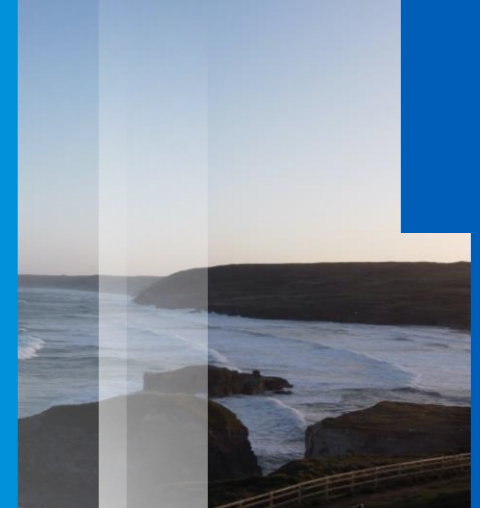


# Cornwall & IoS ICB

Royal Cornwall Hospitals Trust

Cornwall Partnership NHS Foundation Trust

Cornwall IT Services



## Our Digital Transformation Journey

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February 2022

## Our ICS Vision....

Cornwall and Isles of Scilly will be a great place to be born, live and thrive and grow old.

- We have connected, healthy, caring communities for one and all
- Our young people have the best start in life
- We all live well
- As we get older we are able to live happy lives in a place we call home

# ICS Integrated Care Strategy

## How We Will Deliver

### Our existing work on Digital Enablement

In May 2022, we developed our system-wide Digital strategy which will be a driver for closer integration in our system, as well as better empowering our population to access their data and manage their conditions

We need effective data and information sharing to improve our outcomes. From our key areas of focus, this means that we will need to consider how best to :

- Embed a Population Health Management approach through the application of care at all levels of the system to better inform our approach to prevention and our understanding of how inequalities impact our outcomes;
- Further implement 'virtual wards' to support our future model for intermediate care; and
- More effectively share data across multi-agency partners for safeguarding, as a priority.

Within our digital strategy, our key priorities include:

- Procuring a new 'anchor' electronic patient record system to sit alongside our newly implemented Shared Care Record. This will be the foundation for better sharing of information across all partners in health, care and our communities.
- Conduct an infrastructure audit across the organisations within the ICS to prioritize relevant infrastructure improvement programmes.
- Meeting the training needs required to support our staff to work better with digital tools to improve productivity. We'll create a digital literacy programme that informs an ICS-wide professional development framework to upskill all staff.

What do we need to consider for integrated care?

Our strategic priorities for the future:



Cornwall and Isles of Scilly  
Integrated Care System

### Our existing work on Research and Innovation

This strategy will continue to be reviewed, and we know that as we implement it, we need to take the time to do more research into our priorities to better define our delivery plans.

Because of this, a core principle for how we will work is our ability to test, learn and adapt to what our people tell us matters to them. We think that we need to consider how we:

- Empower our Integrated Care Areas ('Places') to innovate in response to local need through our support and development offer to those teams; and
- Use both the Integrated Care Partnership and Joint Health and Wellbeing Board to build stronger, cross-organisation relationships to learn from others' experiences and use that learning to inform our commissioning approach.

Over the course of this strategy, we'll seek to:

- Further develop our Population Health and Inequalities programme, working through our Integrated Care Areas and Primary Care in particular, to identify areas where further research is required to understand the needs of our local communities.
- Work with our communities to understand the impacts of the cost of living crisis on peoples' choices about their health and social care, building on the work of our cost of living summit in September 2022 and our on-going engagement approach that underpins this strategy.
- Develop partnerships with research institutions to define our priorities, drawing on the work with the University of Exeter on social mobility as an example.

# Our digital strategy on a page

## What are the benefits?

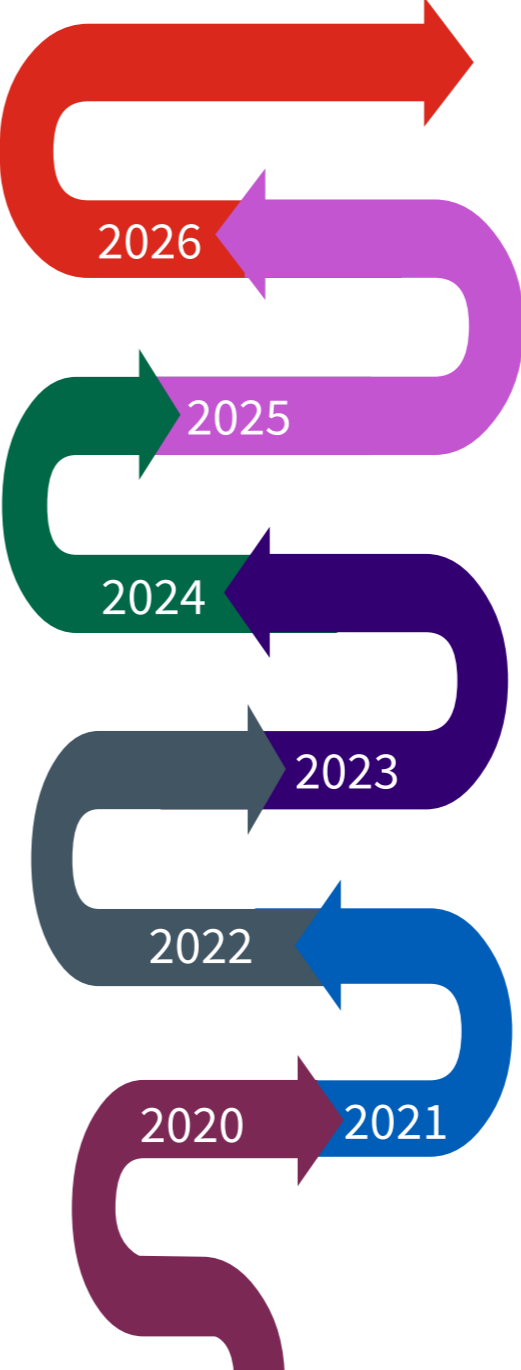
- Improved citizen experience
- Improved digital access in excluded groups
- Greater visibility of population health data
- Earlier diagnosis through targeted screening
- Improved staff experience and retention
- Reduced admin burden and more time with patients
- Reduction in medical errors and avoidable mortality
- Improved per capita spend

## Who are the beneficiaries?



## What will we do and when?

- We will **improve sustainability** by creating a cloud-based integrated back office
- We will **support national goals** by linking to wider care record and EPR programmes
- We will **enable citizens to self serve** and book appointments through the Patient Hub
- We will **improve social care integration** by implementing a digital social care record.
- We will **support population health** by increasing our PHM analytics capacity
- We will **improve clinical safety** by procuring a new EPR for acute care in RCHT
- We will **launch our shared care record** to begin the integration of care across the region
- We will **lead our digital transformation** by creating ICS-wide roles and working groups
- We **improved patient access** during COVID-19 by offering video appointments for all services
- We **established digital leadership** by appointing a joint CIO and Trust CIOs



- We will **improve home care** by upgrading our Virtual Wards to support the shared care record
- We will **improve workforce flexibility** by integrating our HR and recruitment functions
- We will **improve care at home** by piloting Virtual Wards across key pathways
- We will **support our workforce** by creating an ICS digital learning platform
- We will **create a trusted and safe system** by establishing an ICS Cybersecurity Ops Centre
- We will **support public health** by improving access to primary care data for system-wide analytics
- We will begin to **simplify our systems** by reviewing older systems for decommissioning
- We **reduced staff administration** with eNotes paperless records
- We **empowered citizens to self-serve** by launching a Patient Hub for outpatients

# Key ICS programmes to deliver improved health and care

**Security & Resilience**

**Modernisation of  
Back-Office and  
Service**

**A Digitally-Enabled  
New Hospital**

**A 21<sup>st</sup> Century  
Electronic Health  
Record**

**Data Sharing For  
Better Joined Up  
Care**

**Patient First...  
Access and Control  
Of My Own Health  
and Care**



# Our work is aligned with national strategy... Front line Digitisation

## Eligibility



### Levelling up:

- Aligns to levelling up agenda
- Organisation has a low or medium level of digital maturity



### Strategy:

- Aligns to ICS strategy
- Supported by regional digital directors
- Executive level support includes clinicians and digital capability in organisation



### Funding:

- Match fund the central funding
- Must have budgeted to be self-sufficient after the initial implementation period and end of central investment.



### Commercial:

- Adherence to legal procurement requirements
- A competitive procurement takes place



### Governance:

- Business cases must be in line with Treasury green book principles and follow the SOC, OBC, FBC model.
- All investments will undergo a timely due diligence process



# The Journey...

**Mid 1980s**

DXC Patient Administration System

01

**Early 2000s**

**County wide Community Interest Network**

Circa 20 years GP Net and subsequent iterations through to HSCN

02

IMS MAXIMS

03

**2011**

Became a member of South West consortium operating PACS and RIS

04

**2013**

Roll out of JAC e-prescribing

05

**2021**

Established IT shared service and culture are a good starting point for supporting our Integrated Care System (ICS)

06

Critical Next Steps...

**Priority: EPR Deployment 2022**

- Core PAS end of life
- LIMS end of life
- System complexity and support burden
- System duplication (need to rationalise to deliver ICS vision)

07

To this .....

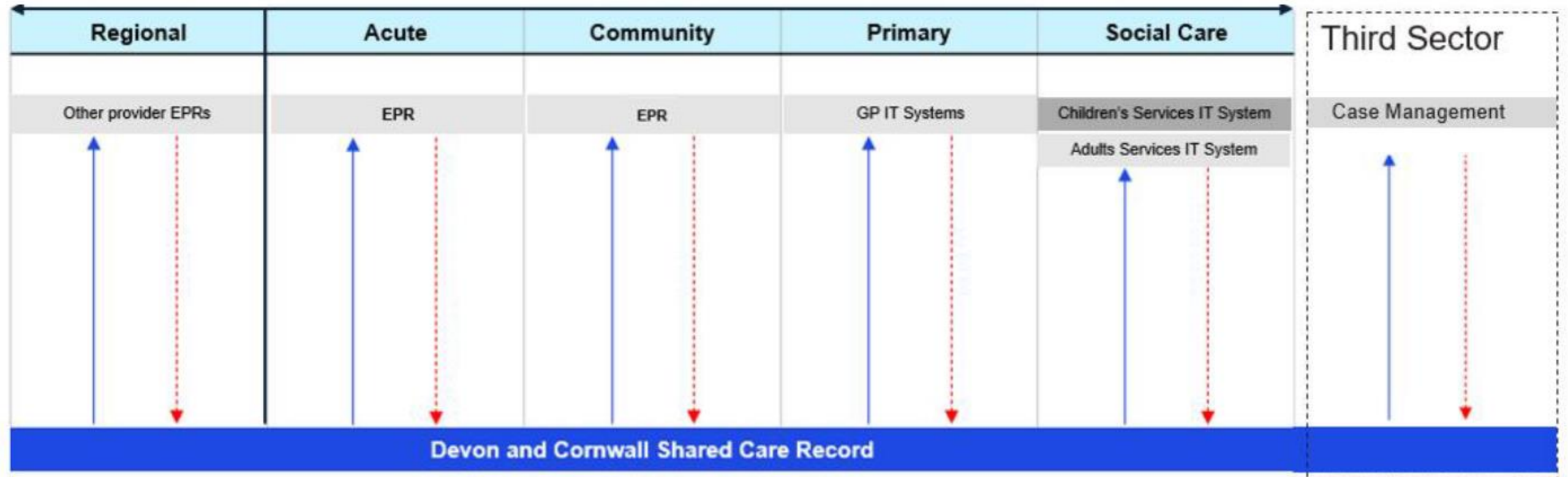
Population Health Management



Care Delivery

Patient Portal

Referrals System





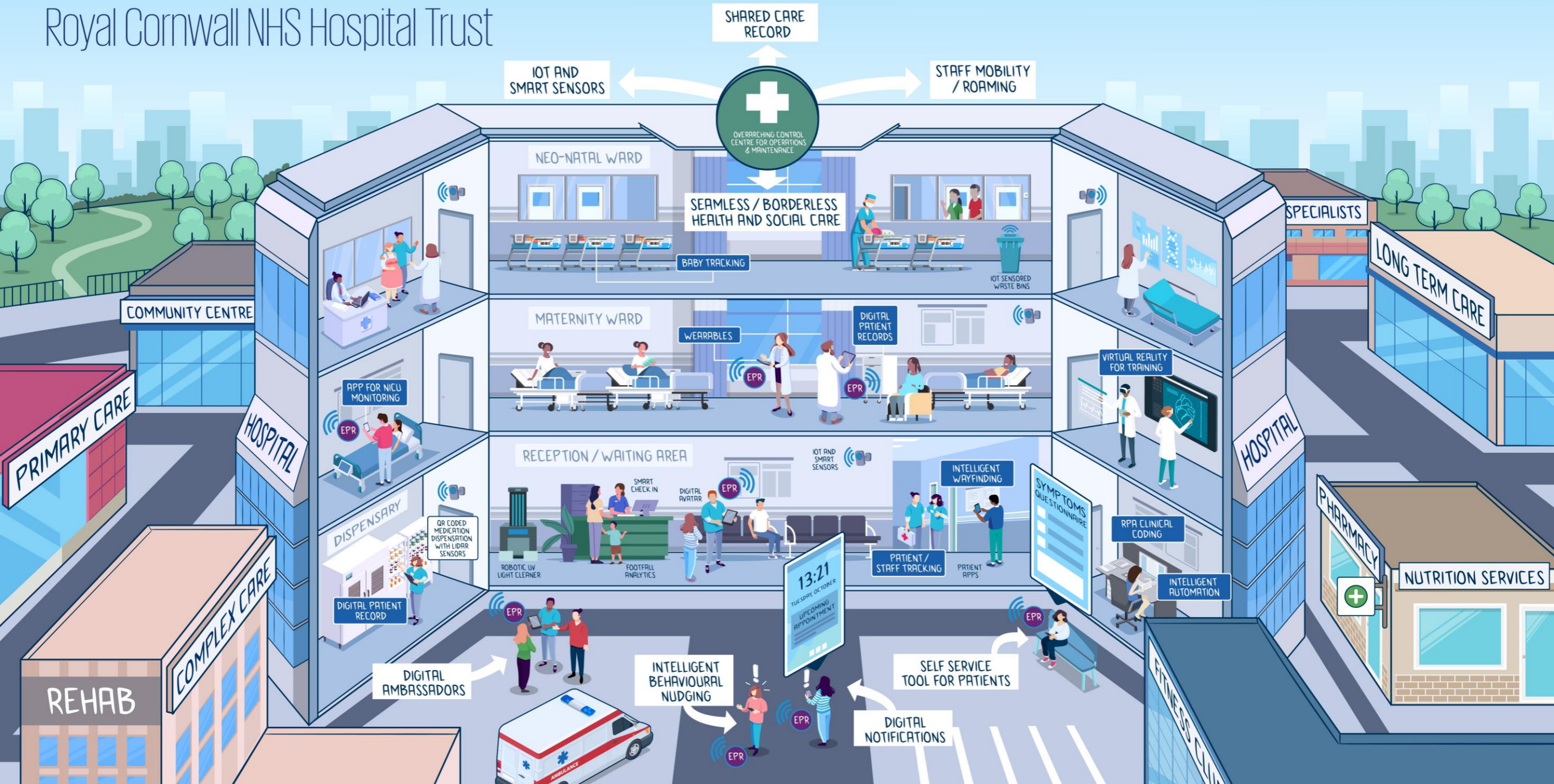
# Who are the beneficiaries?

Citizens are just one of the groups who can benefit from a digitally-enabled health and care system. Our changes will produce benefits for the following groups:



# What does the future look like...

Royal Cornwall NHS Hospital Trust



# Q&A

