ENABLING EXCELLENCE
Investing in IM&T for Future Success
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This strategy has been shaped through the requirements of our patients, clinicians, staff, management and key partners. We recognise that many of our key ambitions as a Trust require technology to make them a reality and there is an overriding need to implement an integrated Electronic Patient Record (EPR). This strategy has been developed to reflect the joint arrangements for IM&T that we have with our commissioners for the people of Cumbria. From the consultation process undertaken we have identified seven principles that underpin this strategy:

- Joined up care
- Supporting care outside hospital
- Integrated Electronic Patient Record
- Enhanced productivity through innovation
- Agile working across all settings
- Empowered and engaged patients
- Adding value for patients & clinicians

**OUR VISION & OBJECTIVES**

This strategy sets out clear objectives and a clear IM&T vision:

‘To ensure our healthcare services are supported by excellent, high quality clinical and business information which is timely, accurate and tailored to requirements.’

We will achieve this vision by delivering our key strategic objectives:

- Develop and implement an integrated electronic patient record for our patients across our Trust and beyond
- Provide patient access to their own health information
- Deliver reliable business intelligence through new technologies
- Implement new technologies to support service delivery regardless of location
- Implement a resilient IM&T Infrastructure.

The key benefits we will achieve through delivering these objectives are aligned to the Trust’s strategic vision, aims and objectives:

- Safer and more effective care
- More responsive and efficient services
- Equitable & Patient Centric care
- An Information Culture supported by a resilient and modern IT infrastructure.
OUR INVESTMENT COMMITMENT

IM&T has the potential to revolutionise healthcare over the next decade and Cumbria Partnership NHS Foundation Trust wants to shape and drive this revolution to the benefit of its patients, staff and commissioners. We are committed to aligning our future investment plans with our new IM&T strategy objectives and to continue working in partnership, through joint investment, with Cumbria Clinical Commissioning Group.

DELIVERING THE STRATEGY

We will translate this strategy into reality by implementing the following programmes of work which will evolve over time:

AN ELECTRONIC PATIENT RECORD PROGRAMME

We will deliver electronic patient record systems into both our Community, Children and Young People’s and Mental Health Services.

AN INTEROPERABILITY PROGRAMME

An electronic patient record for the Trust will provide the basis to then share clinical summaries, referral and discharge information and alerts with other care providers to work towards a combined electronic health record. To do this we will co-ordinate a series of interoperability projects across the health economy to enable the necessary capability to share information seamlessly with our partners.

AN AGILE WORKING PROGRAMME

This programme will ensure access to systems regardless of location. Care needs to be provided in a variety of settings – from care homes, to people’s own living rooms – and our staff need supporting technologies which give them the access they need to information regardless of their location.

A PATIENT ACCESS PROGRAMME

This will provide patient centred technologies to support telemedicine and access to patient’s own information.

A BUSINESS INTELLIGENCE PROGRAMME

This will ensure we have the supporting technologies to extract, analyse and report ‘real time’ and retrospectively on clinical, business and administrative information to meet our own and commissioners’ intelligence requirements.

AN IM&T MODERNISATION PROGRAMME

This programme will deliver a new, modernised IM&T service that can support the IM&T needs of the Trust into the future.
Develop & implement an integrated electronic patient record for our patients across our Trust and beyond.

Ensure our healthcare services are supported by excellent, high quality clinical and business information which is timely, accurate and tailored to requirements.
Improving the health and wellbeing of our community is our main purpose. Harnessing technology to help achieve this is essential. We plan to take forward this IM&T strategy with our partners and commissioners, to support the transformation of services to be truly fit for the future.

This strategy is focused on ensuring we can achieve the healthcare priorities for the Cumbrian communities we serve and will build the confidence of the public, patients and healthcare professionals that we are a modern and effective healthcare service.

We are now moving into a new era of co-operation with Cumbria Clinical Commissioning Group and are delighted with the establishment of the Joint Operational Programme Board with our commissioners to act as the vehicle to deliver our collective ambitions around IM&T. Jointly funded, hosted by the Trust, this new team provides the project and change management skills we need to deliver this strategy in partnership with Commissioners.

This strategy has been widely consulted upon and is core to our Trust forward plan. We plan to ensure IM&T enables our services to thrive, our staff to be enabled to deliver high quality care and our patients & communities to be active participants in their own health & healthcare experience.
PURPOSE OF THIS STRATEGY

Cumbria Partnership NHS Foundation Trust (CPFT) provides Community and Mental Health services to the people who live, work and visit within Cumbria. We employ approximately 4000 staff and serve a population of almost half a million across the six districts in Cumbria. Our community services are supported by hospital beds and rehabilitation services from our nine community hospitals, community beds in acute hospitals, mental health and learning disability inpatient units. We want the people who use our services to remain independent and in control and we work closely with our health and social care partners to achieve this aim.

THIS STRATEGY

This Information Management & Technology (IM&T) Strategy outlines a high level strategic plan for the next five years to enable a sound fit for purpose system architecture and IM&T infrastructure for the Trust. The strategy takes account of the initial NHS Cumbria Strategy 2010-13 which began the journey to achieve fit for purpose clinical systems supported by a strong IT infrastructure and to enable the sharing of clinical information seamlessly via interoperability.

As part of our commitment to deliver excellent, modern healthcare we plan to use IM&T to achieve our organisational Vision, Aims and Objectives, which are outlined in the diagram below.

TRUST VISION, AIMS AND OBJECTIVES

VISION

To maximise health and wellbeing in our community

AIMS

Deliver excellent healthcare
Build partnerships to achieve more together
Connect with local communities to be locally effective

OBJECTIVES

Deliver safe services for parents, carers and families.
Achieve the best possible holistic outcomes for people.
Achieve an excellent patient and staff experience in the delivery of healthcare.
Engage our staff and support them achieving their full potential.
Ensure our services are commercially sound.

KEY MESSAGES:

IM & T is a key enabler to help the Trust achieve its clinical and business outcomes.
Technology will support the delivery of the Integrated Care for the Trust.
This strategy is core to the delivery of the long term aims of the Trust.
High quality, consistent patient experience will be aided by the best use of technology.
Information should be collected once and shared appropriately – avoiding unnecessary repetition and inconvenience for both patients and our staff.
ENABLING THE DELIVERY OF OUR STRATEGIC AIMS

The intention of this IM&T strategy is to enable the delivery of the Trust’s long term aims as described below:

1. **DELIVER EXCELLENT HEALTHCARE**
   We will implement new, clinical systems to ensure information supports our ability to consistently deliver the highest standards of healthcare.

2. **BUILD PARTNERSHIPS**
   We share a common ambition with our commissioner which is to put in place clinical systems that will give us the ability to share information across providers and therefore create a seamless health economy in Cumbria, providing truly integrated care to our patients. We see Cumbria’s local authority services as a key future partner to achieve information sharing and where advantageous infrastructure sharing.

3. **CONNECT WITH OUR COMMUNITIES**
   Over the next five years we will need to ensure we can deliver our services where patients need us, often in their own homes, and provide our patients with access to their own health information via the internet “patient portals” so they can become empowered to take control of their own healthcare. Through new mobile or ‘agile’ working, combined with investing in telemedicine, our clinicians will have to access patient information to support care at home.

**TRANSFORMING HEALTHCARE**

By its very nature IM&T is an enabler of modernisation and improvement in healthcare in the 21st Century – helping the Trust to achieve its clinical and business outcomes and ensuring a high quality, consistent patient experience through the best use of technology. High quality, timely and accessible information is vital to the delivery of safe, prompt and appropriate care and IM&T clearly has a key role in making this happen. Where systems are not fit for purpose they will be removed and replaced with more appropriate systems, in order to encourage confidence and trust in our services.

IM&T can be a major driver for initiating transformation within the organisation and if correctly managed will create business advantage and enhance the effectiveness of our services. There is a need to take a tactical, pragmatic investment approach in the medium term, investing where there is a sound business justification to do so – that is where the consequent efficiencies and/or improvements in clinical or business effectiveness create a compelling investment case. This will be underpinned by sound information governance practices. We will learn from the past and not repeat mistakes where systems or hardware have not been owned or tailored to the needs of users.

**WORKING WITH OUR PARTNERS**

This IM&T Strategy should not, and will not, sit in isolation from our partners. We have strong established links with the Clinical Commissioning Group (CCG), Secondary Care providers, Cumbria County Council and others with whom we share many common ambitions to join up services to benefit our communities. Information sharing is core to many of these relationships at an operational level and we are committed to developing common work programmes as necessary.

In particular we have set up a Joint Operational Programme Board (JOPB) with the CCG which has agreed terms of reference to direct and support the IM&T programmes for both organisations. This strategy is therefore aligned to take into account the requirements of CCG whilst also trying to address the overall aims and goals of the CCG.

Through this strategy we will continually seek the engagement and involvement of clinicians, patients, support staff and partners in order to develop systems to meet their needs and provide information that improve clinical outcomes.
CPFT cannot continue with its current systems and IT architecture as it does not meet modern clinical or business needs. As part of our commitment to deliver excellent, modern healthcare we plan to use Information Management & Technology (IM&T) to achieve our organisational Vision, Aims and Objectives, which are:

- Our system architecture has grown organically and reactively through individual departmental requirements rather than through a planned strategic process.
- We have numerous separate systems which do not integrate, cannot share data and do not have the capability to capture good clinical information.
- We do not have sufficient real time clinical information supporting decision making at the point of care – generally this information is paper based and therefore fragmented.
- We have had audits of our IM&T provision which have provided us with limited assurance in terms of the quality, resilience and sustainability.
- Our current outsourced Informatics Shared Services are not providing the level of service we require and user satisfaction is low.
- The clinical systems we have in place have largely been defined and dictated by our suppliers rather than having been led and defined by ourselves.
- The lack of interoperable systems means the Trust's wider ambitions to improve and implement national service frameworks and integrated care pathways will not be realised.
- Patients cannot access information on their care in a timely fashion.
- We need to ensure that patients have confidence that their information is being used appropriately.

By consulting widely with:

- Frontline Staff
- Senior Clinicians
- Partners & Commissioners
- Senior Managers
- Directors (Executive & Non-Executive)

We have identified seven underlying "principles" that have guided the development of this strategy which underpin our requirements. These are:
### AN INTEGRATED ELECTRONIC PATIENT RECORD: THE NEED FOR INFORMATION

The first step towards improving patient care is to understand what is really taking place now in terms of outcomes, experience and safety. Good information is vital to achieving this. We also have to ensure information is focussed on what matters and is collected once and shared appropriately – avoiding unnecessary repetition and inconvenience for patients and our staff and making our services more efficient and effective. We see information as a key enabler for more streamlined, efficient and higher quality services.

In 2012, the national NHS “Power of Information Strategy” focussed on the need to join up service delivery by joining up information for patients, service users, carers, clinicians, managers and other care professionals. It also recognised the principle that ‘joined up’ information doesn’t require one ‘big’ system. It identified that information technology is always advancing and the big lesson learnt from the National Programme for IT (NPfIT) was that in reality ‘big’ national solutions are difficult to implement quickly and successfully and can inhibit local flexibility and innovation. Cumbria’s experience of NPfIT is that it failed to provide electronic patient record systems fit for us to use, hence this strategy includes the our procurement of the systems we will use in future.

### JOINED UP CARE: DELIVERING MODERN HEALTHCARE IN CUMBRIA

We have hundreds of ‘contacts’ with patients using a variety of staff across multiple locations in Cumbria. In each case we need to capture and record vital information to provide effective care. Making these records and other useful information available electronically will make patient care more informed, safer and independent of where the patient makes contact with our services.

We are often one of many providers who are involved in a patient’s care and it is important that the information that supports the patient’s referral, diagnosis, treatment and discharge is timely, relevant and accessible regardless of the provider. Currently, within CPT alone we have five ‘master’ patient indexes in a number of clinical record systems. Moreover, if these silos are pieces of paper in cabinets and transferred via fax, courier or post then timely communication of this key information becomes impossible.

This strategy is committed to removing information silos, moving away from paper records wherever possible and ‘joining up’ information flows through smarter use of interoperability technology to provide information seamlessly and securely alongside the patient’s journey.

In the next decade, the health and social care system will have to contend with an ageing population (56% of population in Cumbria will be over 50, national average is 38.6%), increasing numbers of people with complex long-term conditions, budget constraints, increasingly sophisticated treatments and rising expectations of what health and care services should deliver.

An integrated approach aims to meet these challenges through better co-ordination of health and social care services, reducing the fragmentation or duplication of care. CPT has ambitious plans to remove unnecessary and artificial boundaries between our services and ensure patients are provided with seamless care. We are seeking to transform our service offer to be more integrated, efficient and effective.

To make this a reality what is required is the ability to combine high quality information together in a detailed ‘live’ overview of a patient’s care across multiple services and providers – this is known as an Electronic Health Record. Although a single system (as per NPfIT) would be one technical solution, in reality this is not desirable or achievable in our complex health economy. Instead we need to procure modern interoperable systems which support the sharing of clinically rich & well-structured information.

### SUPPORTING CARE OUTSIDE HOSPITAL: TO HELP PEOPLE STAY ‘CLOSER TO HOME’

One of our on-going priorities as a trust is working with our health and social care partners to reduce avoidable contact with patients and keep patients ‘closer to home’. Indeed this is one of our current CQUIN targets and aligns well with the NHS ‘digital first’ initiative that we are progressing through this strategy. To deliver this priority we need good communication systems across all areas of care and amongst all relevant service providers and joined up information systems to support information sharing. We also need more effective electronic discharge processes, so that transfers of care are seamless and effective. As part of our CQUIN commitment to increase planned use of telehealth/telecare we will also need to look at where technology can better support the self-management of long term conditions and new ways to manage complex conditions in the community.

### ENHANCE INNOVATION THROUGH PRODUCTIVITY: EFFICIENT AND EFFECTIVE SERVICES

We have to plan now for the increasing pressure on our limited resources. We need to provide both clinical and business services in the most efficient manner possible, using technology innovatively to modernise and simplify services – taking out unnecessary steps in service delivery which either delay or detract from service provision.

IM&T developments will enable the Trust to reduce costs overall and as such is core to the Trust being sustainable. As a healthcare provider our core need for information is to support clinical care. However, as a business we need to use this information more widely and more intelligently to inform our decisions on how, where and why we provide the services we do.

Currently our ability to gather good intelligence is compromised by the multiple paper and electronic information silos we have. Management information often needs to be gathered through a mixture of manual and electronic processes and is time consuming and unsatisfactory. The information gathered is limited and the ability to provide real time reporting is virtually impossible. Service quality (outcomes, safety and experience) data is rarely captured electronically and so is not actively utilised by the Trust.

Moving forward we need information which allows us to:

- Do predictive analysis across the board to support business decisions
- Ensure all staff have access to intelligent data information that helps them to work more effectively
- Ensure business intelligence is fully embedded within processes, systems workflows and is easily extracted
- Ensure our internal information teams can provide an excellent, responsive service where changing requirements are easily handled for new services or business functions. This will give us the ability to provide information to support contracting/commissioning more effectively.
EMPOWERED AND ENGAGED PATIENTS: SUPPORTING PATIENTS TO MANAGE THEIR HEALTH AND HEALTHCARE

Whether our patients obtain their care through direct contact or remotely, patients should receive “personalised care” supported by access to their personal health information.

Our patients rightly expect healthcare to keep pace with other services which provide access to information anytime, anywhere. Laptops, mobile phones and other mobile devices have become as much a part of our culture as television. As the Internet and mobile technology become ever more prevalent, it is reasonable to expect that these technologies should play an integral role in our ability to obtain personalised healthcare.

We need to create an information revolution for patients - to support self-care and promote 'health literacy' - giving patients and their carers much more information about their conditions and signposting for help and support. Technology is not the total ‘solution’ but can play a big part in providing relevant, tailored information to our patients that allows them to take control of their own care needs. By 2015, the Government has directed that patients should have much closer involvement in their care, and this will be achieved partly, by “enabling” patients to access their records” to summary information about their care record.

AGILE WORKING ACROSS ALL CARE SETTINGS: TAKING CARE TO WHERE OUR PATIENTS NEED US

We are committed to taking our services to our patients wherever possible to minimise disruption and impact on our patients. To do this we need access to administrative and clinical information regardless of where we make contact with our patients.

This will mean having timely, reliable access to patient information regardless of location and the connectivity challenges that we face within Cumbria. By doing so this will also help to rationalise the estate and save money on travel and wasted journeys, as well as enable more patients to be treated with clinicians not needing to return to their base as often.

ADDING VALUE FOR PATIENTS AND CLINICIANS: MAKING A DIFFERENCE

We need to build confidence in the role technology can play in delivering excellent services. Both patients and clinicians need to see that technology is genuinely making a difference to the quality of services that can be provided. Technology will provide part of the answer but equally as important will be how we combine our new technological capabilities, such as the implementation of an electronic patient record, with other non-technical improvements such as the decommissioning of paper records, process improvement, staff training and new operating procedures and new agreements to share information across health providers and settings. Technology will be the catalyst, but to make a difference and realise the transformation in healthcare we aspire to, we will need to have a ‘total system’ approach to transformation.
FROM REQUIREMENTS TO ACTION: OUR STRATEGY

KEY MESSAGES:

We have a clear vision for IM&T in the Trust and how it will contribute to the Trust’s plans in future.

We have identified clear objectives that deliver our vision for IM&T.

We have identified programmes of work to achieve these objectives.

The current structure of the IM & T Department is not fit for purpose to deliver the Vision and needs to be re-organised.

We need to learn from previous informatics projects and ensure we have the right skills, resources and structures to deliver with the minimum of bureaucracy – running an effective implementation programme.

We must not lose sight of ‘the patient’ in the delivery phase and allow the programme to become technology led.

We have identified key benefits, aligned to the Trust’s plans that we will ensure are the outcomes achieved by this strategy.

OUR VISION

“To ensure our healthcare services are supported by excellent, high quality clinical and business information which is timely, accurate and tailored to requirements.”

To provide high quality services we need to exploit the power of electronic information to help ensure that patients get the right care, involving the right clinicians, at the right time, to deliver the right outcomes. It is therefore as much about transforming traditional, outmoded paper driven administrative and clinical processes as it is about technology. This IM&T Strategy is intended to enable improvements in patient safety, outcomes and experience through timely access to accurate information.

OUR OBJECTIVES

Informed by our principles and requirements, our vision has been translated into the following key strategic objectives:

- To develop and implement an integrated electronic patient record for our patients across our Trust and beyond: to ensure we have a single overview of our patients across all our mental health, community and children and young peoples’ services and that tailored information follows the patient on their healthcare journey where ever possible.

- To provide patient access to their own health information: develop closer relationships with patients through web based technologies providing access to comprehensive information about their conditions; drug regime; upcoming clinical appointments and open the potential for remote consultations.

- To deliver reliable business intelligence through new technologies: where good quality information drives all aspects of service delivery within CPFT and reporting is simply a by product of good clinical, business and administrative information.

- To implement new technologies to support service delivery regardless of location: recognising the challenges of providing services across the Cumbria area and making best use of communications systems to enable agile working is another key priority, as this will enable more patients to be treated in the most appropriate location; help to rationalise the estate; save money on travel and wasted journeys; enable more patients to be treated as clinicians will not need to return to their base as often.

- To implement a resilient IM&T Infrastructure: which provides the Trust with the networks and hardware it needs to provide reliable IT services to its staff and patients.
AN ELECTRONIC PATIENT RECORD PROGRAMME

We will deliver electronic patient record systems into both our community, children and young people’s and mental health services. Ideally this will be a single system across all three service areas but more importantly it will provide appropriate and tailored administrative, clinical and performance information and functionality to deliver excellent modern healthcare. If we require two or more systems to achieve this we will instead implement an integration engine to achieve a single electronic health record. We will define, market test, procure and then implement our preferred solution(s).

AN AGILE WORKING PROGRAMME

This programme will ensure access to our electronic systems wherever our staff and patients need this. Healthcare needs to be provided in a variety of settings – from care homes, to people’s own living rooms – and our staff need supporting technologies which give them the access they need to information regardless of their location. To achieve this we will deliver projects to:

• Define, market test and procure for staff appropriate hardware that can support remote working and provide reliable access to core systems.
• Feasibility test handheld mobile devices to access clinical and administrative information to provide care in people’s home and other remote locations and implementation where appropriate.
• Work with partners to provide seamless connectivity via wired or wireless ‘guest access’.
• Work with our clinical system supplier(s), as part of the system specification and development in our Electronic Patient Record Programme to ensure clinical systems can be accessed via 3G connectivity (where this is available to us) or as a cached environment where connectivity is not consistently available.

A PATIENT ACCESS PROGRAMME

This will provide patient centred technologies to support telemedicine and access to patient’s own information. We will deliver:

• A business case to consider the options and benefits for investing in passive systems where patient data is uploaded by the patient to a central location and reviewed centrally.
• A procurement project to define, market test and procure, if appropriate, telemedicine technology which can actively monitor and notify clinical support if there are adverse changes to the patient requiring immediate clinical support.
• A web based interface to our clinical systems, in partnership with primary care, to provide access for patients to their own health information.
AN INTEROPERABILITY PROGRAMME

An electronic patient record for the Trust will provide the basis to then share clinical summaries, referral and discharge information and alerts with other care providers to work towards a combined electronic health record. To do this we will co-ordinate a series of interoperability projects across the health economy to enable the necessary capability to share information seamlessly with our partners. The programme will work with clinicians to realise the benefits of this technology to improve clinical and administrative practice and remove the current paper based information sharing. The programme will deliver projects to:

- Create the capability to share administrative referral and discharge information.
- Implement via an integration engine a tailorble electronic health record derived from multiple systems and healthcare providers. Tailorable clinical views will be available in core clinical systems to provide clinicians real time information on diagnosis, treatment, medication and administrative information.
- Implement messaging technology to share safeguarding or clinical alert information across service providers. E.g. A&E visits by children being shared with the Children and Young People service.

This system ‘integration’ and ability to share information proactively will support our wider work to make patient care seamless and patient centred.

A BUSINESS INTELLIGENCE PROGRAMME

This will ensure we have the supporting technologies to extract, analyse and report ‘real time’ and retrospectively on clinical, business and administrative information to meet our own and commissioners’ intelligence requirements. The programme will include:

- Preparation of a business case for the storage, manipulation, analysis and presentation of information to support the creation of business ‘intelligence’ at strategic, management and operational levels
- Based on the business case, we will define, market test and procure supporting data warehousing and analysis tools
- A training and support project to work with business teams in partnership with our Business Intelligence Team to support the ready access, analysis and reporting on high quality information

AN IM&T MODERNISATION PROGRAMME

This programme will deliver a new, modernised IM&T service through the following projects:

- A review of IM&T service provision both within the Trust and beyond with interested NHS and non NHS partners to improve the robustness and effectiveness of current support, networks, hardware and software provision. We will consider delivery options such as shared services, outsourcing and hosted services
- Subject to the review, we will deliver a project to define and then procure and implement a new IM&T service
- We will review networks and associated infrastructure to ensure they can support appropriate speeds for voice, image and video communications, whilst remaining secure and resilient for our services.
HOW WILL WE DELIVER THESE PROGRAMMES

A PROGRAMME MANAGEMENT OFFICE

In order to support the introduction of the IM&T modernisation programme it is essential that process and governance arrangements are in place.

The Trust has already recognised the importance of establishing a dedicated Programme Management Office (PMO) to provide the day to day coordination and management of all large scale projects. This PMO gives us the ability to call upon professional project and programme management expertise in order to manage the implementation of this strategy. The PMO commenced in November 2012 and will drive delivery of this Strategy under the banner of “e-health Cumbria”.

A JOINT OPERATIONAL PROGRAMME BOARD

The work of this Programme Office will be guided and directed by a Joint Operational Programme Board (JOPB) which has been formed in 2012 by the Clinical Commissioning Group (CCG) and Cumbria Partnership Foundation Trust (CPFT) to deliver their common IM&T ambitions. In order to manage the programme effectively, ensuring there is appropriate clinical leadership, effective programme and project management and on-going informatics support a simple joint governance structure has been adopted. The clinical leadership of the programme is incredibly important to its success, ensuring the decisions around the shape and nature of this IM&T programme are always guided by the clinical benefits that might be derived rather than technological capabilities that could be delivered. The collaboration between the CCG and the Trust on IM&T is included in the agreed compact between both organisations that has been approved by the Board of Directors.

The role of the JOPB in brief is:

- To set the strategic direction – formulation of the overall Cumbria IM&T strategy based on CPFT & CCG business plans
- To direct prioritisation and delivery – prioritise projects to ensure that both national and local targets and objectives are met
- To monitor and review progress – ensure high quality and effective delivery of IM&T to deliver benefits that meet both clinical and business needs
- To provide governance – provide assurance and advice, highlighting resource, delivery and support issues
- To oversee financial planning – be responsible for the overall IM&T investment strategy as defined and agreed
- To oversee communication – ensure that appropriate levels of communication are established and maintained so that the development of IM&T can be facilitated across all service and modernisation areas
- To actively support the GIPP agenda – by finding ways to use technology to reduce inefficiency
- To act as a point of escalation – in relation to the agreed programmes and projects.

A NEW IM&T SERVICE

As mentioned above, CPFT will look at options to create a new, fit for purpose IM&T support service. This is likely to be through a mixture of in house management and external suppliers (outsourcing) and we will be investigating the potential to share services with other NHS and non-NHS partners within Cumbria.

The economic advantages of in-house provision of IT are now outweighed in some areas by the benefits of commercially supplied services. These commercial suppliers have the capacity and capability to deliver better service quality than what could be achieved in-house. CPFT will be able to secure its investment through linking payment to delivering quality services. However, to manage this new IT infrastructure it will be essential that CPFT maintains its knowledge through in house IT strategic management.

Outsourcing elements of IT service provision would ensure rigorous business critical capabilities such as information protection, disaster recovery and business continuity where provided through specialist Data Centres.

We plan major procurements of services in the following areas:
- Electronic Patient Records
- Data Centre
- Managed Data Networks
- Desktop Management/Deployment

The next steps will be to clarify the current financial expenditure and market test – drafting business cases that demonstrate the benefits of investment. This will require detailed analysis and rigorous scrutiny on financial, technical and HR issues.

A NEW INFORMATION GOVERNANCE SERVICE

Information Governance (IG) underpins all areas of this strategy. A dedicated team has been established to complete the annual information governance assessment with the aspiration to attain level 3 compliance and provide innovative solutions to IG issues with a view to streamlining business processes which:

- Promote the information governance agenda ensuring that it is embedded throughout the Trust to Locality level
- Build a positive reputation with internal and external clients by providing sound advice and an efficient reliable service regarding all IG matters
- Ensure all policies and procedures are informed by our ‘lessons learnt’ around Information Governance
- Ensure we embed national policy and requirements taking every opportunity to drive the culture change needed to support excellent Information Governance.
There are a number of enablers which will assist us in delivering this strategy.

**BEING CLINICALLY LED**
We need to continue to involve our clinicians and patients in the development and tailoring of technology to support healthcare. Technology is an enabler of better healthcare but we must ensure it meets our stated requirements. We will utilise and support clinical leaders to shape and deliver this strategy.

**A LEARNING ORGANISATION**
We need to learn from previous failures and successes around implementing IM&T projects and ensure we have the right skills, resources and structures to deliver this strategy with the minimum of bureaucracy but with the maximum efficiency. This can be addressed through the involvement of clinicians in the specification and roll-out of this strategy and purposeful evaluation of benefits realisation as we progress.

**MAINTAINING PATIENT FOCUS**
A patient’s ability to make informed choices around care is intrinsic to the success of this strategy and we must not lose sight of ‘the patient’ in the delivery phase and allow the programme to become technology led. We will involve patients in the delivery of the programme.

**A NEW PROGRAMME MANAGEMENT OFFICE**
We have recognised the need to invest in project managers who are skilled and can assist us in implementing new technologies well within the organisation. Creating this new capacity and skillset is vital if we are to deliver the necessary capabilities within agreed timescale, budget and quality expectations.

**A RENEWED FOCUS ON DATA QUALITY**
Culturally, many clinicians believe that poor data quality is compromising the credibility of information. Poor data quality can negate all efforts to improve information management and systems. We will break the cycle where poor data leads to poor information which in turn leads to clinical information systems lacking credibility which inevitably leads to apathy inputting data in the first place. Clinical leaders, in partnership with the IM&T Department will build confidence in the vision of an information based culture within CPFT – ensuring through ongoing engagement that systems really work for clinicians and allow them to record information in a way that makes sense to them. Systems will work hard for people, rather than people working hard for systems and feeling they are just ‘feeding a beast’ needlessly.

**A REFRESHED IM&T SERVICE**
We need a new, fit for purpose IM&T Service which can meet the requirements of the Trust and support us in delivering this strategy. We need a service which will gain the trust and confidence of staff in moving to a new era where it will be even more important to have reliable systems and hardware and IT support which is responsive, easy to access and resolves as many issues as possible at first point of contact.

**A CLEAR PERFORMANCE MANAGEMENT FRAMEWORK ON INFORMATION GOVERNANCE**
We will ensure that this organisation can demonstrate that it can be trusted to maintain the confidentiality and security of personal information by helping individuals to practice good information governance and be consistent in the way they handle personal and corporate information.

**ENABLERS OF CHANGE**

**IM&T STRATEGY 2013–18**

**FRON REQUIREMENTS TO ACTION**
When investing in technology we have to be clear on what the benefits will be. We also need to be clear on the ‘future state’ we are heading towards – what will ‘success’ look like and how will it make a positive difference to our services? This section describes, through the use of stories, the future state to be achieved through this strategy.

The measurable benefits of this IM&T Strategy can be summarised as follows:

- Safer and more effective care
- More responsive and efficient service
- Equitable & Patient Centric care
- A new Information Culture supported by resilient and modern IT infrastructure

SAFER AND MORE EFFECTIVE CARE

By having modern, electronic clinical records our clinicians can make safer, faster diagnoses, based on a better understanding of our patients’ history and current health status. Also, with the ability to have all our clinical information in one place also comes the potential to bring together data for audit and improvement. It will reduce variability in care by having one way of working in new clinical systems supported by agreed standard operating procedures, protocols, pathways of care and the application of clinical guidelines and best practice.

By having a single record it reduces the risk of ‘mis-matching’ of patient records or losing paper records in the system. Indeed with the ability to access a composite ‘detailed’ care record, generated through interoperability across healthcare providers with the patient’s consent, we can access essential medical information which can be potentially life-saving.

Advances in telemedicine and telemental health will also be exploited to support the delivery of care closer to home, improving chronic disease management and anticipatory care, meaning our most vulnerable patients can get tailored care and, where a number of agencies are involved in providing this, it will be possible to share information more effectively to actively support any changes to care that are required on a day to day basis.

MORE RESPONSIVE AND EFFICIENT SERVICE

With modern clinical systems, telemedicine and patient access to their records comes improved communication and the ability to share key information between clinicians, patients and carers within the health sector and across partner agencies – saving valuable time previously lost through paper processes.

We will also avoid duplication of effort through repeated data collection and recording – our new clinical systems will remove the need to capture information once for patient care and again for reporting purposes. This will in turn reduce the administration burden faced in our services and by using the principle of ‘record once and use many times’ to free up more time for patient care and/or reduce costs. It will make care processes more streamlined with enhanced booking systems, faster electronic test results and improved communication between services.

In future information for performance analysis will be generated as a “by product” of clinical and administrative processes. Information on patient journeys will be provided with a patient centric rather than condition based approach, to facilitate the care of patients with multiple long-term conditions and/or complex care needs.

EQUITABLE & PATIENT CENTRIC CARE

There will be less need for patients to repeat information, thereby improving confidence in service efficiency and demonstrating seamless service across both this Trust and its partner health providers.

Patients will be supported in exercising their rights to access their health records and be involved in verifying and amending if appropriate. Patients and carers will have improved access to up to date information about their condition or about a procedure they may have to undergo, encouraging greater involvement in maintaining and improving their own health. Information will enable care to be more targeted where appropriate – to create equity in outcomes.

PATIENT STORY: ETHEL, KENDAL

Ethel has late onset diabetes and is under the care of both her GP and a Consultant in the Diabetes Service. She also has regular visits from a district nurse to treat recurring leg ulcers. The district nurse works to a care plan which is kept in the patient’s home. With the introduction of an electronic health record for the district nurse this provides the final piece of the jigsaw, as each care provider (GP, Consultant, District Nurse) has an electronic health record which is then capable of sharing information with the other – meaning the GP for example can see any recent recommended changes to her diabetic care made by the Consultant and indeed the District Nurse or Diabetic Consultant can see Ethel’s full GP record, including any admissions to hospital or referrals for acute services and take this into consideration when providing the care Ethel needs.

ADMINISTRATOR’S STORY: MARY, TRUST HQ

Children and Young People Services previously had a mixture of paper and electronic systems to record clinical information which were supported by a range of means of collecting performance data – from spreadsheets to databases – and analysis tools. Mary had to spend significant time re-recording information for reporting purposes which was both time consuming and frustrating. With the introduction of new clinical systems important clinical and administrative information is captured in a structured way which is capable of being used for reporting purposes removing the need for Mary to undertake this manually. This means Mary’s time is now focussed on supporting the new improved referral process for the service which is reducing waiting times and, with improved information sharing across healthcare providers, means less ‘mis-routed’ referrals so children get the right treatment faster.

INTENDED MEASURABLE BENEFITS OF THIS STRATEGY
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A NEW INFORMATION CULTURE SUPPORTED BY RESILIENT AND MODERN IT INFRASTRUCTURE

In future, services will be defined and driven by good quality information which our staff can rely upon for all kinds of management and clinical decision making. High quality, timely and accessible information will be the ‘norm’ not an aspiration.

Where technology has received poor publicity in the past when patient identifiable information has been ‘lost’ or misplaced, there will be a renewed confidence that modern IT systems are the safest, most secure means to capture, handle, store, share (with consent) and update sensitive information.

The new IM&T service will provide a customer focussed service which is responsive, proactive and tailored to the new environment where technology is intrinsic to healthcare.

CORPORATE SERVICES, PENRITH:

Information systems provide a backbone to the Trust’s clinical performance management and business control. The outcomes, safety and experience of trust services is monitored from these systems, without the need for paper data collections. Reports are available at the frontline and corporately in real time. Business decisions are made based on data, that is quality assured through effective audit. Staff’s supervision is supported by good quality information on their performance, productivity, and outcomes and staff are less isolated from the Trust in delivering effective services.

CLINICIAN’S STORY:
JOANNE, HEALTH VISITOR, EDEN VALLEY:

Joanne is a Health Visitor who works for Children and Young People Services in the Eden Valley. She has a large geographical area to cover and divides her time between home visits and regular weekly clinic sessions. In the past, Joanne has used paper records to capture her work with new parents and pre-school children. If Joanne had to request the child’s paper record from administration, this would often take days to arrive. There has been an electronic child health record created to help to co-ordinate immunisations and vaccination for each child and in addition parents hold their own copy of the child’s health record, capturing their progress in terms of height, weight and immunisations but there hasn’t been one overall, definitive health record for the child.

With the introduction of a single electronic health record for this service, Joanne can see at a glance a child’s record of immunisations, screenings, tests, medications, and problems and with parental consent access the wider GP record too and understand any wider health needs being addressed by other healthcare providers. This clinically rich information supports them in providing to parents the best advice and guidance on their child’s needs and keep track of the outcomes of referrals onto other healthcare providers. It also avoids asking repetitive questions of parents to understand the most basic information relating to their care. With access to a laptop or tablet PC, Joanne can update the record in the child’s home and access wider public health information, electronic advice and information sheets and e-mail these onto the family after her visit as appropriate. The record is available online for parents to review and contribute to.
IM&T has the potential to revolutionise healthcare over the next decade and Cumbria Partnership NHS Foundation Trust wants to shape and drive this revolution to the benefit of its patients, staff and commissioners. We are committed to aligning our future investment plans with our new IM&T strategy objectives and to continue working in partnership through joint investment initiative with Cumbria Clinical Commissioning Group.

This strategy will form an integral part of our transformation and modernisation plans and the Trust Board is committed to making IM&T investment a key priority going forward. To this aim the Board will allocate both capital and revenue investments over the next five years towards the IM&T agenda in order to ensure that we have the means to provide modern healthcare service provisions which truly meet the needs of people in Cumbria.

Recognising the increasing clinical dependency on availability of IM&T we believe that better use of technology will, of course, just be one part of this journey. However technology is an important enabler of change alongside investment in people, better processes, improved buildings and better use of information to drive clinical decision making. This Strategy defines the key building blocks to provide IM&T services wherever and whenever they are needed – freeing us up from slow paper driven processes which tied us to bases and locations which did not always work for our patients or staff.

Through the approval of this IM&T business case the revolution starts here…
Delivering this strategy is a programme that will take 3 years.

The timeline for this programme is shown in the detailed programme table below.

Ensure our healthcare services are supported by excellent, high quality clinical and business information which is timely, accurate and tailored to requirements.
## PROGRAMMES OF WORK

<table>
<thead>
<tr>
<th>PROGRAMME</th>
<th>ELECTRONIC RECORDS</th>
<th>INTEROPERABILITY</th>
<th>AGILE WORKING</th>
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<tr>
<td>Will see the implementation of system(s) to provide electronic access to patients’ records across our services. This ‘single’ view of patients within our Trust.</td>
<td>Connecting systems across the health economy to provide timely access to information and support integrated working.</td>
<td>Ensuring access to systems regardless of location.</td>
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<tr>
<td>HOW WILL IT IMPROVE CARE?</td>
<td>It will ensure all services have better access to patient information – paper records can only ever be in one place at a time and clinicians in different locations may need access to the same information. It will give both clinicians and patients the ability to make informed choices on care.</td>
<td>An electronic patient record for the Trust will provide the basis to then share clinical summaries, referral and discharge information and alerts with other care providers. This system ‘integration’ and ability to share information proactively will support our wider work to make patient care seamless and patient centred.</td>
<td>Care needs to be provided in a variety of settings – from care homes, to village halls and people’s own living rooms – our staff need supporting technologies which give them the access they need to information regardless of their location.</td>
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<td>WHEN?</td>
<td>By 2015 Community, Children’s’ and Mental Health Services will have an electronic patient record system.</td>
<td>A phased programme up to 2015 will see initially our own systems integrated alongside wider interoperability with other trusts/primary care and finally local authorities, police etc.</td>
<td>By mid 2014 there will be a range of mobile/home working solutions available tailored to the needs of the services and their patients.</td>
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## HOW WILL IT IMPROVE CARE?

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<tr>
<th>PROGRAMME</th>
<th>PATIENT ACCESS</th>
<th>BUSINESS INTELLIGENCE</th>
<th>IM&amp;T SERVICE MODERNISATION</th>
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<td>Providing patient centred technologies to support telehealth and access to patient’s own information.</td>
<td>Ensuring we have the supporting technologies to extract, analyse and report ‘real time’ and retrospectively on clinical, business and administrative performance.</td>
<td>A procurement programme to define, market test and procure a fit for purpose IM&amp;T service for CPFT.</td>
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<td>For care to be truly patient centred it must be designed around their needs not just available services and locations. By providing patients with better access to their own records and technologies to help them manage their own care at home they will be empowered and in control of their own health needs.</td>
<td>Care can only continue to be responsive and tailored to patients’ needs if services are designed based on the best intelligence available from clinical services. Business functions need to be tailored to support care provision based on evidence of their performance, value, efficiency and effectiveness.</td>
<td>Modern healthcare requires modern technology which meets the needs of clinicians, administrators and most importantly our patients. We need a support service which ensures our IT systems are tailored, always available, fit for purpose and always one step ahead in sourcing new technologies.</td>
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### WHEN?

- Patient access to records will be scoped and commence delivery in 2014. A programme of implementing telehealth technologies will be underway in 2013/14 subject to an agreed business case.
- New Data warehousing and analysis technologies will be procured and implemented between 2013 and the end of 2014.
- The scoping and implementation of a new IM&T service is due to complete by the end of 2013.
Ensure our healthcare services are supported by excellent, high quality clinical and business information which is timely, accurate and tailored to requirements.

Electronic Health Record Programme
Providing clinical system(s) as the basis for a detailed care record.

Interoperability Programme
Connecting systems across the health economy to support information flow and integration.

Agile Working Programme
Ensuring access to systems regardless of location.

Patient Access Programme
Technologies to support telehealth and access to patient’s own information.

Business Intelligence Programme
Technologies to extract, analyse and report on clinical and administrative information.

IM&T Modernisation Programme
To define, market test and procure IM&T services.

Safer and more effective care

More responsive and efficient service

Equitable & Patient Centric Care

A new Information Culture supported by resilient and modern IT infrastructure