One Gloucestershire
Transforming Care, Transforming Communities

Digital Health and Care Gloucestershire

2022 - 2025

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www.onegloucestershire.net

Contents

Chapter 2: One Gloucestershire

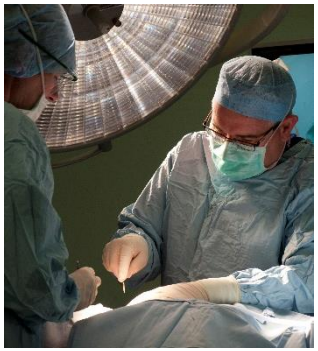
- Gloucestershire has been working in a ‘structured’ partnership across health and social care (known as an Integrated Care System or ICS) since 2018
- This partnership is known as ‘One Gloucestershire’
- It’s made up of local health and care partners including:
  - Gloucestershire Integrated Care Board (ICB), that plans for and commissions health and care services to meet local needs
  - Primary Care (GP) providers
  - Gloucestershire Health and Care NHS Trust that provides community physical, mental health and learning disability services
  - Gloucestershire Hospitals NHS Foundation Trust that provides specialist hospital services at Cheltenham General Hospital and Gloucestershire Royal Hospital
  - South West Ambulance Services NHS Foundation Trust
  - Gloucestershire County Council that jointly commissions a range of services with the NHS, is responsible for social care and public health
  - and wider partners such as the City Council, Districts and the Voluntary and Community Sector (VCS)

One Gloucestershire

Working as an Integrated Care System means:

- greater focus on supporting people across the county to be healthy, independent and involved in developing active communities
- more joined up care and support for people whether in their own home, at their GP surgery, receiving community or social care support or in hospital
- easier for staff to work across organisations to support shared health and care priorities
- greater freedom and control to make local decisions about how services are organised and delivered that make best use of the Gloucestershire pound
- more opportunities to make the best use of scarce resources and support a net-zero NHS



Chapter 3: Our digital vision and priorities

Simplicity for the citizen

- Making the best use of technology
- Preventative and assistive technology

Support for health and care colleagues

- Establishing a digital working culture

Levelling up maturity and harmonising pace

- Partnership working

Joining up care across the county

- Shared care record

Simplicity for the citizen

Delivering digital for the population of Gloucestershire

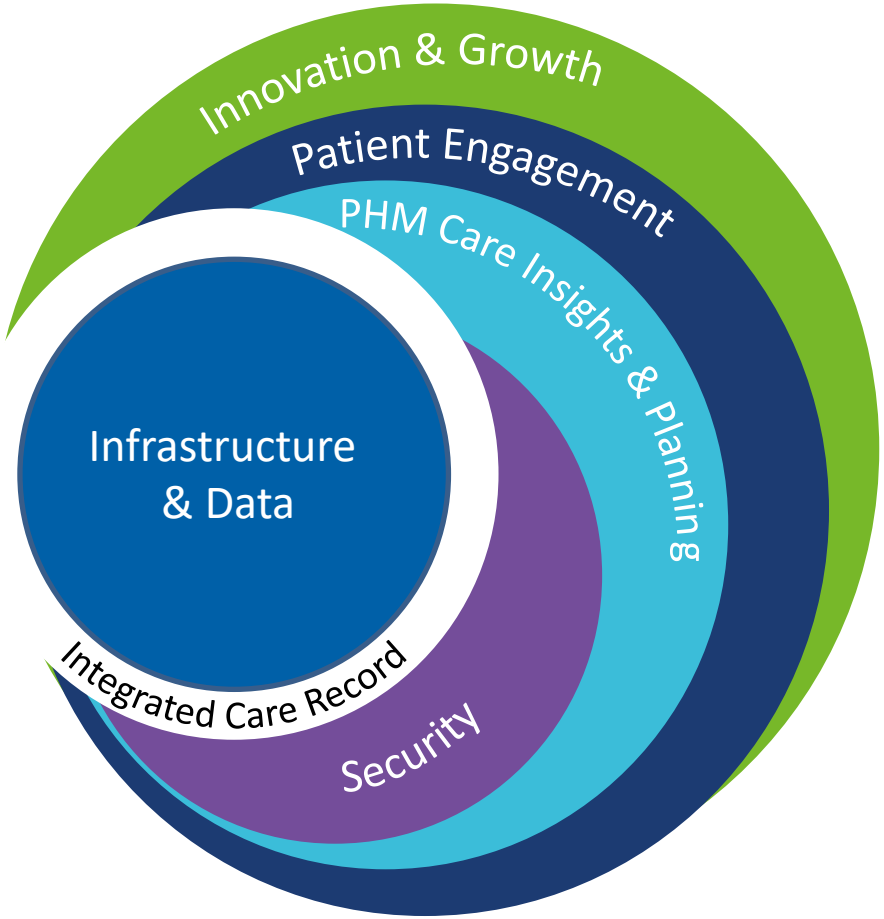
The Gloucestershire population will have available to them digital services they value which are **simple**, **trusted** and **engaging**.

Our citizens will only have to tell their story once as all health and care professionals understand their needs, medication etc, through their shared care record.

People will have the support they need to gain the skills to access our health and care services digitally. We will address **digital exclusion** across the county, enabling our citizens to develop digital skills, not only for health and care assistance but to improve modern social/digital inclusion, especially with our most vulnerable groups. Facilitating independence of care to citizens through digital services will provide greater personal choice and control over the way the ICS will meet their needs.

The public will be involved as stakeholders in developing, designing and adopting new digital services – from agreeing what information should be shared with whom, through to reviewing how and indeed whether new systems should be introduced.

Simplicity for the citizen - making the best use of technology



Simplicity for the citizen - making the best use of technology (cont..)

Having access to digital and technology solutions will empower the people of Gloucestershire to have more control over their health and care, to be comfortable in using technology and data to manage their health throughout their lives, promoting healthy living and manage long term conditions where required. Where health deteriorates and / or care needs increase, digital and technology solutions will provide an opportunity for our citizens to have choice over their care requirements and with more efficient use of staff time, improve the response of the care provision to match their needs.

Supporting our digital journey we will have in place the necessary infrastructure, robust governance standards, cyber security and services to deliver safe, modern health and care services.

Data capture and linkage will help us plan our resources and support clinical decision making. Through this we will deliver inclusive services, reducing variation and enhancing safety within our ICS.

With an enhanced AI data-driven approach we will gain a deeper understanding of our population (through Population Health Management). We will design new models of care and implement change using data-driven analysis and predictive modelling tools that will focus on the needs of our citizens.

Utilising investments in communication technology over the last few years, we will connect key care applications and harness the continual increase in coverage of social media. Our virtual presence will increase to capture care data from individuals and provide diverse digital ways to interact with our citizens.

Simplicity for the citizen - preventative and assistive technology

Through the use of preventative and assistive technology, both in home and in person, we will improve our citizens self-care services to support more people to remain living independently in their own homes.

Citizens will trust and be motivated by the digital tools available to them and be an active participants in the management of their own health and care. Through this, true personalised care interactions will allow our citizens to have [the] choice and control over the way their care is planned and delivered.

Our goal is to fully integrate technology within the care journey, making technology enabled care a core part of our service delivery models.

However, we do recognise that the use of digital and technology solutions is only one way to access services and for care provision. As such, we will continue to provide our citizens with choice based on their preferences.

Support for health and care colleagues

Delivering digital for our colleagues in health and care

Embedding digital and technological solutions that can improve efficiency of working practice will help to reduce demand for services and provide an alternative to face-to-face service provision where appropriate and beneficial for the citizen. This will also help address significant workforce shortages and enable our staff to focus on their core values of helping people whilst managing their own work / life balance.

We will support colleagues to gain confidence in using digital tools. For some colleagues, digital and data skills of discovery, design and development will be a core part of the evolving culture within teams and roles. We will utilise digital and data to redesign care pathways and establish new ‘digital first’ services such as remote monitoring, digital triage, and consultations, technology enabled care at scale and data-enabled population health management.

We recognise that implementing digital technology at scale will significantly change how our staff across health and care work, and these changes can create anxiety. As such, we have prioritised investment in engaging our staff in re-designing services, and in building capacity and skills in utilising technology. Our staff being aware, confident and excited about technology as a driver of new offers will be fundamental in delivering a successful strategy, and sustainable health and care system.

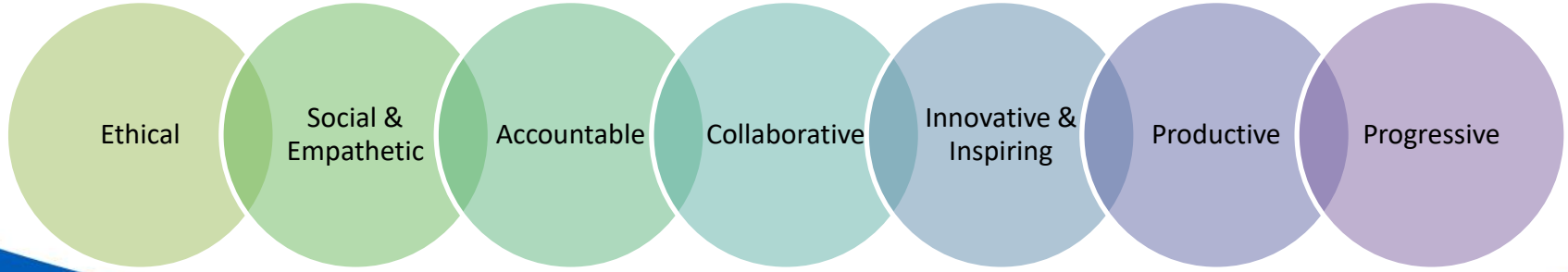
All partners across health and care will be both contributing to, and benefiting from, real time information, images and insights flowing between organisations and supporting alerting clinicians, practitioners, patients and carers to make safe decisions in support of the health services delivery to and care of individuals in the Gloucestershire population. This will help us to develop a reputation as a digital leader will act as an ‘attractor’ for people to want to work in Gloucestershire.

Support for health and care colleagues - establishing a digital working culture

How our colleagues work as individuals and how they interact with each other, in care teams and more broadly, is shaped by physical and digital interactions – and is enabled by technology. Our desired core digital behaviours apply to all of us; no matter who we are, what we do or where we provide our care services. The technology we adopt, how we manage it technology and how we use our data use therefore influences the way we work.

Our digital strategy highlights how we plan to establish a 'digital working culture' to enable us to effectively work together for the benefit of the Gloucestershire population. In so doing, we develop trust in our services and consistency from our colleagues.

Desired digital behaviours



One Gloucestershire
Transforming Care, Transforming Communities

Levelling up maturity and harmonising pace

Delivering digital for all the partner organisations in the ICS

A Gloucestershire-wide digital operating model will be fully established – with digitally mature foundations in each partner organisation, a digitally aware ICS leadership team and a data-led decision making culture.

The digital operating model for the ICS will be delivered through financially sustainable partnership digital services, workforce models and skills development – all underpinned by a comprehensive shared care record. The ICS will use improved data in relation to performance to understand where the care system requires intervention, leading to improved decision making and use of scarce resources.

Digitally enabled care will transform the way in which our services are delivered, and therefore will improve the patient experience whilst systematically reducing waste, resources and carbon emissions.

Gloucestershire will have embedded an adaptive learning approach* across the ICS, supported by core linked data services. It will ensure that staff and the public are confidently and consistently using quality data for operational and clinical decision making, innovative commissioning, understanding and addressing inequality and supporting open public deliberation about care provision across the county. That will extend to academic partners including the University of Gloucestershire, the West of England AHSN and The ARC.

All partners will move forward in digital maturity with no partner left behind and that all will share in digital maturity increases and digital skills uplift.

**adaptive learning in this context means using artificial intelligence to continually develop and refine insights about a population*

Joining up care across the county

Delivering digital for all the partner organisations in the ICS

Each part of our health and care system needs to be excellent in designing and unifying the digital information on which we rely. We will commit to innovation, transformation and doing things differently to ensure our digital services are in line with peoples every day use whilst maintaining NHS Digital standards.

Utilising the power of joined-up digital capabilities, integrated care teams from health and social care can unite effectively to serve our population. Removing the requirement of paper-based processes for collaborative working is enhanced by, not limited by, technology.

A shared care record underpins integrated care for our citizens. Our digital strategy uses this as a foundation to bring systems, new and old, together for the benefits of all.

Digital capabilities support **fluidity** of health and care staff – enabling colleagues to work in multiple care settings and ensuring practitioners can work in any health or care location.

Joined up care extends beyond clinical colleagues and social care practitioners to key support services that enable frontline practitioners within health and care.

Chapter 4: Our Delivery Approach - Digital Strategy Themes

We have identified **five key themes** to articulate our approach to delivering the digital strategy. These have formed the basis of the development of the activities to deliver the vision. These are summarised below and in further detail in subsequent pages

1. Delivery Framework

- Our digital strategy is integral in driving our health and care future, demonstrates our commitment to change through citizen and staff engagement, robust planning and prioritisation
- We will invest in a people-first, needs-led change management approach to ensure successful delivery

2. Levelling Up

- All partners will move forward in digital maturity as one, ensuring no partner is left behind and all partners share in digital maturity increases and digital skills uplift.
- We will invest in a digitally inclusive community, ensuring equal access and connectivity to digital solutions

3. Data & Information Sharing

- We will build the infrastructure, systems and digital tools to enable appropriate information to be shared in real-time to enable collaborative working and decision making, whilst improving planning and evaluation of services.

4. Innovation & Growth

- We will maximise the implementation of digital tools, products and services by changing our models of care, workforce and citizen engagement to continue to meet our citizens needs.

5. Population Health Management

- PHM tools will give us insights into our population that will support clinical decision making and inform interventions.

Chapter 4: Our Delivery Approach – measuring success

The approach and activities set out in subsequent slides are a strategic view of our existing priorities based on the current environment we are operating within. It is important that the digital strategy has a clear method of ensuring it is focused on delivering evolving priorities, as we will no doubt witness, as well as providing a clear method of evidencing impact against a defined set of measures. As such, the system Digital Executive Group have agreed the following:

1. **Ambition and reference framework:**
    a) The national framework for assessing digital maturity at a system level is HIMSS Continuity of Care Maturity Model (CCMM) – the system has been assessed against this model and were assessed between stages 1 and 2 for the different stakeholder components – clinical, information technology and governance. The ambition, as reflected in the strategy, is to move the system up to HIMSS CCMM Level 5.
2. **Measurement of success:**
    a) It is important to have clear success measures and approach to evaluation to demonstrate progress, evaluate priorities, and justify ongoing investment
    b) Whilst CCMM above will be key to measuring success, there will be others that will need to be reflected upon e.g. return on investment – a priority within the digital strategy is to agree / enhance the delivery mechanism behind the strategy. The success measures and evaluation approach will be delivered as part of this work.
3. **Review process**
    a) There will be a regular review of the digital strategy to ensure it is delivering against the plan, value for money and is focused on the right priorities for the system. This will be agreed as part of the delivery framework

Delivery Framework

Digital strategy themes – delivery framework

Where are we now?

- A good understanding of our level of maturity in each organisation, our delivery approaches and individual organisational strategies which was baselined as part of the CCMM evaluation.
- A clear joint ambition aiming to meet CCMM level 5.
- An ICS wide governance structure is in place with accountability at Executive level in each organisation. The governance structure is evolving as the ICS becomes more mature
- A recognition that resources are constrained but a commitment to work collaboratively to ensure that no one organisation is left behind

Where do we want to be?

- **Drives strategy:** Digital strategy integral in driving the system's health and care strategies, co-produced and aligned but challenges organisational digital strategies to be consistent; digital strategy aims to stretch ambition as benchmarked against other systems but also reflects a pragmatic approach to delivery
- **Framework for improvement:** Provides a framework that drives improvement across health and care
- **Costed plans:** Supported by a clear, costed roadmap that accounts for and co-ordinates each individual organisational ambition, shifting resources across the system to deliver as one; recognises the investment in digital leadership and digital change capacity
- **Implementation is critical:** Plan recognises conditions to deliver successful change – leadership, co-production and engagement with frontline to practically deliver change, build evidence and deliver impact, change capacity and capability, agile change approach. Ability to describe, capture and monitor benefits. Change approach will provide a framework for communication and engagement, including fostering, encouraging and guiding innovators within our workforce to lead and contribute to change.
- **Ability to scale:** The system will have a clear approach to evaluation and ability to scale digital interventions that improve outcomes and costs across the system

How are we going to get there?

- Develop system-wide digital strategy with a costed roadmap
- Development of enterprise architecture as a framework for technical strategies including data strategy, systems architecture, cyber security
- Clear governance to provide framework for investment and decision making
- Clear implementation approach – priorities, people-first, ability to scale, agile delivery, continual assessment of conditions for successful change
- By engaging with patients / citizens in co-producing solutions

Levelling Up

Digital strategy themes – levelling up

Where are we now?

- Significant investment over the past 5 years in digital infrastructure and maturity has put in place the foundations for an ambitious vision to become digitally advanced when benchmarked against similar ICS's
- A joint network infrastructure is in place across the ICS has improved connectivity and access for staff and is the beginning of improving ways of working across the organisations
- A commitment to improving the digital literacy of our staff There have been a number of new or upgraded clinical and social care systems being implemented increasing functionality which has enabled more clinical and social care information to be available to clinicians across the system

Where do we want to be?

- **Digital foundations:** All system organisations have the basic digital foundations to support innovation and growth, prioritising the whole system to progress in the medium term towards HIMSS digital maturity index level 5 or equivalent in social care
- **Invest in workforce:** Equip our staff and organisations with the digital tools, infrastructure, hardware and technology enabled care to work as effectively as possible in enabling improved outcomes.
- **Connectivity and access:** Enhance connectivity and access to wifi networks, systems for our staff, providers and citizens so frustrations become a thing of the past
- **Digitally enabling workforce / organisations:** invest in training and embedding a digitally enabled workforce, digital culture and enhance new ways of working
- **Digital inclusive communities:** improving connectivity, access, digital literacy and digital skills of our communities to enable people to have choice and control over their lives; we will engage and support more vulnerable, diverse, seldom heard groups through digital solutions; support families and carers help those they care for engage digitally

How are we going to get there?

- Prioritised investment in digital foundations as basics for innovation and growth
- Clear workforce strategy to first baseline, then plan to embed the digital skills – building first awareness then understanding and finally digital confidence across health and care
- Developing "digital skills for digital people" and support technology-enabled learning for all elements of the workforce
- Investing in digital projects that positively impact the workforce such as rostering, staff passports and AI / RPA to manage frequent and repetitive tasks and to support decision making
- Investment in connectivity and access to basic infrastructure for our citizens across the county, engage with communities in improving digital skills

Data & Information Sharing

Digital strategy themes – data & information sharing

Where are we now?

- Gloucestershire was one of the first areas in the country to implement a shared care record system which has a rich source of data from multiple organisations. The contract is ending and the shared care record system is being reprocured
- There is a commitment from all organisations to maximise the benefits of the new shared care record system adding richer clinical and social care datasets as they become available
- Use of the NHS app and online digital tools, particularly in primary care saw a significant increase during Covid. Usage was largely for transactional services such as appointment booking which saved administration time.

Where do we want to be?

- **Shared intelligence:** Build a digital and data offer that enables sharing of real-time, timely information across systems to support multi-agency operational and strategic decision making, ultimately improving the care and support to citizens. We will embed a new shared care record as one vehicle in enabling this to be achieved.
- **Collaborative working:** The offer will enable collaborative working across organisations, supporting shared expertise, knowledge and technology
- **Online platforms, digital tools and technology:** Systems are easy to access for our workforce and organisations with increased use of digital tools and technology to support decision making, efficiency and promote the fluid use of scarce resources across the county e.g. RPA, AI / machine learning. Online platforms, digital tools and technologies are easy to access for our citizens to support improved advice and guidance, communication and self-care e.g. unified app, digital front door, etc.
- **Digitally enabling workforce / organisations:** Information used will provide a single version of the truth, support integrated decision making, planning and commissioning, with the ability to analyse to increase proactive and preventative care across the system

How are we going to get there?

- Prioritise procurement and implementation of a new shared care record building on the progress made within the existing system
- Invest in digital service transformation to maximise the impact of sharing of information and use AI and RPA to address workforce challenges
- Develop a plan and implement improving health and care information and services for citizens, including personal health records
- Establish a system wide digital dashboard to maximise system-wide access to intelligence

Innovation & Growth

Digital strategy themes – innovation & growth

Where are we now?

- Closer links with universities and medical schools have been developed to help alleviate workforce shortages
- Digital solutions such as online consultations and virtual wards have increased capacity and made some efficiencies in clinical services
- Service transformation leads are reviewing more digital solutions to improve patient care across the patient pathway

Where do we want to be?

- **Improved access to technology solutions:** Develop patient-facing technology that provides people with a less intrusive and alternative approach to managing their health and care needs. The technology will be simple to use and access e.g. through single sign-on and will be thoroughly tested for data security and clinical safety.
- Fundamental shift in workforce: Develop a digital offer to ensure that the workforce has the best digital tools to work as effectively as possible, provides opportunities for career progression and development, the ability to work collaboratively across organisations and roles in sharing expertise, systems, services and technology. This includes support functions as well as the frontline. Develops a digital workforce to respond to changing environment, improving the recruitment and retention of our workforce across all disciplines.
- **Transformation and continuous improvement:** Invest in service transformation to maximise the impact of developing technologies in shifting the model of care, enabling personalised health and care and improving outcomes. Keeping on top of technological advances in improving outcomes for people through partnership networks. Utilising technology to reduce our carbon footprint.

How are we going to get there?

- Develop and implement technology enabled care (TEC) strategy and plan
- Develop and implement One Gloucestershire community wide data analytics strategy and plan
- Continuous assessment of market / supplier developments through partnership networks
- Plan and embed at scale active citizen self-care / health management plan
- Working with partners in the regional UX lab to embed user-centred design (e.g. joint R&D project with BNSSG ICS around Autism)

Digital strategy themes – population health management

Population Health Management

Where are we now?

- Gloucestershire ICS has a successful programme of work implementing PHM in primary with clinical champions driving this forward within PCNs. A PHM roadmap is in place and the governance structure and priorities are being reviewed
- The development of a data strategy has begun which will incorporate a review of the ways of working, capability and infrastructure required for a PHM programme

Where do we want to be?

- **Insights driving population wide decisions:** Tools providing the insights into population behaviours and health & well being to enable targeted decision making and inform interventions that take into account wider determinants of health and the potential impact
- **High quality predictive analytics:** Develop utilisation of co-ordinated intelligence and predictive analytics to support population planning and long term service planning. The ability to utilise a range of data sources to undertake longitudinal analysis to plan at population level across the system whilst driving prevention at scale
- **Research:** Work with academia to enhance quality improvements, research and audit opportunities; promote the use of trusted research environments in supporting long term planning
- **Citizen engagement** Improved working with citizens and patients in strengthening their skills, knowledge, decision making and control through improved access to evidence, in addition to behavioural interventions

How are we going to get there?

Working alongside system-wide PHM infrastructure in developing the analytics capabilities in:

- Development and embedding of population health management approach including data warehousing capabilities
- Develop PHM techniques, identifying initial priority cohorts
- Provide the digital foundations / intelligence to support the delivery of targeted interventions at scale; re-design services, develop digital twin capability (scenario planning) based around PHM analytics
- Provide intelligence to support the implementation of population health management academic / research studies to support long term planning, working with PHM system infrastructure / workstreams
- Digital and technology solutions to support and enable the drive for personalised care (linked to ShCR)

Bringing the strategy to life – people journeys

Jill is 20 and has been living with a complex learning disability that impacts on her confidence interacting socially. She also has physical health conditions that requires her to take regular medication otherwise her health deteriorates which can cause serious implications.

She has spent her childhood being cared for by parents and within a special school for her education. She has limited independent living skills and has struggled to gain employment since leaving education at the age of 18. She has recently moved out of the family home into an independent living environment. She has a low level support plan with social care and has regular appointments with a community nurse to manage her health conditions.

Themes

4

A smart home and access to applications tailored for Jill

Jill will have access to a tablet that will include applications that provide practical videos to support independent living, such as cooking and cleaning. She will have worked with a charity to tailor these applications to her living environment. Jill will be remotely assessed by a practitioner in her place of living to prevent anxiety in having to visit a busy GP practice. Jill can also use the tablet to engage socially with friends and family to prevent her being isolated – this improves her mental well-being and assures her parents that she is coping living independently.

Jill uses a range of online platforms to link in and access local services, providing opportunities for social interaction.

3

Access to Jills shared care record through her personal health record

Health and social care practitioners will have access to Jill's shared care record to have a full view on her health and care needs. The shared care record will include information from a range of health, care and voluntary sector organisations that Jill engages with. This will provide more context and help tailor the care and support plans to support her to live independently.

4

Utilising technology-enabled care solutions to reduce care support

Jill has access to a range of TEC solutions to support independent living and reduce the number of care workers having to help with care needs. This includes help such as medication dispensers, digital diaries, meal plans that act as guidance and prompts to live independently whilst managing health and care conditions. This also reduces the cost of paying for care workers in her home.

Bringing the strategy to life – people journeys

Frank is 85, lives with his 83 year old wife and has been living with progressive dementia for 3 years
He has a number of health conditions of which restricts his mobility and requires him to take medication daily. His wife helps with basic care needs but is also frail. They live 75 miles away from their daughter who visits monthly. They receive twice weekly visits from domiciliary care to support with personal hygiene. Frank has started to change his behaviours, getting up in the middle of the night, letting himself out and wandering the streets and leaving the gas on the cooker. He has also had a recent hospital visit due to a mild fall.

Themes

4

Technology enabled remote monitoring in Frank's home will allow him and his wife to be as independent as long as possible
Sensor technology, linked to emergency remote monitoring dashboards will enable care support to monitor behaviours and intervene if needed. This includes front-door sensors, cooker sensors

4 2 3

Frank will wear a wrist watch sensor
This will be used for vital signs monitoring and to detect potential falls. Information collected in Franks watch will be captured in his personal health record with care plans created automatically and updated by her trusted set of carers. Use of artificial intelligence / machine learning will drive alerts to carers and the GP relating to Franks condition.

5

A population health management service
Will be able to identify more people like Frank across the system and enable early, targeted care to prevent escalation of need within the health and care system. Cohort identification and risk stratification tools of the population will look to reduce inequalities in the system and enable individuals to be partners in their own care.

2 3 1

A digitally enabled workforce across Gloucestershire
Will be able to work remotely and effectively to care for Frank and his wife. Information relating to his condition can be shared effectively across care settings and will provide more co-ordinated and joined up care for Frank. Staff will be confident in identifying technology solutions alongside face to face care to ensure Frank remains living independently as long as possible as his health condition deteriorates.

Bringing the strategy to life – people journeys

Michelle is 41, 4 months pregnant with her first child and lives with her husband
The couple have struggled with their fertility and this is the first time they have been able to conceive. Michelle was diagnosed with polycystic ovary syndrome (PCOS) in her 20s and has managed the hormone imbalance with daily medication. She also has type 1 diabetes and must maintain stable blood glucose levels as her hormones change.

Themes

4 3

Access to apps linked to Michelle's Patient Held Record
This will allow her to follow her progress. Appointments, results and birthing plans online. This will be a single source of information that can be accessed via a mobile or PC device and can be taken to any of her appointments with her GP, midwife or diabetes team.

2 3

Access to Michelle's longitudinal health and care record
This will allow midwives, gynaecologists, nurses, her GP and diabetes team to have a single source of information relating to Michelle's pregnancy and diabetes. This will enable more personalised care for Michelle.

2 3 4

Robust cloud-based infrastructure across the ICS
This will allow midwives, gynaecologists, nurses, her GP and diabetes team to input information seamlessly form any care setting or hospital and will be updated in real time.

1 2 3

A digitally enabled workforce across Gloucestershire
Will be able to work remotely and effectively to care for Michelle during her pregnancy. Information relating to her health history and current conditions can be shared effectively across care settings and will provide more co-ordinated and joined up care.

2 3 4

Condition monitoring apps relating to Michelle's diabetes and PCOS
This can be accessed via her mobile. She is able to track her symptoms throughout the pregnancy, deal with multi co-morbidities which will be monitored remotely and integrate automatically into her PHR. Michelle and her practitioners will be alerted via the app if her condition is noticed to be abnormal through AI / ML

Bringing the strategy to life – people journeys

Ahmed is 45, is dyslexic and has been living with chronic depression since separating from his wife 15 years ago
He is on medication to support his depression having attempted suicide 12 years ago. His dyslexia and depression has prevented him from gaining employment. He attends interviews every 2 years which causes severe anxiety and worsening health conditions. He likes socialising but has found it difficult because he is on benefits and struggles to afford to go out but also his depression impacts on confidence to meet new people – he has tried to search on the internet but his local wifi connection is very poor. He is a religious man and used to be a very active part of his local mosque but rarely visits now due to the stigma of his mental health issues. He visits his GP weekly.

Themes

4 3

Access to applications tailored to Ahmed
Ahmed will have access to applications via a mobile device or tablet that provide practical video guidance to support communication and enable him to prepare for interviews in the comfort of his own home. He also utilises the apps to connect to local community activities, accessed through a local directory of services. He undertakes self assessment questionnaires online that then link him to local services that are free to use.

2

Improved connectivity
Investment in local connectivity and wifi means Ahmed can now utilise web services to explore local services to connect with the community and improve his mental well-being.

2 3

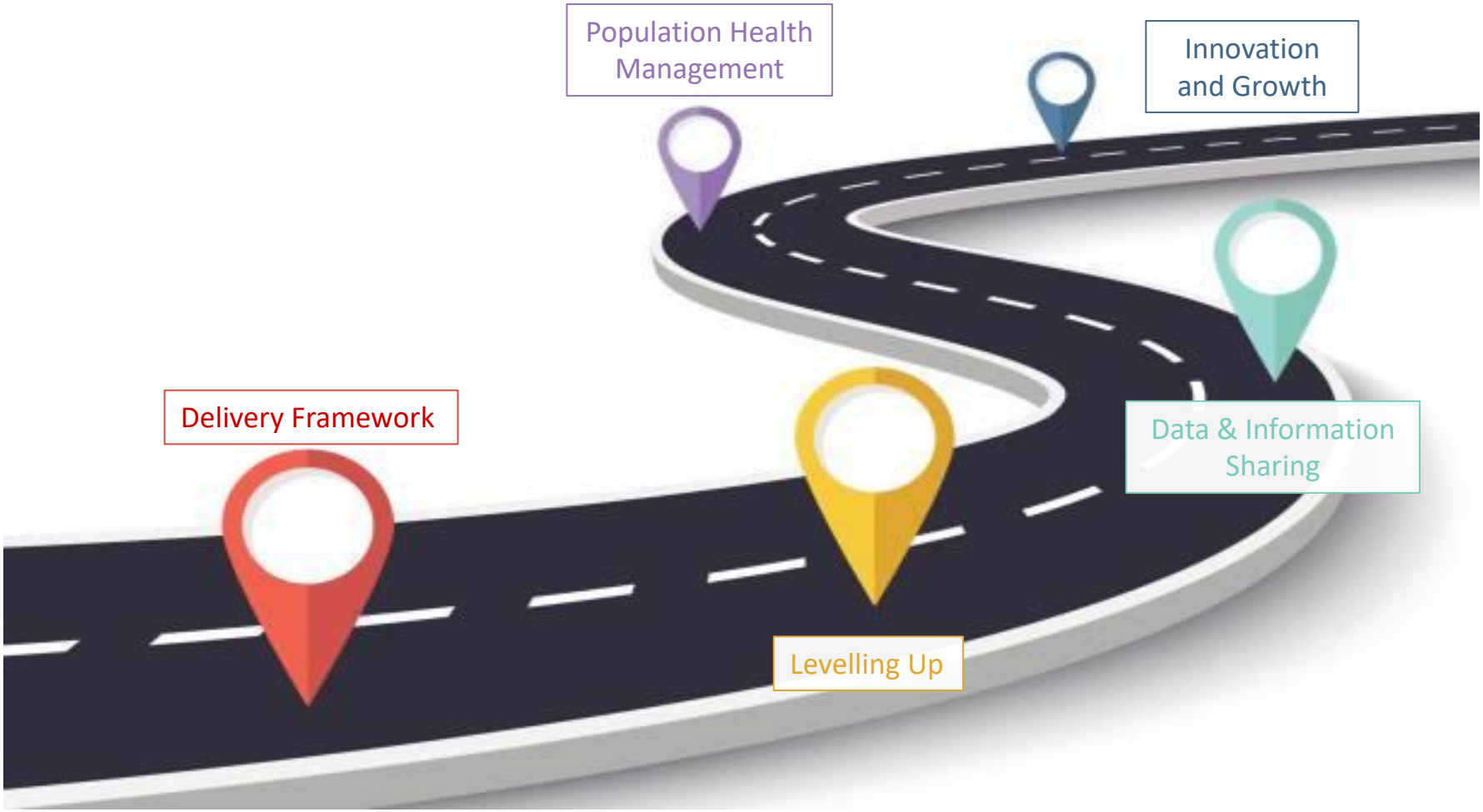
Access to Ahmed's longitudinal health and care record
Health and social care practitioners will have access to Ahmed's shared care record to have a full view on his health and care needs. The shared care record will include information from a range of health, care, and voluntary sector organisations that Ahmed engages with. Ahmed is able to self report on his mood weekly and this is accessible to his GP to intervene where necessary.

2 3

4 5

Communication with local services
Local social prescribing / care co-ordinators have been able to work with Ahmed, his GP, with consented access to Ahmed's personal health records, communicate through online platforms in supporting Ahmed to engage with his local mosque. Care co-ordinators have used virtual tools to communicate with the local Imam and explain the situation and sensitivity with Ahmed's situation prior to the Imam reaching out and contacting Ahmed.

Chapter 5: Our Outline Plan for Delivery – the next three years



One Gloucestershire
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Our Outline Plan for Delivery – Key Deliverables & Outcomes Year 1

KEY PRIORITIES

- Establish delivery framework – strategies, plan and governance
- Establish requirements and procure new Shared Care Record
- Implementation / design priority digital foundations: unified network, system convergence in MH, acute, community and Council
- Design and implement hospital discharge dashboard
- Develop and pilot technology enabled care strategy in care homes, develop detailed TEC implementation plans and implement early prevention priorities

WHAT DOES THIS MEAN FOR…….

The people of Gloucestershire …..

- More people will have access to a broader range of technology enabled care to support living independently at home and in care homes
- People spend less time delayed in hospital, improved experience during discharge and increased independence

The staff in Gloucestershire……

- Staff are able to access networks at any time, in any place, reducing frustration of sourcing information
- Improved confidence in commissioning TEC as part of care packages for priority cohorts
- Help shape the new shared care record capability to support care co-ordination and shared planning

A sustainable health and care system……

- Clear delivery framework and detailed plans agreed cross system to enable rapid and successful implementation of digital strategy focussing on early prevention priorities
- Reduced delayed discharges and improved system flow, freeing up beds in hospital
- TEC targeted at key cohorts of need (such as care homes), reducing costs, workforce constraints and/or demand

Our Outline Plan for Delivery - Year 1 key activities

First 6 months

- Develop system-wide **digital strategy**
- Develop and agree system-wide **data strategy** – systems of record; consistent data utilisation; data interop; data sharing approach; information governance / security
- Develop and agree system-wide **governance structure** to deliver digital strategy – roll out local / national policy; investment approach; structure & decision making approach – agile, delegated limits, system v local
- **Cyber security**: develop and implement system-wide remediation plan
- Develop system-wide **operating plan / enterprise architecture** – technology, processes, people to deliver strategy

Second 6 months

- Review and develop existing system-wide **change management approach** aligned to ICS approach and resource plan to deliver digital strategy
- **Cyber security: upgrade** in line with evolving digital environment e.g. hardware / information sharing
- **Change management resource** – capacity / capability sourcing, recruitment, training
- Develop and pilot **citizen / patient engagement approach** to deliver digital strategy
- **Implement system-wide governance** structure to deliver digital strategy

Delivery Framework

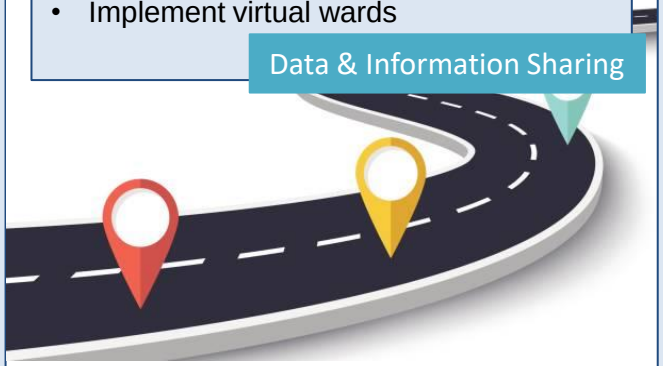
First 6 months

- Establish requirements and procure **shared care record** (JUYI v2)
- Develop strategy and plan to improve **health and care information and services for citizens**
- Develop **plan for increased use of digital tools and platforms** – implementation of priorities e.g. MH apps, text services, BP monitoring
- Progress implementation of digital social care records with care homes / homecare providers

Second 6 months

- Develop system **hospital discharge dashboards**
- Implement virtual wards

Data & Information Sharing



Second 6 months

- Develop and pilot a **technology enabled care strategy**, supporting care homes to implement a care system
- Establish **data analytics strategy**, plan and implementation approach

Innovation & Growth

First 6 months

- **Digitally enabled workforce** – develop digital workforce plan, assess system capabilities / digital skills assessment; training needs and gap analysis
- **Digital foundations** – execute strategy including system-wide unified network (any user, access any network, any site), converged MS environment, simplified technology estate, end user devices, enabling connectivity for staff and citizens; plan for updating, converging, rationalise health and social care record systems (e.g. EPRs), implement paperless plan
- Draft / approve **digital inclusion strategy and plan**

Second 6 months

- **Digitally enabled workforce –** implementation of digital skills programme; establish digital roles
- Implement **digital inclusion hubs** and innovation fund
- **Digitally enabled workforce:** Identify and implement priority digital tools / online platform

Levelling up

Second 6 months

- Establish data warehouse capability and repository aligned to **PHM workstream**

Population Health Management

One Gloucestershire
Transforming Care, Transforming Communities

Our Outline Plan for Delivery – Key Deliverables & Outcomes Year 2

KEY PRIORITIES

- Undertake training and embed digital skills to priority frontline staff
- Transition to Shared Care Record, embedding shared care planning; care co-ordination
- Scale TEC opportunities for priority cohorts
- Develop and embed digital front door and increase digital tools for citizens to self-care and access digital care solutions
- Implement data analytics plan and pilot for priority cohorts

WHAT DOES THIS MEAN FOR…….

The people of Gloucestershire …..

- Technology enabled care and digital solutions will be a more integral part of care packages, improving choice, control and less intrusive care support
- Easier access and more choice of digital tools and solutions to support self care and management of long term conditions improving independence
- Less time spent repeating their story to staff

The staff in Gloucestershire……

- Improved awareness, confidence and incidence of commissioning technology / digital solutions
- Improvements in shared care planning and care co-ordination through access to information in ShCR
- Reduced case loads as TEC / digital provides alternative to F2F

A sustainable health and care system……

- Digital / technology solutions embedded sustainably at scale in care plans reducing reliance on staff as a scarce resource
- Shared care planning, care co-ordination improves decision making, reduces duplication, improves efficiency and costs and reduces our carbon footprint
- Evidence-led analytics supports more informed approach to embedding prevention at scale, improving outcomes and reducing costs for priority cohorts

Our Outline Plan for Delivery - Year 2 key activities

First 6 months

- **Implement operating plan / enterprise architecture** (aspects of which are covered below)
- **Implement system-wide data strategy** – confirm guardianship; establish data governance; mini operating model to resolve data quality / contention issues
- Enhance **ICS system-wide change management approach** to include digital transformation requirements
- Work with ICS **citizen / patient engagement** teams to test priority digital plans
- **Digital strategy alignment between organisations –** joint implementation, procurements, contracts, service planning, etc.

Delivery Framework

First 6 months

- **Implement priority TEC initiatives** – priority care home needs, supplier market review, implement at scale.
- **Implement data analytics plan** – establish priority needs, source data, pilot and implement at scale e.g. risk stratification tools & case finding, ML/AI
- Ongoing assessment of **technology / supplier market developments**

Innovation & Growth

First 6 months

- Digitally enabled workforce – phased implementation of prioritised **digital workforce plan through digital development programme**
- Deliver **digital leadership programme**
- **Digital foundations** – continued execution – simplification, rationalisation, investment
- Progress implementation of **digital inclusion plan,** including implementing digital inclusion hubs

Levelling Up

Second 6 months

- Develop intelligence to support i**mplementation of PHM techniques / priorities** including – frequent flyers, establish cohorts/ segmentation, risk scoring / stratification

Population Health Management

First 6 months

- Transition to and implement new **shared care record**
- **Implement plan to improve health and care information and services for citizens** – pilot access to information; online digital tools / directories / apps (incl. digital front door)
- Develop plan and implementation approach for **digital operating model** – system dashboard, real-time feeds, design op model
- Establish plan for **personal health record**
- **Implement plan for priority digital tools and platforms –** pilot and scale

Second 6 months

- Plan, design and deliver priority quick wins of **digital service transformation** – operating model, workforce changes, data analytics, culture / behaviours
- Identify priority tools and implement plan for **personal health record –** pilot and scale

Data & Information Sharing

Our Outline Plan for Delivery – Key Deliverables & Outcomes Year 3

KEY PRIORITIES

- Embed digital skills training / support for staff across all care settings
- Plan and implement operating / workforce model changes to maximise increased use of digital tools / TEC and shared information
- Improve connectivity and access to wifi for Gloucestershire citizens and for hard to reach groups
- Implement system wide digital operating model to include system dashboard & real time feeds
- Enhance data analytics capabilities, predictive analytics and AI to drive targeted population wide prevention

WHAT DOES THIS MEAN FOR…….

The people of Gloucestershire …..

- Improved access and confidence in using digital tools enhancing ability to be an active participant in managing their own health
- TEC, digital tools and more innovative care plans enables people to have more choice and control over care delivery
- People are living more independently, connected socially with better access to health and care options

The staff in Gloucestershire……

- Access to relevant information, digital tools and TEC for key services across health and care enhancing care planning
- Confidence and skills in providing innovative advice, guidance and care plans that improve outcomes for people
- Improved opportunities for career progression through new workforce models
- Improved satisfaction and well-being as more manageable workload as less reliance on face to face care / reduced crises

A sustainable health and care system……

- Mixed digital, technology and people led operating and workforce model for priority areas that reduces reliance on scare people resource and is more economically viable
- Evidence led and timely approach to managing system wide demand and capacity challenges through live dashboards
- Implementation of priority population health prevention improving outcomes and reducing costs of escalating health and care conditions

Our Outline Plan for Delivery - Year 3 key activities

First 6 months

- **Cyber security: strengthen security** across the system in line with evolving digital environment
- Embed sustainable approach to **citizen / patient engagement** in co-producing digital / technology plans

Delivery Framework

First 6 months

- Develop intelligence to support i**mplementation of PHM techniques / priorities** including – frequent flyers, establish cohorts/ segmentation, risk scoring / stratification
- Digital and technology solutions to support and enable the drive for **personalised care** (linked to ShCR)

Second 6 months

- Provide intelligence to enable delivery of **whole system targeted interventions at scale**– re-design services, digital twin capability (scenario planning) based around PHM analytics (recognise already happens in Public Health)

Population health management

First 6 months

- Digitally enabled workforce – continued phased implementation of prioritised **digital workforce plan**

Levelling up

First 6 months

- **Continue to implement TEC plan** in care homes and hospices
- Continue to **implement data analytics plan**
- Ongoing assessment of technology / supplier market developments - partnership network, needs v market
- **Activate citizens to self-care / manage health** – consolidate pilots; priority cohorts from PHM; identify digital tools; develop plan and implement; track benefits

Innovation & growth

First 6 months

- Optimise **shared care record**
- Ongoing implementation of **digital service transformation** – operating model, workforce changes, data analytics, culture / behaviours
- **Implement plan at scale to improve health and care information and services for citizens** – including possible digital front door
- Implement system **digital operating model** (dependent on data strategy / feeds)
- Implementation of plan for **personal health record –** pilot and scale

Second 6 months

- Work with PHM workstream in scoping and providing intelligence into **PHM enabled research / academic study** plan

Data & information sharing

One Gloucestershire
Transforming Care, Transforming Communities

Financial Summary

- This strategy had a costed plan to complement it
- Yr 22/23 and 23/24 the digital plans are included in the system financial plans which are agreed
- For 23/24 there is still £5.4M of funding which is expected but not yet confirmed, there is a high degree of confidence that this monies will be received
- For 24/25 there are a number of unfunded schemes. The availability of plans will enable us to take advantage of any opportunities that may arise for digital funding.

Conclusion

- This is a strategy all partner organisations have developed together as a system
- It defines a level of ambition for the system that is pragmatic and achievable
- But it recognises that meeting the needs of our citizens across the county requires investment
- An investment case is being developed to underpin funding discussions with NHS England
- There is a gap in funding which will be sought through those discussions and through prioritisation agreed as a system

Appendices

- Appendix 1 – Delivering on Gloucestershire's green plan aspirations

Appendix 1 : Delivering on Gloucestershire's green plan aspirations

Digitally enabled care will transform the way in which our services are delivered, and therefore will improve the patient experience whilst systematically reducing waste, resources and carbon emissions.

The coronavirus pandemic acted as a catalyst for NHS organisations to implement a number of digital initiatives at speed, in particular remote consultations, our digital strategy, which is in development is building on this work.

Digital support is embedded in a number of ICS transformation programmes supporting new care pathways where there has been a secondary benefit of supporting sustainability (e.g. covid virtual ward, children's mental health pathway).

Organisation	Goals	Objectives and actions
Gloucestershire Health and Care NHS FT Gloucestershire Hospitals NHS FT Primary Care	Conduct outpatient & other appointments remotely where clinically appropriate, taking account of patient preferences, aiming for 25% to be delivered remotely overall	Develop a digitalised pathway to become paperless organisations where clinically possible Embed digital technology to reduce face-to-face appointments for clinical activities in line with NHS Targets. Introduce digitalised meal ordering system to reduce hospital food waste
ICS	New models of care to include digital solutions where there is proven benefit.	Collaborate to ensure identification, design and delivery of transformation programmes and clinical networks that have a positive impact on sustainability are identified as potential options in the overall solution design by March 2024 Digital literacy programme jointly with GCC to enable better access to digital services by a wider range of the population
Virtual Wards	Enable a greater number of individuals to receive care at home with remote monitoring	Virtual ward programme of work to identify areas of greatest benefit to patients and the NHS through care at home with virtual monitoring

Appendix 1 : Delivering on Gloucestershire's green plan aspirations

Date	Measures of success
Year 1	Where attendances are clinically necessary, at least 25% should be delivered remotely by telephone or video consultation
March 2024	Reduce paper use to absolute minimum
March 2024	Develop a plan and start implementation of digital meal ordering systems
March 2023	Digital literacy programme jointly with GCC to enable better access to digital services by a wider range of the population
March 2024	Ensure identification, design and delivery of transformation programmes and clinical networks that have a positive impact on sustainability are identified as potential options in the overall solution design by March 2024
March 2025	Further rollout virtual wards in line with planning guidance

Appendix 1 : A framework for an ICS-wide sustainable digital strategy

The ICS has a fundamental role in incentivising green behaviours through system levers and incentives to change culture. Some things can be done at system level to ensure that environmental impact has been fully considered.

Rethink

- Develop guidelines for digital business case development that address the green agenda
- Investment objectives to support the net zero agenda
- Options under consideration to have a clear dimension associated with sustainability
- Options appraisal criteria to include consideration of climate change
- Procure only with suppliers committed to/ in the process of setting science-based targets for sustainability outcomes
- Management cases and business as usual service delivery models for digital services to be designed with embedded sustainability

Reduce

- Implement electronic patient records in line with national digital maturity guidelines to reduce paper usage including:
    - Reduce paper use for communication with care professionals/ patients/ residents.
    - Reduce paper use within organisations across all back-office functions.
- Reduce printers on-site to only areas where they are absolutely needed and put software in place to minimise printing and ink usage.
- Provide hardware (sensors, monitoring devices etc.) and software for patients to receive care in their usual place of residence rather than a hospital or other healthcare facility.
- Utilise e-learning to reduce travel required to attend training courses.
- Provide hardware, software, and other relevant infrastructure to ensure staff can work from alternative locations to reduce travel.
- Review and assure digital maturity and investment plans to ensure commitment to ‘cloud first’ and virtual machine approaches for existing infrastructure.
- Develop/ review/ update power management policies and protocols and embed solutions to implement the policies and report on power usage.

Re-use

- Refurbish and re-use old equipment for other purposes (for schools, charities, or UK/ overseas projects) as part of an organisation’s corporate social responsibility.
- Share learning on digital initiatives to support sustainability with other organisations across Gloucestershire.

Recycle

- Recycle digital consumables wherever possible.
- Dispose or recycle digital equipment safely, securely and in line with relevant regulations.

Further information

Our Digital Strategy can be found at:

PLACEHOLDER

The One Gloucestershire website has a dedicated page for all resources relating to ICS Development:

https://www.onegloucestershire.net/ics-development/

You can register with the GIG on-line platform to find out how to get involved in shaping the ICS in Gloucestershire: https://getinvolved.glos.nhs.uk/