**E-health strategy**

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| | <ul><li>E = exploratory report</li><li>L = lab report</li><li>F = factory report</li><li>S = summary document</li><li>LR = literature review</li><li>RR = research report</li><li>MR = market research</li><li>MAP = mapping</li><li>V=video</li><li>O= other</li></ul> |

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| Purpose of document | Summarisation of documents of high importance for the Business Case |
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| **Project detail (delete row if appropriate)** | (project name, project owner(s), dates, organisation(s) involved) |
| **Other detail (delete row if appropriate)** | |

| Related projects | Names and doc reference numbers |
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| **Keywords** | 2020 Vision; eHealth; health and social care integration; |

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| Name of Strategy: | eHealth Strategy 2014-17 |
| Date: | 9 March 2015 |
| URL: | http://www.gov.scot/Resource/0047/00472754.pdf |
| Key words: | 2020 Vision, eHealth, health and social care integration |
| Why does this strategy exist?<br><br>(what's the problem/opportunity this stems from) | This document is the refreshed 2014-17 eHealth Strategy, which reflects developments since 2011 and includes a perspective out to 2020. It takes into account the new strategic direction in Scotland, supported by legislation, on integrating health and social care services. Associated with this is a further shift in focus from the internal needs of the NHS Scotland towards joint requirements with local government and third sector partners, and, in particular, the expectations and requirements of citizens and patients for electronic information and digital services. |
| Summary: | 2020 eHealth Vision suggest that everyone's health and wellbeing can be better supported through greater use of digital technology. eHealth is the key to how we access, use and, share information within and across NHS Boards, and with partner organisations in order to deliver integrated health and social care; how we support patients and their carers to make informed decisions to manage their health and wellbeing; and how we use health data appropriately to improve the effectiveness of services and treatment and make significant advances in medical research. |
| Key goals and means to achieve them: | **Current challenges faced by NHSScotland**:<br><br>• reducing variation in infrastructure and applications, and maintaining the resilience of systems that now need to be available 24/7/365;<br>• ensuring the availability of funding for replacement and modernisation of existing systems;<br>• filling gaps in electronic information coverage and systems integration (the most significant being community systems and HEPMA);<br>• providing citizens with the means to access their health and care information, and utilize secure interfaces between consumer health and care products/tools and core health and care information systems;<br>• building greater capability for clinical and business intelligence; |

- further developing information governance so as to balance the need to protect the confidentiality of patient information with the need to share information in order to provide integrated care.

Route map describes:

- A 22% increase on the demand for health services between 2012-32, if health life expectancy does not change. For health and social care services the increase is estimated at 29%.
- Increase in long-term conditions, with growing numbers of people with multiple conditions and complex needs such as dementia;
- relatively little progress to date in addressing health inequalities in Scotland despite the effort undertaken.

**The SG 2020 Vision**: "Our vision is that by 2020 everyone is able to live longer healthier lives at home, or in a homely setting. We will have a healthcare system where we have integrated health and social care, a focus on prevention, anticipation and supported self-management. When hospital treatment is required, and cannot be provided in a community setting, day case treatment will be the norm. Whatever the setting, care will be provided to the highest standards of quality and safety, with the person at the centre of all decisions. There will be a focus on ensuring that people get back into their home or community environment as soon as appropriate, with minimal risk of re-admission."

**2020 Vision - By 2020 eHealth in Scotland will**:

- Enable information sharing and communications that facilitate integrated health and social care across all settings from the patient's home to the hospital.
- Provide information processing, analysis and intelligence that supports and complements the work of health and social care professionals and improves the safety and quality of care.
- Support people to manage their own health and wellbeing and live longer, healthier lives at home or in a community setting.
- Contribute to a partnership between the Scottish Government, NHSScotland, the

research sector and industry to enable Scotland to be a long term leader in digitally enabled care.

**The eHealth Aims** (set out in 2011, still valid):

1. To enhance the availability of appropriate information for healthcare workers and the tools to use and communicate that information effectively to improve quality.
2. To support people to communicate with NHSScotland, manage their own health and wellbeing, and to become more active participants in the care and services they receive.
3. To contribute to care integration and to support people with long term conditions
4. To improve the safety of people taking medicines and their effective use.
5. To provide clinical and other managers across the health and social care spectrum with the timely management information they need to inform their decisions on service quality, performance and delivery.
6. To maximize efficient working practices, minimize wasteful variation, bring about measurable savings and ensure value for money.
7. To contribute to innovation occurring through the Health Innovation Partnerships, the research community and suppliers, including SME sector.

The strategy also outlines more detailed milestones, deliverables and steps for achieving the different stages (Ch5). DHI features heavily in helping to deliver the eHealth Strategic Programme (5), especially the "5.7. To contribute to innovation occurring through the Health Innovation Partnerships, the research community and suppliers, including the small and medium enterprise (SME) sector."

The National strategic oversight of eHealth is provided by the eHealth Strategy Board, whilst governance oversight of the delivery of Scottish Government funded "pillar" programmes and projects is provided by the eHealth Programmer Board. They are both supported by an infrastructure of other bodies including local consortium or internal NHS Board governance groups for local delivery projects.

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| Expected outcomes: | Achieving the 2020 Vision for eHealth is expected to result in substantial benefits for citizens, patients and health and social care staff, resulting towards a continuing shift of |

the location of care from acute hospitals to patient's own home, with eHealth support for the care teams. The emphasis is also on supporting the self-management of long-term conditions, and on making health and care services more personalised and continuous. People will be healthier for longer, health problems will be predicted earlier and managed more effectively. This is also contributes to the overall sustainability and the total capacity of the health system.

**Citizens and Patients, in addition to f2f care, will be able to**:

- Use a patient portal to access their personal, editable EHR;
- Have structured access to information about prevention, managing their health and availability of relevant health services, and a route to access peer and community support;
- Order repeat prescriptions and book appointments online; use secure two-way e-communication with their health and social care providers to receive information, make enquiries and track their care arrangements;
- Access a portfolio of proven tech enabled solutions, e.g. individualised home health monitoring devices and services, and thus take a much more important role in self-monitoring of their conditions.

**Clinicians, Social Care Staff and other third sector partners will be able to**:

- Quickly access at the point of care EPRs containing the necessary information to deliver the best care possible;
- Record, and share, their findings electronically with the rest of the care team; quickly and easily initiate care processes; Workflow will coordinate the inputs of other staff and monitor the patient's progress;
- Have quick and easy access to increasing amounts of clinical guidance and decision support that is relevant to the specific patient context, including highlighting any substantial variation from expectations, and generating appropriate prompts and alerts.

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| | **Managers, Planners and Researchers will have:**<br><br>● Better access to appropriate anonymised and summarised data for analysing, understanding and improving clinical practice;<br>● Support from immediate information that enables them to take operational decisions on an hour-to-hour and day-to-day basis that can improve patient flow and the management of outpatients, in patient and community services;<br>● A greater capacity to analyse and understand specific patient populations, whether by geography, age group or conditions, and undertake risk stratification and predictive analytics that can inform prevention measures and early intervention with a view to improving health and reducing unplanned admissions. |
| Key quotes: | Dame Fiona Caldicott (2013) 'the duty to share information can be as important as the duty to protect patient confidentiality. Health and social care professionals should have the confidence to share information in the best interests of their patients'. (p. 11)<br><br>"Primary and Secondary care services depend more than ever on secure, resilient and reliable ICT systems. This dependency also reaches beyond NHS Scotland as NHS Boards work in integrated partnerships with local authorities and the third sector. Health and social care workers require access to the right information, whenever the wherever they need it, to inform their decisions and ensure the best possible care is given to each individual. The move to seven day working will require NHSScotland to enhance its current infrastructure, and the associated support services, to provide much broader "always-on" capability." (p.12)<br><br>"That the parliament recognizes that innovation through technology is vital in delivering Scotland's 2020 Vision for health and social care, whereby everyone is able to live longer , healthier lives at home or in a homely setting; considers that enhanced home-based monitoring services are instrumental in reducing levels of hospital readmissions; acknowledges that digital healthcare should be a catalyst for people interacting with services and information online, building on examples such as the Key information Summary, and the internationally acclaimed Emergency Care Summary, and recognises |

that Scotland has a clear opportunity to be a leader in the growing global digital healthcare market - -" (p. 13)

"eHealth systems are now vital to the delivery of patient care. Loss of systems or significant downtime have a major impact on NHS Boards' capability to deliver care and this will only increase in significance with a shift to more seven day working. Ongoing investment will be required for business as usual, including maintaining, upgrading the underlying technical infrastructure, ensuring greater system resilience, and enhancing the functionality of existing applications to support more effective working practices and t contribute towards the overall Electronic Patient Record."

-"Delivery of solutions to support the Health and Social Care partnerships real challenge as they evolve new operating practices and care processes."

-"Field of "Health maintenance and self-management" is subject to substantial innovation by private sector organisations, and increasingly the NHSScotland will need to facilitate not only patient access to their own health information, but possibly their interaction and use of other health consumer digital products and devices where interaction with NHSScotland systems may enable them to better self-manage their health and wellbeing. Patient can be expected to express greater ownership of their data and seek to download it for their own purposes."

-"Whilst focus tends to be on operational information to support patient care, Scotland also requires a world class Information and Intelligence Framework if it is to develop its health and social care systems to the highest levels of quality based on up-to-date evidence. All eHealth development must account for the need to build on the existing local and national information resources to build such an infrastructure and capability." (p. 21-22 )

"Incompatible standards and data structures, and differing implementation approaches and decision, have historically led to issues across NHSScotland with system integration and data sharing. As this is a capability that lies at the heart of enabling the types of care envisaged in the 2020 Vision, it must have the prominence and priority that it

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| | deserves. It will be addressed through a variety of ensures including common applications, but also consistent data and messaging standards which will need to be adopted rigorously by NHSScotland and its suppliers."<br><br>"Effective information assurance is a foundational requirement for the successful exploitation of eHealth covering governance, confidentiality, security and availability, and integrity and quality of data, information and records. - - The recent review chaired by Dame Fiona Caldicott has signed posted the way to acceptable further information sharing and has been adopted by the SG"<br><br>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/192572/2900774_InfoGovernance_accv2.pdf |
| Parent/child document (of what)? | This strategy follows on from the eHealth strategy 2011-2017, but has been updated to take into account new legislation regarding health and social care integration that was issued in April 2015.<br><br>-supported by a separate eHealth Finance Strategy and eHealth Technical Strategy, set out in an eHealth Business Plan.<br><br>-Related to Digital first (2012) strategy and "key enabler" for the Healthcare Quality Strategy, and essential for Vision 2020.<br><br>-Also linked to All About Me: My Conditions, My Care, My Outcomes -agenda for improving care for Multiple morbidities, the Home First – Ten Actions to Transform Discharge - actions, and the Joint Improvement Team Strategic Plan 2013-2016. |