

Report to the NHS Somerset Clinical Commissioning Group on 26 November 2020

Title: Somerset Integrated Digital electronic Record (SIDeR) Programme - Shared Care Record	Enclosure F
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Version Number / Status:	1.0
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Summary and Purpose of Paper

The SIDeR Programme has been developing a clinically led, digitally enabled approach to information sharing, and currently planned for soft launch of the Shared Care Record during November 2020 (delayed from April due to COVID response activities).

The Phase 3 Plan, developed in August 2020, noted the requirement for the provision of a shared care record across the health and care system. As we soft launch across General Practices, Yeovil District Hospital NHS Foundation Trust and St Margaret's Hospice, further work will continue for further expansion across the system during 2021.

The Programme will also look to prioritise other clinical use cases for development, alongside need to plan system wide financial investment. As with EMIS Viewer utilisation, further work is planned on the benefits of implementing the shared care record to patients and workforce teams in care provision.

Recommendations and next steps

To Note

- the progress in development and soft launch of the SIDeR Shared Care Record during November 2020 and further plans for 2021
- the steps towards optimisation and benefits realisation at scale across Somerset health and care system

The SIDeR Programme is monitored through a by Highlight Report reviewed regularly at the Somerset Digital Delivery Board with aspects of the programme discussed, developed and monitored through Clinical Leadership Oversight Group, Somerset Information Governance Working Group and Technical Working Group. CCG Digital Team provide clinical and programme management support.

Impact Assessments – key issues identified

Equality	Forms part of SIDeR Programme and recently reviewed by CCG QEEIA Panel.
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Quality	Aligned with implementation of EMIS Viewer, the access to right information at the right time and in the right place will enable improved service delivery, for both patients and workforce. This should enable clinical care to focus on current need rather than repeating information.			
Privacy	Information sharing requirements and solutions have been addressed through Clinical Oversight, Information Governance and Technical Working Groups.			
Engagement	The SDeR Programme features regularly in discussion with PPG and patient representative groups such as Somerset Engagement Advisory Group and Digital People's Champions Group. Briefings and updates have been included in the 'Your Somerset' newspaper, website, social media and leaflets through planned digital communications and engagement approach over the last two years. Presentations to colleagues and formal meetings, as well as posters in the workplace to engage and inform on the programme.			
Financial / Resource	<p>The current 3 year programme of activity has been funded via CCG approved bid on behalf of Somerset General Practices to the NHS England Estates & Technology Transformation Funding. Procurement process supported by collaborative system stakeholders led to contract award to Softcat plc, with Black Pear as key technical development partner.</p> <p>The former Somerset Digital Steering Group noted that further system level investment (excluding primary care) would need to be sought for contract extension from April 2021, with procurement providing +1+1 year extension period.</p> <p>Core CCG Digital Team leading the SDeR Programme continues to be funded via delegated finances from NHSE/I Digital Primary Care IT service provision, and work collaboratively with stakeholders across Somerset health and care system.</p>			
Governance or Legal	We have a requirement to ensure right information is available at the right time, and in the right place.			
Risk Description	Risks and issues are identified and addressed through the SDeR Programme Highlight Report on monthly basis. Risks recorded on CCG Risk Register as required.			
Risk Rating	Consequence	Likelihood	RAG Rating	GBAF Ref

SIDeR

Somerset Integrated Digital e-Record

**Making the *right information* available
to the *right people* at the *right time***

SIDeR Programme

Context

- Somerset Digital Roadmap, 2016
- Clinically led, digitally enabled
- Need for improved information sharing across Somerset health and care system
- Opportunities:
 - All General Practices on EMIS
 - Estates & Technology Transformation Fund
 - GP Systems of Choice Framework
- As part of SW digital discussions, recognising Somerset context
(core organisations: one local authority, one CCG, 3 NHS Trusts)
- Local system interest to explore and commit to shared approach
- Addition of St Margaret's Hospice

Stakeholders

Executive, Digital, Technical, Clinical, Operational, Safety, Assurance, Information Governance, Training and Communication Leads from:

- Somerset Clinical Commissioning Group (CCG)
- St Margaret's Hospice (SMH)
- Somerset Primary Care GP Practices
- Yeovil District Hospital NHS Foundation Trust (YDHFT)
- Somerset County Council (SCC)
- Somerset Foundation Trust (Somerset FT)

Other Stakeholders

- Bristol Connecting Care (BCC)
- Meddcare (Devon Doctors)
- Dorothy House Hospice (DHH)
- Children's Hospice South West (CHSW)

Live Transformation Services

- EMIS Viewer – used over 350,000 times
- Special patient notes shared with Out of Hours – 5,400 created
- Treatment Escalation Plans created and shared with GP practices – 3,000 records
- End of Life ‘single source of truth’ record – 2,400 records created
- Learning Disability Assessments – 1,800 patient records flagged
- Bedstate tracker established across CCG and SCC residential and nursing homes, accessible by secondary care discharge teams – 150 active homes

Shared Care Record

- SIDeR Shared Care Record (SSCR) was scheduled to go live in April 2020 but was paused to allow digital services in Somerset to support their organisations in response to Covid-19
- Aim is to go live in a phased approach with 1st phase soft launch from late November 2020 – Yeovil Hospital, St Margaret's and 63 of 65 GP practices
- Somerset County Council Adult and Children's Social Care, together with Somerset NHS Foundation Trust acute, community and mental health to commit to follow in 2021



Programme Assurance

- ✓ Information Sharing Agreement
- ✓ Contextual Launch from Clinical Systems
- ✓ Seamless Role Based Access and Validation
- ✓ Acceptable Use Policy
- ✓ System Audit Trail
- ✓ Quality, Equality, Equity Impact Assessment
- ✓ Clinical Safety Review and Report
- ✓ Connectivity Testing
- ✓ Performance Testing
- ✓ User Acceptance Testing
- ✓ E-Learning Training Package
- ✓ Digital Technical Leads Approval
- ✓ Digital Clinical Leadership and Oversight Group Approval
- ✓ Digital Delivery Board Approval
- ✓ Public and Stakeholder Communications

Potential Benefits

- Save wasted journeys
- Save time
- Save visits / appointments
- Improve the safety of treatment
- Save admissions
- Enable safer prescribing
- Improve the quality of a consultation
- Support risk management and safeguarding
- Support more effective triage and assessment
- Patient won't have to keep repeating their story
- Patient will receive collaborative, safer, more appropriate care
- Patient will have a better experience with fewer duplications or delays
- Staff will be more aware of patient wishes (e.g. End of Life Care)
- Improve confidence in clinical decision making
- Increase recognition and value of peer professions

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- Summary
- Alerts
- End of Life Care 1
- GP Record
- SCC
- YDH
- SFT - Comm&MH
- SFT - Acute
- SMH
- Contacts

Data from SFT - Comm&MH could be out of date - please be aware that you may not be looking at real-time data. Clinical judgment remains paramount.

Data from SMH could be out of date - please be aware that you may not be looking at real-time data. Clinical judgment remains paramount.


Active Medications	Allergies	Problems
SCC does not share Active Medications	SCC does not share Allergies	Asthma
Repeat	[X]Oth non-ster anti-inf drg [NSAID] caus advers ef ther use. diclofenac	Death cert. Med A signed 12/04/2019
Furosemide Oral Solution, Sugar Free 10 mg/ml (50 mg/5 ml). <i>drink as required</i>	Adverse reaction to penicillins	Patient died at home 09/04/2019
Paracetamol Soluble tablets 500 mg. <i>One To Be Taken Every 4-6 Hours Up To Four Times A Day</i>	cats and pollen	End of life care 01/04/2019
Amoxil Powder For Solution For Injection 500 mg vial. <i>as directed</i>	Drug-induced haemolytic anaemia. diclofenac	Treatment Escalation Plan 01/04/2019
codeine phosphate, tablets,15mg,tablet(s) [28 tablet(s)]. <i>Do not drink alcohol., Warning. May make you sleepy. If so do not drive/use tools or machines</i>	Penicillamine	Not for attempted CPR (cardiopulmonary resuscitation) 01/04/2019
	Penicillin	Double incontinence 08/01/2019



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  “Digital Team at Somerset Clinical
Commissioning Group”