Digital Transformation in the SW Region

25/06/24

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NHS England – South West
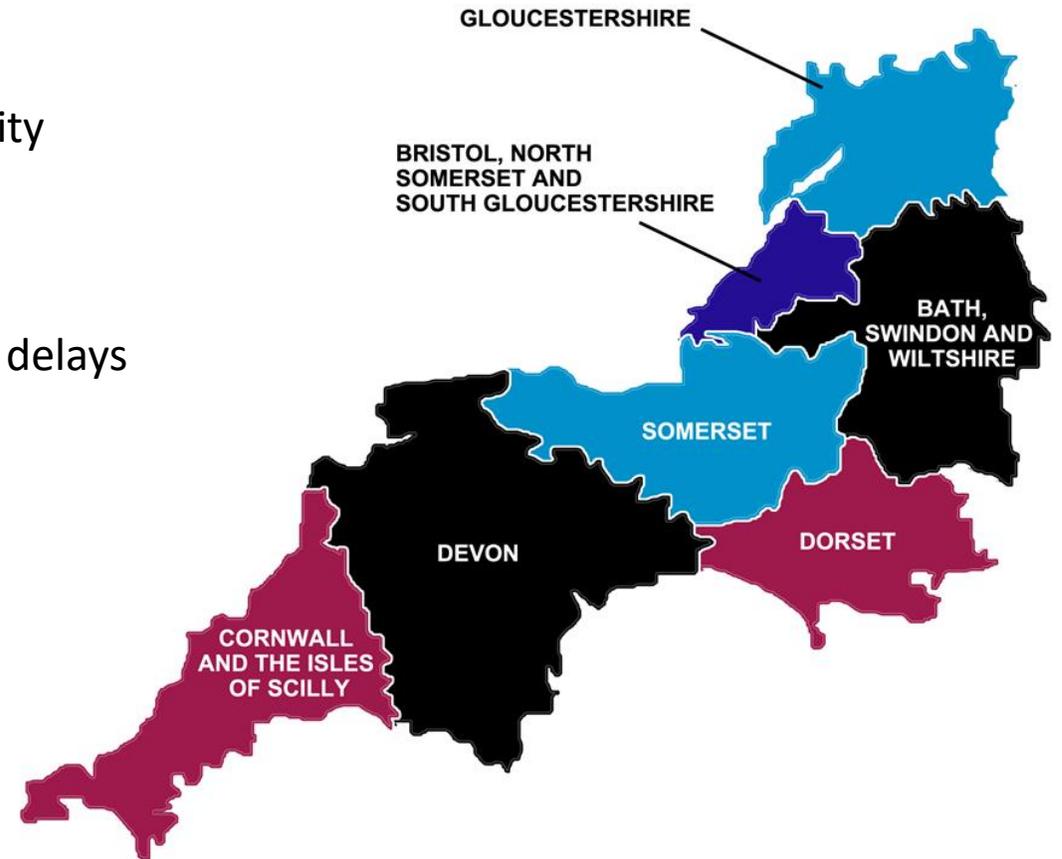
Discussion

SW Business Plan 2022 - 2025

SW Region

SW specifics

- Demographics – an aged and ageing population, rurality

- Significant Performance Challenges:

  - Urgent & Emergency Care, Ambulance handover delays
  - Diagnostic Waiting Times
  - Elective Recovery
  - 'Productivity challenge'

SW Demographics

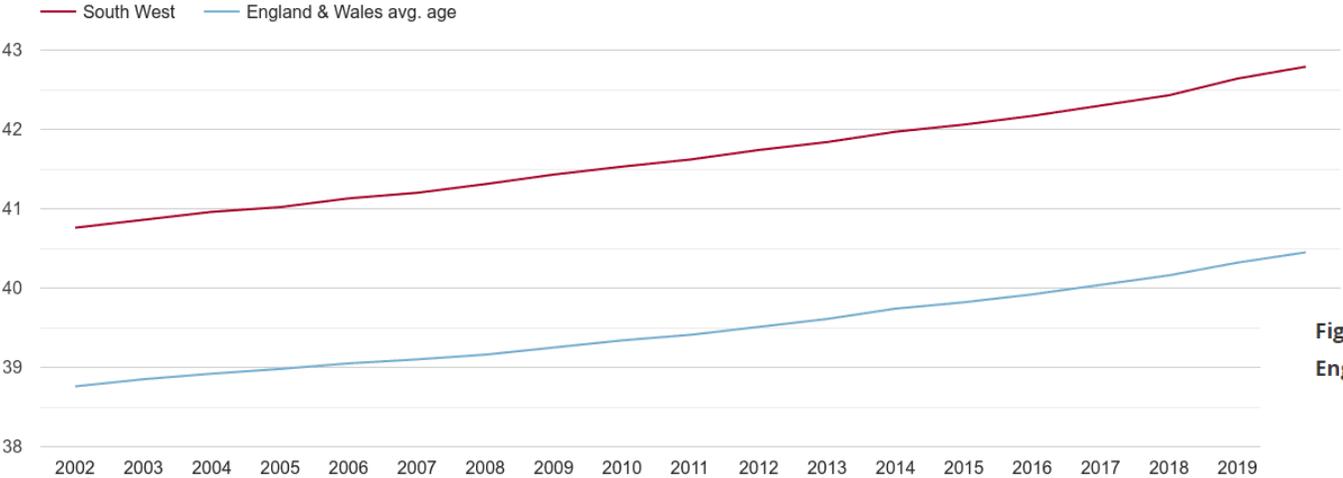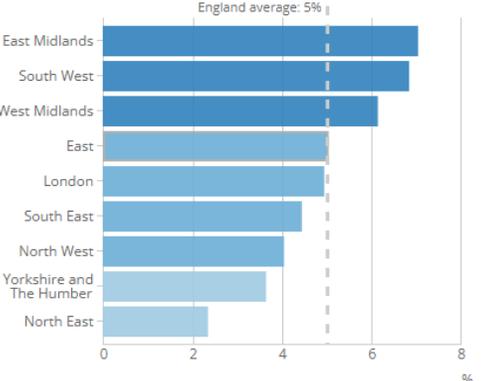Legend: — South West — England & Wales avg. age

Figure 3: Projected percentage population change for regions in England, mid-2018 to mid-2028

East: 5.0%.
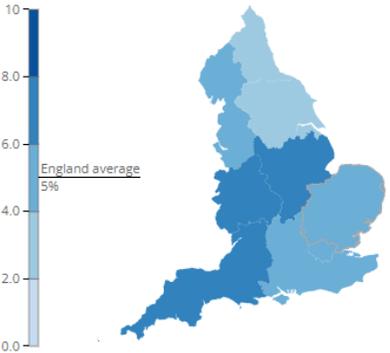
England average: 5%

Region	
East Midlands	
South West	
West Midlands	
East	
London	
South East	
North West	
Yorkshire and The Humber	
North East	

Embed code

% Population > 65 yrs 2020 - 2040
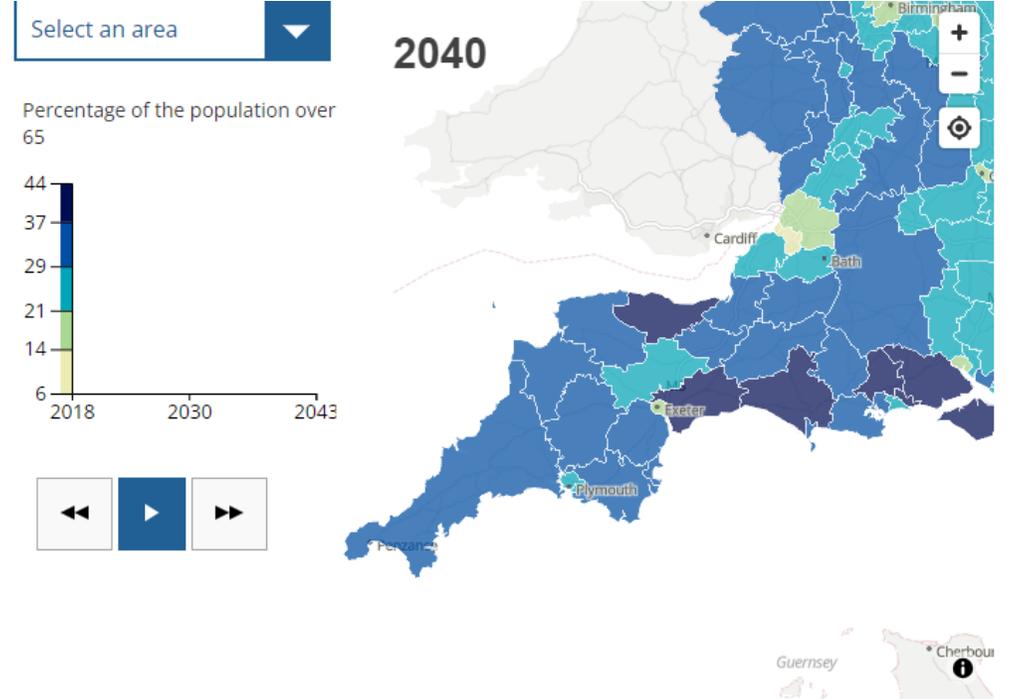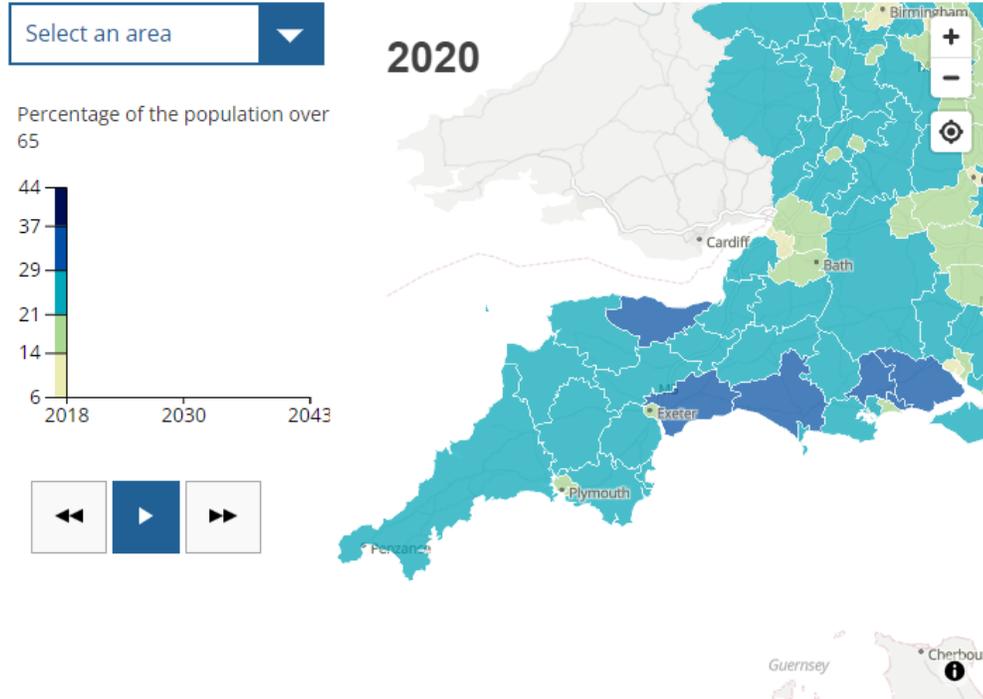
Multi-morbidity: 2/3 of > 65yrs have 2 or more Long Term Conditions

Long Term Conditions

NHS England South West

People living with a long term condition are more likely to use health and care services.
They account for:

50%
of all GP appointments

64%
of all hospital outpatient appointments

70%
of all hospital bed days

70%
of total health and social care spend

The 'Productivity' Challenge

How we measure NHS productivity currently

- NHSE / DHSC has an established method of calculating NHS productivity

  - **Productivity is calculated as a comparison to a baseline period**, so assesses change over time

  Where activity increases more than the cost of delivering it, productivity is positive (we are delivering more output per unit of costs)

  Where costs increase more than activity, productivity is negative (we are delivering less output per unit of cost)

What the measure is telling us

- Overall we have seen a trend since 19/20 of a significant drop in productivity through Covid, with improvements in productivity each year after, but overall the NHS has not yet recovered productivity to 2019/20 levels

- **Activity has increased compared to 2019/20, but costs have increased by over 20%** after inflationary impact is removed

- **SW region productivity in 23/24 has dropped 17%** from the 2019/20 baseline, worse than national average of a 15% reduction

- Emerging **priority area of non-elective length of stay**, with an increase in average length of stay the single largest driver of productivity deterioration since 2019/20 accounting for up to half of the 17% adverse movement we have seen

Productivity – Next Steps

SW Regional focus

- **Productivity is a key regional work stream for 24/25**, with improvement in NHS Productivity a key requirement for sustainable service provision

- **Cross functional approach** to identifying and supporting systems to deliver opportunities to improve productivity

- Challenge will be how we more fully **leverage significant data sets** available to better understand drivers of this change and as a result opportunities for improvement

National Programme approach

- In the latest budget **additional capital for digital investment** was announced, alongside an expectation that the **NHS would demonstrate annual improvements in productivity**

- National programme areas focussing on productivity improvement can be described in terms of:
  - **Operational and clinical productivity** (UEC flow, outpatients, theatres productivity)
  - **Workforce productivity** (e.g. Long-term Workforce Plan initiatives)
  - **Care settings, prevention** (moving care into appropriate settings, secondary prevention and screening)
  - **Technology and digitally enabled productivity** ('one digital' estate, transformation through data, transforming patient facing services, releasing time for workforce, innovation at scale)
  - **Value for money** (non-pay efficiency, back office, commercial, medicines)

'Trade Winds' nationally

Macro trends:

- Patient ownership, empowerment (NHS App: 33m registered users)
- Event-based data recording
- Move towards proactive care

Consequences for Digital:

- 'One Digital Estate' –
    - Infrastructure
    - Staff facing solutions
    - Patient facing solutions
- Event-driven data architecture
- Increasing size of footprints, convergence and larger scale deployments
- Maximise utilisation of national contracts e.g. Federated Data Platform, Microsoft
- Robust cyber strategy to underpin increasing reliance on digital care

Consequences for Workforce:

- Core skills but also pace to adapt, rapidly developing technology and models of care delivery (Virtual Wards, AI, cyber)

SW Regional Digital Transformation Programmes

NHS England South West

- **So, challenges from demographic trends driving demand**

- **Challenges in recovering to 2019/20 levels of health system activity/unit cost**

- How Digital Technology can help over the next 5 years:

  - Foundation………..electronic records in all clinical settings
  - Basic …………………joining clinical records so data flows with the patient
  - Intermediate………understanding populations at local, neighbourhood, place, and care system levels
  - Advanced……………full use of automation, decision support, and predictive analytics to drive towards pro-active care models

Electronic Patient Records investment > £230m in SW

ICS	Acute Trusts	Current EPR's	Status and Planned approach
Gloucestershire	GHFT	GHFT – Allscripts	Allscripts extended
BNSSG	UHBW NBT	UHB - System C NBT – System C	Convergence through optimisation (separate instances)
BSW	RUH GWH SFT	RUH – Cerner GWH – System C SFT – Lorenzo	Single ICS-level instance of Cerner
Dorset	UHD DC	UDH – Graphnet DC – Fortrus Unity	Convergence onto single ICS level instance with Somerset
Somerset	SFT (YDH)	SFT - IMS Maxims/Rio (YDH – Trakcare)	Convergence onto single ICS level instance with Dorset
Devon	UHP T&SD RDUH	RDUH – Epic UHP – OpenEHR T&SD – DXC IHCS	UHP & T&SD aiming to join RDUH Epic instance
Cornwall	RCHT	RCHT – DXC IHCS	Contract signed with Cerner

Group 0/1
Group 2
Group 3
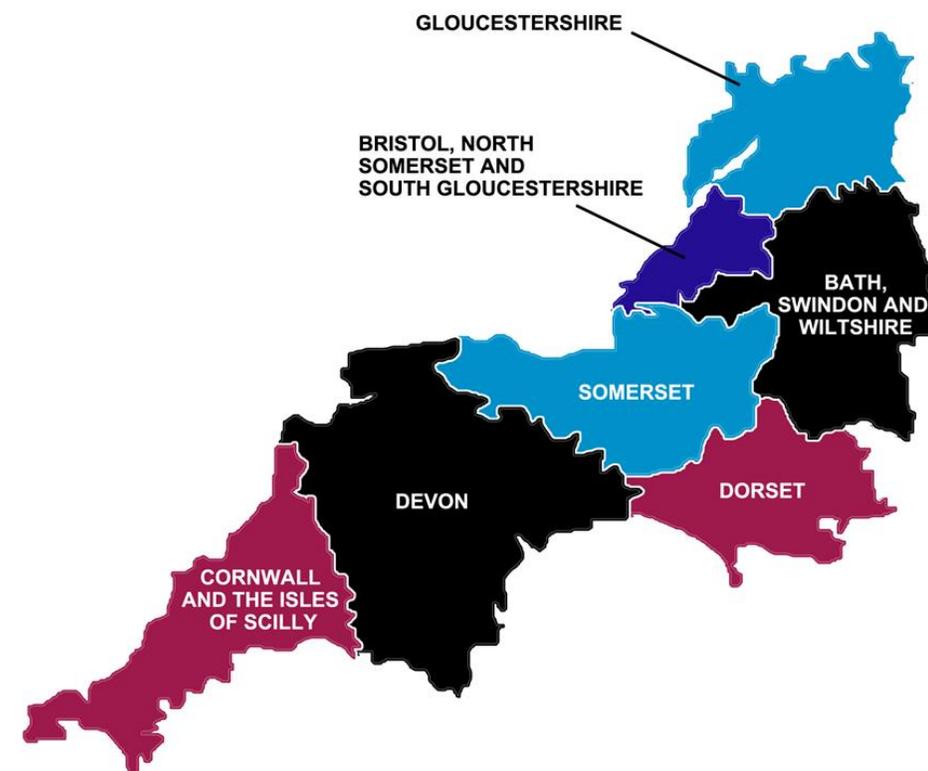
3 'Signature' South West Digital Initiatives

In addition to the delivery of activity across all regions, e.g. EPR's, Digital Diagnostics, Primary Care Access Recovery Plan, Digitising social care records, NHS App, Digital Maturity Assessments, etc. we have 3 major regionally-funded programmes:

Primary Care Digital Experience
1

"To transform the human experience of primary care processes for the better, using digital technology and data"

Digital Neighbourhoods
2

"To empower neighbourhood teams with the digital tools and data they need to keep people well, at home, for longer"

One South West ShCR
3

"To transform the experience of direct patient care, through seamless digital information flows, across organisational boundaries"

Primary Care Laboratory

The problem: how to digitally transform services in a challenging live environment (i.e. Primary Care)?

What is the Lab?

- A safe physical and virtual environment to learn and experiment

- A trusted partnership to test innovative solutions in near to real-life environments

- Helps address real needs of end-users, increasing acceptance and reducing time to adoption

- Able to demonstrate ambitious technical solutions that directly address known problems

- Ultimately aim to drive supplier market towards development of solutions to match NHS requirements

Physical simulation

- Highly configurable, open-topped spaces, with mobile walls
- Observable, with a mezzanine or similar solution to oversee workflow
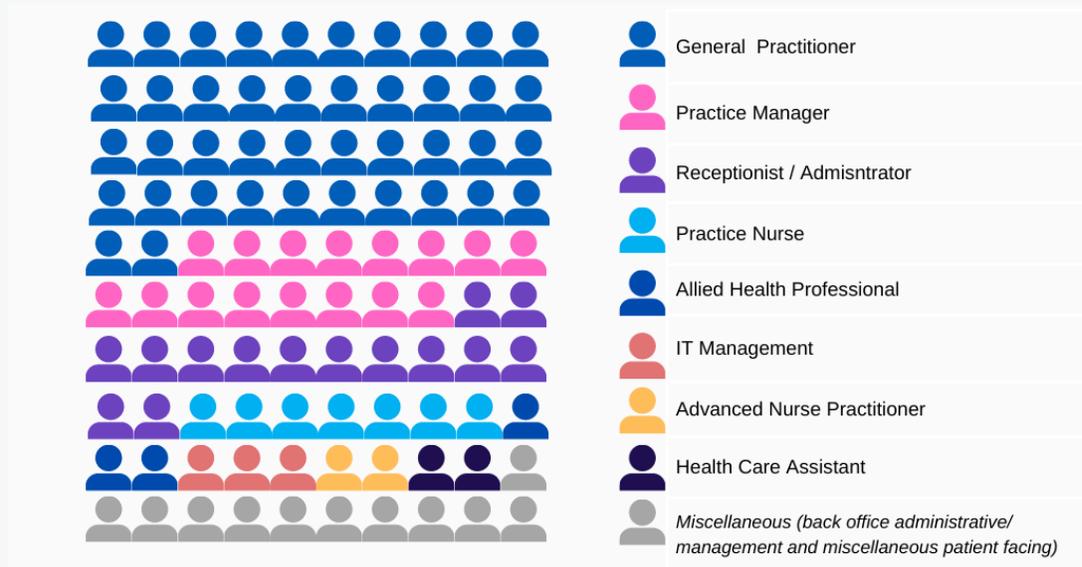
Primary Care Laboratory research data results

There are139 Primary Care Networks (PCN), 545 GP practices in the South West region with a GP Practice workforce of approximately 31,610 (based on 58 per Practice) (clinical and non-clinical inclusive)

A short survey of the Primary Care workforce in the region requested the ranking of the five high-level problem statements, with the opportunity to add and rank an additional problem, if desired. The survey ran between 23rd June and 31st July 2022 with Primary Care colleagues across the seven ICSs in the South West. We received 93 additional problem statements as a sixth problem, which were themed into a further six problem statements.

- **61% (85) of all South West PCNs** returned at least one survey response

- **26% (141) of all South West GP Practices** returned at least one survey response

In total 351 populated surveys were returned (1.11%), and 116 problems / issues raised which could (potentially) be tackled by the Lab.

The final outcome was a group of 11 problem statements, representing the key challenges in Primary Care in 2022.

General Practitioner

Practice Manager

Receptionist / Adminsntrator

Practice Nurse

Allied Health Professional

IT Management

Advanced Nurse Practitioner

Health Care Assistant

Miscellaneous (back office administrative/ management and miscellaneous patient facing)

Key outcomes of Problem research

43.2% Managing patient access to primary care is challenging

22% Lack of capacity to manage long term conditions impacts patient care

13.2% Information required from other organisations is not always visible or accessible

6.4% Inputting information is time consuming and inefficient

5.6% The way information is organised and presented can make interactions with patients inefficient

4% Primary care demand is outstripping capacity

2.4% Expectations of primary care are unrealistic

1.6% Communication with other services and organisations is challenging

0.8% IT software and support is sub-optimal

0.4% Lack of data analysis prevents effective planning

0.4% There is a lack of capacity in social care

Summary

- **Significant challenges facing the NHS over short and longer term, including:**

    - Addressing rising costs of care delivery
    - Address rising demand from demographic trends

- Ambitious national and SW regional Digital Transformation agenda is understood to be an essential part of the solution to these challenges.

- Our digital ambition spans deployment of clinical record solutions through to offline testing of future technologies.

    ……..The wider workforce needs to move with us….