



Item No: 19

Meeting Date: Wednesday 25th November 2020

Glasgow City Integration Joint Board

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HSCP ICT & Digital Strategy

Purpose of Report:	To provide an update to the IJB on our ICT priorities, some of the challenges we face in achieving those and to highlight some current priority ICT projects.
Background/Engagement:	This strategy is built on national and local digital strategies as well as those of the employing organisations and the IJB's strategic plan. It is a further development of the strategy published in 2016.
Recommendations:	<p>The Integration Joint Board is asked to:</p> <ul style="list-style-type: none">a) Note the contents of this report;b) Instruct officers to provide an updated reflection on the strategic priorities of the Partnership as they relate to, or are enabled by, ICT; andc) Request updates on progress of the priority ICT projects.

Relevance to Integration Joint Board Strategic Plan:

The strategy has been developed to enable key elements of the strategic plan as technology underpins significant areas of service delivery and development.

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Implications for Health and Social Care Partnership:	
Reference to National Health & Wellbeing Outcome:	ICT and Digital services have the potential to positively contribute to all of the National Health and Wellbeing outcomes.
Personnel:	Properly integrated ICT and Digital provision enables staff to operate efficiently and securely, share information effectively and work flexibly.
Carers:	Effective ICT and Digital provision as an enabler will support new ways of working flexibly and remotely with carers and service users where appropriate.
Provider Organisations:	Effective IT and Digital services enables effective and secure communication with providers and other external organisations and increases the scope for flexible methods of communication.
Equalities:	ICT and Digital services play an important role in digital inclusion and resilience.
Fairer Scotland Compliance:	N/A
Financial:	Not applicable at this time.
Legal:	Not applicable at this time.
Economic Impact:	Not applicable at this time.
Sustainability:	Not applicable at this time.
Sustainable Procurement and Article 19:	Not applicable at this time.
Risk Implications:	Not applicable at this time.
Implications for Glasgow City Council:	None at this time.
Implications for NHS Greater Glasgow & Clyde:	None at this time.

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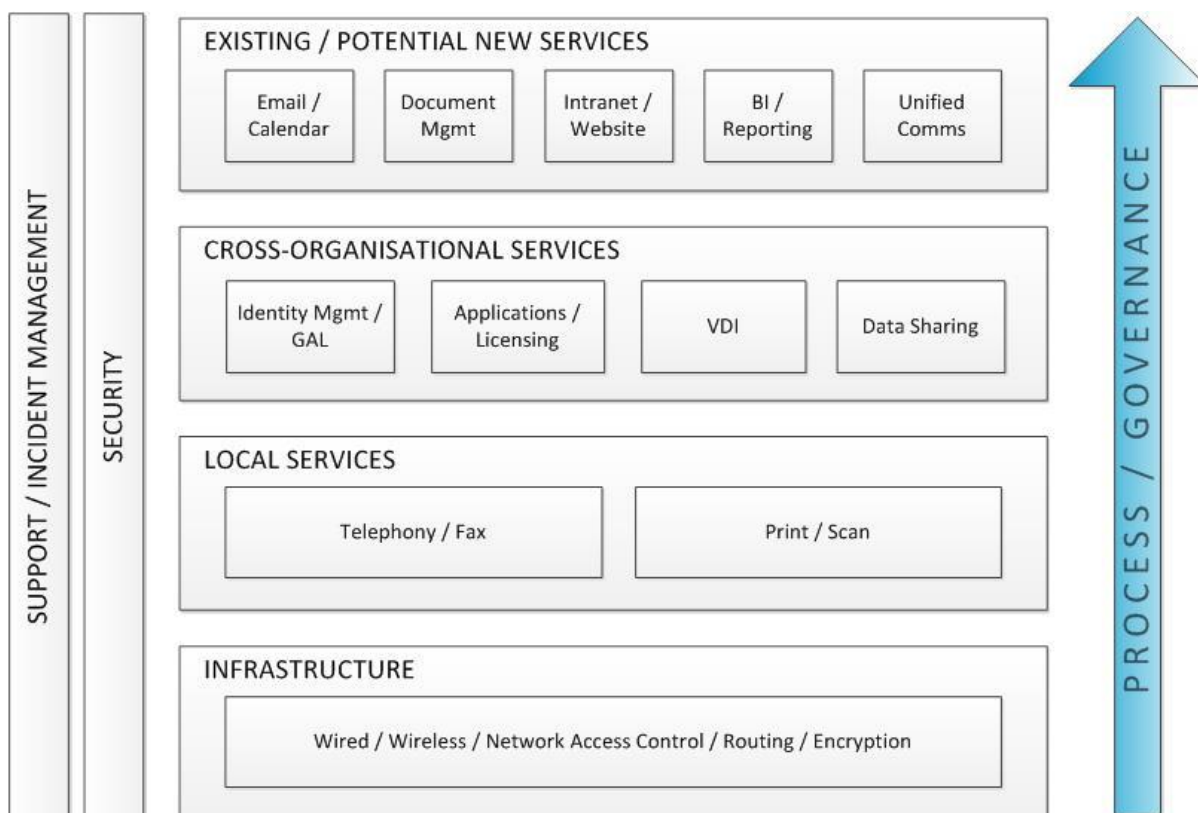
Direction Required to Council, Health Board or Both	
Direction to:	
1. No Direction Required	<input checked="" type="checkbox"/>
2. Glasgow City Council	<input type="checkbox"/>
3. NHS Greater Glasgow & Clyde	<input type="checkbox"/>
4. Glasgow City Council and NHS Greater Glasgow & Clyde	<input type="checkbox"/>

1. Purpose

- 1.1. To provide an update to the IJB on our ICT priorities, some of the challenges we face in achieving those and to highlight some current priority ICT projects. (Appendix 1).

2. Background

- 2.1. An initial ICT Strategy for the HSCP was published in May 2016. This was developed alongside the IJBs Strategic Plan for 2016-2019 and focussed on the key opportunities, themes and actions – linking these with key ICT themes noted below. The diagram below illustrates the key technology building blocks of the strategy.



BI – Business Intelligence

GAL – Global Address List (NHS and Council staff are available on both organisations Global Address Lists)

VDI – Virtual Desktop Integration – this is the technology used to provide the Joint Desktop

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- 2.2. The Scottish Government Published 'Realising Scotland's full potential in a digital world: a digital strategy for Scotland' in 2017 and are now consulting on an update to the strategy. Scotland's Digital Health and Care Strategy, the Digital Glasgow strategy and the NHS Greater Glasgow and Clyde Digital Strategy: Digital as usual were all launched in 2018. In 2019 the Council published Technology, Business Intelligence and Innovation Strategies. All of these strategies are relevant to the ICT & Digital strategy for the HSCP and in large part determine the strategy and implementations due to the roles of the parent organisations. This document aims to update the initial strategy, highlighting the key elements relevant to the HSCP, in line with the priorities in the IJB's strategic plan.

3. Key Strategic Themes

3.1. Data Sharing

Data is one of Glasgow City Health and Social Care Partnership's key assets. Effective information management is vital to decision making and to providing appropriate levels of care to the citizens of Glasgow. A key focus of this and the previous strategy is ensuring that data can be easily accessible whenever and wherever it is needed, and that it is shared instead of duplicated. It was agreed that the NHS Clinical Portal would be the strategic data sharing platform for the HSCP, and NHS data is now available to staff in Adult Social Care. A project to make data from the careFirst Social Care system available to NHS staff has suffered from a number of setbacks relating to resourcing and information security. Further work is being done on this and it is hoped this can be implemented in early 2021.

3.2. Application Access

Because the ICT for the HSCP is provided by each of the employing organisations there is a requirement for staff across the Partnership to have access to information in both NHS and Council systems. A key project from the strategy was the development of a 'Joint Desktop', which allows staff employed by both organisations to access key systems from Council or NHS ICT equipment. Going forward the development of cloud based technologies and changes to user access policies and technologies may mean there are development opportunities to allow further access with appropriate security. This will also assist with the potential for channel shift to allow citizens to submit and view information online. This has been done at a basic level with online forms, but in the future it is intended that this will be integrated with back office systems, and that relevant information can be shared with citizens.

3.3. Application Development

A number of the applications in use in the Partnership are legacy, which means they no longer meet the requirements of the business. Both the Council and NHS are reviewing system requirements and aim to concentrate on supportable key (or cornerstone) systems that can be used for many purposes. An Outline Business Case has been approved for the replacement of the careFirst Social Care system to Eclipse. The 25 Home Care systems inherited from the Cordia organisation in October 2018 will also be replaced.

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Due to the age of the systems and a change in the support model there are increasing risks of system failure of the Home Care Systems. Serious system failures resulted in all Home Carers having to adopt business continuity processes for 14 days last September. This included; being issued with daily appointment sheets across the city; the HSCP having to stop same day discharge to home care from Hospitals and having to retrospectively record incidents on the system when business continuity arrangements stopped and business as usual was resumed.

There are significant benefits to be achieved by the replacement of the systems – which will remove duplication and enable efficiencies in processing, which in turn will improve access to accurate information and decision making.

The proposal provided by CGI is not meeting the Council's expectations and is therefore being re-negotiated. This is leading to significant delays which further increases the risk of failure of the Home Care systems with a resultant impact on service delivery and means that transformation opportunities cannot be taken forward.

3.4. **Collaboration**

One of the early actions of the Partnership was to co-locate staff to facilitate integration of services. This was supported by ICT from both organisations being provided and in smaller bases with the introduction of Cisco ISE (Identity Services Engine). This is technology that allows a member of staff with Council equipment in an NHS base to access the Council network. ISE has had mixed success, and is only suitable for small number of staff. Further work is therefore required on an overall strategic plan for access to Council and NHS ICT services, which may involve joining the networks together.

The implementation of Microsoft 365 in both the NHS and Council offers substantial opportunities for collaboration and data sharing between the organisations, and wider opportunities with other organisations including 3rd sector providers.

This has begun with the swift introduction of Videoconferencing technologies in response to the pandemic. Both the NHS and Council rolled out Microsoft Teams and the NHS made Near Me (Attend Anywhere) widely available. The use of VScene video technology for Children's Hearings was also approved by the Council's Information Security Board. The use of these technologies has been essential during the pandemic, but offer the opportunity for significant transformational change for the HSCP going forward.

3.5 **Mobile and Remote Working**

Mobile working was introduced in the Council in 2015, and in a similar timescale in the NHS. This meant that all fieldwork or office mobile workers were issued with a hybrid tablet or laptop to enable them to work from multiple locations, which enabled significant improvements in efficiency and

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positive feedback in relation to work life balance.

There have been significant delays in the implementation of the Council's ICT refresh programme by the Council's ICT supplier, which has led to staff working with outdated and fault prone equipment or not being able to get mobile devices. In many cases equipment which has broken cannot be fixed or replaced, which in some cases has led to staff being unable to work, and in other cases staff having to use office based desktops (where available).

This has been further exacerbated by the impact of the pandemic, where there have not been enough mobile devices to fully support the workforce working remotely.

An example of this was delays in getting equipment to NHS Mental Health staff, which impacted on their ability to continue working in the early part of the pandemic. Staff have now been issued with equipment to allow them to work remotely and premises have had equipment installed to facilitate Attend Anywhere video meetings.

Through the Council's refresh programme (which started in October 2020 in the HSCP) most desktops will now be replaced by laptops to facilitate more remote working. The NHS are also taking forward business cases from each of the directorates for the provision of more mobile kit. Both organisations are further exploring the potential for ICT services to be accessible from other devices – with the appropriate identity management and security.

3.6 **Business Intelligence and Analytics**

Staff in the NHS and Council have worked together to baseline business intelligence capabilities and products. Going forward the aim will be to improve our use of data to make informed decisions and focus our resources to achieve better outcomes. In particular linking data and using tools to make information more accessible and analytics tools to predict demand.

The benefits of this were clearly demonstrated in response to the needs of the shielding population. Data from the NHS and Council were linked to identify the most vulnerable people on the shielding list who would be likely to require additional support and services. Linked data is also being used to map Covid 19 cases and predict where additional support may be required.

3.7 **Technology Enabled Care**

The existing Telecare infrastructure is analogue and requires to be transformed to digital by 2025, however many providers will be switching off their analogue services by 2023. There are approximately 9000 analogue units in premises throughout Glasgow City that will require to be replaced alongside the ageing infrastructure and telephone lines supporting the Alarm Receiving Centre. The success of the 'Can Do' challenge has illustrated the potential for digital technologies to support more people at home, enabling them to remain independent. There is significant potential for the use of digital services across multiple care groups – particularly to enable remote assessment and support.

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3.8 **Digital Resilience and Inclusion**

The Council's Digital Resilience group was started in response to pleas from young people living in children's houses for better technology. The programme has ensured good Wi-Fi is available in all the houses as well as up to date laptops for all the young people, but highlighted the much bigger issue of needing to ensure that our service users, staff and carers can be digitally resilient in order to make the most of available technologies, and potentially improve outcomes, while ensuring that vulnerable people are protected.

This is aligned to the wider aspects of digital and social inclusion for our service users and carers. During the pandemic many basic pieces of technology were provided to service users and carers to allow communication to continue. This included pay as you go mobile phones to enable continued contact with vulnerable service users. The Connecting Scotland programme has provided equipment and a year-long data contract for vulnerable people on the shielding programme and in the next round will focus on children and families. Much more needs to be done to ensure the digital and social inclusion and digital resilience of vulnerable people to help them achieve the best outcomes.

3.9 **Current Projects**

Details of key priority projects are shown at Appendix 1.

4. **Challenges**

4.1. There are a number of challenges associated with implementing an ICT and Digital Strategy for the HSCP.

- a) ICT and Digital services are provided by the parent organisations which means the HSCP has limited influence over strategic developments and priorities. This lack of control often means that developments are not undertaken in timescales required by the HSCP.
- b) This also means that a number of separate systems require to be operated due to the nature of the organisations (for example separate HR and Finance systems). This leads to unavoidable duplication and inefficiencies for the Partnership.
- c) NHS systems are designed to meet NHSGG&C or national requirements, and Council systems are designed to meet HSCP or Council requirements, which can mean it is difficult to find solutions to work specifically for the HSCP.
- d) The Council's ICT contract is with an external ICT supplier, and the experience to date of this has been characterised by significant costs and delays to projects, the most recent examples being the Refresh programme and the programme to replace careFirst and the Home Care Systems.
- e) The multiple bespoke and legacy systems inherited from Cordia are a significant risk until replaced. These include critical systems such as homecare and community alarms. The risk of system failure is

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increasing as they become increasingly difficult to support, and this is exacerbated by delays in the replacement programme.

5. Recommendations

5.1. The Integration Joint Board is asked to:

- a) Note the contents of this report;
- b) Instruct officers to provide an updated reflection on the strategic priorities of the Partnership as they relate to, or are enabled by ICT; and
- c) Request updates on progress of the priority ICT projects.

Current Key Projects

Microsoft 365	Both the Council and NHS GG&C are beginning to implement the Microsoft 365 suite of products. The rollout of Teams was expedited in both organisations in response to the pandemic. There is significant potential for greater collaboration between organisations through Microsoft 365.
Refresh Programme	After considerable delay an initial implementation of refreshed Council devices commenced on 19 th October. If successful further rollout is planned for the end of November and will continue thereafter. Most desktops will be replaced by laptops to facilitate flexible and remote working. NHS GG&C are also undertaking a refresh programme and ensuring staff have access to key applications remotely.
Clinical Portal Implementation	NHS data is available to SW Adult services staff via the portal, and a project to make SW data available to NHS staff is being worked on. It is hoped this can be implemented early in 2021.
Anticipatory Care Plan	An Anticipatory Care Plan Summary is now available in the Clinical Portal and is accessible for NHS and SW staff with the appropriate access. The Summary is electronically sent to GPs and is integrated in to workflow.
Integrated Solution for Health and Social Care	The first stage of a business case to replace careFirst and Home Care systems has been approved and work is ongoing with CGI on their proposals, with a view to having the next stage of the business case approved by the end of this year.
Technology Enabled Care	A project is underway to transform telecare services from digital to analogue and work is also ongoing on a 'Can Do Challenge' to provide digital tools to enhance independent living. Another project is underway to transform the Alarm Receiving Centre technology to make it more resilient and enabling offsite working.
DAISy	The Scottish Government's national Drugs and Alcohol Information system (DAISy) is due to start implementation from 1 st December. Glasgow is currently working with SG provided consultants on the requirements for file upload,

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	which means that Glasgow's implementation will be in 2021.
GCHSCP Direct	Development of a single point of access for the HSCP, bringing together health and social work service. Development paused due to the pandemic, but will be re-started and linked with the work of the urgent care hub and the critical services hub.
GG&C Urgent Care Hub	The out of hours urgent care hub is due to go live in January 2021. The NHS Trakcare system will be used to record referrals and actions taken by the hub. Joining up with other systems will be further investigated.
HSCP Critical Services Hub	Critical services are being co-located at the Borron St site to maximize collaboration between key services, ensuring efficiency and speed of delivery and decision making.
Housing First/ Rapid Rehousing Transition Plan/ Alliance to end Homelessness	Supporting the service to develop the technologies and reporting required to meet the needs of key strategic initiatives. Work on mapping processes has begun and a post is being recruited to support the work.
Videoconferencing	Both NHS and GCC expedited the rollout of Microsoft Teams and Near Me (Attend Anywhere) videoconferencing technologies in response to the pandemic. Use of VScene video technology was also approved for use in Virtual Children's Hearings.
Digital Resilience	Wi-Fi has been provided in all Children's Houses and laptops provided for all children and young people. Digital Agreements have been put in place and initial training agreed. A website has been developed to provide guidance and resources and this will be further developed. A digital skills and learning framework is being developed. Staff and young people digital champions groups have been established.
Redesign of Urgent Care	The implementation of the NHSGGC Flow Navigation Centre to support redesign of urgent care is due to go live at the beginning of December 2020.
Mental Health Assessment Units (MHAU)	Calls from NHS24 111 are now being triaged to the MHAU. Work is ongoing to automate these calls to Nurse Practitioners. Outcomes will be recorded in EMIS, sent to GP electronically and integrated to workflow.

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