

Thames Valley and Surrey LCHR Programme Board paper

Date of Meeting: 19.05.20	Paper No: 04
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Title of Paper: Current Programme Priorities

Paper is for:	Discussion	✓	Decision		Information	
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Purpose and Executive Summary:
To outline the current position on programme delivery priorities for Q1/Q2

Engagement: clinical, stakeholder and public/patient:
Design Authority input at 5/5 meeting

Action Required:
To confirm the scope and overall target timescale (by end Sept) for delivery to enable records sharing for Individual Care at a regional level across TVS, enhanced by analytics outputs that directly support care delivery at an individual level.

Author: Andrew Fenton / Patrick Reed, Bryn Wales and John Skinner

Date of paper: 14.05.20

Financial Implications of Paper:
Programme costs for delivering the route-map priorities are covered in the programme budget, there may be some third party supplier costs to be addressed.

Conflicts of Interest	
No conflict identified	✓
Conflict noted: conflicted party can participate in discussion and decision	
Conflict noted, conflicted party can participate in discussion but not decision	
Conflict noted, conflicted party can remain but not participate in discussion	
Conflicted party is excluded from discussion	

Publication status – default position is for Board papers to be published on the TVS website. Note exceptions and reasons below.	
Tick if <u>Not</u> for publication:	
Reason:	



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CARE RECORDS

Programme priorities - Q1/2 route-map

TVS LHCR Board, 19.05.20

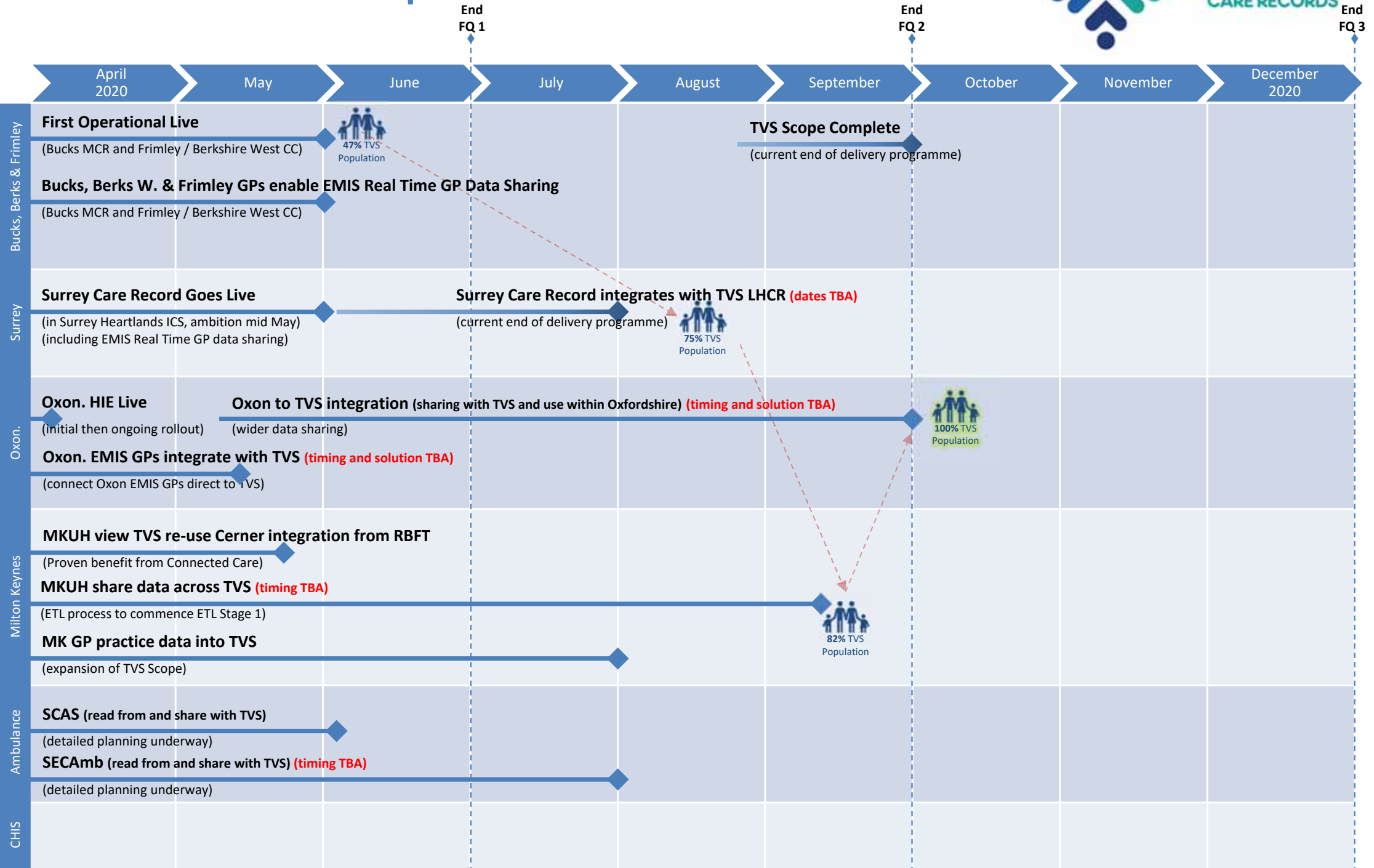
Target delivery by end Q2



To enable records sharing for Individual Care at a regional level across TVS, enhanced by analytics outputs that directly support care delivery at an individual level.

In scope of the route-map: My Care Record (Bucks), Connected Care (Berks West and Frimley), Surrey Care Record, Oxfordshire, Milton Keynes UH, SCAS & SECAMB, Child Health Information Services.

TVS Route Map



Release 2 status (MCR and CC)



R2 go live steps	Release 2 stakeholders				Later stakeholders							
Area	TVS	Graphnet	Connected Care	My Care Record	Surrey Care Record	MKUJH	SCAS	SECAM	Oxford!!	CHIS - SCW	CHIS - Surrey	BLMK
Technology path agreed	N/A	N/A	Yes	Yes	Yes	Yes - query VPN	999 and 111 separate solutions	999 only	Proposed solution - not agreed yet			
Data loaded	N/A	MCR data not synchronised	Yes	Yes								
Data matching	Agree algorithm change	80k not matched - change algorithm	n/a	n/a								
Data testing	N/A	20 cross border patients provided	Set up portal access	Set up portal access								
Clinical safety sign off	Need report to summarise evidence	N/A	Line up clinicians	Line up clinicians								
RBAC sign off	Finalise 4 levels of access	Set up agreed 4 levels	Agreed in principle	Agreed in principle	To be confirmed							
DPIA DSA Qualifying standard accepted/met	Board to sign off in May		Connected Care does not support some use cases Sent to leads Frimley processing	DPIA supported Sent to leads Frimley processing								
Comms	Prepare material for local use	N/A	Local	Local								
Local area approval for Release 2		N/A			N/A							
Analytics set up	Define access and segregation	N/A	TBD	TBD	N/A							

Oxfordshire



Technical solution to interface between Cerner and Graphnet for Oxon not yet agreed.

SSO to the Oxfordshire shared record is through HIE and the Oxfordshire preference is to have a single way of accessing from Cerner Millennium and Primary Care into Graphnet CareCentric through an API; Cerner have suggested some options for doing this and Graphnet are suggesting alternative approaches – there needs to be agreement based on standards.

The links being considered would provide API viewing-access between Cerner HIE and Graphnet CareCentric, but Oxon data wouldn't reside in the TVS data platform, so not part of the analytics capability.

Data into the Oxon platform could be via Cerner HealthIntent (once deployed) or direct from providers into TVS platform.

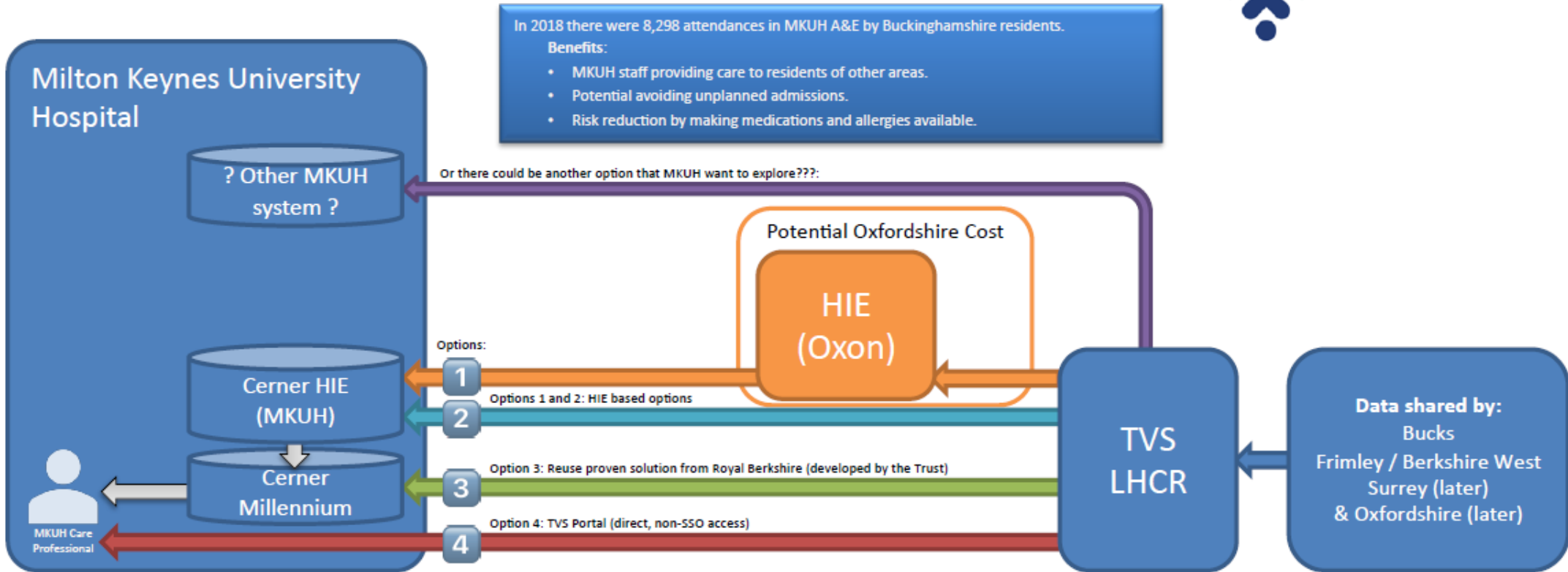
The challenges of resolving the interface between Cerner and Graphnet for Oxfordshire have been identified as a high level risk for the programme and requires further escalation and action.

MKUH care professional access to TVS LHCR

(e.g. Enabling A&E clinician to assess Emily's data in TVS LHCR)



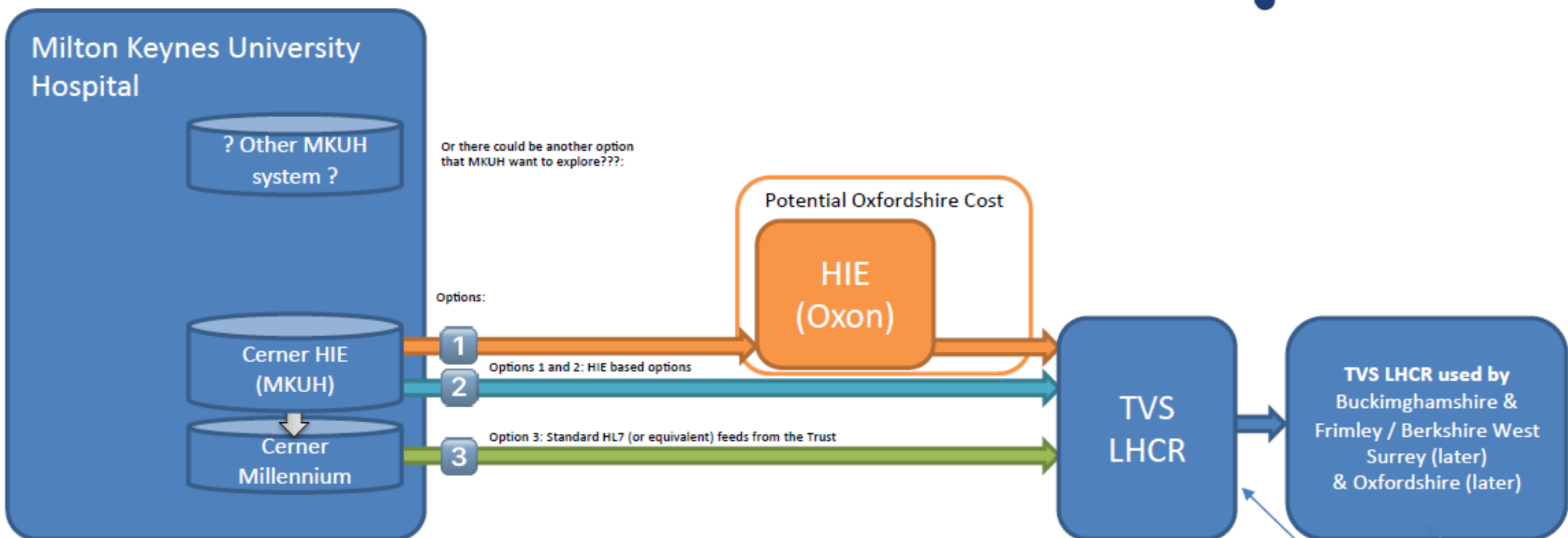
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Option	Complexity	Speed	Supplier Cost	MKUH User Experience
1 MKUH joins Oxon. HIE	High, Two HIE connections and Oxon work ongoing.	Unknown dependent on Oxon work first then HIE to HIE connection	Unknown to MKUH or OUH	Good, fully integrated presentation, summary dataset.
2 MKUH HIE connects to TVS	High, Unproven but in development.	Unknown	Unknown, proposal made to Cerner (as for Oxon.)	Good, fully integrated presentation, summary dataset.
3 Reuse Royal Berks integration.	Low, proven. Trust Developed solution.	Fast (few weeks)	None. NHS (Trust) Developed solution.	Excellent, proven in Royal Berkshire.
4 Direct Web Access	Implementation is trivial but use is complex.	Very Fast	None (assuming Graphnet / TVS include licenses)	Adequate

Chosen Solution

MKUH contributes data to TVS LHCR



Option	Complexity	Speed	Supplier Cost	TVS User Experience	TVS Analytics / Dashboards / Risk Stratification
1 MKUH shares data via Oxon. HIE	High, currently in development in Oxon. Unknown how end to end will work. TVS integration via HealthIntent.	Dependent on Oxon. expediting	Unknown to MKUH or OUH	Good, fully integrated dataset (dataset TBC). Not real time.	No
2 MKUH HIE connects to TVS	Medium, currently in development in Oxon	Unknown	Unknown	Good, fully integrated dataset (dataset TBC). Real time TBC.	Dependent on integration choices.
3 Standard HL7 (or equivalent feeds)	Low, proven	Fast (few weeks)	Covered by TVS	Excellent, proven in Royal Berkshire	Yes



Chosen Solution

Ambulance Services



- SCAS: (999 and 111 services)
 - re-engaged for LHCR integration via Care Professionals Group (in addition to Connected Care integration)
 - Graphnet working with Adastra to resolve technology issues (now awaiting testing)
 - Covid-19 pressures diverting resources
- SECAMB: (999 services)
 - engaged via Surrey Care Record for SyCR and TVS
 - Proven Graphnet integration with Cleric CAD system
 - Covid-19 and pending system upgrade affecting resources.