



*“Digital passports with systems access capability- the future.
Supporting workforce mobility and increasing time for patient care”.*

Digital Health Rewired, Tuesday 15th March, Smart Health, 10:30 - 11:15

Dr Dilshan Arawwawala, Chief Clinical Information Officer | Consultant ICM and Anaesthesia
Mid and South Essex NHS Foundation Trust

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Royal Berkshire NHS Foundation Trust

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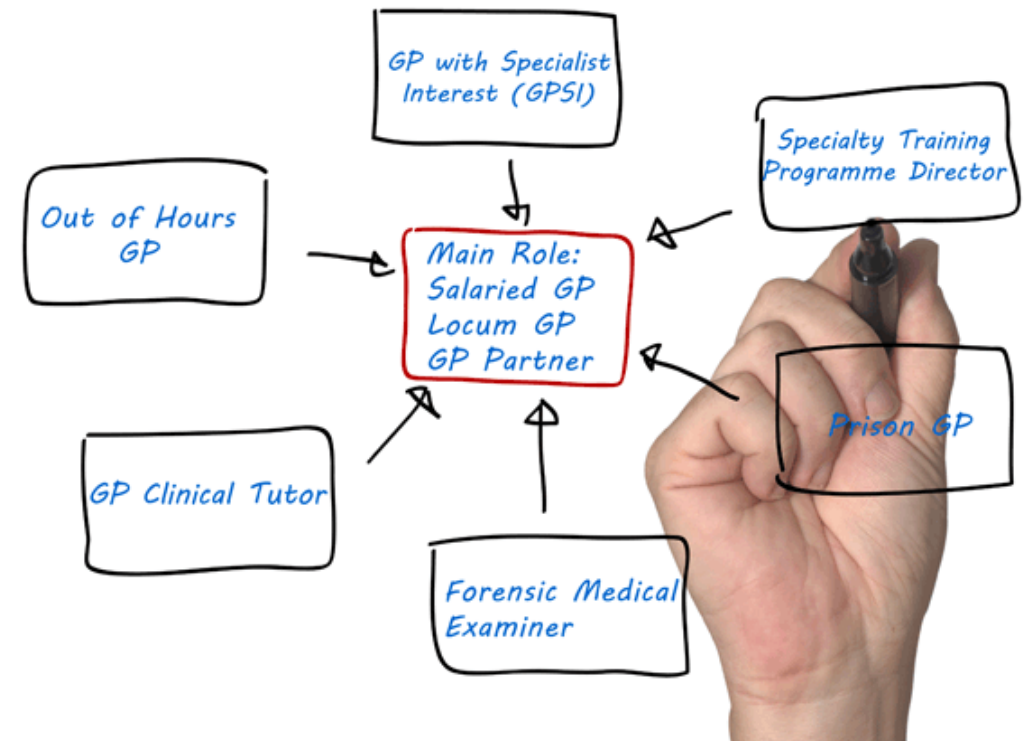
The changing world of clinical medicine

Macro level mobility

- Training
- Maintaining skills and competencies
- Collaborative 'inter-organisation' working
- Healthcare organisations 'without walls'
- Portfolio careers

Portfolio Careers

- Permanent
- Temporary
- Honorary
- Bank
- Agency
- Private hospitals
- Non-clinical roles



Digital transformation of care delivery

Micro level mobility

- Reducing healthcare estate footprint
- Patient/citizen-orientated care pathways
- Collaborative 'intra-organisation' working
- Patient-clinician partnership in care decisions
- Patient security
- Information governance

NHS Long Term Plan

As medicine advances, health needs change and society develops, the NHS has to continually move forward so that in 10 years time we have a service fit for the future. The NHS Long Term Plan is drawn up by frontline staff, patients groups, and national experts to be ambitious but realistic.

What we will do

- **Make the NHS a great place to work** by prioritising staff support and wellbeing
- **Strengthen and support leadership** at all levels
- Make sure that we have enough **people with the right skills to help care** for patients now and in the future
- **Enhance retention drives for nurses** to continue their NHS careers
- Empower our workforce to use **new technology**.

The 'current reality' as a clinician

- Swathes of paper, email and phone calls
- Delayed start date/time, trying to get a badge
- Unable to access clinical areas
- Unable to access clinical informatics systems

Unable to work.....

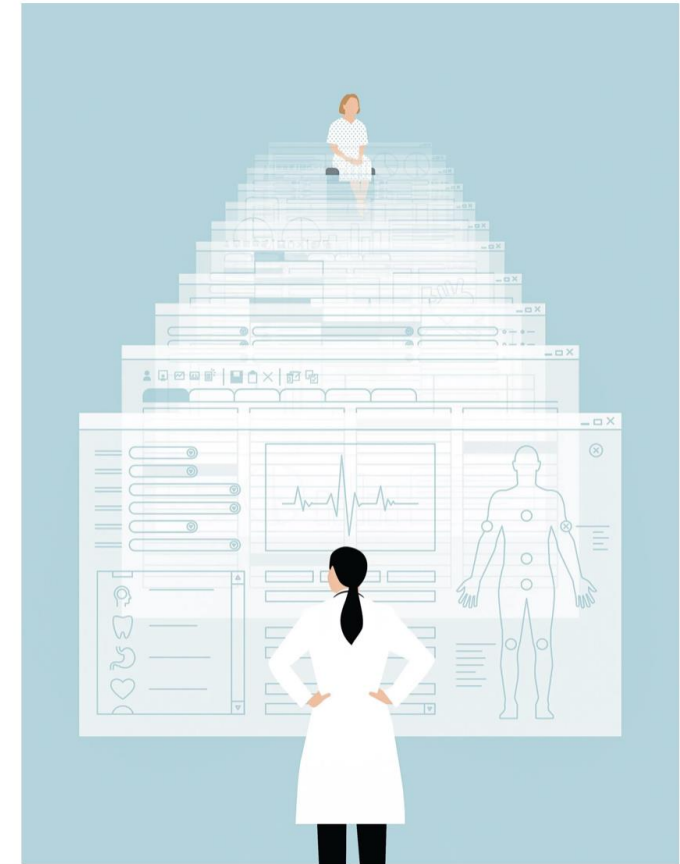
ANNALS OF MEDICINE NOVEMBER 12, 2018 ISSUE

WHY DOCTORS HATE THEIR COMPUTERS

Digitization promises to make medical care easier and more efficient. But are screens coming between doctors and patients?

By Atul Gawande

November 5, 2018





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“Was he wearing a stethoscope?”

The dilemma for trusts’ managers

Protecting our patients, protecting their information

- Door security passes
- Recruitment identity checks
- Professional registration checks
- Clinical systems
- Electronic patient records
- Password protection and renewals
- Controlled access to medication
- Policies and governance, based on new legal requirements



On-boarding substantive staff

- Authorisation – multiple form filling
- Ensuring all boxes ticked for access to numerous clinical systems

Rota gaps

- Complexity of bringing in locum staff
 - Organising access to locations and the clinical systems for the service
- Ensuring training is up to date on local EPR systems

Reduced productivity

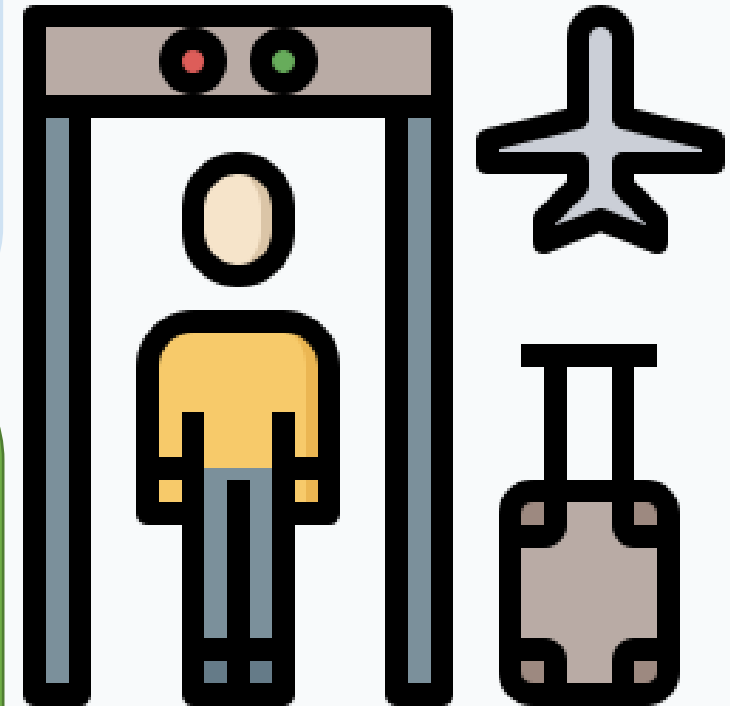
- Increased work pressure on colleagues
- Higher risk of data governance issues
- Greater risk of clinical error
- Tracking responsibility

Mitigations

- Standardised pre-employment checks
- Electronic forms with as much information as possible pre-populated
- Position Based Access Control (PBAC) in ESR across all Spine-enabled systems
- Active Directory profiles for access to shared drives and clinical systems
- For locum staff, Hospital at Night teams to co-ordinate access
- Agencies required to monitor and guarantee training compliance

Improving the Locum staff's experience

- Owns an authenticated, fully updated profile
- Only appropriate work opportunities are communicated
- Be able to book onto work selected shifts with ease and receive timely confirmation
- Ensure all required access is assigned in time for shift start
- No need to inconvenience substantive colleagues in order to provide patient care
- Shifts worked are easily authorised
- Shifts worked are paid in a timely fashion
- Positive experience in the Trust will lead to a better relationship
- Increased professional experience





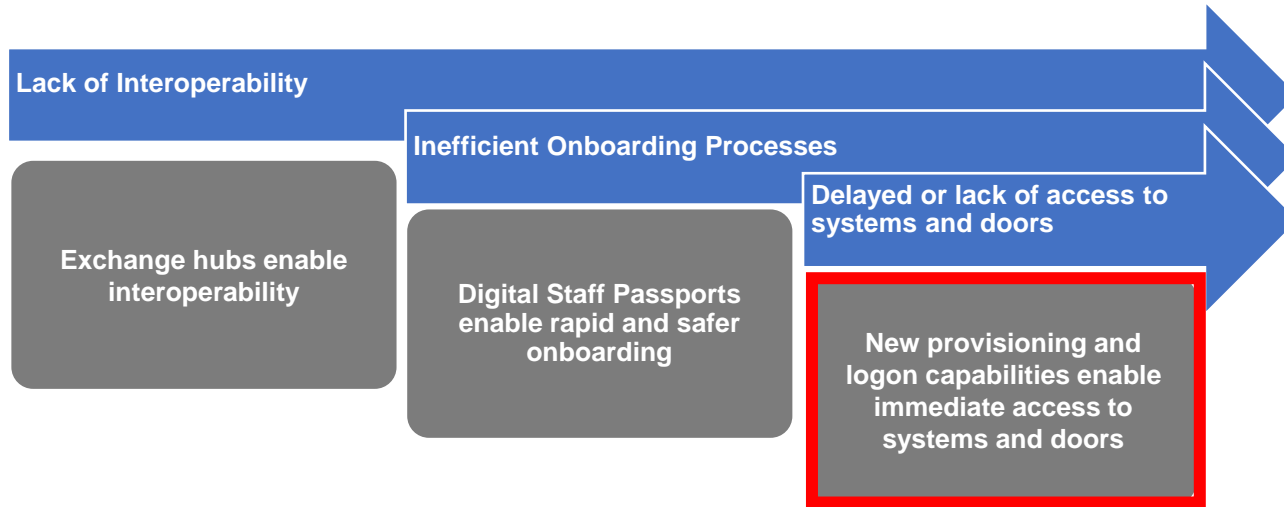
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Digital enablers for frictionless staff movement

NHS England and NHS Improvement



Collaborative Approach

- Started with the front-line user need
- Trusts and ICS' articulating the guidance and support required from the centre
- Using scale to solve problems collectively

POLICY DRIVERS

- NHS Long Term Plan
- NHS People Plan
- ICS strategy
- People Digital Strategy
- Recovery and transformation priorities

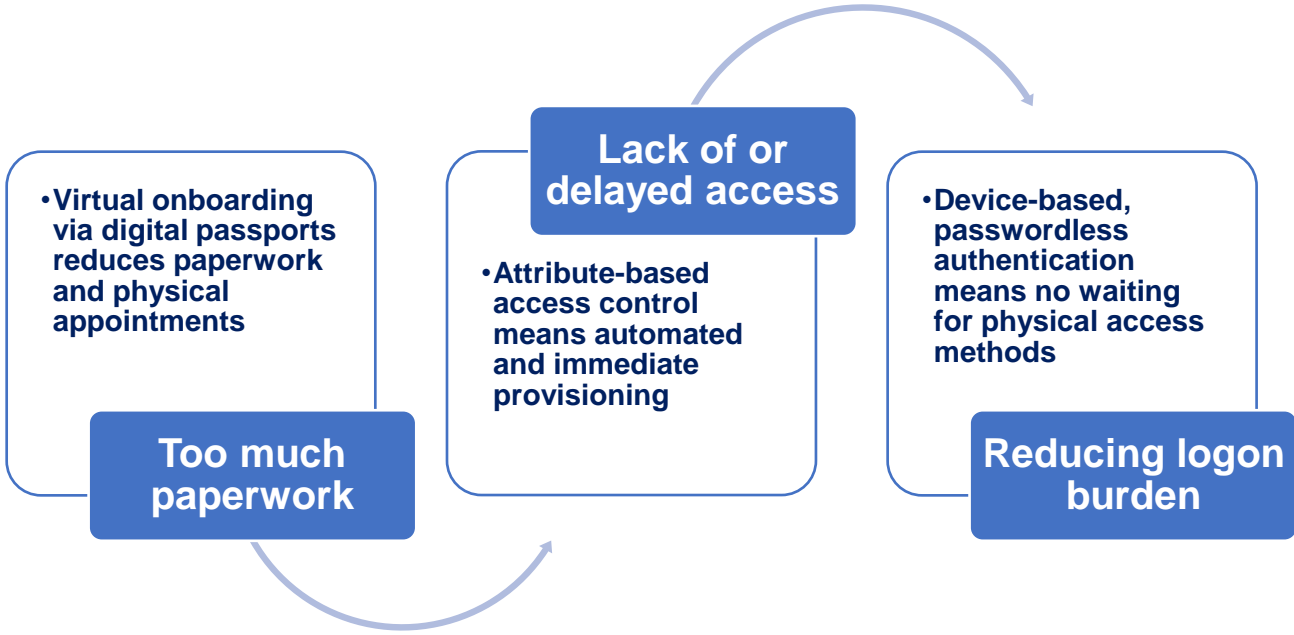
Extract from HR&OD Futures report Nov 21

"ICS CPOs should use the benefit of scale and enable seamless moves between teams and organisations"

"Enable our people to access wider opportunities across the system, supporting their development and helping them gain wider experience"

- ✓ Local, ICS and NHSE/I collaborative leadership
- ✓ User input in research, design and feedback
- ✓ Multi-vendor collaboration
- ✓ Open standards
- ✓ Open APIs
- ✓ Security, user control and privacy-by-design

Provisioning and systems access alpha (PASA) overview



“For every nurse that doesn’t have access to systems during a shift, another nurse must stop what they doing with patients to perform their digital duties and open doors for them as and when required. This can take 1.5 hours of patient time away from their shift”
Quote from a Matron

Clinical impacts

- Provisioning immediate access to the systems positively impacts patient care
- It also releases time to care in a medium-sized acute trust- equating up to 17 WTE

Better Value

- Less resources are required to administer the process, duplication removed

Improved staff experience

- Not having to do other people’s digital work
- Personal time saved booking, waiting, travelling to duplicate physical appointments
- Reduction in passwords to remember and reset
- Makes flexible working more appealing

Security enhancements

- Reduces risk of patient data breaches
- Increased trust in the identity and skills of staff
- Can be applied to door scanners and medicines cabinets

BTH, RBH and MSE as Alpha use cases

Discovery	• January-March
Design	• March-April
Develop	• May-June
Pilot	• July
Case for Change	• August

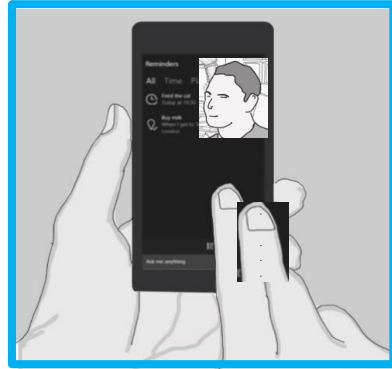
Digital enablers utilised in an ICS Collaborative Bank

Easy for staff, managers and HR teams to manage staff movement to meet patient demand

Managers and employers use analytics to define staffing needs and publish unfilled shifts



Bank members easily access and apply for unfilled shifts on their devices



Managers and HR teams can appoint easily



Staff and managers present credentials for onboarding and for access



Maximise staff time with patients



Exchange Hubs

Digital Staff Passports

Provisioning and Systems Access

How you can get involved

- ✓ IAM Community of Practice
- ✓ Learnathon
- ✓ Hackathon

Contact Jenna Pinder jenna.pinder@nhs.net



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People Digital Programme: Delivery plan

Delivery of digital capabilities and an enabling improvement package for ICSs.

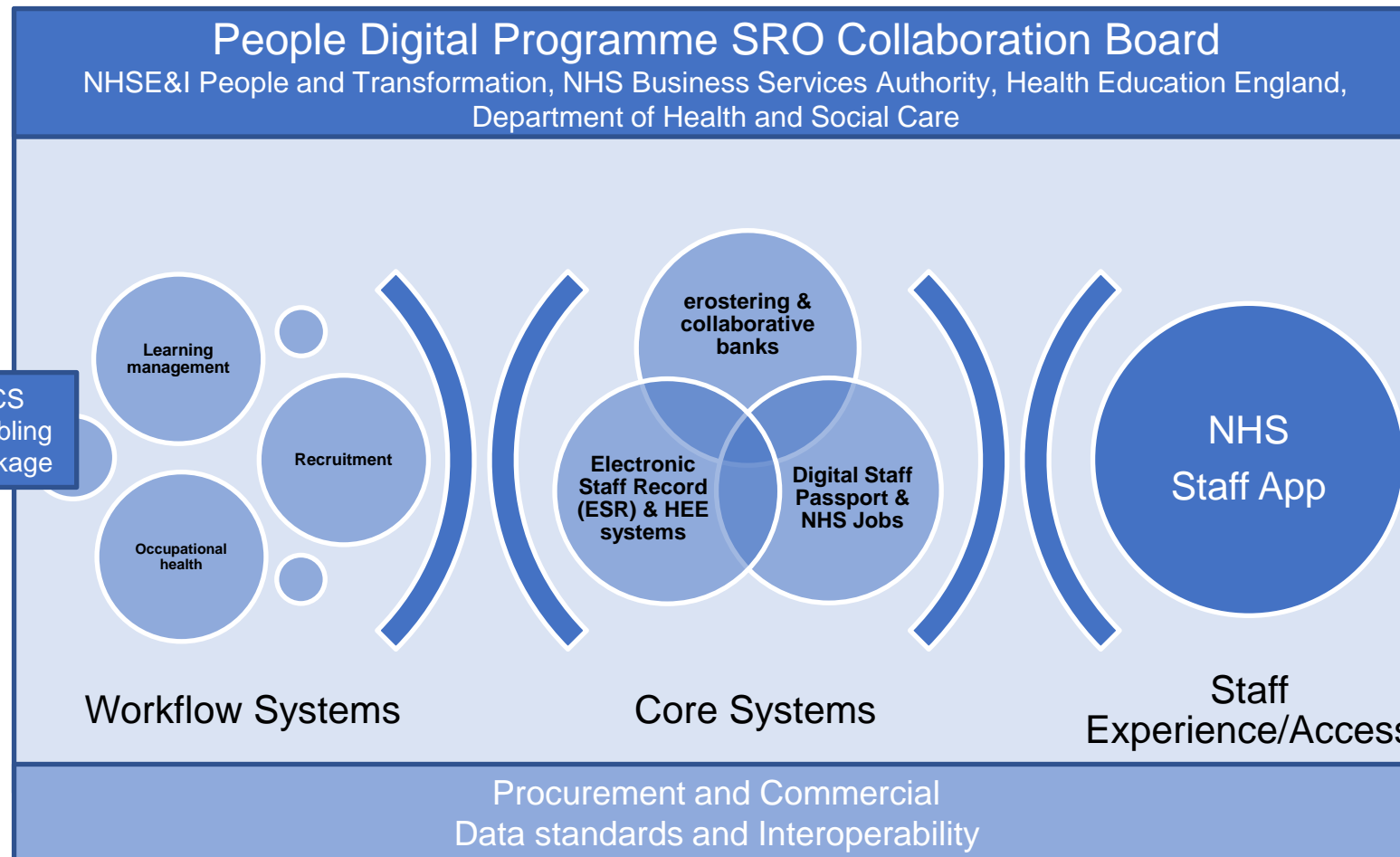
ICSs will:

- Develop ICS People Digital Plan
- Accelerate
- Build ICS workforce intelligence platform

ICS Digitalisation & People Plan Delivery

- Transform activity
- Digitalise workflow
- Release time for care
- Reduce costs
- Reduce admin
- Workforce planning

ICS enabling package



Requirements:

- Align priorities
- Resources
- Define standards
- Co-ordinated procurement
- Collective user research

Staff will be able to:

- Control own data
- Book annual leave
- Book shifts
- View payslips
- Auto-fill forms
- Apply for jobs
- Fast onboarding
- Build competency portfolio

“The future of NHS human resources and organisational development”

Prerana Issar, Chief People Officer



Website

<https://www.england.nhs.uk/future-of-human-resources-and-organisational-development/>

Report

https://www.england.nhs.uk/wp-content/uploads/2021/11/B0659_The-future-of-NHS-human-resources-and-organisational-development-report_22112021.pdf

People Digital Vision: Digitally-enabled experience for NHS staff and managers

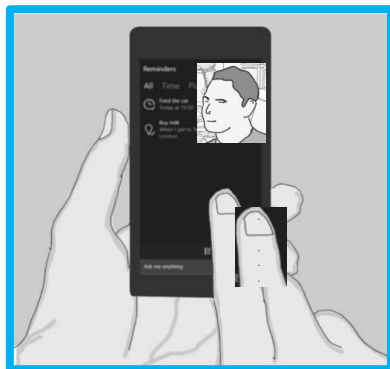
Easy for staff, managers and HR teams to complete tasks on the move to improve working lives

Managers and employers define staffing needs and publish vacancies / shifts



- Evidence-based workforce planning and insights to define staff and skills needed.
- Staff records full and up to date.
- Employers publish vacancies and unfilled shifts bookings.

Staff easily access information and activities on any device



- Staff use an app(s) to do basic tasks on the move like booking shifts, booking annual leave, viewing payslips etc.
- Carefully targeted notifications keep staff informed and engaged.

Managers and HR teams have intuitive workflow tools to complete tasks quickly



- HR teams manage workflow to recruit, shifts booking, managing absence, employee relations and more rapidly with confidence that all safeguards have been met.

Staff and managers present credentials as evidence and for access



- Staff control their data.
- Staff use an app(s) to hold their 'verified employment and skills credentials' securely.
- Staff able to access buildings and log into clinical systems.

Maximise staff time with patients



- Clinicians, managers and support teams feel their time is valued.
- Processes fast-tracked.
- Patients can rest assured that all safeguarding checks have been completed and are up to date.



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Panel Session

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