. Enable population health capability Presentation delivered to Board in Nov '17 	<p>Objectives:</p> <ol style="list-style-type: none"> 1. Attract, Develop and maximise retention, through inclusive, effective leadership Early phase of a development programme for staff 2. Increase Organisational awareness to deliver a focused service Plan to support 'winter pressure' key areas 3. Support Organisational development through targeted training programmes. Technical training programmes established, more work required on development of staff 	<p>Objectives:</p> <ol style="list-style-type: none"> 1. Technology for virtual and remote working Flexible working for staff project established 2. Wi-Fi for staff and patients Review of existing contract underway with an outcome by Feb '18 3. Progress against "Universal Capabilities" Maturity index survey completed – progress achieved compared to '16 survey 4. Innovative Technology to support developments and efficiencies No Progress 	<p>Objectives:</p> <ol style="list-style-type: none"> 1. Cyber Secure Cyber Security Strategy, Security Patching Strategy, two month patching cycle for IT, Alignment to National CARE Cert guidance 2. Upgrade the core network Upgrades in progress 3. Excellent user experience New Service Desk software in deployment 4. Pro-active Legacy retirement Assets identified, plan being developed 5. Collaboration opportunities for services Exploring back office services and supplier contracts