

Board of Directors (In Public)

Item 3.1

Subject: Digital Excellence
Date of Meeting: 26th April 2022
Prepared by: Kate Warriner, Executive CDIO, Ian Gilbertson – Deputy CDIO
Presented by: Kate Warriner, Executive CDIO
Purpose of Report: For Note

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) <i>To be used when the content of the report provides evidence of assurance</i>					
<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

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:

- Good progress with Digital Excellence delivery
- Good progress with digital clinical improvements
- Significant progress with digital safety improvements – HIMSS Stage 6 Accreditation
- Developments within iDigital service model
- Changes to National Digital Teams and Services

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

2. National & Regional Digital Update

Nationally, there have been some significant developments with structures and ways of working. This includes the retirement of NHSX and the lift and shift of NHSX and NHS Digital colleagues into NHS England & Improvement. The move includes a much closer link to transformation activities and includes the establishment of the 'Office of the CIO'.

Key priorities for the new 'transformation unit' include:

- Expanding the functions and uptake of the NHS App
- Increase diagnostics capacity
- Data architecture and infrastructure for population health, planning and research
- Population health and personalised prevention
- Exploiting the NHS's purchasing power
- NHS as a platform for rapid cycle research and innovation
- Redesign pathways using digital tools

2.4 Regional/ICS Developments

Regionally, the Digital Strategy for Cheshire and Merseyside ICS is about to be refreshed, following the appointment of a new Chief Digital and Information Officer late last year. The Trust are actively engaged with the regional teams and will ensure their contributions are captured and portrayed in the refreshed strategy.

3. Digital Excellence Update

3.1 Digital Excellence / Digital Aspirant Programme Progress

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

The Digital Aspirant element of the programme also remains on track and the Trust are on target to receive the final round of funding in September 22, which amounts to circa £3 million.

All planned Business Cases were completed as scheduled in 21/22:

- Closed Loop Medication – Nov 20
- Additional Resource Business Case – March 21
- Digital Communications – August 21
- ISLA – September 21
- Robotic Process Automation – September 21
- Closed Loop Bloods – September 21
- EDMS Upgrade – October – 21
- E-Consent – January -22
- Digital Dictation – March – 22

Business cases supported to date are entering deployment phases with delivery managed through the DEC with external programme support from NHS Digital.

In terms of key achievements to date, the Trust was successfully accredited as a HIMSS Stage 6 site in December 2021 and were commended by the Assessment Team for good governance,

excellent use of clinical decision support, lack of reliance on paper and approach to IT Security. The Trust became one of only 7 Trusts in the UK to reach the highest levels of the HIMSS Framework (Levels 6 & 7), consolidating LHCH's status as a digital leader in healthcare.

The Trust are now preparing for its HIMSS Stage 7 assessment which is expected to be scheduled towards the end of 2022. It is important to note, that as of March 2022, HIMSS have expanded their assessment criteria, which will need to be factored into the current plan.

Looking further ahead, a multi-disciplinary team of key Clinical, Operational and Financial stakeholders will conduct a review of the planned deliverables for 22/23 and any revisions will be submitted to the relevant committees for approval in May 22. This will ensure the plans remain current and meet the strategic direction of the Trust and evolving National frameworks.

3.2 Back to Basics Workstream

The 'back to basics' workstream has delivered some key solutions in the last couple of months and aims to improve the experience of our staff by ensuring they have the best, up to date digital technology to complete their jobs efficiently.

Since January 2021, over 500 desktop and laptop devices have been replaced. From the 1st April, the PC refresh programme enters its third phase which is scheduled to deploy the next batch of 360 devices across the Trust by Summer 2022. Alongside this, the team have been refreshing the mobile pharmacy carts and have replaced 18 out of the planned 24 and is on track to be completed by May 2022.

3.3 Clinical and Nursing Digital Developments

Further to the Service Improvement work above there has been good progress within the transformation element of the Digital Excellence Programme. Imprivata - Single Sign On has now gone live across all Inpatients and Outpatients in February 2022. This is a system where users will be able to login into a workstation with a tap of their ID badge. Staff will no longer have a need to remember multiple passwords as the single sign on will allow access to all applications. The feedback from the clinical and nursing teams has been overwhelmingly positive having made huge improvements on their user experience and saved them valuable time when moving from machine to machine.

Following a procurement exercise the Trust have selected a new solution to facilitate its Digital Dictation processes. The new system will provide a more modern and efficient tool, culminating in improved workflows and reduce the time taken to produce a letter.

Critical Care, having conducted a similar procurement process, are close to selecting a digital solution that will transition the service from paper documentation to a full electronic record. The solution will integrate with the medical devices in the department, automating the flow of data, improving data quality, and releasing time to care

3.4 Digital Safety Programmes

From a Digital Safety perspective, great strides have been made in relation to closed loop technology for bloods and medication. Both solutions deliver supporting technology to help nurses positively identify patient and product before administration or collection.

Closed loop medication has now been rolled out to all inpatient wards, with positive feedback reported by the staff using the system. Plans are now being developed to deploy the solution in Critical Care Department. Compliance data is being collated and benchmarked against the levels of medication incidents to ascertain if there is any positive correlation.

In terms of Closed Loop technology for Blood Products, the pilot for Specimen Collection is due to commence in late April with the Transfusion piece to follow in May, again aiming to reduce administration and collection errors.

3.5 Patient Interactions

For the past two years, the Trust have been utilising Attend Anywhere, video calling software to provide virtual Outpatient care. The system was provided free of charge to all NHS Trusts to support keeping patients safe during COVID-19. Trusts were informed that as of April 22 they would be required to provide their own funding for the software. In March 2022, a Business Case was approved by the Trust Executive Committee to renew the contract with the current supplier for 2 years.

Work is going to digitise the Trusts communication with patients. The first phase is complete with all of the Trusts SMS activity transitioning to the new platform. As part of Phase 2 which is already underway, digital letters will now be sent to patients for appointment notifications, reminders and clinic summaries improving their experience and reducing the Trust's carbon footprint. To ensure digital inclusivity, the solution recognises those patients who don't open the digital letter and will follow up with a paper copy. The solution is expected to be fully deployed by May 2022

3.6 Digital Innovations

Some of the highlights from the Digital Innovation space include the Digital Human Resources platform, which is in its final stages and will complete by April 2022. This has modernised the various HR processes, improved workflows for staff across the hospital and reduced the time taken in each individual area.

Also the team have delivered a results interface for Blood Gases, which creates a seamless and automatic transfer of patient blood gas results from the analysers directly into the Electronic Patient Record, and is populated into a flowsheet for clinical staff to see and track. This will provide time saving efficiencies

4.0 Digital Partnership – iDigital Service Model Update

In light of some recent changes, a review of the iDigital service model was undertaken. Whilst the collaboration has shown some very early benefits, the model has been reviewed and refreshed.

The new model operates within 2 core functions:

- **Data & Change** function will have significant transformation priorities for 2022 for both trusts. These priorities include taking data and analytics to the next level both operationally and strategically, HIMSS 7 at LHCH.
- **Delivery and Assurance** has a major role in ensuring operational excellence in core delivery across a range of areas critical to the day to day running of services in both trusts. Delivery and assurance should be highly visible working with front line teams supporting clinical care delivery to be effective with a great digital experience for staff.

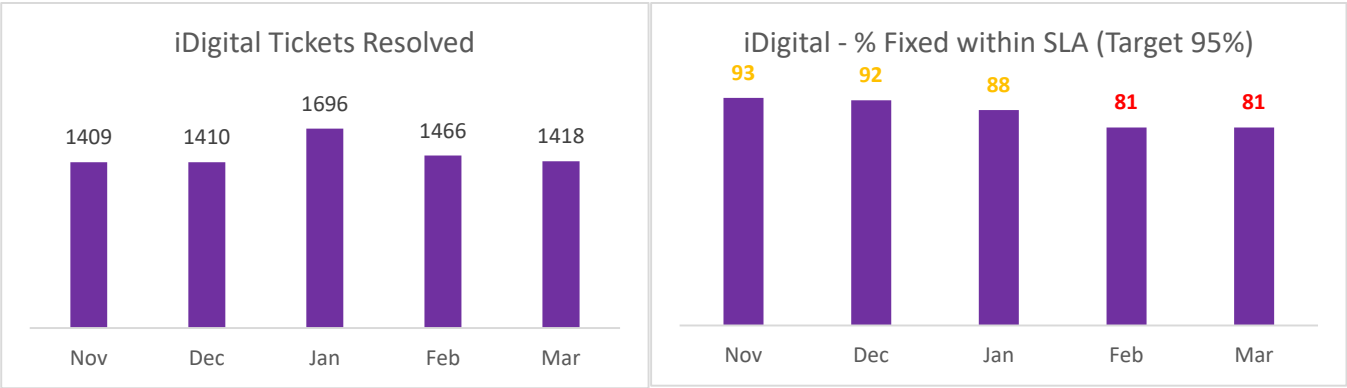
The model was approved by the Trusts Executive, Digital Excellence Committees and iDigital Partnership Group. The recent meeting of the partnership group noted the huge amount of progress that has been made in 21/22 and the benefits the model has delivered for both organisations.

5.0 Operational Performance

Performance against key indicators achieved 96% in October however, long term sickness within the desktop team across November and December plus, short-term COVID sickness in January had an impact on incident resolution. Staff returning from long term sickness in January enabled the team to focus on reducing the volume of tickets and this contributed to the highest volume of resolved tickets in January compared to the previous 12 months. Continuing reduction of tickets over the last 3 months will enable LHCH to achieve the 95% target in April.

iDigital teams at LHCH are now meeting weekly with the IM Service Desk Management to work on improvement to first time fix rates and promotion of self service and live chat. Promotional materials have been shared and a trust wide comms is being developed. In tandem the first IT drop in clinic, hosted by the onsite technical teams, is being planned and will take place in early May.

A reduction in incidents over the next quarter is targeted by increasing proactive ward rounds and regular drop in clinics. Additionally the service will be introducing problem management to look at incident trends and targeting the Top 10 recurring incidents areas.



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.