NHS

A vision and programme for digital transformation in health and care

The **Local Digital Roadmap** for Buckinghamshire, Oxfordshire & Berkshire West

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Preface

The last decade has seen a genuine digital revolution in the UK. Information technology is pervasive, enabling, and essential to everything that we do, from shopping to healthcare. This has changed the expectations of both service users and service givers as to what digital technology can do to improve how we deliver care, and this is for the better. However, bringing the advantages of digital transformation to where it matters – where clinician meets patient, where patient meets illness, where planning meets reality – has many challenges.

Health and care across Buckinghamshire, Oxfordshire and Berkshire West is supported by a wide range of organisations, including three acute trusts, two community and mental health trusts, 5 local authorities, a primary care sector of 181 practices, an ambulance service, and a range of independent and voluntary sector providers.

Each of them generally uses a different patient/client record system, none of which can easily communicate with each other. Tracking patients through the system across the organisations for population health and planning how best to put services where, is similarly disconnected. This is entirely normal for the UK health and social care system and indeed for most, if not all, health and social care systems worldwide. This local digital roadmap is about working out how to change that, at least in our area. And if local solutions work well, they can become part of national solutions, or even international solutions.

In the future, patients will be able to read their own health record in the way they choose, enter or upload their own information as they see fit, and decide who else is able to access it. Clinicians and other caregivers – including doctors, nurses, carers, and social services workers – will be able to access all relevant patient information when they need to, when they see the patient, with the patient's consent.

Those planning how to better deliver services in future will be able to access real-time service data across the entire system so that they can analyse whether a current service actually does what it is supposed to, design a better service if it doesn't, and see where the system can work better together.

These are the changes that we want, and the road that we wish to travel, together.

Dr Paul Park, CCIO Oxfordshire CCG (Chief Clinical Information Officer)

1.

Overview and summary

The **Local Digital Roadmap** for
Buckinghamshire, Oxfordshire & Berkshire West

Overview

This Local Digital Roadmap for Buckinghamshire, Oxfordshire and Berkshire West presents a vision for digital transformation in health and care across the sustainability and transformation plan (STP). Based on levels of programme activity, this roadmap draws together plans, first submitted in 2016, from the three areas.

This Local Digital Roadmap (LDR) reflects strong foundations across Buckinghamshire, Oxfordshire and Berkshire West (BOB) to create a joint plan for delivery of digital capabilities.

- We will jointly develop and deliver digital programmes where this adds value and can achieve greater benefits for patients and value for money than a local focus.

- We will collaborate across the STP to share best practice in digital health, with delivery programmes in each of the three area.

- Each organisation will make the necessary contribution to strengthen digital maturity across the STP.

We will work together where it makes sense to do so, but also allow localities and individual organisations to pursue plans and developments that are localised to their specific needs.

Digital transformation across BOB will progress under three core themes.

- Delivering the vital technology capabilities required to enable STP service change goals

- Digital maturity in all care settings to achieve paperless working at the point of care.

- High levels of achievement towards the national '10 universal capabilities'.

It is not always practical to reference all terms of organisation, care worker, or service user/patient/citizen in a document such as this, particularly when referencing other published documents.

Readers should note that this roadmap is inclusive of care across all sectors: health, social or other care.

A summary of the BOB Sustainability and Transformation plan can be found online at http://bit.ly/BOBSTP

Digital programme priorities

Based on the core elements of the existing Local Digital Roadmaps for Buckinghamshire, Oxfordshire and Berkshire West, five priorities have been identified for the focus of the STP Digital Roadmap, shaped further through discussion at the STP CIOs Forum.

- **Records sharing / Transfers of Care information**
- **Patient / citizen facing technology**
- **Whole system intelligence & real-time clinical intelligence**
- **Infrastructure & network connectivity**
- **Information Governance (IG)**

In addition, a substantial range of technology development is taking place at provider organisations across the STP footprint.

Each organisation is progressing on elements of digital maturity which complement the five priority areas.

These developments are highlighted in section 5. The capabilities in this area include Medicines Optimisation, Resource & Asset management, Orders & Results management.
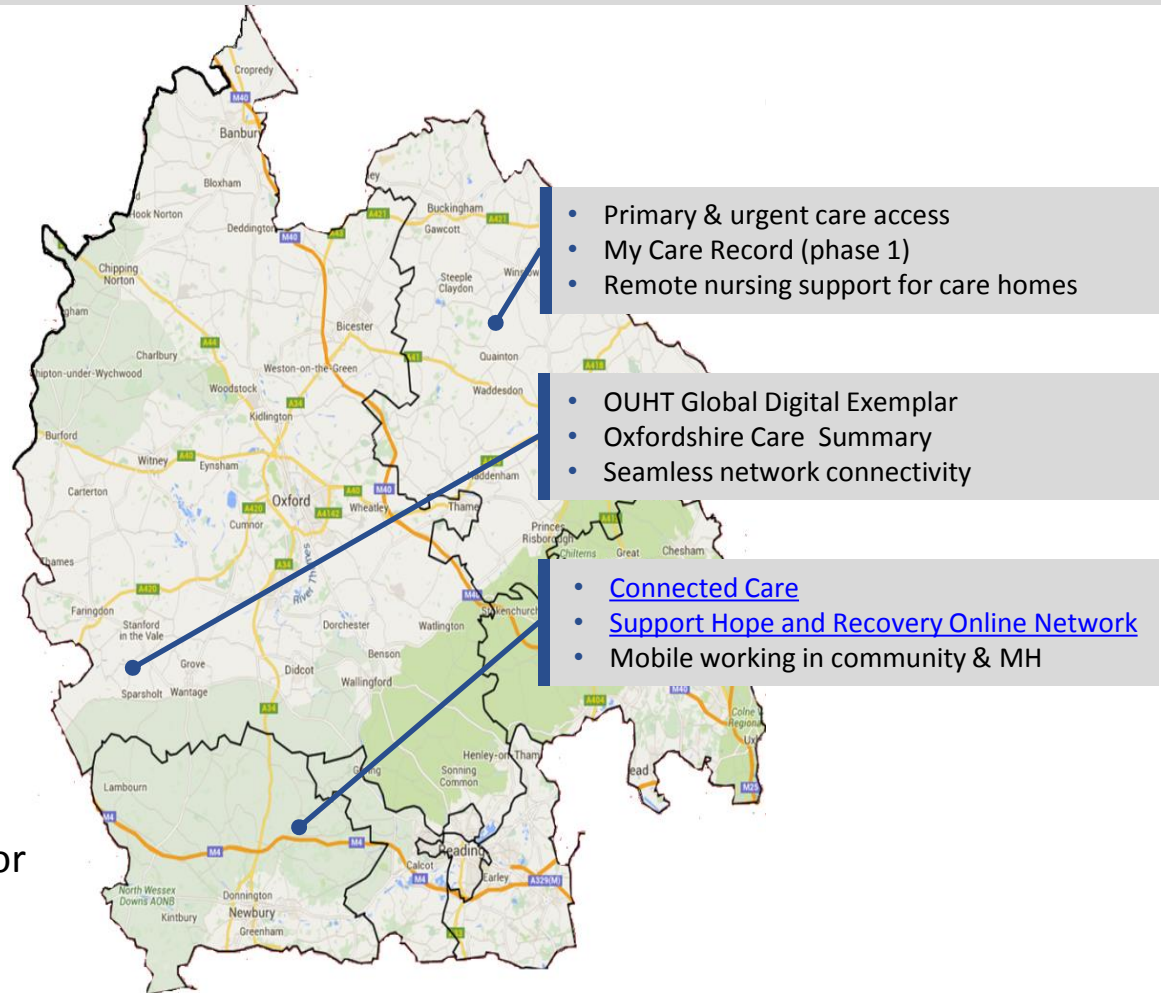
Digital health: Strong foundations

The area has strong foundations in digital health,
with all areas demonstrating leading examples of technology development.

Buckinghamshire, Oxfordshire and Berkshire West

- 1.8 million population

- £2.5 billion budget

- 7 clinical commissioning groups

- 6 NHS trusts

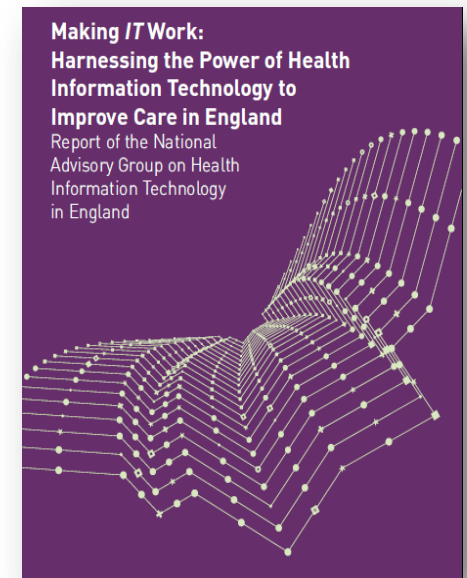- 14 local authorities (incl. Districts)

BHFT and OHFT have both been identified in a group of only fourteen MH Trusts shortlisted nationally to make submission for Mental Health Global Digital Exemplar status.

- Primary & urgent care access
- My Care Record (phase 1)
- Remote nursing support for care homes

- OUHT Global Digital Exemplar
- Oxfordshire Care Summary
- Seamless network connectivity

- Connected Care
- Support Hope and Recovery Online Network
- Mobile working in community & MH

Driving principles

This roadmap takes on board the principles and recommendations of the 'Wachter Report' - Making IT work: harnessing the power of health information technology to improve care in England

- Digitise for the correct reasons.

- It is better to get digitisation right than to do it quickly.

- When it comes to centralisation, the NHS should learn (but not over-learn) the lessons of the NHS National Programme for IT, getting right balance between local, regional and national solutions.

- Interoperability should be built in from the start.

- While privacy is very important, so too is data sharing.

- Health IT systems must embrace user-centred design.

- Going live with a health IT system is the beginning, not the end.

- A successful digital strategy must be multifaceted, and requires workforce development.

- Health IT entails both technical and adaptive change.

Making *IT* Work:
Harnessing the Power of Health
Information Technology to
Improve Care in England
Report of the National
Advisory Group on Health
Information Technology
in England

Involving citizens, clinicians, and practitioners

Key to any transformation programme is the engagement of those people who are affected by and will benefit from new technology. Citizens, clinicians and practitioners have all been involved in the creation of the BOB STP local digital roadmap and its components.
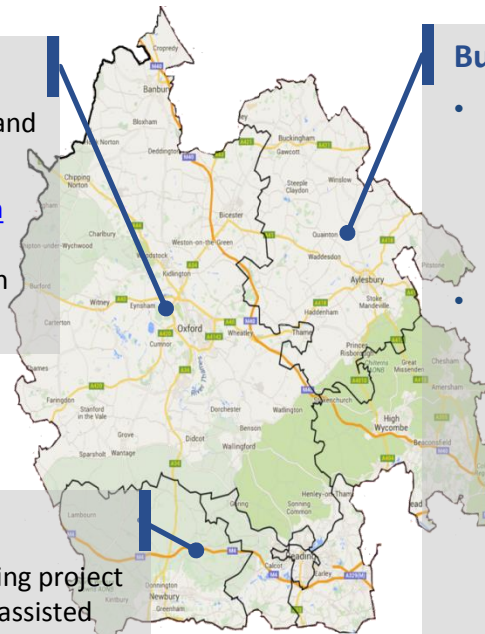
Oxfordshire

- Oxfordshire digital projects will have a clinical lead and clinical user involvement
- Oxfordshire Talking Health and Patient Participation Groups have regular opportunities to have their say (similar online engagement tools are in also place in Buckinghamshire and Berkshire West).

Buckinghamshire

- The Buckinghamshire Supported self-care pilot with Digital Life Sciences is co-produced with a number of local patients.
- Buckinghamshire has strong clinical involvement in digital transformation projects :

    - eRS, Patient Online, EMIS Clinical services, My Care Record, Access and Supported self-care with Digital Life Sciences.
    - The Diabetes programme also has formal patient involvement.

Berkshire West

- The Connected Care (Share Your Care) records sharing project has strong patient representation. A patient group assisted with selection of the patient portal. The group continues to meet and has assisted with the development of IG principles and public communications to support the project.
- Over 1,000 patients answered questions about their digital lifestyles and new models of care during engagement activities in support of a new primary care strategy and the re-procurement of GP contracts.

The benefits of digital health

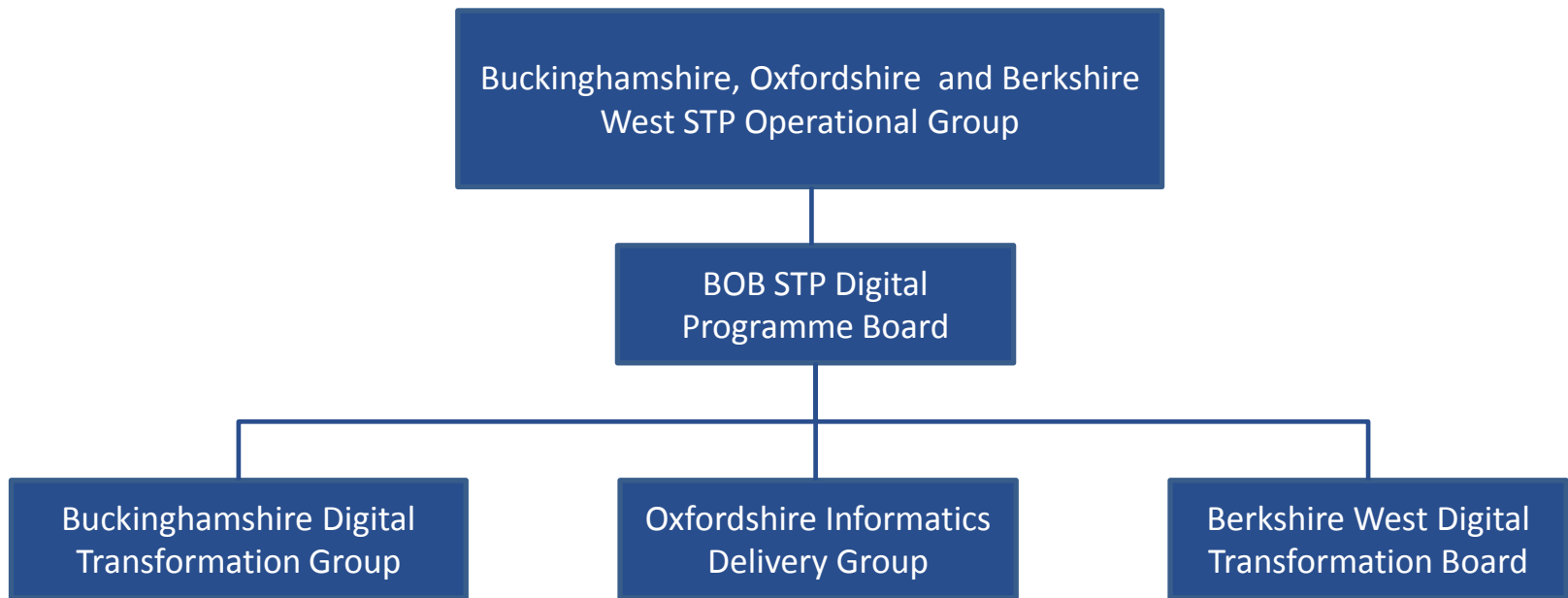|	
Improved treatment	better use of technology to monitor patients, coupled with freeing up nurses and doctors to talk with their patients.
Efficiencies and savings	eliminating waste will allow reassignment of resources to where they will deliver the best value in terms of public health.
Personalised medicine	tailored treatments based on molecular diagnosis, individual's genomic information / life-style parameters & the patient's values.
Population health	very large studies with the resolution and sensitivity to learn what makes a difference and reliably inform policy.
Healthcare research	bigger data sets and better defined 'deeper' phenotypes deliver superior insights and, ultimately, more personalised treatments.
Society engagement	personal health records and centralised dynamic consent changes perception of the NHS towards a shared social enterprise.
Improved well-being	improved engagement with patients, medical staff, carers and family, brokered by a better connected health system.
Improved outcomes	mobile technology to improve recording of outcomes and tightening the feedback of this data to improved care.

The BOB roadmap reflects the findings and analysis of the Oxford AHSN report Digital Health in Oxford and the wider Thames Valley region, identifying 8 key opportunities for digital health.

Governance

This chart represents the core elements of governance for the STP-wide digital programme. Crucial governance steps exist at each local and organisational level.

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┌─────────────────────────────────────────┐
│ Buckinghamshire, Oxfordshire  and        │
│ Berkshire West STP Operational Group     │
└─────────────────────────────────────────┘
                    │
        ┌───────────────────────────┐
        │ BOB STP Digital           │
        │ Programme Board           │
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Buckinghamshire Digital Transformation Group	Oxfordshire Informatics Delivery Group	Berkshire West Digital Transformation Board

Oxford University Hospitals NHSFT	Oxford Health NHSFT	Buckinghamshire Healthcare NHS Trust	Berkshire Healthcare NHSFT	Royal Berkshire Hospital NHSFT	South Central Ambulance Service NHSFT	Oxford Academic Health Sciences Network	Care UK (OOH Bucks)
Buckinghamshire County Council	Oxfordshire County Council	Wokingham Borough Council	West Berkshire Council	Reading Borough Council	Buckinghamshire Federated CCGs 52 GP Practices	Oxfordshire CCG 72 GP Practices	Berkshire West Federated CCGs 51 GP practices

2.

Vision and Outcomes

The **Local Digital Roadmap** for Buckinghamshire, Oxfordshire & Berkshire West

Digital programme priorities

The five prioritised digital work-streams reflect those areas that benefit most from being collaborative. The initial task of each work-stream is to fully develop the draft vision, objectives and scope, outlined below and in the following pages.

Records Sharing for cross-organisational care	Enable health and care professionals to have immediate and appropriate access to all relevant information about a person's care, treatment, diagnostics and previous history. This includes care plans and all necessary transfers of care information.
Citizen facing technology	Support and enable people to be actively involved in managing and making decisions about their care. This provides a strong basis for well-being and prevention.
Whole system intelligence	Health and care professionals across communities, geographic and clinical, have the information and insights they require to run an efficient and effective service. This includes care delivery, planning, targeting, monitoring, auditing, and research.
Infrastructure & network connectivity	A fast, reliable infrastructure, with shared connectivity, at a lower cost. Common ways of working support access to 'home' systems across the footprint.
Information Governance	A common set of processes to appropriately and effectively use information, in line with the expectations of patients and citizens. Information Governance becomes an enabler, not a barrier, to care, planning, targeting and research.

Record sharing

Vision	• Enable health and care professionals to have immediate and appropriate access to all relevant information about a person's care, treatment, diagnostics and previous history. This includes care plans and all necessary transfers of care information.
Key objectives	• Supports multi-disciplinary collaboration across care settings and sites • Users can access all necessary records from their 'home' system, particularly patient medications, allergies and adverse reactions. • Multiagency care plans can be created. • Proactive care plans such as End of Life, Special Patient Notes are available to South Central Ambulance Service, 111, out of hours services, ED's and social services. • All referrals, including 2 week wait, are sent electronically. • No user has to re-enter the same patient/service user data twice. • Users do not have to 'look for important patient data', it should be presented to them in a suitable form such as a flag to indicate critical data is available.
Key requirements	**Each digital footprint have their own solutions based on local strategies and investments. The following outcomes are required to deliver the vision across BOB:** • Provenance and timeliness of people's data is clear to users, data is available in real time if required. • A defined level of system functional maturity that each organisation and footprint must attain in order to 'plug their records in'. • Agreed pathways and compatible clinical processes. • A standardised role based access structure. • Suppliers that will work together. • Agreed consent models and Information Governance.

Citizen facing technology

Vision	• Support and enable people to be actively involved in managing and making decisions about their care. This provides a strong basis for well-being and prevention.
Key objectives	• **Individuals have electronic access to view their multi-organisation health record** supporting them to: manage their health, prevention and care; use an online appointment service; monitor a chronic condition (perhaps using a mobile app); ask a clinician or care worker a question; and communicate with members of their care team, such as their GP. • **Access to general information and guidance** to improve knowledge and health literacy; look up medical jargon; and access prevention advice. • **Take part in multi-agency consultations about their care**. • **Have one point of contact for queries** – even though their care may span several organisations/footprints.
Key requirements	• A comprehensive Personalised Health Record, so that patients do not have to navigate and access multiple provider / primary care portals. • Patient focussed signposting to organisation and disease-specific portals such as mydiabetescare. • Secure access to assure people that only they, or those they give consent to, have access to their data. • Leveraging technologies to promote self-care and prevention for differing age groups including wearable's, smartphone applications and assistive technologies. • Patient held technology incorporated into provider specifications. • Authoritative/legal advice on use of citizen held technology and patient information.

Whole system intelligence

Vision	• Health and care professionals across communities, geographic and clinical, have the information and insights they require to run an efficient and effective service. This includes care delivery, planning, targeting, monitoring, auditing, and research.

Key objectives	• Capability across the STP area to access and manipulate data. This enables sophisticated management and forward planning of the healthcare system to:
	   • respond to immediate pressures
	   • undertake trend analysis and rapid assessment of service changes
	   • apply risk modelling to support targeting for care management
	   • demand and capacity modelling across all settings of care
	   • support audits.
	• Staff have a single view of business intelligence information
	• Patients are targeted with services and care pathways appropriate to their need
	• A rich joined up data repository that is available for agreed research purposes.

Key requirements	• Data architecture agreed
	   • For example, data mart layers and integrated / federated / distributed data warehouse / data lake.
	• Common metrics and interpretations.
	• Capability to apply machine-learning / AI to support risk-modelling and profiling.
	• Integrated reporting solutions to avoid duplication and facilitate intelligence / knowledge sharing.
	• Data quality requirements agreed and monitored
	   • For example, how up-to-date and accurate data must be for analysis purposes.

Infrastructure & network connectivity

Vision	• A fast, reliable infrastructure, with shared connectivity, at a lower cost. Common ways of working support access to 'home' systems across the footprint.
Key objectives	• Networks are connected, giving fast access across all health and social care services. • Users have access to their 'home' systems, regardless of where they connect to the network and whether it is wired, wireless or remote. • Systems are easy to use, working seamlessly when a clinician is with a patient. • There is easy access to the right IT Support • Free public WiFi. • Voice over IP
Key requirements	• Single sign on technologies. • Aggregation of networks across geographic areas and organisations to maximise speed of access and system performance, and reduce costs. • A minimum set of infrastructure standards to ensure security and implement change. • A shared development pathway to deliver consistency of approach. • A resilient architecture with back-up and redundant connections. • A plan and process for identifying and resolving any incompatibilities. • Professional development and education to support 'Digitally enabled users' • IT service is flexible enough to support new models of care. • Support calls quickly routed thanks to integrated and interoperable IT support.

Information Governance (IG)

Vision	• A common set of processes to appropriately and effectively use information, in line with the expectations of patients and citizens. Information Governance becomes an enabler, not a barrier, to care, planning, targeting and research.

Key objectives	• Authorised, legal, justification for
	   • record sharing that underpins digital interoperability across the STP area.
	   • using data across the STP area for business intelligence purposes such as targeting, planning, monitoring, research.
	• Staff know what they can use clinical data for.
	• Patients know what their data is used for.
	• New data use purposes are easy to implement.
	• Partners are confident in each other's appropriate data use.

Key requirements	• An authorised, legal, justification for record sharing that underpins digital interoperability across the STP area, for direct care and for secondary use of data such as analytics, modelling, and risk stratification. • A joined up process for handling subject access requests and patient queries – in support of shared records. • A common, STP-wide, understanding of what clinical data can be used for. • Procedures for new processing requests such as research or further record sharing. • STP public communications include a consistent message about what patient data is used for. • A common consent process.

3.

Aligning to STP Goals

The **Local Digital Roadmap** for
Buckinghamshire, Oxfordshire & Berkshire West

Aligning the roadmap to STP goals

The goal of digitisation of health systems is to promote what has become widely known as healthcare's Triple Aim: better health, better healthcare, and lower cost (Wachter Report)

The eight STP priorities are reflected in the new models of care emerging in the Buckinghamshire, Oxfordshire and Berkshire West.

- Shift the focus of care from treatment to prevention
- Access to the highest quality Primary, Community and Urgent Care
- Acute trusts collaboration to deliver equality and efficiency
- Mental Health development to improve overall value of care provided
- Digital interoperability

- Maximise value and patient outcomes from specialised commissioning so that digital aspects relating to specialist services are not addressed separately.
- Establish a flexible and collaborative approach to workforce
- Primary Care at scale.

Technology must not be applied for the sake of it, but to play a fundamental role in how health is improved, care is delivered, and productivity gains are achieved.

With this focus in mind, the following pages identify how the Digital Roadmap supports the service transformation priorities set out in the BOB STP, with examples of digital initiatives mapped to the STP.

Shift from treatment to prevention

Technology enables patient engagement and activation in their own health & care, and a more intelligent approach to targeting public health & preventative interventions

	Example 1	Example 2
Records sharing for cross-organisational care	Supporting care professionals to promote targeted health and wellbeing messages based on information in the record, such as social prescribing.	
Citizen facing technology	Patient access to a personalised health record, aiding improved self-care.	Integration with apps, wearables and sensors to combine key data into patient record & enable telecare and 'nudge' health alerts.
Whole system intelligence	Data analytics and risk-modelling to identify key patient groups for upstream preventative care.	Socio-demographic and GIS analysis and mapping to target geographic public health initiatives.
Infrastructure & network connectivity	Patient & public access to WiFi in health & care sites.	Telehealth & care devices for target patient cohorts.
Information Governance	Developing public confidence in how data is used beyond direct care.	

The highest quality care

Supporting a joined up service across primary, community and urgent care, underpinned by records-sharing, phone & web supported triage & access, and care coordination.

	Example 1	Example 2
Records sharing for cross-organisational care	Enabling new integrated models of care, supporting multidisciplinary working across sites & organisations.	Integrated appointment booking, for example community hubs. Automated transfers of care data.
Citizen facing technology	Phone and web-based services to support self-care, and an access route into services	Clear, easy-to-find signposting to services, with appointment booking.
Whole system intelligence	Real time analytics, alerts and clinical decision support to aid patient flow and 'right care' delivery.	Risk-stratification supports case-finding for care co-ordination.
Infrastructure & network connectivity	Care professionals are able to access network from any care setting.	Offline access to care records when there is no connectivity.
Information Governance	Ensuring no IG obstacles for legitimate records access for direct care purposes.	

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Acute trusts collaboration

Advancing provider digital maturity (with OUHT at the forefront as a Global Digital Exemplar) to support new models of acute care delivery and back-office efficiencies.

	Example 1	Example 2
Records sharing for cross-organisational care	Records sharing to enable hub and spoke model of clinical services and specialist advice.	Information Exchange interface between areas to share records.
Citizen facing technology	Provide secure messaging, lab results, e-consultations, and appointment scheduling between patients & hospital.	
Whole system intelligence	Data and tools supporting patient flow management.	Combined provider data supporting research and clinical audit.
Infrastructure & network connectivity	Care professionals able to access network from any care setting.	Single-sign on and direct access to patient record across systems.
Information Governance	Common STP-wide IG protocols and agreements to enable legitimate sharing across providers.	

Mental Health development

Developing digital technology to transform the way people look after their mental health, and transform the way the NHS designs and delivers mental health services.

	Example 1	Example 2
Records sharing for cross-organisational care	Enabling new integrated models of care, supporting multidisciplinary working across sites & organisations.	Records sharing provides basis for providing holistic person-centred care including mental and physical health.
Citizen facing technology	Patient portal to support care and communication with service users.	Trial online CBT 'chat' therapy & expand remote / assistive technology apps.
Whole system intelligence	Develop mental health analytics on prediction / prevention.	Using data to support delivery of outcomes based contracts.
Infrastructure & network connectivity	Extending off-line access to care records to enable mobile working.	Expansion of free WiFi across care settings for patient and carer use.
Information Governance	Ensuring no IG obstacles for legitimate records access for direct care purposes.	

A flexible & collaborative approach to workforce

Registration and accreditation of the information and technology workforce, with succession and development plans to retain expertise. Developing clinical leaders and gaining organisational commitment to develop and fund the role of the CCIO. Ensuring staff have the digital skills to meet the future challenges and cross system roles.

	Example
Records sharing for cross-organisational care	Saving time and improving effectiveness by making sure the information required to deliver care is available wherever care is delivered.
Citizen facing technology	Supporting a healthy workforce by piloting digital health and wellbeing tools with our own staff, and creating advocates for digital health - giving staff the skills to promote digital inclusion.
Whole system intelligence	Changing the focus of care from making patients better, to keeping people well – supporting early proactive intervention.
Infrastructure & network connectivity	Empowering a connected workforce, by ensuring access to systems across the health and local government estate, removing current barriers to integrated working and segregation of networks.
Information Governance	Supporting staff, by ensuring information sharing is carried out within the same rules and governance across the BOB STP footprint.

Primary Care at scale

Supporting new models of primary care, in locality and federated groups, and as part of the wider health and care team. Applying digital tools to improve demand management.

	Example 1	Example 2
Records sharing for cross-organisational care	Enabling cross-practice and federated working. For example, extended practice hours and 7 day working.	Electronic referrals with bookable appointment slots.
Citizen facing technology	Web and phone-based access services supporting triage, and improved handling of demand for appointments.	Personal Health Records (PHRs) supporting collaborative care planning and interaction between patients and the care team.
Whole system intelligence	Risk stratification and modelling to support care co-ordination.	Clinical decision support and referral management tools.
Infrastructure & network connectivity	Shared network access across primary care, supporting federated working.	Single-sign on for primary care clinicians to avoid multiple log-ons.
Information Governance	Developing confidence in primary care over how data is accessed for primary & secondary uses, and data-controller responsibilities can be assured.	

4.

Programme Delivery

The **Local Digital Roadmap** for Buckinghamshire, Oxfordshire & Berkshire West

Approach to delivery

The five prioritised work-streams all have a history of ongoing development in the three areas of the STP. To achieve the best impact and value for money, the forward plan for the programme has to take account of the existing landscape of technologies and investments, building on these as appropriate at the STP and local levels.

The next page shows a high level summary of the main current developments for each of the five work-streams, and indicates the direction and focus of the STP-level activity on each theme.

There then follows three 'feature programmes' highlighting these major initiatives:

- OUHT Global Digital Exemplar
- Berkshire Connected Care
- Buckinghamshire urgent & primary care access
- Bids for Mental Health Global Digital Exemplars.

Programme delivery 1

	Buckinghamshire	Oxfordshire	Berkshire West	STP-wide
Records sharing	**My Care Record** phase 1 via MIG, connecting GPs with Acute emergency care, OOHs and Social Care. OBC in development for further phases, which will include mental health services. Heart failure (BHT) initiative to share records with providers, carers and patients.	**Oxfordshire Care Summary** is currently in place. Future development is now focussing on building on the OUHT GDE opportunities with Cerner - a review of system-wide opportunities is now underway to confirm overall system-wide approach, taking into account the full range of local initiatives, including the OUHT GDE and AHSC plans.	**Connected Care** integrated digital care record (Graphnet). Initial go-live in Q3 2016, with further foundation stages through to mid 2017, then extending to Personalised Health Record and Care Planning functionality.	The BOB wide work will have two main foci: 1) connecting local shared record systems so patients crossing boundaries can have their records shared, and with SCAS. 2) Sharing best practice.
Citizen facing technology	Development of digital tools and business processes in co-production with patients and clinicians to redesign Primary Care and Urgent Care access and underpin supported self-care with Digital Life Sciences. Existing and planned solutions already in place in mental health (e.g. True Colours).	Patient portal functionality is an option to extend to wider use via the OUHT GDE.	Personalised Health Record (PHR) development as part of Connecting Care, with Graphnet & Microsoft, live from mid 2017.	Joint development with PPI of user requirements to achieve equity in the 'citizen offer'. Explore options for commonality of patient portal.
Whole system intelligence	Systematic use of templates and reports through EMIS Enterprise to support seamless delivery of Locally Commissioned services and evaluate service changes. Use of ACG tool for risk stratification.	Currently EMIS Enterprise provides ability to analyse integrated primary and secondary care - e.g. for risk stratification to target patients. OUHT GDE provides other opportunities for development with Population Health Management and potentially AHSC initiatives.	Process, platform and principles objectives drafted for local work stream initiation. Eclipse project – LTC risk stratification and analytics in flight	Risk stratification is STP wide. Option to synchronise them and use this as the building block for a bigger intelligence resource – leading to common prediction and planning intelligence across BOB.

Programme delivery 2

	Buckinghamshire	Oxfordshire	Berkshire West	STP-wide
Network infrastructure & connectivity	Currently: all organisations have access to current N3 secure Network; free public WiFi available in all BHT sites. WiFi in all general practices to be completed in 2017. BHT mobile infrastructure upgrade for community teams in 2017/18 HSCN is seen as the next step.	Currently: a joined up network incorporating GP practices, OUHT and OHFT sites, some sharing with local council; Provider WiFi; some free public WiFi. Intention is to move to one area wide procurement (ideally as part of STP wide initiative)	Local work stream established. Drafting a multi-organisational 5 year forward view of infrastructure technology. Primary care single domain and WiFi infrastructure deployed. N3 in all organisations and standardisation on NHS number as patient/citizen unique identifier	Health & Social Care Network – joint procurement. Joining up networks with common ways of working.
Information Governance	Multi-organisational common health and social care Information Sharing Agreements created for My Care Record project. A County wide IG group oversees and advises on IG issues: e.g. authorisation for data sharing agreements and Privacy Impact Assessments.	A common Information Sharing structure has been set up. Used for OCS. A County wide IG group oversees and advises on IG issues: e.g. authorisation for data sharing agreements , consent models.	Multi-organisational common health and social care Information Sharing Agreements created for Connected Care project	Standardise on a common IG framework, Information Sharing Agreements, consent process, patient and public engagement & communications. Strengthen PPI scale up on-going programme on usage .

Buckinghamshire digital patient / citizen platform

Buckinghamshire CCG's, in partnership with Digital Life Sciences, are delivering a digital patient / citizen platform to empower patients to self-care and access local services independently.

The platform supports a 'proof of concept' GP Access Centre to receive and process on-the-day requests for GP and Nurse appointments from patients.

The Access Centre and the digital platform together will provide a means to deliver Locally Commissioned Services, Core and extended hours Primary Care, Urgent, Out of Hours Care and Mental health Services.

In time the platform will link with the My Care Record platform.

- The proof of concept plans to release clinical and admin time at the GP Access Centre. More efficient management of on-the-day demand allows more time to be spent with long term conditions patients. It also releases time to educate patients about digital offerings, self-care and which locally commissioned services are available to them.

- Providing clinicians, carers and patients with a platform to communicate and share data digitally empowers patients, enables remote care support and broadens self-care. Patients can be directed to digital education materials, at scale and on demand.

- Call and appointment data from pilot sites is beginning to demonstrate standardised demand and capacity data in Primary care. This will inform planning and allow more targeted release of resources when required.

- Feedback is being collected routinely from patients who have used the service.

Buckinghamshire digital patient / citizen platform

Three central locality practices experiencing high demand, poor patient satisfaction with access and higher than average A&E attendances led to a six month proof of concept of a GP access centre.

Project aims

- Better manage on the day demand
- Improve patient satisfaction
- Reduce unnecessary A&E attendances
- Digitalise patients (get online)
- Centralise admin functions to release admin time

Project status

- Three practices live on system by December 2016
- Patient population = 44,000 people
- Central management of call / online appointment requests.

Requesting a GP call back online.

Buckinghamshire digital patient / citizen platform

Six month proof of concept to provide patients and clinicians with a digital alternative to self and shared care. Converting the paper Care and Support Planning process into a digital process.

Project aims

- Better manage patients out of hospital
- Bring patient & HCP closer together
- Enable better collaboration in patient care
- Digital tools to monitor self-care & share data
- Better access to verified educational material
- Remote support for patients by HCP

Project status

- Dec 2016 - diabetic patients co-produced digital solution
- January 2017 - draft supported self-care online solution for Diabetics and launch to test group
- by April 2017 - full solution launch

Supported Self Care app

OUHT Global Digital Exemplar programme

Oxford University Hospitals Foundation Trust has been selected nationally as one of 12 acute-sector Global Digital Exemplars.

A global digital exemplar will be an internationally recognised NHS care provider delivering exceptional care, efficiently, through the world-class use of digital technology and information flows, both within and beyond their organisation boundary.

It will also be a reference site to other care providers.

The core objectives of the 2.5 year programme are

- Development and delivery of a population health and interoperability solution that can support whole system management of patients and long term conditions with disease registers and an emphasis on ensuring population well-being through patient interaction to their own record.

- Clinical decision support and learning embedded in the workflows to ensure high quality repeatable care delivery.

- Integration of biomedical devices, anaesthetic machines and removal of paper across the whole hospital ceasing to use the paper notes through a combination of on-line clinical documentation and integration as well as some limited scanning.

- Dissemination of the lessons learnt both as blueprints in specific systems for others to adopt and as system agnostic lessons.

OUH programme contributes to the STP & LDR

Oxford University Hospital's 'Go Digital' GDE programme underpins the Trust's strategic plans and is a core contributor to the BOB STP and Oxfordshire LDR.

- Completion of OUH's digital transformation enabling the full hospital record to be accessed by primary care and other colleagues through the pan system longitudinal record.

- Providing a foundation platform available for interoperability across the county; as a starter four disease registers will be constructed to help manage patients with long term diseases across boundaries; this is fundamental to and underpins the LDR.

- Care planning across care settings throughout Oxfordshire can be supported with deep integration into each partners local digital record.

- Assuming the partnership proposals are accepted OUH will assist Royal Berkshire develop its own digital solution cloning parts of what has been achieved in OUH; this will support the West Berkshire LDR and the STP across the whole patch.

- Linkage between the Oxfordshire interoperability platform and the respective platforms for Buckinghamshire and Berkshire will also be delivered with close integration; linkages between OUH, Milton Keynes and Royal Berkshire acute systems will support local clinical networks.

- Lessons from OUH's digital blueprint will be played into STP plans to ensure that lessons are learnt and delivery is expedited.

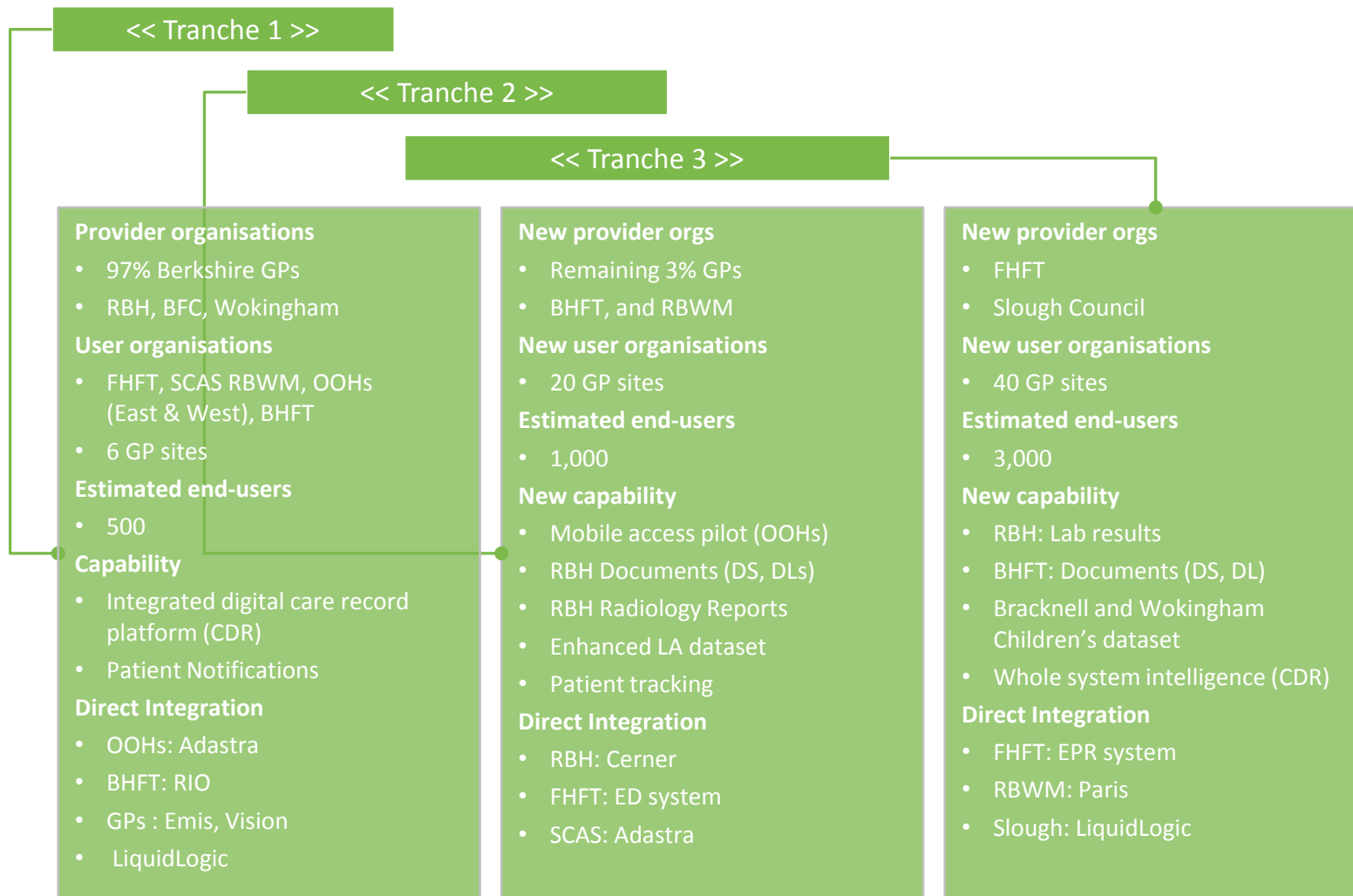# Berkshire West Connected Care Programme

Berkshire West, in partnership with East Berkshire, are delivering an integrated health and social care record sharing, intelligence analytics and patient/citizen patient portal.

Connected Care is a partnership that spans 18 organisations across health and social care. The East and West programme boards include senior representation from each of the partner organisations involved.

- Connected Care provides comprehensive interoperability and digital data exchange across organisational boundaries. Real time data exchange means that critical information is available to health and social care professionals at the point of care.

- Connected Care will improve clinical effectiveness and patient experience by providing clinicians, carers and patients with a comprehensive view of patient medical/care history, irrespective of source.

- Patient held records (PHR) in Connected Care will enable local people to view and update their record. Coupled with access to accurate real time data from commissioners, health and social care providers (and citizens themselves), the PHR supports patient self-care and streamline current processes. Using the PHR, people can also grant consent to providers of services and carers to view their record.

- Whole system intelligence, including real-time analytics and whole system metrics enables initiatives such as preventative care offered to people identified as being at high risk of an adverse event. This kind of data intelligence could avert costly and unpleasant health problems in future and support planning of services based on local needs.

Connected Care delivery timescale

2016 - 17									2017-18						
Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct-Dec	Jan-Mar

<< Tranche 1 >>

<< Tranche 2 >>

<< Tranche 3 >>

Provider organisations	**New provider orgs**	**New provider orgs**
• 97% Berkshire GPs • RBH, BFC, Wokingham	• Remaining 3% GPs • BHFT, and RBWM	• FHFT • Slough Council
User organisations • FHFT, SCAS RBWM, OOHs (East & West), BHFT • 6 GP sites	**New user organisations** • 20 GP sites	**New user organisations** • 40 GP sites
Estimated end-users • 500	**Estimated end-users** • 1,000	**Estimated end-users** • 3,000
Capability • Integrated digital care record platform (CDR) • Patient Notifications	**New capability** • Mobile access pilot (OOHs) • RBH Documents (DS, DLs) • RBH Radiology Reports • Enhanced LA dataset • Patient tracking	**New capability** • RBH: Lab results • BHFT: Documents (DS, DL) • Bracknell and Wokingham Children's dataset • Whole system intelligence (CDR)
Direct Integration • OOHs: Adastra • BHFT: RIO • GPs : Emis, Vision • LiquidLogic	**Direct Integration** • RBH: Cerner • FHFT: ED system • SCAS: Adastra	**Direct Integration** • FHFT: EPR system • RBWM: Paris • Slough: LiquidLogic

Connected Care subsequent tranches

2016 - 17						2017-18										
Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct-Dec	Jan-Mar

Subsequent implementation (tranches 4 – 8)

Integrated dynamic care planning development

Patient portal development in conjunction with Microsoft

(E) Enabling / (S) Supporting universal capabilities

# Tranche	1. Professionals can access GP-held information on GP-prescribed meds, patient allergies & adverse reactions.	2. U&EC clinicians can access key GP-held information for patients previously identified by GPs as most likely to present.	3. Patients can access their GP record.	4. GPs can refer electronically to secondary care.	5. GPs receive timely electronic discharge summaries from secondary care.	6. Social care receive timely electronic assessment, discharge and withdrawal notices from acute care.	7. Clinicians in unscheduled care settings can access child protection information w/ soc. care professionals notified.	8. Professionals across care settings made aware of end-of-life preference information.	9. GPs and community pharmacists can utilise electronic prescriptions.	10. Patients can book appointments and order repeat prescriptions from their GP practice.
1	(E)	(E)		(E)	(E)					
2						(S)				
3							(S)			
4 - 8			(S)					(E)		

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Mental Health Global Digital Exemplar Bids

Berkshire Healthcare Trust and Oxford Health Foundation Trust are among 14 mental health organisations invited by NHS England (NHSE) to submit a proposal to be considered as a GDE for mental health services. NHSE are looking to select a small number of Mental Health Trusts who are most advanced in their use of information technology, to develop as national leaders and ultimately to become world leaders at an accelerated pace. The GDE proposals will focus on key areas to advance digital capability.

- Extended use and optimisation of the Electronic Patient Record functionality, enabling
  - Technology to seamlessly transfer service user information at referral, admission or on discharge
  - Use of remote, mobile and assistive technologies to help provide care.
  - Use technology to support the ordering of diagnostics and sharing of test results
  - Receiving automatic alerts and notifications to help me make the right decisions
  - Using insight and intelligence to support continuous service improvement
  - Use of technology to manage assets and resource to drive efficiencies and improve quality
  - Ensure people receive the right combination of medicines every time and reminders about safe monitoring.

- Global Digital Exemplars will become leaders in
  - Innovative new approaches to care redesign
  - Partnering with research organisations to catalyse advances in conducting research and applying its findings
  - Building new digital tools and integrating them into workflow
  - Partnering with IT companies, in the UK and elsewhere, to promote innovation.

5.

Capabilities & Plans

The **Local Digital Roadmap** for
Buckinghamshire, Oxfordshire & Berkshire West

Capabilities and plans

Developments in digital capability are planned across Buckinghamshire, Oxfordshire and Berkshire West health and care providers. These developments will increasingly achieve 'paperless working at the point of care', as measured through the domains set out in the national Digital Maturity Index (DMI).

To note in the DMI baseline and planned trajectories:

- Baseline capabilities are generally higher in the 'Readiness' and 'Standards & Infrastructure' elements of the DMI than the core Digital Capability domains

- Medicines Management & Optimisation and Decision Support are the weakest elements of digital capability in the baseline.

- The greatest planned improvement in digital capability is in Records, Assessments and Plans.

- DMI will be reassessed in 2017.

- All Digital Capabilities are planned to be close to or in excess of 70% as measured in the DMI by end 2018/19.

The following slide shows the baseline position for digital maturity in BOB NHS providers, as assessed in early 2016. There follow two slides that demonstrate the planned improvements in digital maturity over the coming 2.5 years.

Digital maturity across trusts

Domain		National	Royal Berkshire Foundation Trust	Oxford University Hospitals Trust	Buckinghamshire Healthcare Trust	Oxford Health Foundation Trust	Berkshire Healthcare Foundation Trust	South Central Ambulance Service Trust
Readiness								
Strategic Alignment	4/6	76%	60%	80%	80%	85%	100%	56%
Leadership	5/6	77%	80%	95%	100%	95%	90%	85%
Resourcing	5/6	66%	45%	70%	70%	75%	95%	75%
Governance	4/6	74%	65%	70%	80%	90%	100%	75%
Information Governance	3/6	73%	50%	67%	92%	79%	96%	75%
Digital capabilities								
Records, Assessments & Plans	3/6	44%	26%	54%	23%	35%	56%	57%
Transfers Of Care	3/6	48%	42%	92%	30%	35%	59%	61%
Orders & Results Management	3/6	55%	56%	86%	44%	12%	49%	14%
Medicines Management & Optimisation	1/6	30%	17%	89%	24%	0%	4%	29%
Decision Support	1/6	36%	33%	73%	6%	25%	30%	22%
Remote & Assistive Care	5/6	32%	25%	58%	50%	58%	92%	50%
Asset & Resource Optimisation	4/6	42%	45%	70%	40%	20%	81%	56%
Standards & Infrastructure								
Standards	5/6	41%	44%	83%	33%	17%	46%	75%
Enabling Infrastructure	5/6	68%	48%	84%	61%	77%	80%	75%
			2/14	12/14	6/14	7/14	11/14	8/14

as assessed in Jan 2016; green indicates above national average, red below, blue at or close to.

Digital maturity trajectories – BOB level
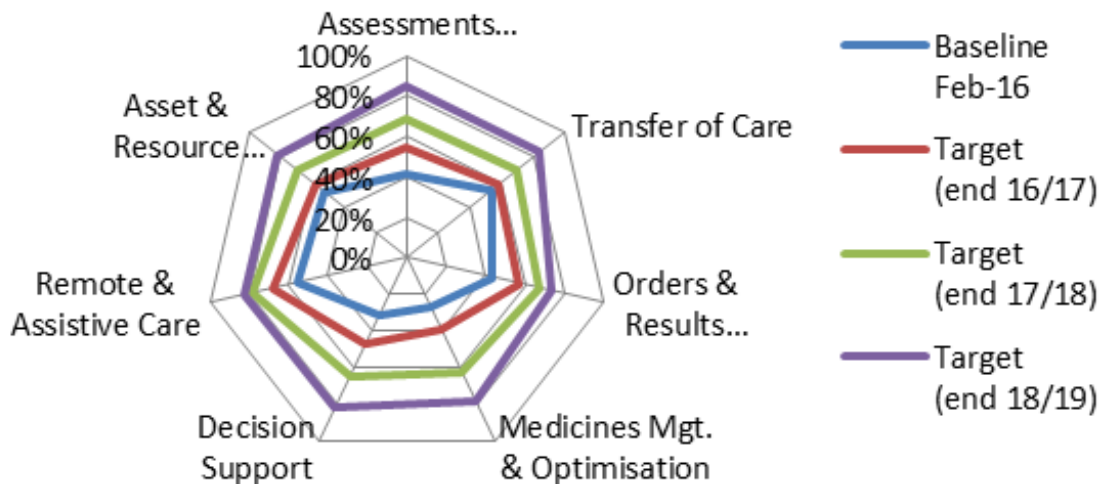
Footprint Summary (Average Provider Score)	National Average	Baseline Feb-16	Target (end 16/17)	Target (end 17/18)	Target (end 18/19)
Records, Assessments & Plans	44%	42%	55%	69%	86%
Transfer of Care	48%	53%	58%	70%	84%
Orders & Results Management	55%	44%	57%	68%	74%
Medicines Mgt. & Optimisation	30%	27%	39%	63%	79%
Decision Support	36%	32%	48%	65%	82%
Remote & Assistive Care	32%	56%	68%	78%	82%
Asset & Resource Optimisation	42%	52%	58%	69%	82%

Digital maturity trajectories

The organisation trajectory summaries reflect the current view and scale of work. There is an underlying plan to deliver increased maturity levels.
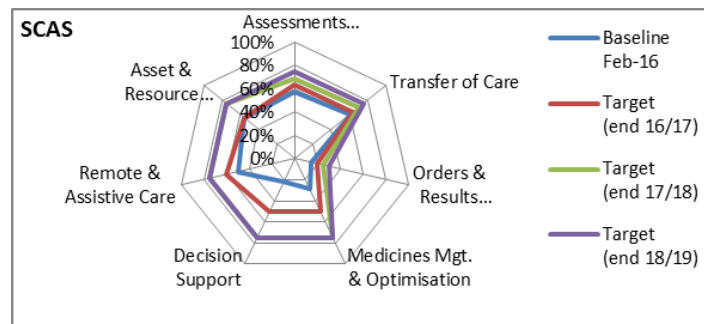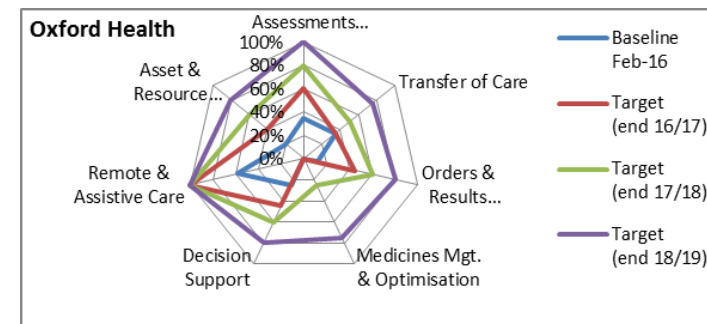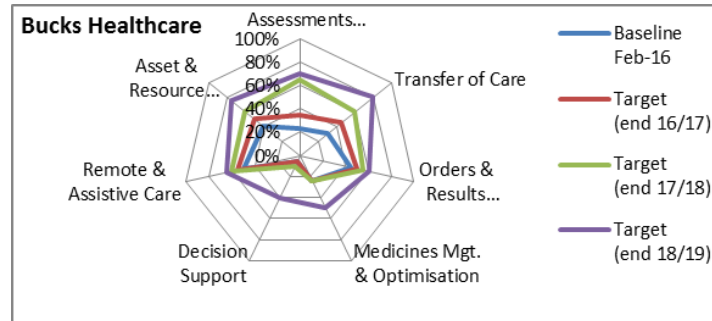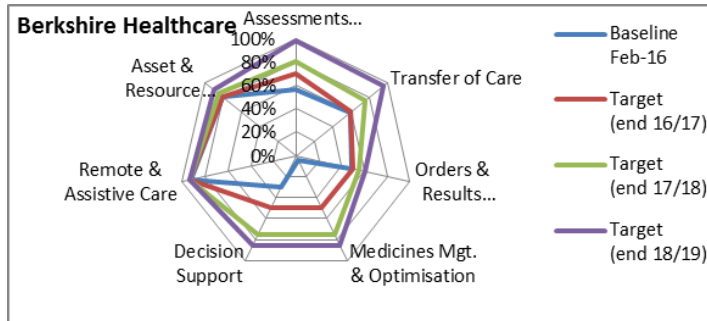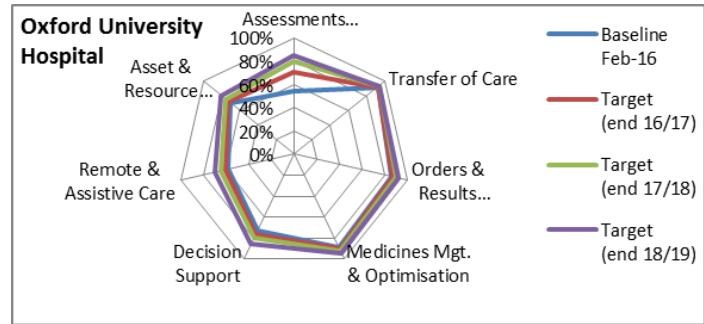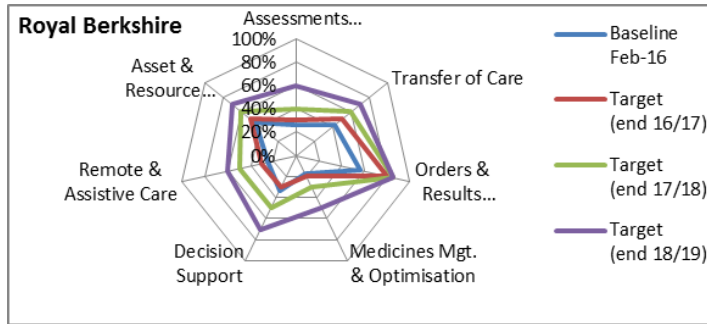
Programme plan

The programme plans for the 3 LDR footprints and the BOB STP reflect developments within and across partner organisations.

The following eight pages illustrate the 2016/17 and 2017-19 'capability deployment plans', mapped to the 7 national digital maturity domains, and based on the 3 LDR submissions (excluding the impact of the planned Global Digital Exemplar delivery).

The 2017-19 high level plan indicates the STP-wide programme activities that will be taken forward, subject to adequate investment funding.

Digital capability plans 2016/17

Domain	UC						
Records, assessments & plans	1 2 3 4 5 6	Patient access to electronic records utilisation to 95% enabled, 5% registered	Increase e-forms usage to support PF @ POC, structured documentation & audit / reporting	Outpatient clinics: no paper record initiation	SCR available to clinicians in 50% of clinical areas	Paperless in West Wing OP - on-line assessments & day forwarding scanning.	Connected Care - sharing between clinicians
STP Digital **Records sharing, care planning**	7 8 9 10	Electronic observations solution, with auto alerting for NEWS on all wards	Expand / enhance core HER functionality, & expand mobile functionality	Horton: Notes no longer pulled for routine appointments	Improved util. of shared records MCR & SCR. Available to soc care & comm pharmacies.	Impr. sharing of diabetes patients info w/ care team. Complete EoL transfer to SCR.	OOH clinicians use electronic care plan to support triage & clinical decisions.
Domain	**UC**						
Transfers of care	1 2 3 4 5 6	Utilisation of eReferrals improved	Discharge summaries - incr. compliance w/ nat. guidance & %age sent to out of area GPs	e-Correspondence	RiO business as usual implementation	All general practice letters delivered electronically	Connected Care
STP Digital **Provider digital maturity**	7 8 9 10	Docman supporting electr. transfers of letters to primary care (10% eDS for MH Ips)	Out of area discharge coordinators (MKUH) access EMIS to manage care & discharges.	Electronic ward whiteboards used for handover	Relaunch e-Referral project & review options for increasing take-up. Usage =>80%	Child protection information sharing	GPs digitally refer urgent cancer patients using eReferral templates.

Key:

BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

In flight projects (16/17)

Domain	UC						
Orders and results management	1 2 / 3 4 / 5 6	Radiology / pathology orders and results	Improve access to orders and results management	Endoscopy, cardiac, respiritory results available in EPR		All results delivered electronically	Stabilise / improve current solution - more efficient results / clinical management.
STP Digital	7 8 / 9 10	New equipment rollout and review.					
Provider digital maturity							

Domain	UC						
Medicines management & optimisation	1 2 / 3 4 / 5 6	Increased takeup & utilisation of electronic prescription service by 90% of practices, average utilisation 55%	Analysis, requirements, procurement of e-Prescribing solution	Increase in utilisation of electronic prescriptions from 50 - 60% in live practices	EPS - 50% of permitted prescriptions are electronic		e-prescribing and medicines management initiation
STP Digital	7 8 / 9 10	ePMA available in maternity	ePMA available in OP				
Provider digital maturity							

Key:

BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

In flight projects (16/17)

Domain	UC							
Decision support	1	2	Referral triage, decision support & monitoring of referral patterns in place (DXS | point of care)	Access to general practice care plans (end of life and special patient notes)	South Central Ambulance Service LiveLink for front line and patient / caller - Berkshire	Child protection information sharing (CP-IS) available	Introduce additional decision support	Clinical utilisation review system (acuity of patient v. care setting) available across all services
	3	4						
	5	6						

STP Digital	UC							
Whole system intelligence, childrens' sharing.	7	8	Sepsis decision support in EPR (others planned)	Electronic observations solution with automatic alerting for NEWS on all wards	Local authority use of service user support, data collection apps and online services such as Care Companion	EoL information available to all appropriate professionals via SCR	Enhanced alerting and patient preferences available across all services	Clinical decision making, increase utilisation of decision support tools (Pathways and Guidelines - DXS & ACG)
	9	10						

Domain	UC							
Remote and assistive care	1	2	Increased utilisation of online services offered by all practices - 20% Bu, 10% Ox, 15% Be	Assistive technology portfolio (apps, trust websites, Skype, EHR, patient portal)	Telesson	Requirements defined for patient portal / apps / telehealth following evaluation of pilots	Increased use of mobile apps such as care companion	Integrated assistive technology strategy
	3	4						
	5	6						

STP Digital	UC							
Patient facing technology	7	8	South Central Ambulance Service LiveLink for care homes	Proof of concept for digitally supported self care for diabetics (apps, referral management, care plans	New and expectant mothers use Baby Buddy app to get advice and support		Remote clinical triage & support available to some care homes (working with Airdale NHS FT)	Preparation for transition to NHS Mail - including requirements for video conferencing via Skype
	9	10						

Key:

BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

In flight projects (16/17)

Domain	UC		Single domain wi-fi and mobile device management (MDM) in place to support federated working	Pilot use of Intelligence Point primary care data to inform planning and commissioning	Use of on-line bed board	e-Consultations	Cerner transition and upgrade	NHS Mail 2
Asset and resource optimisation	1	2						
	3	4						
	5	6						
STP Digital	7	8	Improved efficiency through greater interoperability of clinical systems with EPR	e-Rostering implementation completed	Digital appointment correspondence		Virtual pathways	Biomedical device integration with EPR, including infusion pumps (Neuro ICU)
	9	10						
Provider digital maturity								

Key:

| BWF Primary Care | Royal Berkshire NHS Foundation Trust | Berkshire Health NHS Foundation Trust | Local Authority | Multi Organisation | South Central Ambulance Service | OCCG Primary Care | Oxford University Hospitals | Oxford Health NHS Foundation Trust | Buckinghamshire Healthcare NHS Trust | BCCG Primary Care |

Digital capability plans 2017-19

Domain	UC					
Records, assessments & plans	1 2 / 3 4 / 5 6	Patient access to electronic records utilisation to 100% enabled, 8% registered	Digital clinical docs used for all basic nursing and generic medical assessments	All community staff have access to mobile devices to access / update patient information at point of care	Improved utilisation of shared records - MCR / MIG & SCR	No paper record needed at outpatient clinics	Connected Care - majority of secondary care clinicians can access GP-held data
STP Digital **Records sharing, care planning**	7 8 / 9 10	Notes no longer pulled for routine appointments - Horton	Carenotes integration with partner solutions	Carenotes uogrades and enhancements			

Domain	UC					
Transfers of care	1 2 / 3 4 / 5 6	Utilisation of eReferrals improved	Deploy revised e-Discharge summaries	eReferral coverage & use increased. Usage >=85%	Expand support for eRS in key service lines	Care pathways	Child protection information sharing implementation by Local Authorities
STP Digital **Provider digital maturity**	7 8 / 9 10	Connected Care	Digital clinic worklists in widespread use following successful pilot	U18, Urgent care encounters		Deploy e-Admission documentation	EDS sent electronically for 75% MH inpatients

Key:

BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

Planned projects (17/18, 18/19)

Domain	UC						
Orders and results management	1 2 3 4 5 6	All results delivered electronically	Sharing South Central Ambulance Service Discharge summary	Booking for minor injuries unit appointments - Berkshire		Bookings for emergency general practice appointments - Berkshire	Requesting for all non-EPR tests in place
STP Digital / **Provider digital maturity**	7 8 9 10	Reduce paper for requests and results	Additional orders and results management introduced				

Domain	UC						
Medicines management & optimisation	1 2 3 4 5 6	Increased take up and utilisation of electronic prescription service by 95% of practices	Deployment of e-prescribing solution - all service areas	e-prescribing and medicines management	e-prescribing and medicines administration	Emergency prescriptions	e-prescribing and medicines administration decision support at Frimley Park Hospital
STP Digital / **Provider digital maturity**	7 8 9 10	70% utilisation of electronic prescriptions	50% of permitted prescriptions are electronic	Development of ePMA functionality			

Key:

BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

Planned projects (17/18, 18/19)

Domain	UC						
Decision support	1 2 3 4 5 6	Real time analytics	Early warning systems	Business intelligence - auto reporting and alerting	Improved utilisation of End of Life records	Improved medication support available (a further 50x powerplans / rules)	CP-IS utilisation monitored and plans in place to promote and support usage
STP Digital **Whole system intelligence, childrens' sharing.**	7 8 9 10	Advanced decision support introduced					

Domain	UC						
Remote and assistive care	1 2 3 4 5 6	24/7 digital advice via telephone, web and app supporting same day primary care	eConsultations supporting same day primary care	Increased utilisation of online services - offered by all practices	Expand remote and assistive technology (apps, interactive Trust websites)	Observations capture equipment, eData feeds	Digital support for the management of heart failure patients, following 16/17 pilot
STP Digital **Patient facing technology**	7 8 9 10	NHS mail available to all service areas	Development of patient portal functionality	Heart failure shared record			

Key:

BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

Planned projects (17/18, 18/19)

Domain	UC		Extended hours / prime ministers challenge fund	Staff electronic rostering	TIE upgrade and new hardware	Expand asset and resource optimisation	Gastro review and improvement projects	
Asset and resource optimisation	1	2						
	3	4						
	5	6						
STP Digital	7	8	Create data / income capture interfaces to EPR	RFID - patient tracking deployed (A&E, Maternity and wards)	BCC improvement project			
	9	10						
Provider digital maturity								

Key:

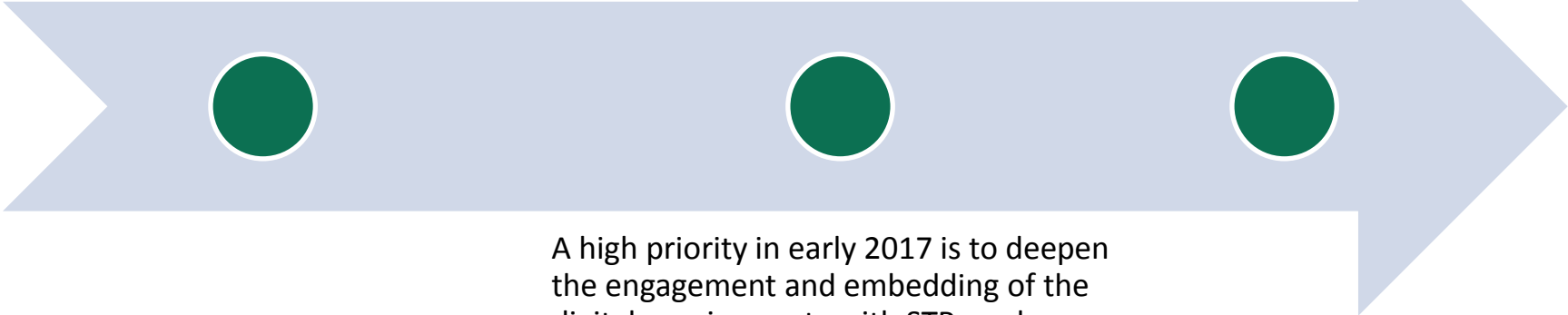| BWF Primary Care	Royal Berkshire NHS Foundation Trust	Berkshire Health NHS Foundation Trust	Local Authority	Multi Organisation	South Central Ambulance Service	OCCG Primary Care	Oxford University Hospitals	Oxford Health NHS Foundation Trust	Buckinghamshire Healthcare NHS Trust	BCCG Primary Care

6.

Next Steps

The **Local Digital Roadmap** for
Buckinghamshire, Oxfordshire & Berkshire West

The core elements and priorities of the STP digital programme have been developed in recent months to form a platform from which to move to the federated model of programme design and delivery (described in section 1).

The slides in this final section outline:

- Work-stream leads for each of the 5 agreed STP digital priorities.
- Work-stream mobilisation process.

A high priority in early 2017 is to deepen the engagement and embedding of the digital requirements with STP work-streams, to exploit the opportunities described in section 4.

Extending patient & public engagement as part of wider transformational service changes is needed to support the development of information consent models and the use of data for secondary purposes.

Work-stream mobilisation

Tollgate	Aims	Output		Goal
Phase 1 Initiation	• Engage Leadership • Define strategic needs • Define strategic outcomes • Develop strategic business case	• Strategic imperatives • Transformational scope • Define strategic outcomes • Outline strategic benefits • Develop strategic business case	*What is driving the change?* *Who and what is impacted?* *What will change?* *What will it deliver?* *How will we make it happen?*	Executive Charter
		Tollgate Review		
Phase 2 Visioning	• Describe the "As Is" • Articulate the "To Be" vision	• Vision statement • Future Operating Model • Outline Business Case	*How will the business look?* *How will it operate differently?* *How is the investment justified?*	As Is Model To Be Model
		Tollgate Review		
Phase 3 Planning	• Logical Design • Product and Supplier selection • Identifying Benefits • Defining the Programme • Full Business Case	• Logical Design Document • Functional requirements spec. • Product/Supplier selection • Benefit Cards • Benefit Realisation Plan • Full Business Case	*What is the solution concept?* *How the users need it to work.* *Who can deliver the solution?* *What ROI can we expect?* *How to demonstrate returns* *Have we covered all the bases?*	Outline Solution
		Tollgate Review		
Phase 4 Design	• Detailed Design • Benefits Validation • Full Business Case Validation	• Design Blueprint • Design Report • Validated Benefit Cards • Revised Full Business Case • Functional Specifications	*What does the solution look like?* *How does the solution stack up?* *What it is going to deliver.* *Is this the right choice to make?* *How will it actually work?*	Detail Solution
		Tollgate Review		

the current focus for the STP-level digital programme is primarily phases 1-3, noting that many component LDR projects are well advanced into delivery. Working groups with STP wide membership will be working to progress each workstream's vision.

Further programme phases

Phase 5 Build	• Turning design into reality • Build/purchase all components • Processes and organisation structure verified • Testing – Unit/System/Integration • Validating Benefits	• Technical Specification • Service Creation Report • Validated Benefit Cards	*How is it going to perform?* *How will we implement it?* *Modify the expected benefits?*	**Finished Product**

Tollgate Review

Phase 6 Deployment	• Ownership moves to the business • User Acceptance Testing (UAT) • Operational Acceptance Testing (OAT) • Transition – preparing for new ways of working	• Solution Acceptance Report • Go-Live Assessment Report • Implementation Status Report	*Is the solution fit for purpose?* *Are we ready to Go-Live?* *How are we doing so far?*	**System In Service**

Tollgate Review

Phase 7 Implementation	• Embedding new processes, people and roles to stabilise the solution • Tuning technology • Realising early benefits • Problem resolution	• Implementation Report • Benefits Realisation Report	*Is it living up to expectations?* *Has it delivered?*	**Fully Integrated**

Tollgate Review

Phase 8 Maintenance	• Realising Benefits • Continuous Improvement • End of business transformation lifecycle	• Future enhancement roadmap • Strategy recommendations • Incremental benefits statements • Ongoing support strategy • Continuous improvement strategy	*How can we improve further?* *What have we learned?* *Are we still benefitting?* *Are we using it effectively?* *How can we get more from it?*	**Established Solution**

Closure Review

Further programme phases will be defined in more detail during earlier phases.

7.

Find out more

The **Local Digital Roadmap** for
Buckinghamshire, Oxfordshire & Berkshire West

Find out more

The Buckinghamshire, Oxfordshire and Berkshire West sustainability and transformation plan is currently under development. An updated version will be ready to share by February 2017.

Local public engagement events will continue, including opportunities to comment on the digital future for health and social care. Engagement events will be promoted via each partner organisation's website and other communication channels.

Please share your views at these events and if you have any questions or comments, please email:

- Buckinghamshire queries: ccgcomms@buckscc.gov.uk
- Oxfordshire queries: cscsu.media-team@nhs.net
- Berkshire West queries: ppiteam.berkshirewest@nhs.net