Health and Wellbeing Board (HWB) Paper

1. Reference Information

Paper tracking information	
Title:	Surrey Wide Data Strategy - Update
HWBS Priority populations:	All
HWBS Priority - 1, 2 and/or 3:	All
HWBS Outcomes/System Capabilities:	- Data, Insights and Evidence - The needs of those experiencing multiple disadvantage are met - Serious conditions and diseases are prevented - People are supported to live well independently for as long as possible
HWBS Principles for Working with Communities:	- Co-designing: 'Deciding together' - Co-producing: 'Delivering together'
Interventions for reducing health inequalities:	- Civic / System Level interventions - Service Based interventions - Community Led interventions
Author(s):	David Howell, Joint Director for Strategic Insight and Analytics (Surrey Heartlands Integrated Care System); david.howell5@nhs.net
Board Sponsor(s):	Tim De Meyer - Chief Constable of Surrey Police
HWB meeting date:	21 June 2023
Related HWB papers:	Surrey Wide Data Strategy, May 2022
Annexes/Appendices:	**Appendix 1**: Surrey Wide Data Strategy

2. Executive summary

The Surrey Wide Data Strategy 2022, sets out a vision to build an interoperable data and analytics ecosystem, comprising of shared data from a range of partner organisations across Surrey to help deliver better care/services to our residents now, and in the future. This strategy was broken down into four pillars required for success:

Purpose

We collect and share quality data to improve outcomes

Infrastructure

We ensure security and safety in line with standards & Governance

People

We work through a collaborative culture to develop skills capabilities

Opportunity

We enable ethical data driven decisions, turning insight into action
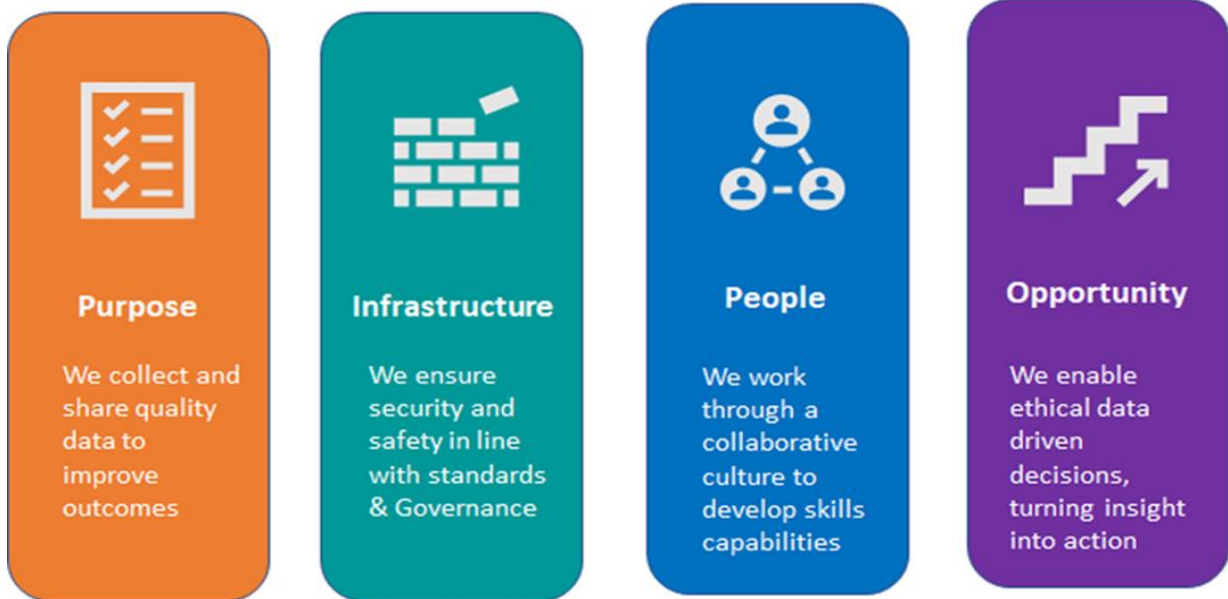
This paper aims to provide an update to the Board on the current progress and implementation for the Surrey wide data strategy, as well as providing an insight into the challenges faced at this time. Since the purpose for the use of data across the system was extensively covered in the data strategy, this report will focus upon the latter three pillars respectively. This links to the 'Data Insights and Evidence' system Capability for the Health and Wellbeing Board priorities:
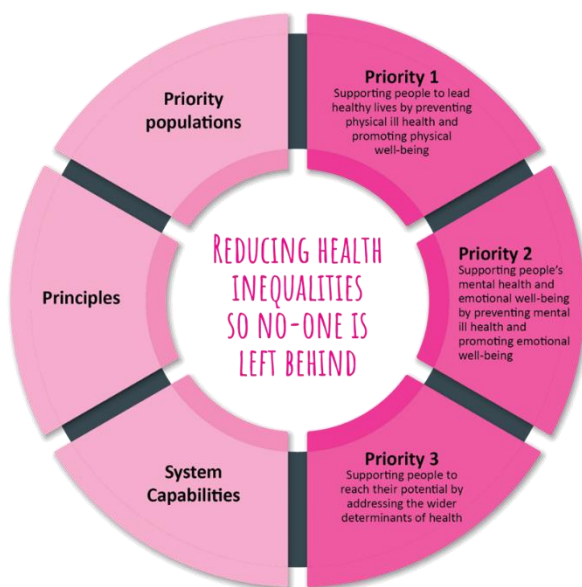
System capabilities

- Empowering and Thriving Communities
- Clear Governance
- Estate Management
- Workforce Recovery and Development
- Programme Management
- Equality, Diversity and Inclusion incl. digital
- Data, Insights and Evidence
- Integrated Care

3. Recommendations

The Health and Wellbeing Board is asked to:

1. Note the progress that has been made to date across the system.

2. Ensure that the direction of travel and progress being made by the teams are in line with the views of the Health and Wellbeing Board membership.
3. Provide feedback and recommendations on the highlighted areas of challenge being faced at this time.

4. Progress Updates

Infrastructure

A system wide project group has been established to plan and develop a roadmap for the IT systems and platforms required to deliver the data strategy. A Strategic Outline Case (SOC) was completed in December 2022 and more recently, the next stage of the Outline Business Case (OBC) has been signed off by Surrey Heartlands ICS, and ICB. The OBC describes how we are going to implement the recommendations from the Surrey Data Strategy through the development of an Integrated Digital & Data Platform (IDDP) by the end of financial year 2024/2025. This will commence with a focus on integrated health and care across the system, but with a capability to expand to wider services in the near future. The next step and final gateway is to complete a Full Business Case (FBC), providing final costings and delivery plans for approval and onward delivery.

This IDDP will, over time, create a central and shared place to hold data about the population of Surrey. Contributions to this repository will be able to be made by a range of partners and health sources (where standards and information governance criteria is reached) to create a holistic and broad view of the population. This data can then be used by health and social care, as well as wider partners (where legal/ethical) for operational planning and reporting and has the potential to enable more advanced analytics work for complex, system wide issues. It will also provide a secure environment for research and help drive more health specific objectives related to the Surrey Care Record, Personal Health Record and Population Health Management.

This shared source of data will make it easier for authorised users across the system to find data they need to support local decision making and provide greater trust around the accuracy and timeliness of this information. It will also support greater transparency of performance and shared issues, ensuring that we can operate more effectively as one system in support of our patients, residents and communities.

The design and implementation of the IDDP will be phased and so approval of the FBC will enable us to move to begin implementation of the initial building block for this work which will focus on expanding the capability of existing IT systems and tools already implemented within Surrey.

This programme will enable the system to realise a series of intended benefits, measuring the financial and non-financial impact of any investment. These will be described in more detail for the FBC, including a plan to realise some benefits during the initial 'converge' stage of the programme. The provisional benefits include:

a. More widespread use of data and population health approaches to inform and evaluate interventions by all partners to support priority population groups and reduce health inequalities.

b. Greater availability and efficient management of richer, better-linked data and increase in public understanding and support for data sharing.

c. Resources (Finance, Workforce, Estates) better targeted between reactive/proactive care and centralised/community settings.

d. Increase in staff satisfaction and retention, and wider system teams using data to drive better decision making.

e. In addition, there may be opportunities to look at greater efficiencies that could be achieved through use of the platform and its data. For example, there may be duplicated storage or reporting that can be removed by partners. The expectation is that these opportunities would be identified during the implementation period. It is not anticipated that local case management systems could be replaced by this platform.

8

People

Supporting our roadmap towards the vision of a shared analytics ecosystem, a significant amount of progress has also been made around integration of our shared care record platform across the Thames Valley and Surrey (TVS) partner systems.
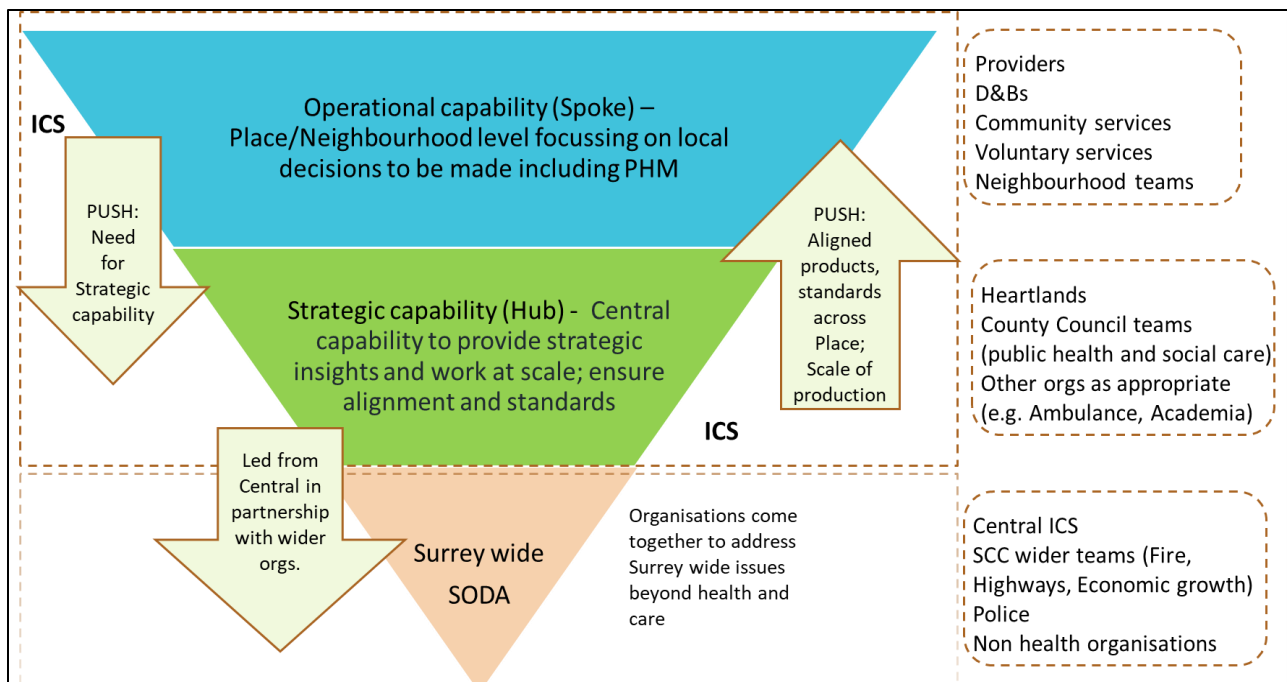
This work, being led by Frimley partners, is being undertaken to ensure that there is closer cross collaboration between all member ICSs including with sharing of best practice, dashboards, analytical resources and expertise.

The Surrey Wide data strategy sets out the ambition for how analytical communities need to be better connected to provide the integrated insight and analytical capabilities required for the system, referred to as the data operating model. A vision

for this data operating model has now been developed and is summarised below for reference:

Progress to date:

Towns development: A plan has been developed and shared with system partners focusing upon an approach to support and develop the role of towns as distinct, recognisable places and communities around which partners can coalesce and work. This new approach proposed a 'spatial hierarchy' and phased approach over the coming year to delivering integration and partnership in towns. A proposal has been made for ten priority towns to initially focus upon in which the new approach will be developed and rolled out across the rest of the county. All of which is aimed at securing more effective and efficient delivery and better outcomes for Surrey residents and businesses. Some of these outcomes and the measures used to assess them might include:

- Improved overall life expectancy and reductions in differentials
- Levels of employment and ability of employers to recruit
- Qualitative happiness scores
- Reductions in smoking/alcohol/drug usage and dependency
- Improved quality of public realm
- Positive impacts on climate change and CO2 emissions reduction
- Community activity, social capital, and civic engagement

Central Hub Formation: A working group of analysts from across the system have recently kick started the formation of the hub and to date have held a number of initial meetings and workshops to focus upon a common approach to identification of vulnerable cohorts and population segmentation. Over the coming next couple of months, the hub have agreed to commence by working as a multi-disciplinary team on a business problem that is of strategic importance to all members of the group. This 'use case' will enable us to establish new ways of working, understand the potential barriers, how we can share information, knowledge and skills and start to establish a common hub identity.

SODA: We have begun a project with partners on undertaking a strategic needs assessment to inform a strategy on reducing serious violence. The duty on reducing violence is placed on all relevant local organisations, and so this is a good opportunity for bringing together data and analysis across all the relevant Surrey organisations. The project will help identify the opportunities and challenges in bringing the insight together, including information sharing, which we will want to use in the future remit and direction of SODA.

Once in place the IDDP will support both the centralised hub and SODA to have easier access to timely, relevant and trustworthy data. This operating model will facilitate a greater sharing of skills and knowledge across the system, build greater understanding of the datasets needed and will help shape and guide the development of the IDDP, long term, ensuring that it enables analysts (across the system) to harness the power of data for better decision making.

Opportunities

The Hewitt Report: The recent Hewitt Report has recognised that timely, relevant and transparent data is essential for integration, improvement, innovation and accountability. As high performing ICSs are already showing, high quality, integrated data collection and interoperable digital systems can initiate real change. Good data, used well, can generate actionable insights into outcomes and the drivers of inequalities, as well as productivity, quality, and safety.

Progress to date:

Through joint working and the active involvement of key stakeholders the programme team are focusing on how we can support and implement some of the recommendations that have been highlighted through the Hewitt review, all of which will strongly support the data strategy implementation for the future. These include the following:

- Focusing on enabling data sharing and digital innovation that supports real-time service improvement
- Defining standards on data taxonomy and services' interoperability, and coordinating data requests to the system
- Progressing ICS devolved autonomy for decision making and finances to enable system-wide change to promote health production and thriving communities.
- Streamline and simplify the approach to system governance and accountability. This is particularly relevant for funding initiatives which span organisations and are often dotted around the system with different bidding requirements, templates, accountability reporting, timescales, objectives and flexibilities.
- Encourage more local input and involvement in designing and delivering regulatory and accountability regimes. Streamlining the regulatory system and reducing the number of regulators would improve clarity of system assurance and enable partners to become more involved in co-developing and delivering against an accountability system for their ICS.
- The balance of national versus local targets is key to ensure that sufficient focus and priority can be given. We would like to see a smaller numbers of targets, sufficiently aligned across national and system/local priorities.
- Targets should remain static for a period of time to allow organisations to accurately monitor and review trends.
- System improvement relies on collective accountability, moving away from an organisational mindset. There is a real opportunity for stronger peer support and challenge amongst providers and system partners.

5. Challenges

The top three key risks for taking forward the Surrey Wide Data Strategy are as follows:

Resources. RED A lack of investment or availability of staff and specialist support (technical, commercial and IG) may hamper our ability to progress the Integrated Digital & Data Platform or substantially improve intelligence support to place and neighbourhood teams through the data operating model. This will however be addressed in the Full Business Case for the IDDP.

Alignment between local, regional and national plans around data and analytics. AMBER A myriad of other initiatives risk duplicating or undermining the systems own roadmap. We will work with national and regional teams to understand the future direction of travel to ensure that our own IDDP and Operating Model can align/integrate into this as required.

Public Support. AMBER Public confidence in the way their data is handled and shared is vital. We will need to develop and consult a Digital & Data Ethics Committee (as recommended in the Surrey Data Strategy) to provide assurance that our use of data will be legal, safe, and proportionate, and ensure that sufficient resource for Information Governance activities, communications and engagement is included in the forward plan.

6. Next Steps and Timescales

Infrastructure

- **IDDP Strategic Outline Case (*Completed Feb-23*).** This document lays out the strategic case for change and seeks authority to continue to develop the full business case.
- **IDDP Outline Business Case (*Completed Apr-23*).** This document will lay out a more detailed plan and identify arrangements for procurement.
- **IDDP Full Business Care (Expected Aug-23).** This will select the most economically advantageous tender and to put in place arrangements for programme delivery. **ACTION: Surrey Heartlands Integrated Care Board**

People

- **Sharing of Best practice for vulnerable cohort identification processes (*Completed Feb 23*).** Analytical hub to agree what outcomes we would be seeking to have from an aligned vulnerable cohort and segmentation approaches identification process and to share best practice from each partner with the rest of the system collaborators.

- **Develop a recommendations paper** *(Completed Apr-23)* on an aligned approach to vulnerable cohort identification for sign off by the neighbourhood board
- **Joint analytical approach to support the Prevention Spend Mapping Programme (Jun-23).** Centralised hub to jointly work together on prevention spend mapping. **ACTION: Surrey Heartlands ICS Analytical Hub Partners**
- **SODA – Serious Crime Workstream (May-23).** Establishment of working group for this use case and development of a joint multi-agency analytical product. **ACTION: Relevant systemwide partner organisations**

8   Opportunities

- **Spend Analysis Recommendations Paper (Jun-23)**. Development of a spend analysis paper to be shared with ICS Stakeholders, identifying the recommendations from the Hewitt review and how these can be embedded into the system across a number of areas. **ACTION: ICS (Surrey and Frimley) Partners**