

Meeting of  
Lanarkshire NHS Board  
26<sup>th</sup> November 2008

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**SUBJECT:eHealth**

**1. PURPOSE**

Quarterly update on eHealth including status of approved projects and prevailing local, regional and national issues.

**2. CONTENT/SUMMARY OF KEY ISSUES**

- Work on eHealth related developments is progressing broadly in line with the agreed plan – priorities have been revised in accordance with the National eHealth Strategy and additional programmes of work have commenced in the areas of GP IT, Community Nursing and AHP support and Information Governance
- Regional initiatives have been approved in the areas of Renal Medicine and Chemotherapy Prescribing – these will be implemented within a regional work programme during 2009/10
- The programme of work that will conclude with the award of a contract to replace our Patient Management System (PMS) is progressing to plan. The business case review and development aspect of work that is intended to address individual NHS Board affordability has commenced and will inform the NHS Lanarkshire business case
- A new target for the universal use of CHI has been set and a programme of work will take place over the next 3 years to adopt CHI as the primary patient identifier across all service areas

**3. ACTIONS**

Board Members are asked to note progress

**4. CONCLUSIONS**

**5. FURTHER INFORMATION**

Further information from Robin Wright, General Manager eHealth/IM&T, 01698 245078 or [robin.wright@lanarkshire.scot.nhs.uk](mailto:robin.wright@lanarkshire.scot.nhs.uk)

**NHS Lanarkshire  
Board Meeting – 26<sup>th</sup> November 2008  
eHealth Update and Status Report**

**1. Introduction**

This report to the NHS Board sets out progress against the work programme agreed for the period 2007-09, informs members on an exception basis of variance against the plan and updates on other issues pertaining to local, regional and national eHealth related issues.

**2. 2007/09 Work plan**

Progress against the initially agreed work plan and subsequently added initiatives is largely complete or on target. Those work elements that remain as work in progress or are subject to variance against the agreed plan include:

**CHI**

Existing targets relating to CHI have been met locally and will be maintained on a continuing basis. CHI targets have now been revised and NHS Boards must adopt CHI as the single patient identifier in all patient based transactions by 2011. This target is supported by an allocation of funding over the next 3 years (£120k, £120k and £60k) and plans are under development locally to set out our approach to achieving the target.

**Community Nursing System**

NHS Lanarkshire is now a full partner in the collaborative development with NHS Dumfries and Galloway and NHS Tayside of a system to support the information and operational management needs of Community Nurses and AHPs. This Scottish Government funded initiative will deliver ‘core functionality’ by spring 2009 and will include the facility to tailor the system to local needs.

**Chemotherapy Prescribing**

The business case and associated financial plan for the introduction of a Chemotherapy Prescribing system has been approved by the National eHealth Programme Board and the West Regional Planning Group. The system will be available to all Boards during 2009/10 and will initially focus on the West of Scotland Cancer Centre (Beatson). This initiative will improve the flow of information for cancer patients who receive care across the managed clinical network and will better support patient care that is shared between the Beatson and Lanarkshire.

**Renal Medicine**

A contract for the supply of a regional renal system has been established and subject to an agreement on NHS Lanarkshire making a recurring financial contribution no greater than the cost of the current renal system, the new system will be adopted during 2010/11.

### **3. 18 weeks RTT**

The eHealth Programme is closely involved in the planning activities related to 18 weeks RTT. As well as taking account of the potential systems changes that may be required, the early focus is on determining appropriate data sets from which current performance can be derived. The importance of streamlined referrals management processes is seen as a key aspect of the 18 week programme and specific work is being undertaken within the Referrals Management Service to prepare for the likely changes there. NHS Lanarkshire staff are fully engaged in national activities and opportunities to work collaboratively will be fully exploited.

### **4. PACS/RIS**

Plans remain in place to implement phase 3 of the adoption of the national PACS/RIS System at Wishaw Hospital during December 2008.

Negotiations are continuing with the existing PACS Supplier (Siemens) regarding exit from the Wishaw contract. A compensation proposal from NHS Lanarkshire to Summit Healthcare in respect of early termination of the Siemens PACS Contract at Wishaw is in preparation and will be the subject of scrutiny by the Audit Committee and Scottish Government Health Department.

### **5. Improved Information Governance**

NHS Scotland guidance has been received over recent months to address a number of perceived threats and vulnerabilities to information security.

NHS Lanarkshire has responded to this by revising and strengthening its Information Governance Committee and remitting it to bring forward a milestone based action plan to address:

- IT related security policies and associated technical and procedural controls
- The security of information in transit including a review of current storage, transportation and mailing facilities
- The capture, storage, handling, distribution and secure destruction of formal Health Records
- The capture, storage, handling, distribution and secure destruction of ad-hoc correspondence and general paperwork that supports operational activities

The Action Plan and associated financial implications will be finalised during the remainder of 2008 for approval by the Information Governance Committee at its December meeting.

Notwithstanding that, a number of specific activities have taken place to exert greater control over existing known security risks. These include:

- Prohibition of the use of Memory Sticks for all but business and clinical imperatives
- Encryption of all Laptop Computers and Blackberry devices
- The commissioning of a risk assessment on the use of handheld computers The issue of guidance to all staff regarding the secure use of IT and manual records and to raise general awareness on the need to physically secure offices and other work areas that contain paper and electronic media
- The review of all Information Security related policies has commenced across NHS Scotland with a plan to issue pan Scotland policies in early 2009 – this initiative will also commission specific work in areas of common interest to ensure a joined up approach and economies of scale

## 6. National Strategy

A revised National eHealth Strategy has been approved and published. The strategy aligns with *Better Health Better Care* and from an NHS Lanarkshire perspective, is broadly in line with the range of initiatives that have been included in the current workplan. The detailed implementation plan to accompany the Strategy is currently subject to discussion between the service and Scottish Government and it is likely that once agreed, there will be a need for Boards to demonstrate that plans are in place to deliver against a range of priorities.

## 7. PMS Programme

The initial shortlisting phase of the project has concluded with a longer than planned list of suppliers to be taken to the next stage. The decision to take forward an extended shortlist reflects the complexity of the evaluation process and the indiscernible outcome from the evaluation of written responses.

The Programme Board has decided therefore that an interim stage of ‘filtering’ is appropriate to enable a more manageable group of suppliers to be taken forward to the Invitation to Participate in Dialogue Stage 2 process (ITPD2) – This new terminology replaces the Invitation to Tender (ITT) process that was previously followed for such procurements.

The interim stage will include:

- Senior Management Meetings;
- Technical/Implementation
- Workshops/Functional demonstrations
- Functional presentations

It is intended that during the third week of December the project team will score these activities, and will make a recommendation to the PMS Programme Board (23 December) of a further down-select of bidders.

The impact of the introduction of this interim stage has been assessed and does not materially affect the planned end date to the programme.

The PMS Programme has undergone a Office of Government Commerce Gateway Review as part of the Quality Assurance framework associated with large scale Government procurements. The result of this report have been made available in draft and the outcome recommendations are favourable with a project status of 'Amber' – A number of recommendations for improvement have been suggested and these are being auctioned in advance of receipt of the formal report.

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Robin Wright, November 2008