

Health and Wellbeing Board Paper

1. Reference Information

Paper tracking information	
Title:	Digital workstreams for Restoration and Recovery across the System and Digital Inclusion
Related Health and Wellbeing Priority:	System Capability – Digital
Author:	Katherine Church, Chief Digital Officer (Surrey Heartlands ICS); 07971091484
Sponsor:	Rob Moran, Chief Executive, Elmbridge Borough Council (Priority 3 Sponsor)
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Related papers	Annex 1 - Digital Inclusion data and insights presentation

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2. Executive summary

Developing system-wide digital capability is a key transformation driver, designing and delivering people centred, technology focused change to significantly improve operational efficiency and outcomes for residents. It was identified as key system enabler in the HWB Strategy and is currently focused on Restoration and Recovery as a result of the pandemic, with a particular focus on digital inclusion in the ICS. The following gives an update on these developments.

3. Recommendations

That the relevant Proper Officer(s) in consultation with the Chairman:

1. Notes the significant digital capabilities being delivered across the system as part of Restoration and Recovery and the need for partnership working.
2. Supports the need for more joined up communication of digital across partners and a greater focus on citizen engagement at every level.
3. Supports the ongoing data analysis and insights regarding digital exclusion given its relationship to health inequalities.
4. Supports the development of a Digital Inclusion Strategy, as requested by the ICS System Board.

4. Reason for Recommendations

There is a plethora of digital development work currently being planned and / or delivered across the system to drive Restoration and Recovery from the pandemic that partners will need to work on together. This work requires engagement at every level to ensure practitioner buy in to new ways of working and a deep focus on the needs of people to ensure digital products work for the people we are codesigning them with.

Health inequalities have been exacerbated during the pandemic. Digital delivery of services has been a key strategy for outbreak control but has also resulted in some service users being unable to access services due to a lack of equipment, connectivity and/or skills. Further research needs to be undertaken to understand how some population groups are digitally excluded and a Digital Inclusion strategy developed.

5. Detail

Digital capability is a key enabler of to a number of the Recovery and Restoration workstreams (which were the key mechanisms for transformation in the ICS as part of Covid).

The digital work commissioned by the Restoration and Recovery Workstreams should integrate with and align to the broad system priorities and scope, as agreed by the Digital Programme Board and be clearly aligned to the principles of the Health and Wellbeing Board and its Start Well, Live Well and End Well life stages.

1. Digital Primary Care/Healthy Neighbourhoods
2. Children's Digital Programme
3. Adults' Digital Programme (including End of Life Strategy and Enabling You with Technology)
4. Shared Data and Shared Records (including the Surrey Care Record and Population Health Management)
5. Digital Infrastructure and One Public Estate
6. Digital Inclusion – an overarching programme of activity underpinning every aspect of our digital work

Workstream One - Digital first primary care/ healthy neighbourhoods

Digitise the model of health and social care delivery for both urgent care and 4 long term conditions to move health and care services closer to the resident, enable early intervention and prevention and enable signposting to the most appropriate provider for resolution of care needs.

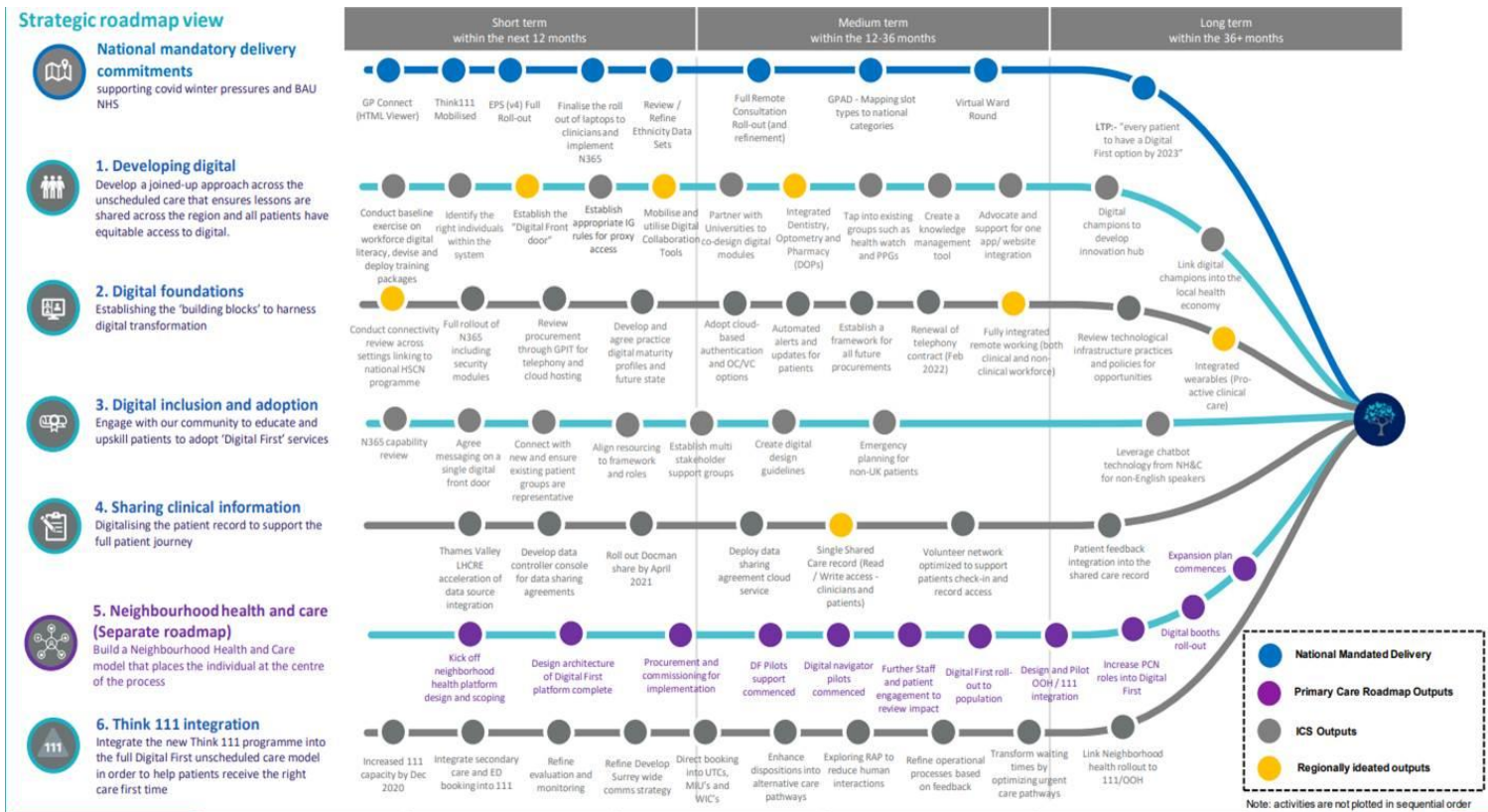
The ICS digital team role is to work with primary care, SCC, community providers and the ICPs and PCNs to define, design, commission to build the data and technical products to deliver the strategy.

The digital First primary care programme has 6 core workstreams which align to and integrate core ICS digital programmes into a coherent and deliverable model with clear outcome measures at each stage.

A 5-year funding plan from region supports the delivery of this programme. Mobilisation is underway with a first stage programme plan being delivered for Q1 2021 along with a recruitment strategy to bring the core digital and technical skills in to support Primary Care and the ICPs, PCNs in their delivery.

This programme will deliver tangible, measurable reduction in the cost of delivery of primary care in particular as well as improving cost effectiveness of health and social care outcomes across the system.

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Workstream Two – children's digital programme

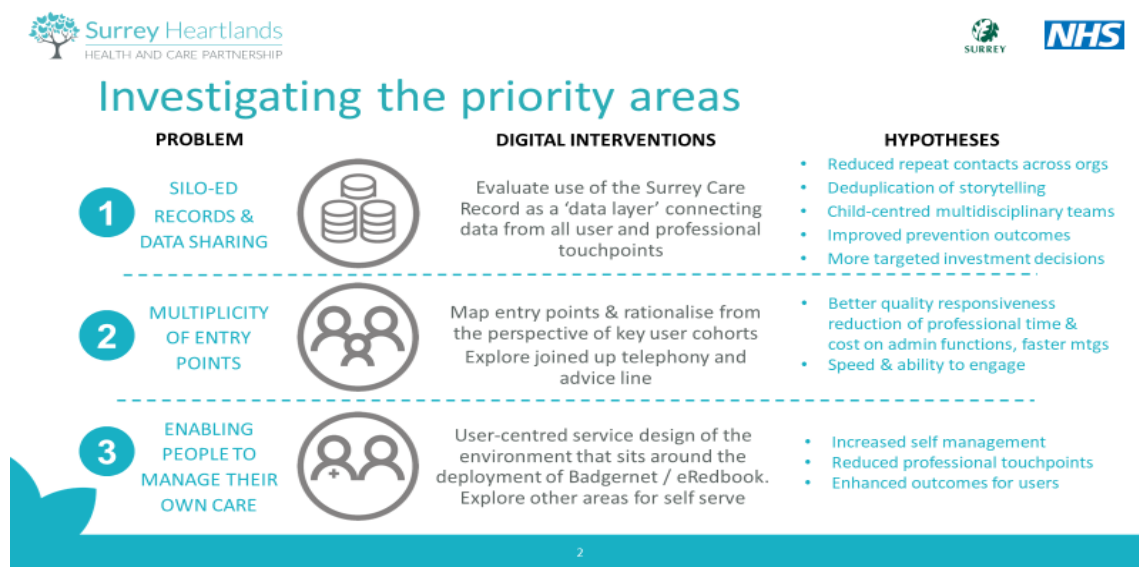
This is a programme of digital projects focused on connecting health and care services for children across the boundaries of organisations; enabling children and families to be able to easily navigate a complex set of providers and enabling clinicians and professionals to work collaboratively across the boundaries of organisations. This is very clearly aligned with the Health and Wellbeing Start Well objective and projects aligned to developing the first 1000 days of a child's life in Surrey.

The programme was commissioned and is governed by the Children's Strategic Group (chaired by Rachael Wardell) and made up of senior representation from across all children's providers.

The programme has 3 key workstreams and incorporates the newly commissioned Emotional Health and Wellbeing digital services as part of its scope

Disconnectedness of data, services and information as well as duplication of small, sub scale digital projects create confusion for people seeking help and information and navigating our services. This programme brings digital together as a unified front door and entry point to services for residents.

The programme will reduce the time and frustration for people to find and access the services they need and reduce administration and effort in Multi- Disciplinary Team working around the needs of children and families. The programme will also seek to digitise and offer remote management solutions for key pathways such as maternity services.



Workstream Three – Adults' Digital Programme

This programme is a series of projects looking at the integration of Health & Social Care and focusing on key customer journeys (pathways) to improve efficiency of administrative processes, reduce timescales and costs of delivery of services and improve outcomes for vulnerable residents.

A key part of this workstream is focusing on the digital projects to support our Palliative & End of Life Care (PEoLC) strategy.

After in-depth interviews and workshops, practitioners most strongly identified the **timeliness** of information, as well as the **disconnectedness** of the websites, apps, advice lines, systems and data as key areas for digital focus. These include remote care and technology in the home, Discharge to Assess pathway redesign and operational process redesign, Digitising the Death Certificate programme and our PEoLC strategy.

The digital programme for PEO LC therefore focuses in on those key areas as shown below:



Remote monitoring and digital solutions to keep people safe in their own homes:

We are working with SCC on a remote monitoring programme in partnership with Mole Valley DC to extend and modernise their current Telehealth offer into a menu of digital support tools, linked to a digital team of OTs and other professionals to create a package of support to people coming through our reablement services. This exciting pilot will extend to investigating a rapid response service in partnership with local Health and Ambulance services to minimise hospitalisations and admissions to A&E in the event of falls.

Other digital in the home projects include TiHM for dementia which we launched during the pandemic to enable remote diagnostics and symptom monitoring for up to 1000 Surrey Residents. We are working to map out the range of remote monitoring initiatives across Surrey, understand the benefits and scale and further develop the best schemes.

Core benefits to be delivered through the Adult Digital Projects will include reduction in case administration time as professionals are able to collaborate across organisations, reduction in hospital admissions, GP visits, ambulance callouts, social care referrals and packages of care through enhanced independence and support for people to stay independent in their own homes.

One of the core projects is Medical Certificate of Cause of Death (MCCD) – where we are working cross SCC, Acutes and Primary Care to digitise the end to end process of recording a death and creating and issuing a death certificate. Under 50% of all our cases currently meet the KPI of 5 days to issue a death certificate and this causes distress to people at a time of significant unhappiness. One of the core outcome measures will be to address timeliness and quality of process which reduce cost to administer. We are also supporting the rollout of the Medical Examiner roles in the community.

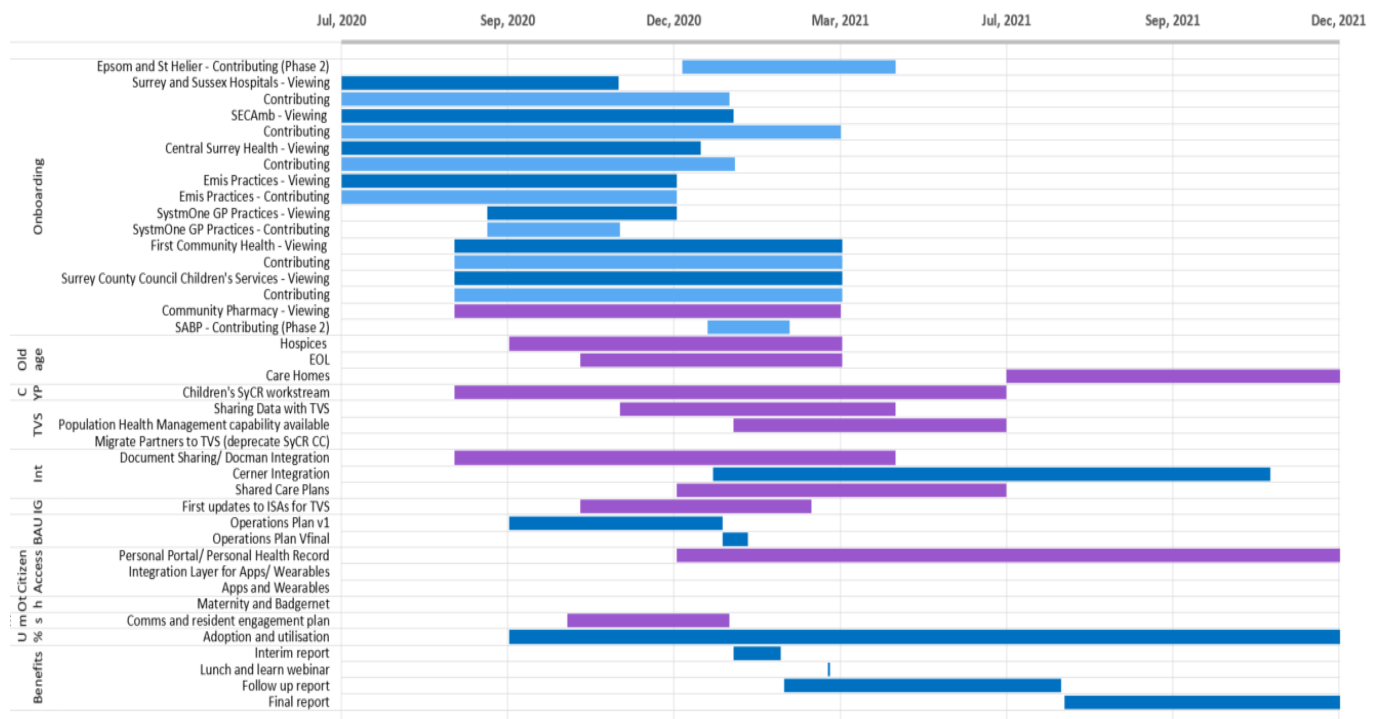
Workstream Four – shared data and shared records

The Surrey Care Record is one of the foundational digital and data sharing products in Surrey Heartlands. At the time of writing, 95% of GPs and all trusts are actively using the solution, with our community providers coming on stream in H1 2021 along with Ambulance services.

Data is sourced directly from each participating health and social care organisation across Surrey in order to build an accurate and complete digital view of a patient's history, simplifying life not only for our citizens, but also for all health and care practitioners across the county.

Having all this patient and citizen data housed in a central repository is one of the precursors and enablers to our data strategy, where a distinct need has been identified for a fully linked data set upon which detailed analysis can be performed.

The roadmap below shows the planned activities for the Surrey Care Record programme for 2021



ASPH & RS Cerner/CareCentric integration scope:

- Replication of existing data feeds into SyCR
- SyCR contextual link within Millennium

This central data repository is at the centre of our data strategy to deliver data for multiple purposes:

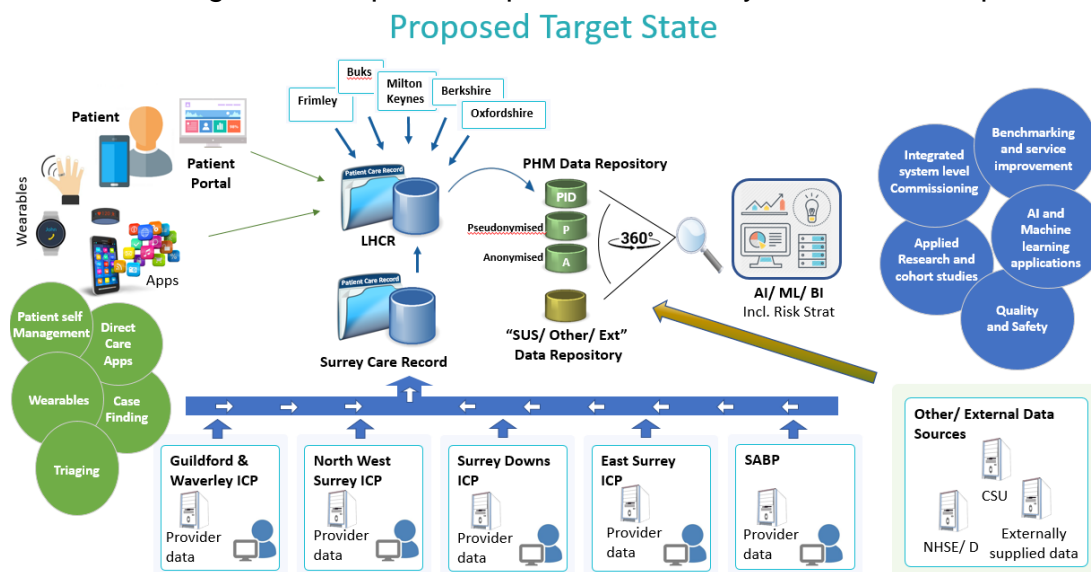
- Integrated data sets to support direct care
- Cross provider data to support financial and quality monitoring
- Integrated operational data to enable service planning and improve responsiveness and effectiveness

- Integrated personalised data to support secondary uses such as PHM, Risk Strat etc

We are working collaboratively with SCC and SODA to design and document our data strategy at an ICS level, ensuring that we have a common vision of what data can deliver for our people and our services. The data strategy is a multifaceted one; ranging first and foremost from the provision of a single source of the truth upon which ICS-wide analytics can be based, through to simplification of the data landscape, the removal of unnecessary duplication and the attainment of economies of scale. This data strategy will inform the foundation for the future development of PHM, Risk Stratification strategy and development as well as underpinning wider system discussions around SODA.

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The platform hosting the Surrey Care Record includes a Population Health Management capability which will allow us to initiate and progress our journey, significantly reducing the cost and complexity of delivering PMH from our current Wave 1 highly manual operating model. The diagram below shows a high-level conceptual data architecture to deliver against those 4 overarching data priorities. we are working with data partners, providers and key transformation partners



Workstream Five – digital infrastructure and one public estate

Enabling fast, safe connections across networks, having the right IT equipment to be able to work effectively and safely, joined up communication channels including telephony, SMS platforms even email are the basic building blocks upon which a digital model of care are deployed. Until we fix the basics, our ability to engage with patients in the channel of their choice (which will be digital for many) will be hampered and costly.

Enhancing Primary Care IT, connectivity and support – extending to Community Providers:

This programme of work incorporates and has key dependencies on GPIT and CCG IT (as we have a common outsourced IT partner) and is a critical component for the digitisation of primary care. We have significant opportunities to join up IT support across Primary Care and Community Care as a minimum and significantly address the critical issues which are slowing digital transformation down. This will be a topic for the digital programme board in 2021.

Remote and Blended Workstyles across Surrey Heartlands – joining people up to work on common areas

We have a vision to support integrated working and a joined up estates strategy that any authorised employee (regardless of whether they work for Health or Social Care) could walk into any building (One Public Estate) under our blended remote/ on-site working model and do the following:

- Connect seamlessly to universal wifi
- Connect to the network they need to connect to the systems they need to work on to do their jobs (preferably without needing 2 laptops)
- Avoid having 2 network connections in core public buildings (COIN and Cygnet) and work to integrate the 2 networks in future buildings – design the interconnectivity between the networks until we can deploy a single one (if possible)
- Federate the versions of O365 and N365 across Surrey Heartlands
- Integrate other core systems such as the SyCR, telephony, messaging (explore viability)
- Extensive digital training and adoption of N365: we are appointing an expert training partner as we speak – we also need to align this across the versions and tenancies
- Design smart offices – capable of supporting smart working and extensive collaboration between Teams and make the best use of being physically together when we are physically together

This workstream is also working with the Estates board to design the digital infrastructure model to support future clinical models of care, including new community locations, upgrading of existing locations to support digital health and social care.

In this workstream, we will also join up with Surrey County Council's digital infrastructure strategy for the next 10 years, ensuring the needs of the Health economy for super fast broadband, hyper connectivity, 5G, extending coverage to remote and rural locations and ensuring that Surrey is an attractive place for business and research to be sited.

Anticipated benefits from this work range from reducing the cost of supporting employees with tech (each employee with multiple laptops costs an additional £500 est per annum) to significantly reducing face to face clinical contact, reducing networking costs etc.

This work programme will also support Transforming Outcomes for People.

Workstream Six – digital inclusion

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Digital inclusion is closely aligned to health inequalities. The ICS Board recognised that digital exclusion was a critical factor in determining the success of our digital transformation strategy and the take up of digital services by the people of Surrey. Digital exclusion has been accepted as one of the core health inequalities that we, as a system, will understand and design solutions to address.

In July 2020, 11% of Surrey residents had not accessed the internet in the past 3 months. Around 200,000 residents lack one of the digital skills required to fully participate in fully digital services, though this may be a significant under estimation. With an ageing population, many residents live in sheltered accommodation, care homes or alone with little or no access to digital services. In Surrey, there is an overwhelming correlation between social and digital exclusion, linked to areas of geographic deprivation (see Annex 1 - Digital Inclusion data and insights presentation).

The ICS Health Inequalities board has taken ownership of these 8 recommendations which the digital programme will coordinate and advise on, ensuring that all system participants work together in a coordinated manner and use all assets and touch points to drive inclusion.

- Continue our engagement work to gain greater insight and understanding of digital exclusion
- Develop system-wide outcomes for inclusion, addressing the factors already identified
- Digital inclusion to be owned by the ICS Executive (linked to health inequalities), with ambitious targets around improving participation, digital access and embedding inclusion
- Work on our digital infrastructure, achieving faster broadband to get more people online
- Review our digital, engagement and broader strategies to ensure digital inclusion is considered (and plans for a new NHS Digital Health Technology Standard)
- Build digital inclusion into the design of all our projects and into procurement criteria
- Build digital inclusion criteria into our governance for all projects that have a digital element
- Create a cross Surrey Heartlands digital champions programme across health, the voluntary sector and the council to create a digital training programme for people who want support

Having had oversight of data and insights around digital exclusion, the ICS Board has requested a Digital Inclusion Strategy.

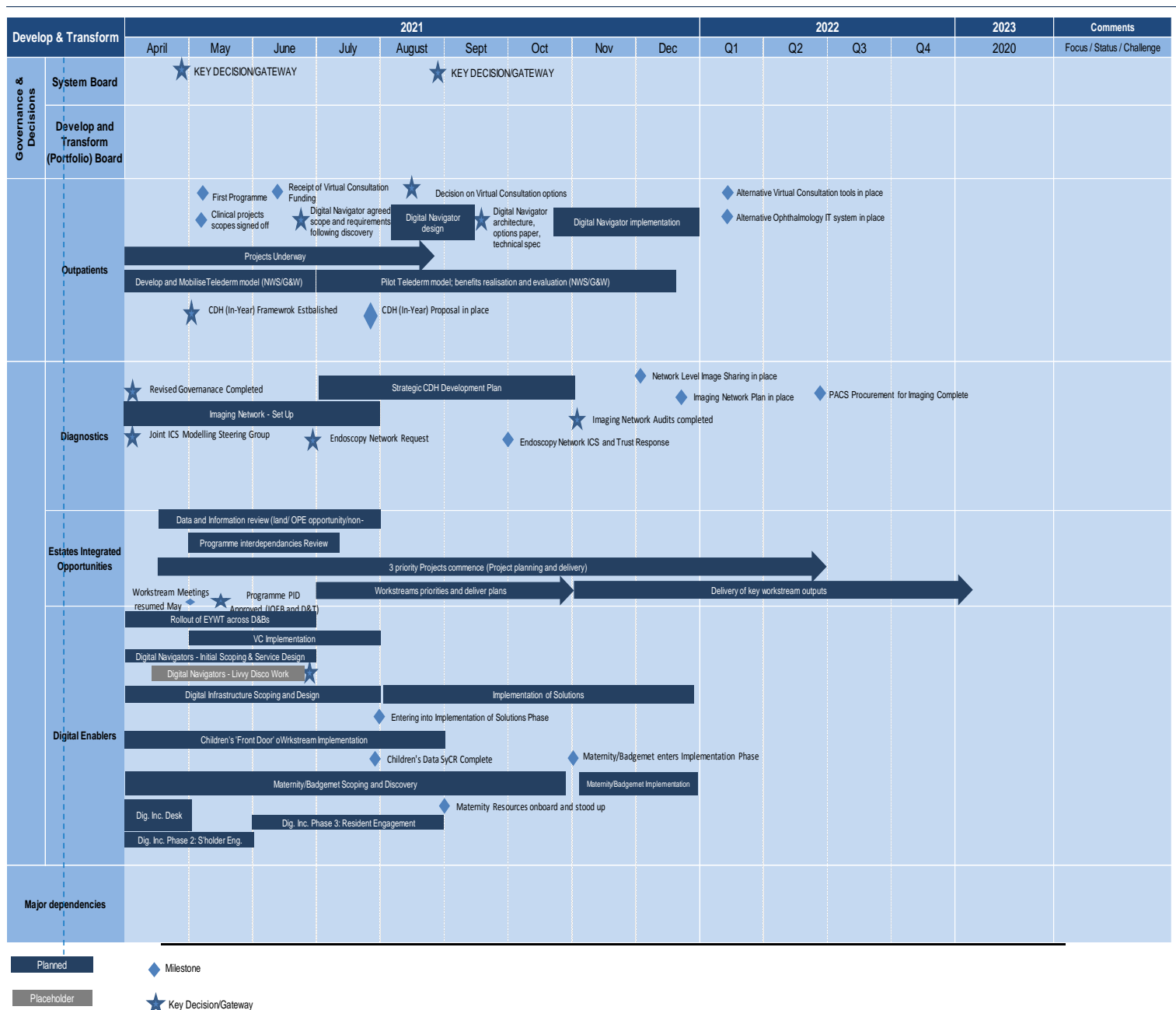
6. Challenges

There is a risk management framework in place for the Digital Programme as a whole to mitigate the following risks:

- Potential lack of resourcing means projects are not scoped or delivered
- COVID surge causing changing priorities
- Need to prioritise a System first approach
- Complexity of programme
- Delivery of scoped projects

7. Timescale and delivery plan

The overall digital programme is initiated and all projects in mobilisation or in delivery as shown in the timeline below.



8. How is this being communicated?

Digital is a key enabler across the majority of our ICS transformation programmes and as such feeds into and reports into a number of key boards and working groups including the Children's Strategic Leadership Group, Health Inequalities Board, Surrey Care Record Board, Digital Programme Board and ICS Executives to name a few.

There is more work to do to engage with practitioners and citizens to ensure deep codesign. There is also more to do at a system level to embed citizen centricity in all our projects. We are addressing this through our digital inclusion project.

9. Dependencies

We are working collaboratively with the SCC Digital, Agile and Data Programme to ensure an aligned approach to discovery, design and delivery that utilises developed capabilities and capacity. Driving impactful results that benefit our residents.

10. Next steps

The work-up of priority Restoration and Recovery digital projects is ongoing against the broad timelines above.

Next steps regarding Digital Inclusion are:

	Action	Status and investment required
1	Research & Insight near completion. To be handed over to ICPs, SCC and Primary Care to action in detail	Detailed mapping of available education resources near completion and will be shared with ICPs for local deployment.
2	Connectivity issues Surrey County Council is responsible for county wide connectivity and infrastructure. This insight to be incorporated into SCC's digital strategy, including ongoing work with Openreach to address poorly served postcodes	In progress re SCC infrastructure programme. System board to consider commissioning implications re care homes connectivity
3	Create a working group with representatives from all 4 ICPs, SCC, and Primary Care for ongoing development and central monitoring of support rollout. Together, create and monitor deliverables against the zero tolerance target.	In progress – only G&W have a dedicated team member working on Digital Inclusion, so we need to find the right people from the other 3 ICPs to be a part of this and lead for their area.
4	Deploy the Digital Eagles and Good Foundation training and upskilling programme through the ICPs, along with supporting materials and marketing content	Final content being put together by the end of April to deploy the FREE content locally through the ICPs and voluntary sector.
5	Secure funding for Tech Point hire of Library spaces for Digital Eagles training centres. Physical spaces where people can come and be trained in digital literacy by digital buddy volunteers through the library network.	Funding source TBC Staines Library is a pilot library to test Tech Point. Tech hubs can be installed in Staines for 3 months to test the project for c£10k (library hire)
4	Recurrent funding for the Surrey Coalition for Disabled People. Their work is extremely valuable but cannot currently scale to meet the demand, currently having reached approx. 2,500 Surrey residents but with networks allowing reach of up to c. 50,000	The Surrey Coalition has multiple small, non recurring funding sources and would benefit from substantive funding support and a Surrey wide strategy to deliver against.
6	Support the Primary care digital navigator programme . Network of digital trainers working with PCNs to implement and support digital healthcare.	NHSX funding applied for 15 roles to support primary care and care homes to deliver digital training and in particular the adoption of digital health monitoring technology. Up to 35,000 people in 3 years

The Digital Inclusion Strategy will be developed presented to the Health and Wellbeing Board for approval.

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