

Board of Directors
Item 3.3

Subject: Digital Excellence
Date of Meeting: 7th February 2023
Presented by: Kate Warriner, Executive CDIO

BAF Reference	Impact on BAF
BAF 11	The paper provides assurance in respect of digital transformation and operational IT delivery.

Level of assurance (please tick one)

To be used when the content of the report provides evidence of assurance

<input checked="" type="checkbox"/>	Acceptable assurance Controls are suitably designed, with evidence of them being consistently applied and effective in practice	<input type="checkbox"/>	Partial assurance Controls are still maturing – evidence shows that further action is required to improve their effectiveness	<input type="checkbox"/>	Low assurance Evidence indicates poor effectiveness of controls
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1. Executive Summary

The purpose of this report is to provide the Board of Directors with a digital update including national direction of travel and local Digital Excellence progress.

Key headlines include:

- National – What Good Looks Like - Digital Maturity Assessment
- Positive feedback from HIMSS Stage 7 – Gap Assessment
- Good progress with Digital Excellence delivery
- Good progress with digital clinical improvements

The Board of Directors is asked to receive the report and note good progress to date.

2.0 National and Regional Updates – What Good Looks Like Digital Maturity Assessment (WGGL DMA)

In August 2021, NHS England published the WGLL Framework, which sets out a clear group of expectations for local systems and organisations with regards to good digital practice across health and care. Since the publication of the framework NHS England have partnered with McKinsey to develop a mechanism that will formally assess Trusts against the success measures within the framework.

The assessment aims to help Trusts gain a clearer view of their digital capabilities against WGGL through a single repository of information. This will enable the tracking of the development of digital capabilities year-to-year.

All Trusts are expected to complete the online assessment before the end of February 2023 and must ensure the submission represents both digital, clinical and operational perspectives. Following the completion of the survey, each Trust will be allocated a 'Peer' to help initially validate each other's assessments. Following this, the Frontline Digitisation Team will hold workshops to further validate and walk through the results with each organisation. It is hoped by the end of March 2023 the results will be made available and can be viewed across several different tiers, including local, regional and national.

LHCH will be actively participating in the process and will update the Board on the outputs, results and any benchmarking analysis that is made available across the ICS and Nationally.

3.0 Digital Excellence Update

3.1 Digital Excellence / Digital Aspirant Programme Progress

The Digital Excellence programme is largely on track and progressing well. Digital Excellence Committee (DEC), which governs the Programme, continues to meet on a regular basis with good attendance from its members.

Following approval of the revised investment plan the Digital Excellence Committee approved the following Business Cases in December –

- Risk and Incident Management
- Integration Engine - Support and Maintenance

The remaining plans for 22/23 include the delivery of the following solutions, pending Business Case approval:

- Website and Intranet
- Anaesthetic, Perfusion and Critical Care
- Data and Analytics

All Business cases will be submitted and ratified through the relevant committees in line with the Trusts governance structure.

3.2 Digital Excellence Finances

Overall, the Programme remains in budget and is forecast to deliver slightly under the original plan. A further detailed benefits review is underway and aiming to be completed for the end of the financial year.

From an external funding perspective, the Digital Aspirant Programme remains on track and the Trust have successfully received and invested the scheduled £3million to date. The Trust have now received the final £3million which is the last payment due for the Programme.

3.3 Core Digital Systems – Strategic Review

Good progress has been made on the review and most of the information has now been gathered from the identified stakeholders. The team conducting the assessment have reached out across the organisation via an online survey which has been supported by follow up interviews with a select group of users.

A workshop has been scheduled for the 3rd February to review the feedback and scrutinise the first draft of the Options Appraisal before the final version is agreed and published through the relevant committees through February and March.

3.4 Back to Basics Workstream

The change in network provider has improved internet connectivity for the Community Teams and the deployment of AOVPN (Always on VPN) workstream is now in the testing phase with Pulmonary Function. Ongoing testing with the Community Health Partnerships (CHP) network team is underway to improve the speed of their building WIFI. Our community teams use CHP buildings and their WIFI is restricted to a certain speed which we have asked to be enhanced.

The main data centre Air Conditioning Unit recently had a new fan fitted. Plans to replace and maintain UPS devices are underway. Work has also been undertaken to clear the IT Workshop to enable the estates team to start work on the Digital Tech Bar. Work continues the design and visual display in conjunction with our communications and brand partner.

3.5 Clinical and Nursing Digital Developments

EPRO Digital Dictation project has now moved to the configuration & build phase and the system is set to be handed over to the Trust on 30th January. Testing and training will take place through February before a small pilot with a Medical and Surgical Specialty. Trust wide roll-out will then commence in March.

The Anaesthetic, Perfusion and Critical Care Business Case was presented and approved at the most recent Digital Excellence Committee and Capital Management Group. The Case will be presented at Operational Board in January before being submitted to Board of Directors in February.

3.6 Digital Safety Programmes

Compliance for closed loop medications (KBMA) remains at an average of 80% across all wards, including Critical Care. Blood Specimen is progressing well and there are further enhancements to be made to the Blood Transfusion element of the solution. A workshop is currently being scheduled with Liverpool Clinical Laboratories to progress.

Electronic Consent is now live across the organisation and continues to progress well. There will be a further push to improve compliance before agreeing a date to completely remove the paper across the Trust.

The joint tender process, between Alder Hey and LHCH, for a new Risk and Incident management solution has now concluded and the Business Case has been approved through the relevant committees. Work is now progressing on agreeing a rapid deployment plan.

3.7 Remote Monitoring/Virtual Wards

The remote monitoring solution pilot is progressing and currently 77 patients have been on-boarded to the scheme. Patients are continuing to complete ongoing pre op questionnaires and the data collated will be used to measure the qualitative impact of the solution. Post Op pathway has now also gone live with positive feedback. Overall patient feedback thus far has been extremely positive. Once completed the pilot and its benefits will be evaluated before the Trust decide whether to continue with the solution on a permanent basis.

3.8 Patient Interactions

Targeted Lung Health Check service have been sending digital communications to patients since June. There are some elements of the service yet to be transitioned over and work is ongoing with the supplier to complete this by February. The design phase for Radiology and Acute is now complete and testing is now underway with the associated Service Leads. Both areas are expected to go live in February.

A new patient calling and tracking system has been implemented in Outpatients in December with positive feedback from patients and staff. This enables patients to automatically check in using kiosks situated in the Dept and complimented by a number of screens which direct and call the patients when the clinician is ready to start the consultation.

Work is now underway with the Communication Team and other relevant stakeholders to develop the case for replacing the Trusts website and intranet. The project is current in the 'market evaluation' stage and will begin to assess several suppliers over the coming month. A full Business Case will be developed and presented to the relevant

3.9 Data and Analytics

The Analytics and Data Engineering teams have been continuing to work to their 12-month delivery plan. A prototype for a new Strategic Oversight Framework (SOF) has been developed in conjunction with the Executive Team. The SOF will align to Making Data Count principles, add commentary for each section from Senior Responsible Officers and split up tracking metrics into Watch and Drive. The Analytics team have also been working on helping the trust on their annual planning as well as developing the Patient Flow Dashboard.

A joint workshop was held with Research and Innovation focussing on Analytics and Data Science to help draw out ideas for use of clinical data and data science use cases. The Data Engineering team have been working on the final stage of the replacement data warehouse, which is to bring in the NICOR datasets as well as updates to CSDS and CDS and supporting the Analytics teams development requests.

The Software Development teams have been continuing work on the private patient portal as well as updates to the Urgent Referral Application and the Fire Risk Assessment App.

3.9 Information Governance and Health Records

Following the TUPE of the Information Governance and Health Records teams in August 2022, work and focus continues in several key areas:

- Data Security and Protection Toolkit which will be supported by a 2-phase MIAA audit process in February and May 2023 to provide independent assurance for the final submission in June 2023
- Strong compliance observed with Subject Access and Freedom of Information data disclosure
- Risk assessment and data protection impact assessments for clinical and digital technologies and process changes involving personal data
- Document control and policy publication supporting corporate governance
- Digitisation and quality assurance of clinical records from inpatient and outpatient activity to ensure timely availability and contemporaneous patient health records

4.0 HIMSS Stage 7 - Gap Assessment Report - 28th November 2022

The Stage 7 process consists of two stages, an informal 'Gap Assessment' which is an opportunity for the Trust to work with the assessment team to identify areas of focus on to achieve criteria. This is then followed by the official accreditation visit, which will be a much more formal and detailed process.

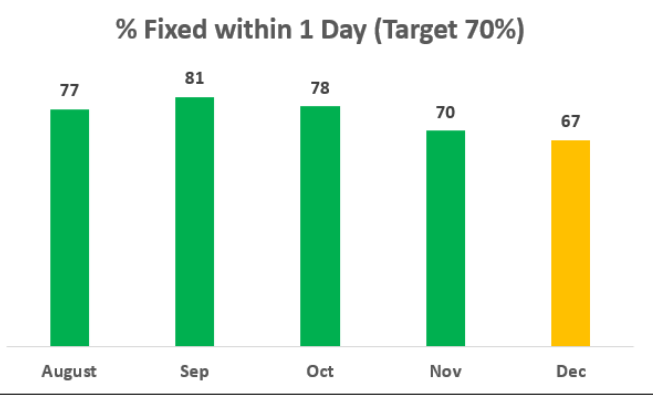
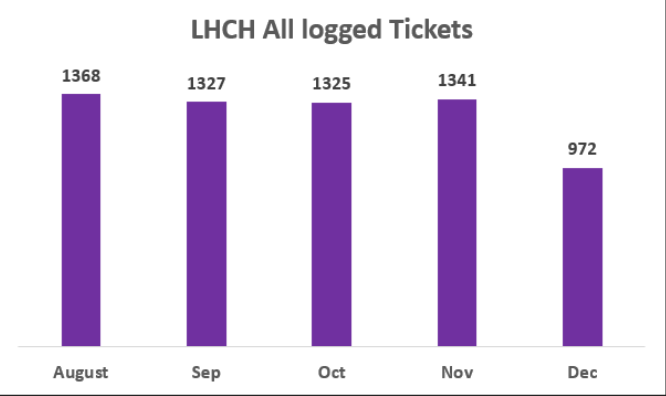
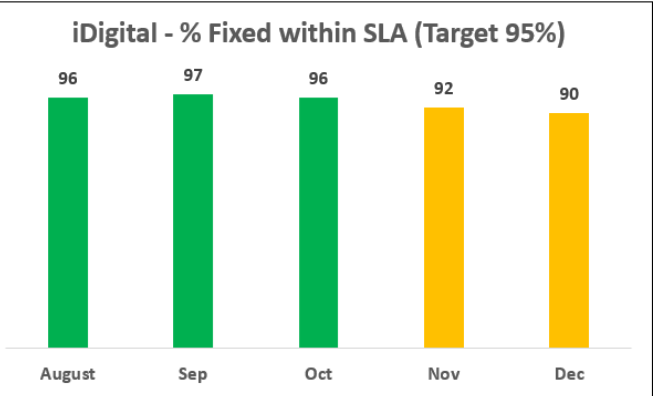
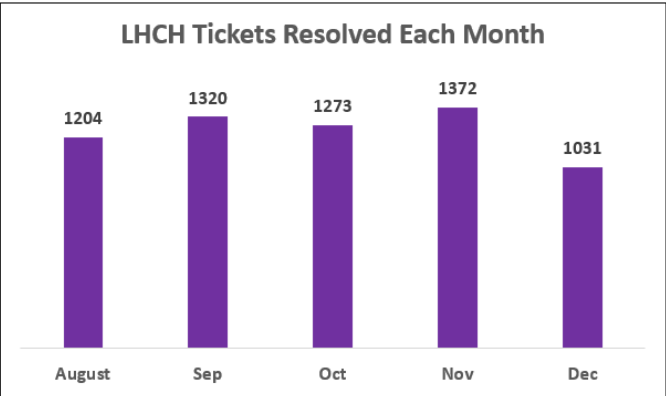
LHCH conducted a Stage 7 Gap Assessment on the 28th November, in which the assessor met with multiple teams and staff members of varying disciplines. The overall feedback from the assessment was extremely positive and the assessor stated that he felt *"the hospital is committed to using technology and information to improve patient safety, the quality of clinical care, remote access, information exchange and access to the evidence base."* He also felt *"the team presented a picture of togetherness, with everyone facing in the same direction with a consistent message delivered in a corporate style"*

A formal assessment report has now been provided which will be analysed and used to inform future progress. There were a significant number of areas that were commended for 'good practice' and a lesser number of areas that require slight improvement. Plans are now being developed for the full Stage 7 accreditation, which will be presented to the relevant committees for approval.

5.0 Operational Performance and Technical Updates

This report provides performance from December 2022. Key highlights include:

- In December we have seen the lowest number of raised tickets at LHCH since iDigital was formed with less than 972 tickets raised. This is not only attributed to this being a quieter time of the year but also to the proactive checks and hardware refresh.
- IT Procurement queue has reduced by 70%. However, this has had an impact on the SLA target as aged tickets have been resolved. We have seen several teams resolve the small number of aged tickets in December which is positive for our users as we have completed the task however does impact the SLA targets especially when incoming tickets are at our lowest levels this year.
- We have a 27% reduction of tickets raised in December compared to the average raised over the last 4 months in 2022.
- We are working with the team to ensure that the usual SLA target of 95% and over is achieved in January as the back log of aged tickets is reducing.



6.0 Summary and Recommendations

Since the previous reporting period, there have been lots of developments and progress delivered at pace. Progress against plans is excellent. Our national and external reputation and profile is high and internal feedback from colleagues is positive.

The Board of Directors is asked to receive the report and note good progress to date.