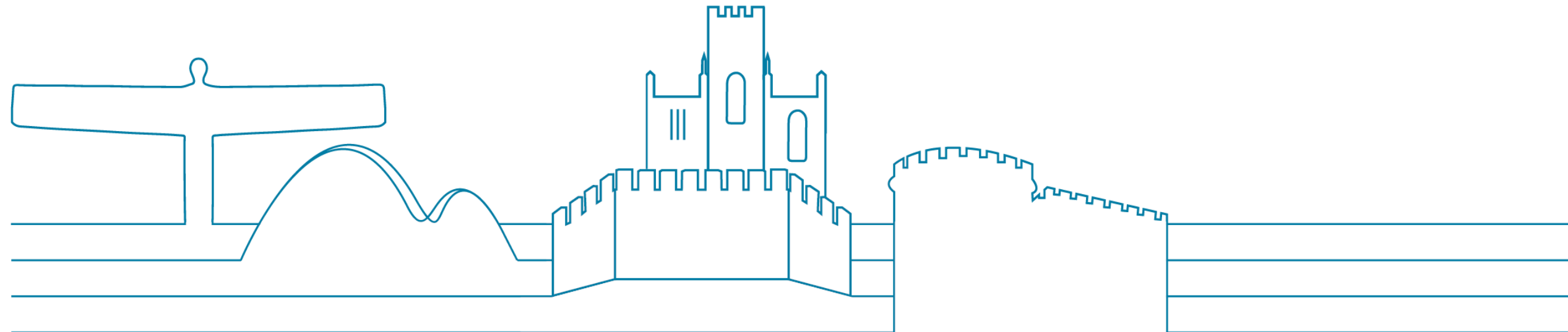


Digital Health Rewired 2022

“from Isolation to Integration”

Professor Graham Evans

NENC ICB Executive Chief Digital Information Officer/SIRO (designate)

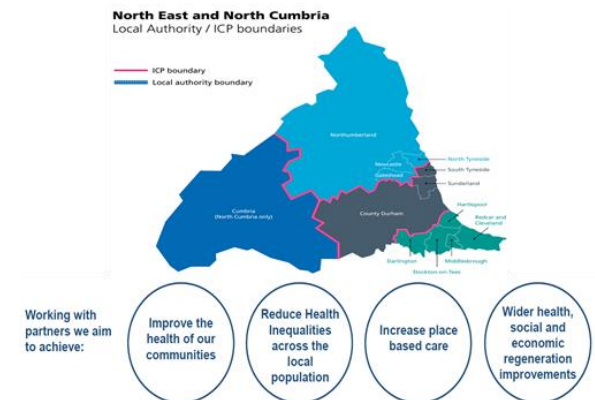


Drivers for digital transformation

- Constraints on NHS funding – our challenge in 2021/22 and beyond.....
- Rising demand - a growing and ageing population - NHS under enormous pressure.
- Current hospital-based model of care – supply and demand miss-match.
- NHS needs to work differently;
 - providing more care in people’s homes and community and,
 - break down barriers between services (i.e. GPs, other Healthcare Providers) – prevent duplication and manage efficiency of scale - meet escalating needs
- NHS Long Term and People Plans
- Integration and Collaboration



Change is needed!



ICS - Overview



Our evolution

Working together as one Integrated Care System (ICS) across the North East and North Cumbria

Our integrated care system is made up of four integrated care partnerships (ICPs):

North Cumbria ICP - population: 325,700

- NHS Clinical Commissioning Groups (CCGs):**
- North Cumbria CCG
- NHS Foundation Trusts:**
- North Cumbria Integrated Care NHS Foundation Trust

- Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
 - North West Ambulance Service NHS Foundation Trust
- Council area:**
- Cumbria



Tees Valley ICP - population: 707,000

- NHS Clinical Commissioning Groups (CCGs):**
- Darlington CCG
 - Hartlepool and Stockton CCG
 - South Tees CCG
- (to become one single 'Tees Valley CCG' from April 2020)
- NHS Foundation Trusts:**
- County Durham and Darlington NHS Foundation Trust
 - North Tees and Hartlepool NHS Foundation Trust

- South Tees Hospitals NHS Foundation Trust
 - Tees, Esk and Wear Valleys NHS Foundation Trust
 - North East Ambulance Service NHS Foundation Trust
- Council areas:**
- Darlington
 - Hartlepool
 - Middlesbrough
 - Redcar and Cleveland
 - Stockton on Tees Borough

North Cumbria ICP
Population: 325,700

Durham, South Tyneside and Sunderland ICP
Population: 997,000

Tees Valley ICP
Population: 707,000

North of Tyne and Gateshead ICP - population: 1,078,500

- NHS Clinical Commissioning Groups (CCGs):**
- Northumberland CCG
 - North Tyneside CCG
 - Newcastle Gateshead CCG

- NHS Foundation Trusts:**
- Northumbria Healthcare NHS Foundation Trust
 - Newcastle Upon Tyne Hospitals NHS Foundation Trust

- Gateshead Health NHS Foundation Trust
- Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
- North East Ambulance Service NHS Foundation Trust

- Council areas:**
- Northumberland
 - North Tyneside
 - Newcastle
 - Gateshead

Durham, South Tyneside and Sunderland ICP - population: 997,000

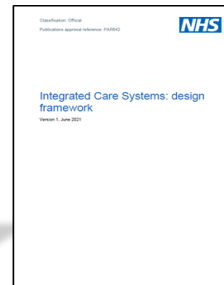
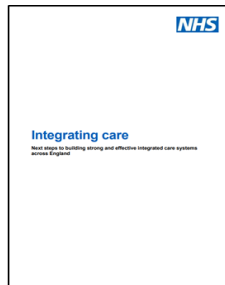
- NHS Clinical Commissioning Groups (CCGs):**
- South Tyneside CCG
 - Sunderland CCG
 - Durham Dales, Easington and Sedgefield CCG*
 - North Durham CCG*

- NHS Foundation Trusts:**
- South Tyneside and Sunderland NHS Foundation Trust

- County Durham and Darlington NHS Foundation Trust
- Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust
- North East Ambulance Service NHS Foundation Trust

- Council areas:**
- South Tyneside
 - Sunderland
 - Durham

*to become one single 'Durham CCG' from April 2020



Establishment of formal Integrated Care Board (ICB)
April 2022 -> July 2022

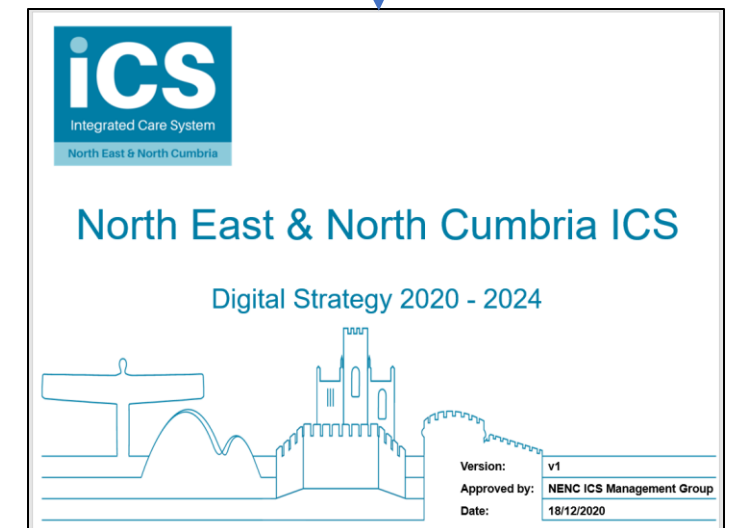
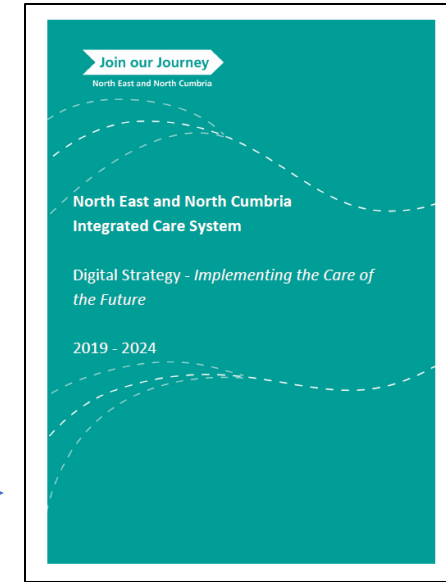
Executive CDIO on ICB

- **Largest ICS in England**
 - Population of 3.2M
 - 4 X ICP's (localities)
- **Legacy of collaborative working**
 - Regional (NESHA)
 - FT landscape
- **Digital is one of 6 ICS priorities**
 - Digital Care Programme (DCP)
 - Digital strategy and roadmap
 - CIO Network
 - Flagship Programmes

Digital enablement

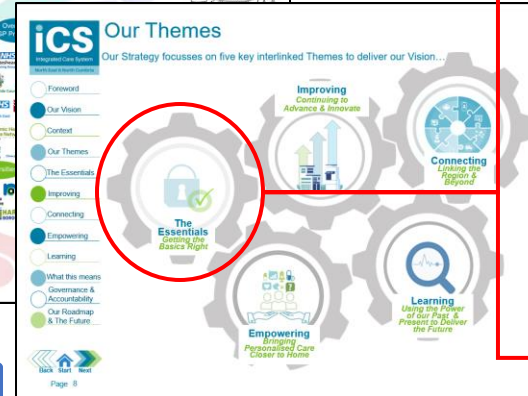
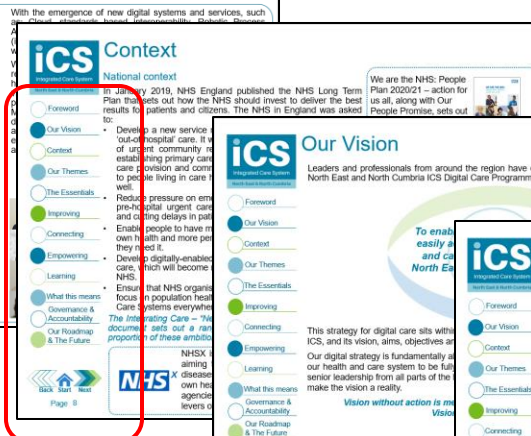
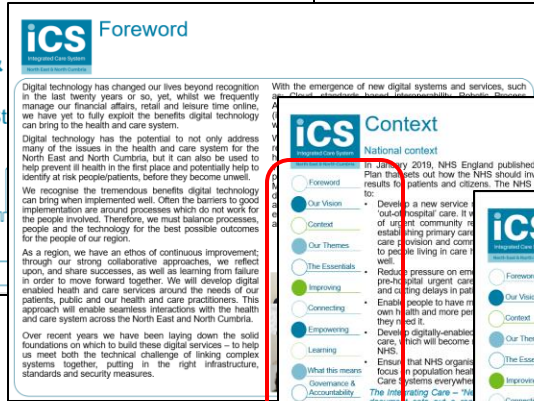
NENC ICS Priority Workstreams

1. Improving population health and preventing ill health
2. Optimising health services – specifically through ensuring high quality standards across all services and delivering safe and sustainable care in the most appropriate setting
3. **Digital transformation** – making the best use of technology, data and IT to ensuring efficient and effective services
4. Workforce transformation – identify how doctors, nurses and other health and care professionals can work across organisations and sites, particularly hospital and community services; support and train staff to work differently; retain our existing workforce and jointly address recruitment challenges.
5. Mental health – improve access to services and standards of care.
6. Learning disabilities – improve quality of care, waiting times and outcomes for patients.



Digital strategy approach/format

https://www.northeastandnorthcumbriaics.nhs.uk/media/5jdarmg/nenc-ics-digital-strategy-2020_v1-2-3.pdf



Dynamic Navigation

Themes

- Essentials
- Improving
- Connecting
- Empowering
- Learning

We will do...



What we have done...



Digital strategy approach/format

Now reviewing in line with ICS Design Framework/WGLL?

ICS Governance & Accountability

Following an internal review with senior leaders from across the health and care system in the North East and North Cumbria – the way regional digital programmes are managed is changing.

New governance structures are maturing and will be expected to be fully operational by April 2021.

Further information including North Cumbria ICS website.

ICS Our Roadmap

Digitally enabled Population, Systems and Organisations

Our digital roadmap
In June 2019, our initial digital strategy and roadmap was approved by the Health Strategy Group, within our strategy we set out an ambitious plan to transform the health and care services for the people and population of North

ICS Keeping our eyes on the Future

We are evaluating and delivering digital systems and services that are most likely to positively change health and care outcomes and experiences over the coming years. As a consequence of digital and technology 'mainstreamisation', a number of such technologies are already in people's many pockets, on their wrists as well as, within local GP surgeries, hospitals, care homes and wider communities.

We will look at all opportunities to realise their full potential; to achieve better outcomes, more efficient care and improve our citizens' experiences.

ICS Supporting and Related Strategies

To deliver our regional vision and Digital Strategy, partners from across our region have developed supporting, complimentary and related Digital Strategies.

Please see the links below:

- North Cumbria ICP
- North of Tyne and Gateshead ICP
- Durham, South Tyneside and Sunderland ICP
- Tees Valley ICP

North East and North Cumbria GPIT

Population Health Management

Vertical Alignment

- ICS Digital Governance review new arrangements in place.

- ICS Digital Roadmap
- Lots delivered, COVID helped
- More to do – future opportunities

- Miniaturisation driven evolution
- Digital by default
- Solid foundations essential

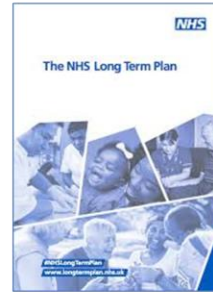
- Regional strategic direction
- Domain & place/ICP delivery plans
- ICP/Place/Organisational alignment

Example

NHS Long Term & People plans

Digital Interactions

- Consultations
 - Digital first access to primary care
 - ‘Digital models’ to reduce outpatients *
 - Video consultations *
- Apps- NHS App- Becomes ‘front door’
- Personalisation - Self-Care / Remote monitoring *
 - Increased use of apps (diabetes / respiratory / maternity / online therapies)



* Examples of rapid adoption to COVID response



Digital Infrastructure

- All trusts fully digitised by 2024
- Standards: info sharing and Cyber security
- Development of shared records (GNCR)



Whilst it is recognised that virtual digital tools have helped during the pandemic, there is now a time for reflection and consideration to offer patients/citizens a choice of interaction options
Digital Inclusion/Exclusion is a key factor



ICS – Strategic digital programmes

Optimising Health Services - Diagnostics



Digital Pathology



Radiology



Patient Centred



Laboratory Information Management System



Community Diagnostic Hubs



Ageing Well Anticipatory Care



Strategic/Tactical oversight i.e. Winter/COVID Cyber



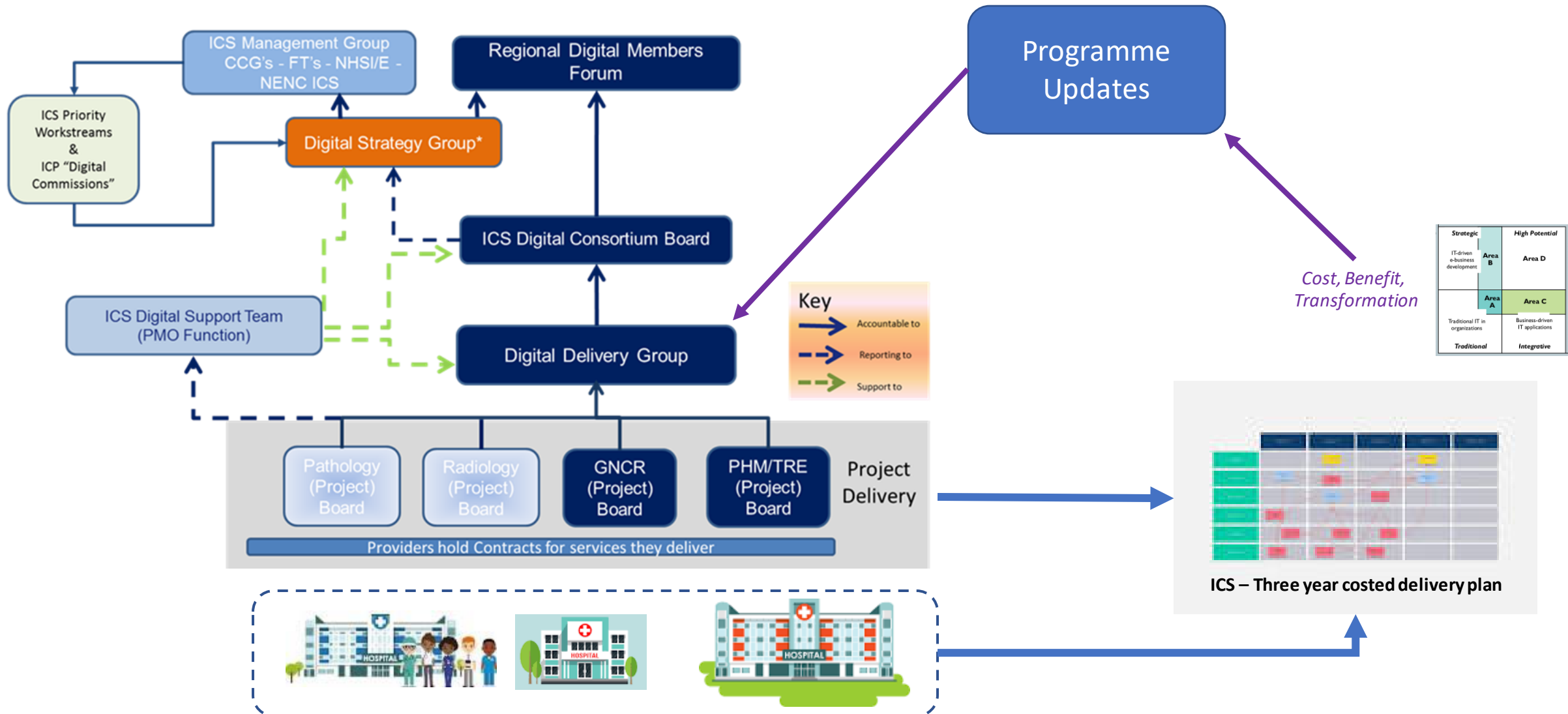
<p>Respiratory Remote Screening Application A system to identify, triage and provide treatment for high risk respiratory patients</p>	<p>Digital Care Home Electronic referrals for those who need urgent care</p>	<p>INR Self-Testing Service Enhancing care for patients on warfarin</p>
<p>Undernutrition Service An award winning digitally enabled care pathway for those at risk of undernutrition</p>	<p>Gestational Diabetes Service Home monitoring for expectant mothers with gestational diabetes</p>	<p>Falls Prevention Service A digitally enabled care pathway to help those at risk of falls</p>

Many other priority digitally enabled health and care programmes evolving

Strategic Programme Delivery Status

High level overview

ICS – Digital Governance



ICS – Digital Governance

ICS – GP and Primary care

Delivered: Remote consultation solutions

- 100% access to video consultations across general practice – reduced unnecessary footfall
- 100% access to online consultations across general practice – 89 (average no. of practice) GP submissions per week Apr 20 July 21
- 2 way messaging systems deployed across North Tyneside, Newcastle Gateshead and Durham – saving visits to GP practices

Transforming now: Digital first primary care

- Digital Champions development - CCG/AHSN collaboration – increase confidence in digital
- Primary Care Innovation hub – CCG/AHSN collaboration
- Refresh & update of GP websites – easier navigation for public
- Sound Doctor, new service for patients in North Cumbria – staying well at home

Plans to deliver: PHM National PHM Development Programme – number of PHM support opportunities at both PCN and Place level progressing across NENC, including South CPS, Northumberland and County Durham to continue to build on the work that was started by the national programme.

Opportunities

- Remote Monitoring
- Self Care/signposting
- Work with wider Primary Care practitioners
- Telephony

Concerns/Risks

- Capacity in all areas of the system
- Digital inclusion
- Performance of key systems (EMIS)

Infrastructure

- Compliant GP estate W10/N345
- Reduced cyber risk
- Over 1800 laptops and peripherals deployed to enable remote access
- 30,000 enabled for staff working remotely in excess of 300 staff able to use own device at home
- Upgraded digital telephony systems for GPs improving access

Innovation: CDC – digital resources developed by clinicians in the North East of England, working on existing clinical IT systems (SystemOne & EMIS) quality assured by NICS – saving clinical time and reducing costs, improving quality and safety for patients, flexible implementation and compliant with data sharing agreements, providing clinical teams with real time data and improving pro...

Governance: Operational emergency response group stood up to inform and co-ordinate the regional digital response across primary care ensured:

- A common voice for primary care
- Strength of leadership and partnership working
- Pooled resources for the benefit of all
- Collaborative approach to issue resolution

ICS – AHSN Digital programmes

Integral to ICS Digital Governance

Example project – Remote ECG Pathway

- 17.5 minutes saved per ECG
- 255 days saved in 1 year across the Trust
- 72 hours saved per year
- £3,854 Approximate cost saved per team, per year
- £327,607 Approximate cost saved by 7200 staff per year, based on 85 teams across the Trust who carry out ECGs

Integral to ICS Digital Governance

- North of Tyne Combined Authority
- Academic Health Science Network
- Digital First Primary Care Digital Pioneers Programme
- Digital Champions £86k DfPC
- £4.4M AHSN grant
- Digital Primary Care Innovation Fund £270k
- £270k to support remotely and our innovation
- COOP Innovations
- MHS
- 2021 circa £750k into the region for Joined Up Care
- 2022 circa £550k
- Agreed on technology Specific Evaluation Team (TSET) as an Evaluation Partner Group
- MHS/AHSN All Health Technology Sites
- Technology Sites
- Specific Evaluation Teams (TSET)
- NEHC are on the framework to ensure they have the right support in technology
- Phase 1 & 2 of the Trust
- Clays with 10 regional partners
- Clays opportunities to case studies of NEHC and bring us on to be part of the use of AI in the NHS
- Digital Inclusion Event Series
- Developing a regional platform to coordinate activity and showcase good practice
- Supporting TSE Development across region
- Improving Digital Literacy - Health Education England

Trusted Research and Evaluation Environment

Integral to ICS Digital Governance

- The Trusted Research and Evaluation Environment (TREE) will provide health, care and academic staff (time limited and secure) access to data for research and innovation projects
- Axiom is a data system which will provide access to a wide variety of health, care and other data to health and care staff for planning, redesign, for operational reporting, for PHM etc.
- Axiom and TREE will work in an integrated manner and provide a significant regional opportunity to maximise the benefits to health and care services, to drive PHM and to conduct leading edge research
- Both initiatives use our installed base: resources, specialist skills and talent; regional governance (PHM, digital); infrastructure
- TREE SRO profile developed – consideration of suitable candidate (share with collaborative).
- To be discussed at ICS Management Group in September

North East and North Cumbria Digital Care Programme Highlight Report

Page 1 of 4 | Reporting Period: 28/05 – 25/06/2021

Programme/Strategic Theme	GNCR	Digital Pathology	Digital Haematology	Digital Radiology	AHSN	TREE	PHM	Ageing Well
RAG Status	Green	Orange	Green	Red	Green	Green	Green	Green
Essentials	✓	✓	✓	✓	✓	✓	✓	✓
Improving	✓	✓	✓	✓	✓	✓	✓	✓
Connecting	✓	✓	✓	✓	✓	✓	✓	✓
Empowering	✓	✓	✓	✓	✓	✓	✓	✓
Learning	✓	✓	✓	✓	✓	✓	✓	✓

KEY HEADLINES

Programme	Workstream	Key Highlights for this Reporting Period
GNCR	HIE	Health: 1. 2. Social Care: 1. 2. Usability: 1. 2.
	PEP	1. 2. 3. 4.
		System changes made to increase data base logging capacity.

ICS – GNCR Overview – Q321

Hosted by NuTH

Primary Care 100% | Community Services 92% | Trusts 88% | Local Authority 49%

Over 3million views since the HIE was launched

HIE Overview

HIE Pipeline 2021/22

- Implement remaining Trusts, Community Services and Local Authorities
- Provide Capability to share Advance Care planning documentation
- GP Connect Available 2022, which will bring structured data from TPP
- Deploy Upgrade to provide more functionality & improvements
- Provide a Solution to Share Medications from Secondary Care
- Provide Capability to share Special Patient Notes / Risks and Alerts
- Provide Capability to On Board NENC Care Homes and Hospices
- Define Process to On Board NENC Care Homes and Hospices

Coming Soon.....

ICS – GNCR Overview – Q321

Integral to ICS Digital Governance | Hosted by NuTH

NHS App integration provides a single "digital front door" for Patients

Use of NHS Login provides surety of security

NHS App and PEP design is consistent

Meets NHS Accessibility standards

PEP Integration with NHS App

"With the NHS App I can order repeat prescriptions to help manage my condition."

"I use the NHS App to book my GP surgery appointments and order repeat prescriptions to help manage my condition."

Agree to share your NHS login information

ICS – HealthCall

Integral to ICS Digital Governance

Health Call	Care homes section
<ul style="list-style-type: none"> Digital skills and knowledge reinvested back into the region Profits reinvested back into the region Being rolled out in a further 296 care homes in South Tyne, Gateshead and South Tyneside 4000 residents and 1300 referrals each month in CDD alone 	<ul style="list-style-type: none"> Digital Care Homes all 115 care homes in County Durham and Darlington Being rolled out in a further 296 care homes in South Tyne, Gateshead and South Tyneside 4000 residents and 1300 referrals each month in CDD alone
Primary care	NHS trusts
<ul style="list-style-type: none"> BP @ Home remote monitoring launched Respiratory pathways allowing remote monitoring of COPD and asthma patients 	<ul style="list-style-type: none"> 185k staff booked covid vaccines 500 MSK self-referrals per month – that's 6000 patients who have avoided going to their GP First mental health pathways developed 500,000 Friends and Family Tests submitted electronically Digital Outpatients Portal developed
Community	
<ul style="list-style-type: none"> INR self-testing 703 patients saving 12,000 appointments 70% of patients improved time in therapeutic range – less strokes and pulmonary embolism Average of 1,200 wound care images shared every month with district nurses 	

ICS – Digital Diagnostics programmes

Integral to ICS Digital Governance

Project	2021	2022	2023									
	Q1 Q2 Q3 Q4	Q1 Q2 Q3 Q4	Q1 Q2 Q3 Q4									
LIMS Interoperability	<ul style="list-style-type: none"> 5 Trusts (Common platform) Northumbria Gateshead, Sunderland & South Tyneside (Existing) 											
Digital Pathology	<ul style="list-style-type: none"> Enabling Trusts to digitally scan and view Enabling technical capability for image sharing Additional scanners procurement (NPIC) Reporting solution procurement (NPIC) Reporting solution roll out 											
Digital Radiology	<ul style="list-style-type: none"> Solution design and development Technical infrastructure build Sunderland and South Tyneside connectivity Complete Proof of Concept and sign off Roll out to non TBC Trusts 											
Digital Haematology	<ul style="list-style-type: none"> Deployment of Calixtus – analysts completed on the region Remote review software being installed across the region to allow collaborative working Use groups established for operational support going forward, with assistance by Siemens Project ECOMPETE 											
irefer – Gateshead	<ul style="list-style-type: none"> Deployment of TBC 2022 onwards Digital Endoscopy TBC 											

ICS Digital Strategy Next Steps

ICS/ICB design framework – digital..



Classification: Official
Publications approval reference: PAR642

NHS

Integrated Care Systems: design framework

Version 1, June 2021

NHS^x

About us Key tools and info COVID-19 response News Blog Contact us

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Contents

- [The challenge](#)
- [What is the WGLL framework?](#)
- [How will we support you?](#)
- [What does good look like for Integrated Care Systems?](#)
- [What does good look like for your organisation?](#)

What Good Looks Like framework

First published 31 August 2021
Updated 4 October 2021 – [see updates](#).

What Good Looks Like (WGLL)

What is the WGLL framework?

WGLL is directed at all NHS leaders, as they work with their system partners, and sets out what good looks like at both a **system** and **organisation** level. It describes how arrangements across a whole ICS, including all its constituent organisations can support success.

WGLL is included in both the [ICS design framework](#) and the [NHS Operational Planning and Contracting Guidance](#), reflecting the expectation that the standards in the WGLL framework will be used to accelerate digital and data transformation.

The WGLL framework has 7 success measures:

1. Well led
2. Ensure smart foundations
3. Safe practice
4. Support people
5. Empower citizens
6. Improve care
7. Healthy populations



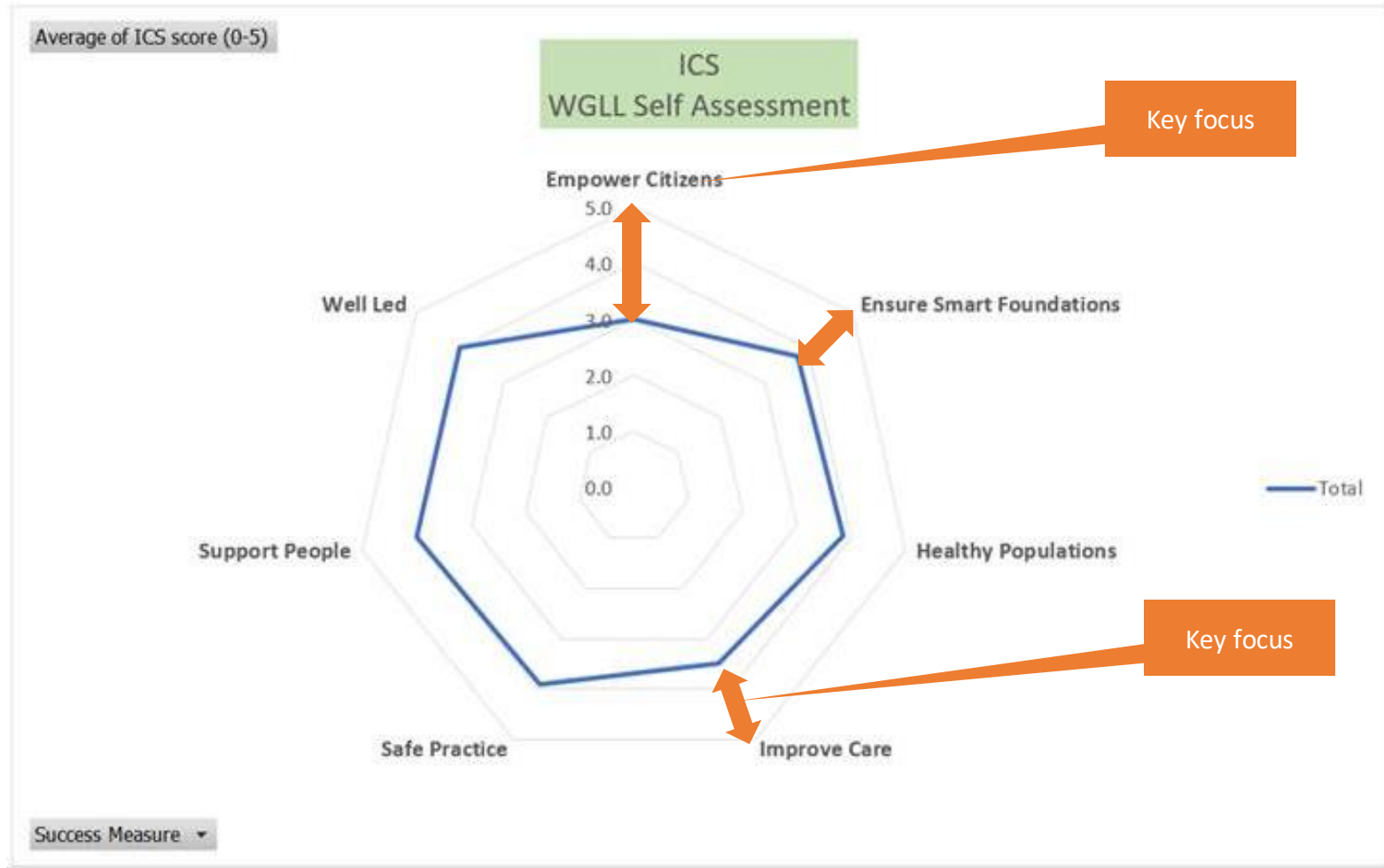
The 7 success measures of What Good Looks Like

This template has been adapted for use by the North East and North Cumbria ICS, from a draft shared with Chief Information Officers, which was compiled from: <https://www.nhsx.nhs.uk/digitise-connect-transform/what-good-looks-like/what-good-looks-like-publication/> on 31st August 2018.

NHS Provider Trusts can use the 'provider data tab, ICSs use the ICS data tab, to enter a self assessment score of 0-5. The following scoring is suggested:

- 0 – Don't know
- 1 – Disagree completely
- 2 – Somewhat disagree
- 3 – Neither agree or disagree
- 4 – Somewhat agree
- 5 – Agree completely

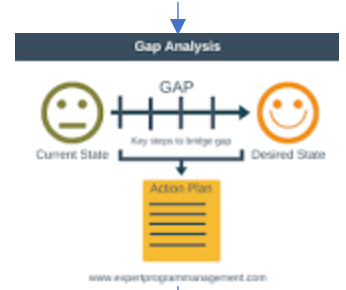
WGLL success measures (System) outcome



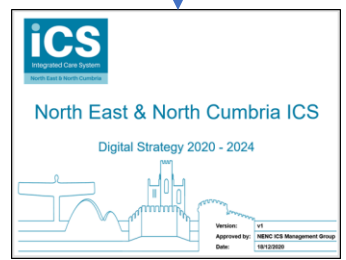
For illustrative purposes only



i.e. ICS Intelligence Functions requirements



Iteration



WGLL success measures (System) - plan

For illustrative purposes only

ICS North East and North Cumbria ICS Digital Care Programme

What Good Looks Like (WGLL) Framework Review

Summary - Gap Analysis - Action Plan

Introduction and background

The What Good Looks Like (WGLL) Framework was published by NHSx on 31st August 21 outlining:

- The Challenge** - The pandemic enabled us to achieve a level of digital transformation that might have otherwise taken several years. As we move into the recovery period, it is critical that we build on the progress we've made and ensure that all health and care providers have a strong foundation in digital practice. Local leaders have long understood the need for system-wide planning and delivery, to provide personalised care and support for those who need it, and to help everyone live healthy lives.
- WGLL is directed at all NHS leaders, as they work with their system partners, and sets out what good looks like at both a system and organisation level. It describes how arrangements across a whole ICS, including all its constituent organisations can support success.**
- It builds on established good practice to provide clear guidance for health and care leaders to digitise, connect and transform services safely and securely.**
- The WGLL framework has seven success measures:
 - Well led
 - Ensure smart foundations
 - Safe practice
 - Support people
 - Empower citizens
 - Improve care
 - Healthy populations



- NENC ICS has a current and approved Digital Strategy, however its development was completed prior to the publication of WGLL.
- Rather than redevelop the recently refreshed Strategy, we've completed a gap analysis of WGLL against the Strategy, to identify areas of strengths and areas that can be improved upon.
- This summary of the findings will inform an appendix to the current Digital Strategy and associated action plans, focussing on addressing recommended improvements.

What we have done

- Each WGLL success measure comprises of a number of standards. To assess each standard, we localised and developed an ICS WGLL self-assessment tool, (utilising and building upon a template created and shared by a CIO in another part of the country). This self-assessment tool facilitates review at both ICS and organisational levels. The tool has been shared regionally, with organisations being encouraged to conduct internal self-assessment.
- A group of regional colleagues, including the NENC ICS Chief Digital Officer, NENC ICS Digital Programme Manager and NHSE/NEY Head of Digital Technology met and reviewed each ICS level success measure standard, using the following scoring criteria:
 - 0 – Don't know
 - 1 – Disagree completely
 - 2 – Somewhat disagree
 - 3 – Neither agree or disagree
 - 4 – Somewhat agree
 - 5 – Agree completely

Where possible, each score was evidenced with comments/links to supporting information.

Findings and next steps

- Upon completion of the review, the scores were plotted onto a radar graph, via the self-assessment tool. Please see graph and results below:



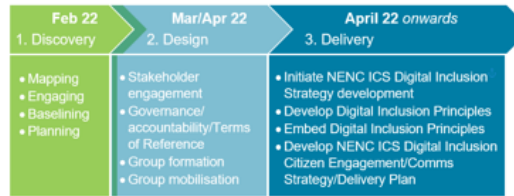
- Well led – 4.0
- Ensure smart foundations – 3.8
- Safe practice – 3.9
- Support people – 4.0
- Empower citizens – 3.0
- Improve care – 3.5
- Healthy populations – 3.9

- As the average scores and radar graph above illustrate, whilst improvements can be made against all success measures, the NENC ICS consistently scored highly against the majority of success measure standards, demonstrating our region's strengths and levels of digital maturity. The areas requiring priority and focus are Empower citizens and Improve care.
- Empower citizens** - Particular focus is required around Digital Inclusion. Please see filtered snapshot from the self-assessment tool:

Success Measure	Standard	ICS score (0-5)	Action Comments
IC-7 Empower Citizens	Develop a single, coherent ICS-wide strategy for citizen engagement and citizen-facing digital services that is led by and has been co-designed with citizens	3 - Don't know	This is an area of priority and focus going forward
IC-4 Empower Citizens	Create and monitor a coordinated offer for ICS organisations	3 - Don't know	More clarification needed around the standard/bank of ICS.
IC-8 Empower Citizens	Have a clear ICS digital inclusion strategy, incorporating initiatives to ensure digitally disadvantaged communities are better able to access and take advantage of digital opportunities	2 - Somewhat disagree	More work to do

Digital inclusion – Next steps and proposed timescales:

- Discovery** - Mapping of what is already happening across the region. There are a number of activities that have and are taking place across the region. To establish the scale of and to plan in addressing digital inequalities, which contribute to health inequalities, an initial activity will be to identify those activities and establish a baseline of the work achieved to date, findings, learning and progress.
- Design** - Establishing a regional NENC ICS Digital Inclusion Focus/Steering Group, with an early remit of planning against the priority success measure standards, (as illustrated in the snapshot above); initial focus being the development of an NENC ICS Digital Inclusion & Citizen Engagement Strategy.
- Delivery** - Establish and maintain regional oversight in the adopting, adapting and embedding of NHSx digital inclusion principles, within strategic and delivery planning; at all portfolio, programme and project levels; across all NENC ICS organisations.



- Improve Care** - Particular focus is required around how data can be used to improve outcomes. Please see filtered snapshot from the self-assessment tool:

Success Measure	Standard	ICS score (0-5)	Action Comments
IC-1 Improve Care	Use ICS embedded digital and data with their engagement capability to transform care pathways, reduce operational burden and improve health and wellbeing. Digital solutions enhance services for patients, and ensure that they get the right care when they need it and in the right place across the whole ICS.	3 - Neither agree or disagree	Score of 3 is an intended target. Linked to PHM agenda and how we can utilise actionable insight. Specific workstreams are looking at how data can be used to improve outcomes. Starting to happen but more can be done to embed this into what we do.
IC-2 Improve Care	Have an ICS-wide approach to the use of data and digital solutions to redesign care pathways, remove operational burdens to give patients the right care in the most appropriate setting.	3 - Neither agree or disagree	As above
IC-6 Improve Care	Lead a system-wide approach to collaborative and multidisciplinary care planning using an array of digital tools and services alongside PHM standards	3 - Neither agree or disagree	PHM built into approach to CCMH. However, MSD Care Planning is around what the services deliver. Digital not necessarily the oversight for how the services are planned and delivered. Example: Many Outpatient services will be digitally enabled but not by Outpatient Transformation Services. Scored as a 3 as there is a lot of progress being made, but more can be done.

- Next steps:**
 - Continue to link Population Health Management (PHM) agenda to Digital Care Programme.
 - Further engagement with specific workstreams looking at how data can be used to improve outcomes.
 - Demonstrate improvements and regional oversight, through establishing a NENC ICS Digital Benefits Realisation function(?)
- Further areas of focus** - There are aspects to be addressed and improvements that will need to be planned for/prioritised against all success measures, in addition to those above. Through filtering the scoring to 3 and below within the self-assessment tool, the following areas were identified:

Success Measure	Standard	ICS score (0-5)	Action Comments
IC-6 Well led	Embed regular board-level discussions to develop digital competence	3 - Neither agree or disagree	Which board? Placeholder link to GCN?
ESF-1 Ensure Smart Foundations	Digital data and infrastructure operating environments are reliable, resilient, secure, sustainable and resilient. Across our ICS, all organisations have well-resourced teams who are competent to deliver modern digital and data services.	3 - Neither agree or disagree	Some organisations are well resourced, but others not so well resourced. As a system we are competing with each other, we may need a shared resource arrangement to ensure the workload reflects the digitalisation capabilities. This will be an action from WGLL review. This will be a gap. We have started to research support offerings that others are using, however significantly more work to be done in this area.
ESF-3 Ensure Smart Foundations	Ensure progress towards net zero carbon, sustainability and resilience ambitions by meeting the Sustainable ICT and Digital Services Strategy (2020 to 2025) objectives	3 - Don't know	More work to do
SP-2 Safe Practice	Have a system-wide plan for maintaining robust cyber security, including development of coordinated capabilities to provide support across all organisations.	3 - Neither agree or disagree	As above
SP-3 Safe Practice	Establish a process for managing the cyber risk with mitigation plans, investment and progress regularly reviewed at ICS level.	3 - Neither agree or disagree	As above
SP-9 Safe Practice	Establish a clear system-wide process for reviewing and responding to relevant safety recommendations and alerts, including those from NHS Digital (e.g. NHS England and NHS Improvement), the MIRA and the Healthcare Service Investigation Branch (HSIB).	3 - Neither agree or disagree	We do this for cyber and others when CareAlert alerts received
SP-4 Support People	Plan resources to provide robust digital support services across our ICS	3 - Somewhat disagree	Can we use this collaborative and have workforce equity will always be in competition with our peers. The tool to enable the work are there but this is an area where to establish what needs to happen. There is a need for a standardised approach for targeted interventions.
HP-4 Healthy Populations	Create integrated care models for all population groups, using data and analytics to optimise the use of local resources and ensure seamless coordination across care settings.	3 - Neither agree or disagree	As above
HP-5 Healthy Populations	Ensure that local ICS and place-based decision making teams, including PCN multi-disciplinary teams, have access to timely population health insight and analytical support	3 - Neither agree or disagree	Capabilities and tools are there, however more to be done around enhancing analytical workforce capacity. An area for development is around analytical support and linking with PHE. Undertake a baseline assessment with action plans to follow.

- Next steps:**
 - Investigate the options around establishing shared/pooled regional resource arrangements, with enabling digital technologies, to ensure where possible, all organisations are well resourced.
 - Draw up a plan of how we will meet and digitally monitor the Sustainable ICT and Digital Services Strategy objectives, building on research already completed.
 - Map, design, communicate and implement new process for NENC ICS Cyber responses and communications, to compliment national and regional mechanisms already in place.
 - Linking to the PHM agenda, work with services and workstreams to develop a standardised approach for targeted interventions for at risk population groups.
 - Link with Public Health England and build upon progress made following the outputs of the NENC ICS PHM Analytics Capacity and Capability Baseline Assessment, to develop an action plan focussed on enhancing analytical workforce capacity.

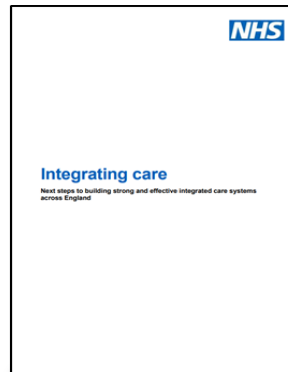
Please see the completed NENC ICS Digital Care Programme Self-assessment tool here:

Strategy is delivery

□ Digital dependency

- *Unintended consequences*
 - *Cyber-threat....*
 - *Digital exclusion*

- ICS Next steps
- ICS Design Framework
- Planning guidance
- What Good Looks Like (WGLL)



- *Digital is not an option, but a **necessity***

Digital Care Programme – Strategy

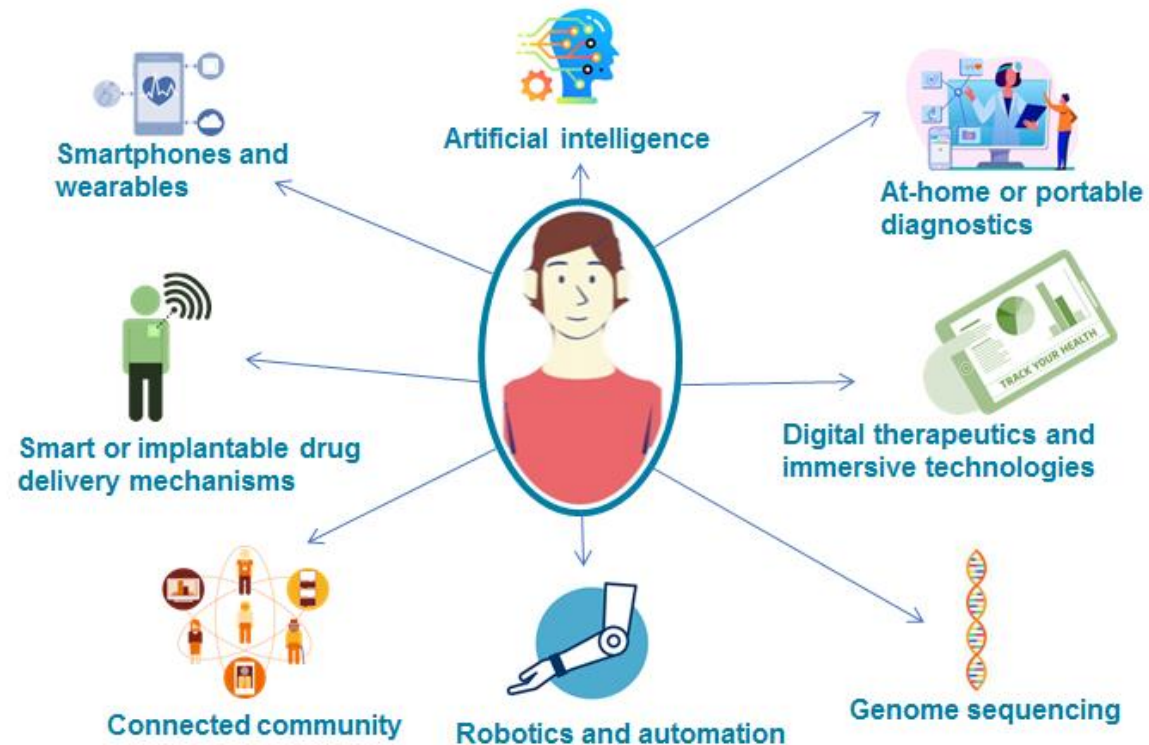


Keeping our eyes on the Future

We are evaluating and delivering digital systems and services that are most likely to positively change health and care outcomes and experiences over the coming years. As a consequence of digital and technology ‘miniaturisation’, a number of such technologies are already in people’s many pockets, on their wrists as well as, within local GP surgeries, hospitals, care homes and wider communities.

We will look at all opportunities to realise their full potential; to achieve better outcomes, more efficient care and improve our citizens’ experiences.

- Foreword
- Our Vision
- Context
- Our Themes
- The Essentials
- Improving
- Connecting
- Empowering
- Learning
- What this means
- Governance & Accountability
- Our Roadmap & The Future



“.....and finally”

- Change is constant and dynamic – embrace it
 - ❖ Pandemic has proved - Digital Transformation is not just for Christmas
 - Digital Inclusion is a major consideration
 - ❖ Expect the unexpected...(Cyber threat is real)!
- The alignment of NHS E/I (D & X) will help clarify - WDWAW
- Integrated Care Systems/Integrated Care Boards
 - ❑ ICS Design Framework and WGLL = Opportunity to make a +ve difference
- Digital is the “glue” to help bond the Integrated Care System, but needs:

- ❑ People.
- ❑ Process.
- ❑ Technology.



Thank you for your time

Questions?