

**23 November 2020**

**Agenda Item: 7**

## **REPORT OF GROUP MANAGER TRANSFORMATION AND CHANGE, CHIEF EXECUTIVE'S DEPARTMENT**

### **NHS DIGITAL PATHFINDERS PROGRAMME 2020/21**

#### **Purpose of the Report**

1. To provide the Improvement and Change Sub-Committee with a progress update on the NHS Digital Pathfinders Programme which is due to complete in March 2021.

#### **Information**

2. Since 2016 Nottinghamshire County Council has been at the forefront of the interoperability programme to develop information sharing and data flows between health and social care, working with the three local hospital trusts in the County:-
  - Sherwood Forest Hospital Trust (Kings Mill and Newark hospitals)
  - Nottingham University Hospitals (QMC and City hospitals)
  - Doncaster and Bassetlaw Teaching Hospitals (Bassetlaw and Doncaster hospitals)
3. Digital solutions have been developed that support the following functions:
  - Services that allow the sharing of social care information to support hospital decision making for admissions and discharges;
  - Automated referrals and alerts from hospital directly into the Mosaic social care system;
  - The identification of the correct local authority for every discharge from hospital.
4. These developments have resulted in considerable benefits for health partners, social care, patients and families. For example:
  - ✓ Hospital referrals no longer must be manually keyed in to Mosaic, saving approximately 25 minutes per case. There are approximately 10,000 referrals per annum requiring Mosaic input.
  - ✓ Referrals previously were sent by email, fax or telephone. In some cases, these could take four days to reach the Council. Now, they are received directly and automatically into Mosaic within seconds.

- ✓ The Council now receives automatic alerts to confirm when a discharge date or ward location changes. This helps more effective planning, and stops time being wasted planning for a discharge that may not happen as expected.
  - ✓ The Healthcare Locator Service now ensures that all referrals go to the correct local authority. For example, where a property is on the City/County border, referrals did on occasion go to the wrong authority which resulted in delays as teams tried to establish the correct provider.
  - ✓ Greater information sharing and more efficient processes have contributed to reduced lengths of stay in hospital. For example, Sherwood Forest Hospitals have reduce dthe average length of stay from 21 to 18 days. This benefits both the patient and their family or carers.
5. **NHS Digital Pathfinders Programme:** In September 2018 the Health Secretary, announced the Government’s digital vision for health and social care. This involved the encouragement of more local influence on digital development, rather than the imposition of a centrally procured and developed IT system. The NHS Digital Pathfinders programme was subsequently initiated. The intention was to develop a range of products that other organisations can make use of to deliver benefits to Social Care and the health system through digital technology.
6. Having already had positive feedback about the local work described above, officers recently applied for funding from the programme to help share learning.

The table below details the key dates for the programme:

Date	Outcome
August 2020	Application made by NCC
November 2020	Notice of successful award
December 2020	Programme commenced
February 2021	Programme conclusion

7. Nottinghamshire’s existing programme had already attracted national interest from the likes of NHS Digital, Local Government Association and health bodies. The Council’s commitment in this programme is to scale up the local solutions that have been found so they can be adopted by organisations who wish to share our learning.
8. In November when officers were informed that the bid had been successful, a programme of activity was established to deliver three key pieces of work:
- Adoption of Nottinghamshire social care data and information standards across the country. Up until now, unlike in Health, there are no nationally agreed data standards to support the wider sharing of social care data. Working with the Professional Records Standards Body (PRSB), NHS Digital and Local Government and LHCR (Local Health and Care Record) Network, we have used our learning to influence this national debate.
  - Taking digital services developed in Nottinghamshire and working with the Council’s partner Servelec to develop these for the wider Servelec customer base across England.

It has been agreed with NHS Digital that 50% of the funding detailed below will be utilised for this purpose.

- Making the Healthcare Locator Service available to all health organisations across England to help reduce the number of incorrect social care referrals where they have been issued to the incorrect local authority.
9. Delivery of this work will help to enhance the reputation of the Council, and improve outcomes for the public on a national level.

### Financial Considerations

10. The key objective of the programme was to allow health and social care organisations to further develop local solutions where it was felt there could be a wider benefit to other organisations. To support this aspiration, funding of **£316,540** from NHSX (a joint unit bringing together teams from the Department of Health and Social Care, NHS England and NHS Improvement to drive the digital transformation of care) was awarded. This funding is payable in quarterly milestones, based upon the delivery of pre-agreed objectives. The payment schedule is detailed below:

Date	Amount	Status
Dec 20	£63,308.00	Funding received
Mar 20	£66,473.00	Funding received
Jun 20	£63,308.00	Funding received
Sep 20	£63,308.00	Invoiced
Feb 21	£60,143.00	Not yet invoiced

11. This funding will broadly be split in to two halves to:

- Finance key personnel at Nottinghamshire County Council to continue to deliver and grow this development;
- Support the Servelec costs associated with the software development.

### Next Steps

12. These will be to continue the programme of work to deliver the items identified in Section 5 above; to work with NHS Digital to participate in national discussions with other organisations and public bodies to raise awareness of these services; and by the end of February 2021, wrap the project up with NHS Digital and finalise the funding position.

### Other Options Considered

13. Not applicable.

### Reason/s for Recommendation/s

14. To make members and officers aware of this successful workstream.

### Statutory and Policy Implications

15. This workstream supports the Council to deliver social care services in line with national and local policy and statutory requirements. All developments are in support of the strategic objectives of the Adult Social Care and Health Department and the Council.

## **RECOMMENDATION/S**

- 1) That the Sub-Committee considers the content of this report, provides feedback and ratifies the approach set out within it.
- 2) That the Sub Committee agrees to receive further updates as appropriate.

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### **For any enquiries about this report please contact:**

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### **Constitutional Comments (KK 13/11/2020)**

16. The proposals in this report are within the remit of the Improvement and Change Sub-Committee

### **Financial Comments (SES 11/11/2020)**

17. The financial implications are set out in paragraph 10 of the report. Funding of £316,540 has been awarded by NHSX to fund this programme.

**HR Comments (JP 11/10/2020)** Any HR implications are contained in the body of the report

### **Background Papers and Published Documents**

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- None

### **Electoral Division(s) and Member(s) Affected**

- All