

Board of Directors

Item 3.3

Subject: Digital Excellence
Date of Meeting: 30th July 2024
Prepared by: Kate Warriner, Executive CDIO; Ian Gilbertson – Deputy CDIO
Presented by : Sarah Barr – Executive CDIO

BAF Reference	Impact on BAF
BAF 9	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:

- Progress with the National Digital Maturity Assessment for 2024
- Good progress with Digital Excellence delivery
- Good progress with clinical and nursing developments
- Good Operational Performance

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

2.0 National and Regional Updates

2.1 Digital Maturity Assessment 2024

The NHS England Digital Maturity Assessment (DMA) for 2024 is underway. The assessment aims to help Trusts gain a clearer view of their digital capabilities a single repository of information and was launched in 2023. There have been amendments made to the assessment following feedback from the 2023 DMA. LHCH have submitted their initial results, gone through a peer assessment, validated scores and completed a final submission in line with the national deadlines. The peer assessment during the DMA process took place with the Walton Centre. The final results, which will allow comparisons with peers regionally and nationally is expected to be available towards the end of July 2024.

2.2 Liverpool digital collaboration

LHCH continue to work with the ICB around joined up digital programme opportunities across Liverpool. A weekly meeting has been established which is attended regularly by the LHCH CDIO and any progress will be reported back to the Trust through the relevant committees.

2.3 Exemplar Award

LHCH are due to receive an 'Exemplar Award' from Alterra who supply the Trusts Electronic Patient Record (EPR). The award is given to customers who can demonstrate a high level of digital maturity and adoption via their EPR. The award will be presented to the team in July.

3.0 Digital Excellence Update

3.1 Digital Excellence / Digital Aspirant Programme Progress

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

3.2 Digital Excellence Finances

Overall, the Programme remains in budget as of 23/24 and is forecast to deliver slightly under the original plan by 25/26. The investment profile for 24/25 was reviewed and approved by Digital Excellence Committee.

3.3 Back to Basics Workstream

Preparatory work for the transition to a cloud hosted, Cheshire and Merseyside PACs solution is well underway. Initial network changes have been completed in May with further work to follow, in line for a indicative Go-Live in August.

Several new laptops and mobile devices have been deployed to support Community Services with more resilient access to Trust systems. This has been complimented by engineers visiting community sites with the clinical teams to get a better understanding for the issues and the impact they have. The team have also worked with the Surgical Division to refresh the Digital kit within Theatres throughout May. The team have now successfully onboarded all staff, onto Multi Factor Authentication. This improves our Cyber resilience, reduces the risk of a cyber-attack and ensures we comply with standards set out by NHS England.

3.4 Clinical and Nursing Digital Developments

Phase 1 of the implementation of the new Anaesthetic & Perfusion system continues to progress. The technical build is completed, and the Trust are in the process of configuring and testing the end-to-end

solution. The testing phase has been extended to provide additional assurances before initiating staff training ahead of the go live in September.

Work is ongoing to upgrade the Trusts document and referral management system. The upgrade will ensure greater resilience in the software and provide several other benefits. The upgrade is scheduled for August 2024.

176 change requests were delivered by the Digital Systems Team over the last period. Change requests delivered include a new facility board for Inpatient areas which was implemented to improve the presentation of snapshot data for clinical staff. A documentation optimisation review for Cardiac Diagnostics and a Pharmacy Flowsheet and Facility Board were also implemented.

Finally, the team continue to support the development work around the letters solution, Epro, to enhance the system for users.

3.5 Digital Safety Programmes

Work has commenced to identify a new Theatre scheduling solution for the Trust. All requirements have been gathered and a gap analysis has been completed to highlight the key challenges that the service facing with the existing solution. Demonstrations are being scheduled for July and the outputs of these will inform an options appraisal and preferred solution for the Trust.

Electronic Consent is now deployed in all specialties. There is some further work to be done around optimising the mobile devices, to enhance the experience and usability for clinical teams, especially in fast paced areas, such as Cath Lab.

3.6 Data and Analytics

There has been a significant number of dashboards delivered since the last report, which include an Diagnostics, Clinical Coding and Clinical Quality. Alongside this the team have supported modifications to the Strategic Oversight Framework and delivered updates to the Weekly Executive Dashboard.

There has been good progress with Cancer Reporting, with huge improvements made to the Dashboards with further data incorporated from LUFT. The new reporting suite is on track to be presented to Cancer Board in July.

From a demand management perspective, the team have been iteratively developing the Referrals Dashboard which includes a 'heat map' portraying key areas driving high levels of demand within the Trust. The presentation of the dashboard has been well received by the Executive Team and other senior colleagues. This has also identified further enhancements, which are currently underway.

Finally, the development is progressing to be ready for the EMIS Data Translation change and the reporting impact of contractual Key Performance Indicators. Several KPI's have been successfully rebuilt with work to continue over coming weeks. As of yet EMIS have not provided a timeframe for delivery and advanced notice which will impact on planning.

3.7 Information Governance and Health Records

Key highlights for the service are as follows:

- Strong performance for 23/24 with compliance for legal and statutory data disclosures:
 - Data protection subject access compliance – 100%
 - Continuance of Healthcare compliance – 100%
 - Freedom of Information Act compliance – 98.8%
- The 2023/24 Data Security and Protection Toolkit (DSPT) was supported with a 'substantial' assurance opinion from MIAA for the veracity of the Trust's self-assessment and robustness of evidence, with a

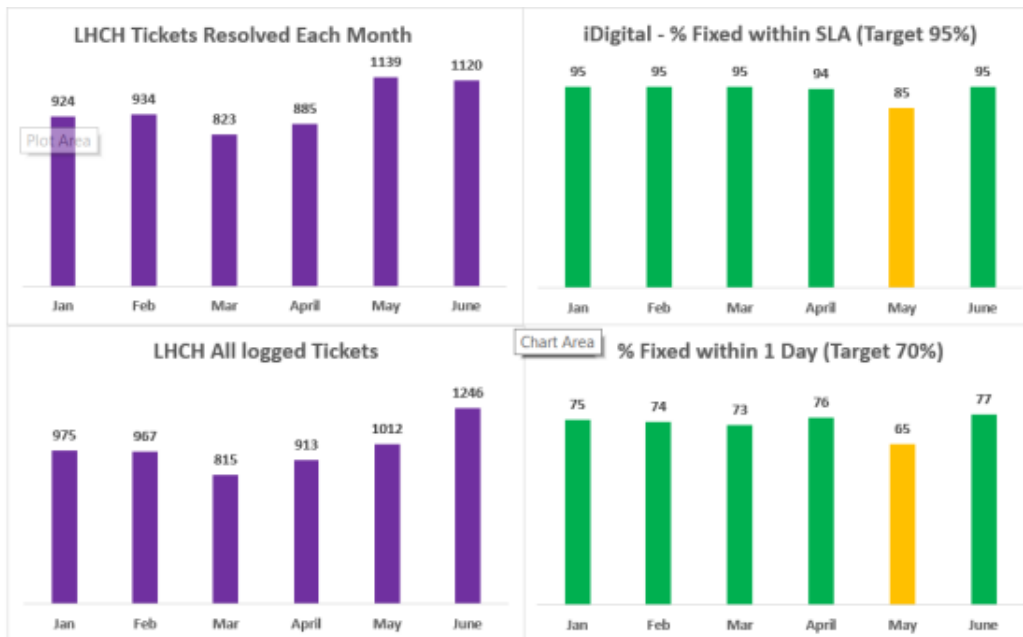
risk classification of 'moderate', against the National Data Guardian Standards, with no high or critical risks identified.

- Zero serious incidents or data protection breaches have been required to be self-reported to the Information Commissioners Office year to date.

4.0 Operational Performance and Technical Updates

This report provides performance from June 2024. Key highlights include:

- 95% of tickets resolved within SLA.
- 77% of tickets were resolved within 1 day.
- Service Desk resolved 58% of tickets of potential calls that they can resolve.
- Call and SLA figures back in line with previous months following a unprecedented period of staff illness and leave.



5.0 Summary and Recommendations

Since the previous reporting period, there have been lots of developments and progress delivered at pace. Progress against plans is excellent. The Board of Directors is asked to receive the report and note progress to date.