



# South East – Digital & Data Scoping Exercise

Webinar

26/10/22



Joining the dots across health and care

# Overview of the session

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Background and Purpose of the Project

Project Approach

Findings & Key Themes

Q & A

Next Steps

# Background & Purpose

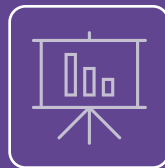
- The 'Priorities for Digital Mental Health' sets out the core priorities for how ICBs, Providers, Regional and National teams can work together to optimize the use of digital innovation to deliver on the Long-Term Plan commitments for mental health; and enhance mental health outcomes for people across all mental health care pathways.
- As part of the 'Priorities for Digital Mental Health', NHSE/I confirmed additional regional funding for dedicated resource to support digital transformation, to provide flexibility and increase capacity within existing structures and programmes of work.
- The purpose of the regional digital scoping exercise was to collaboratively scope with system partners, the regional support offer for 'Digital Mental Health' and understand how regional roles and responsibilities can be delivered most effectively:
  - Deeper understanding of the mental health digital landscape, through an assessment of user need and current gaps in regional and national support.
  - Understand challenges, priorities and opportunities across systems to support the development of the regional support offer
  - Understand current priorities to highlight where regional support would add most value
  - Understand potential skillsets / approaches and whether the regional support could be delivered through a function rather than role-based approach



Deeper understanding of the mental health digital landscape in your ICB



Document challenges, gaps & opportunities to support development of the regional support offer



Agreed prioritisation of where regional support would add the most value

# Project Approach

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- The scoping exercise required the development of Key Lines of Enquiry (KLOEs) aligned to the five core 'Digital Priorities for Mental Health', which the region wanted to explore in more detail through a series of engagement sessions with ICSs, Regional and National colleagues:
  - Priority 1 – Ensuring the digital basics are in place
  - Priority 2 – Enhancing data sharing across systems and organisations
  - Priority 3 – Improving how people get the support they need
  - Priority 4 – Supporting the workforce to deliver the highest-quality of care
  - Priority 5 - Embedding digital products and services in mental health pathways
- The aim of the engagement sessions was to gather feedback from key stakeholders to aid the scoping the regional support offer, by identifying what is needed at a regional level to support effective delivery of the Priorities for Digital Mental Health.
- Engagement sessions were held virtually with representation from both Clinical and Digital Leads at Provider, ICS, Regional and National Level
- Alongside the engagement sessions, Digital Maturity Self-Assessment was developed and shared with ICSs to enable systems and providers to consider current priorities and digital maturity in relation to the above, and additionally provided the opportunity to highlight successes, challenges, gaps & opportunities in relation to the delivery of digital priorities.
- Outputs from the engagement sessions and self-assessments, have been analysed to support the identification of key themes and to inform next steps for the design and delivery of the regional support offer.





# Findings & Key Themes:

- Results from Self-Assessments
- Digital Mental Health Priorities
- Feedback from National team
- Roles & Responsibilities

# Outcomes of the Digital Maturity Self Assessments

- Feedback via the Digital Maturity Self Assessments, supported the delivery of the engagement sessions and has provided a deeper understanding of the mental health digital landscape across the South East region.

## Maturity Level

- In terms of Maturity, mapping of the responses provided by ICS's highlights the varying levels of maturity both across ICSs and more granularly across the 'Digital Priorities for Mental Health'.
- There were number of examples of best practice highlighted, and overall, maturity against a large proportion of digital areas of focus are well defined or managed.
- Maturity against core digital priorities for Mental Health, is more defined or managed where there is established Digital Leadership and Digital Strategies and Plans in place both at a provider and ICS level.
- It was recognised across ICSs, there is limited insight into the digital maturity of VCSE and Independent Providers, in comparison to the high level of insight into the digital maturity of NHS Trusts.

## Priority Level

- In terms of core priorities across systems the following areas of focus have been identified as 'High Priority' by ICSs across the region:
  - Governance and Operating Structures
  - Front Line Digitisation and Digital Maturity: Achieve the Minimum Digital Foundations
  - Data & Data Quality: Use data to make meaningful improvements
  - Digitally Enabled Pathways of Care: Increase digital options within care pathways
  - Digitally Enabled Pathways of Care: Support safe and informed choice
  - Digital Workforce, Skills & Training: Utilise digital productivity enhancements to release time to care
  - Assure the quality of digital products and services
- The following slides provide a summary of the returns for the self-assessments, which provide insight into areas / priorities which may benefit from additional regional support.

### MATURITY LEVEL KEY

0	NOT APPLICABLE	Priority not applicable.
1	INITIAL	Initial approach in development / Current maturity unknown
2	DEFINED	Defined approach with some plans/ programmes are in place to support the delivery of the priority.
3	MANAGED	Managed approach with plans / programmes in place to support the delivery of the priority.
4	OPTIMAL	Optimal approach with plans / programmes delivering on the priority.

### PRIORITY KEY

0	NOT APPLICABLE	Priority not applicable.
1	HIGH	High Priority
2	ESSENTIAL	Essential Priority
3	MODERATE	Moderate Priority
4	MINOR	Minor Priority

# Digital Maturity Self Assessments – Maturity Summary

PRIORITY AREA	AREA	BOB	FRIMLEY	HIOW	K&M	SURREY	SUSSEX
Priority 1: Ensuring the digital basics are in place	Governance and Operating Structures	INITIAL		DEFINED	MANAGED	INITIAL	MANAGED
Priority 1: Ensuring the digital basics are in place	Investment: Development and delivery of ICS digital investment plans, incorporating Mental Health priorities	INITIAL		MANAGED	DEFINED	INITIAL	DEFINED
Priority 1: Ensuring the digital basics are in place	Digital Leadership Across Organisations	INITIAL		MANAGED	DEFINED	INITIAL	DEFINED
Priority 1: Ensuring the digital basics are in place	Digital Strategies and Plans	INITIAL		MANAGED	MANAGED	INITIAL	DEFINED
Priority 1: Ensuring the digital basics are in place	Front Line Digitisation and Digital Maturity: Achieve the Minimum Digital Foundations	OPTIMAL		DEFINED	MANAGED	INITIAL	DEFINED
Priority 2: Enhancing data sharing across information systems and organisations	Interoperability and Information Sharing: Connect provider information systems within each ICS			DEFINED	MANAGED	INITIAL	DEFINED
Priority 2: Enhancing data sharing across information systems and organisations	Interoperability and Information Sharing: Facilitate sharing of data beyond individual ICSs	INITIAL		MANAGED	MANAGED	INITIAL	INITIAL
Priority 2: Enhancing data sharing across information systems and organisations	Data & Data Quality: Support improved data quality	DEFINED		MANAGED	MANAGED	INITIAL	MANAGED
Priority 2: Enhancing data sharing across information systems and organisations	Data & Data Quality: Use data to make meaningful improvements	INITIAL		DEFINED	DEFINED	INITIAL	MANAGED
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Address inequalities in access			DEFINED	DEFINED	INITIAL	DEFINED
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Increase digital options within care pathways			DEFINED	MANAGED	INITIAL	INITIAL
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Support safe and informed choice			MANAGED	MANAGED	INITIAL	DEFINED
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Support earlier intervention	INITIAL		DEFINED	DEFINED	INITIAL	INITIAL
Priority 4: Supporting the workforce to deliver the highest-quality of care	Digital Workforce, Skills & Training: Utilise digital productivity enhancements to release time to care	INITIAL		DEFINED	DEFINED	INITIAL	DEFINED
Priority 4: Supporting the workforce to deliver the highest-quality of care	Digital Workforce, Skills & Training: Improve clinical decision-making support	INITIAL		DEFINED	DEFINED	INITIAL	INITIAL
Priority 4: Supporting the workforce to deliver the highest-quality of care	Digital Workforce, Skills & Training: Increase data and digital literacy	INITIAL		DEFINED	DEFINED	INITIAL	INITIAL
Priority 5: Embedding digital products and services in mental health pathways	Digital Workforce, Skills & Training: Build capacity, teams and cultures to support digital ways of working	DEFINED		MANAGED	DEFINED	INITIAL	MANAGED
Priority 5: Embedding digital products and services in mental health pathways	Assure the quality of digital products and services	DEFINED		MANAGED	MANAGED	INITIAL	DEFINED
Priority 5: Embedding digital products and services in mental health pathways	Streamline the onboarding of digital products and services	INITIAL			INITIAL	INITIAL	DEFINED

# Digital Maturity Self Assessments – Priority Summary

PRIORITY AREA	AREA	BOB	FRIMLEY	HIOW	K&M	SURREY	SUSSEX
Priority 1: Ensuring the digital basics are in place	Governance and Operating Structures	ESSENTIAL		MODERATE	HIGH	HIGH	HIGH
Priority 1: Ensuring the digital basics are in place	Investment: Development and delivery of ICS digital investment plans, incorporating Mental Health priorities	ESSENTIAL		MODERATE	ESSENTIAL	HIGH	HIGH
Priority 1: Ensuring the digital basics are in place	Digital Leadership Across Organisations	ESSENTIAL		MODERATE	HIGH	HIGH	ESSENTIAL
Priority 1: Ensuring the digital basics are in place	Digital Strategies and Plans	MODERATE		MODERATE	NOT APPLICABLE	HIGH	HIGH
Priority 1: Ensuring the digital basics are in place	Front Line Digitisation and Digital Maturity: Achieve the Minimum Digital Foundations	MINOR		ESSENTIAL	NOT APPLICABLE	HIGH	HIGH
Priority 2: Enhancing data sharing across information systems and organisations	Interoperability and Information Sharing: Connect provider information systems within each ICS			ESSENTIAL	ESSENTIAL	ESSENTIAL	ESSENTIAL
Priority 2: Enhancing data sharing across information systems and organisations	Interoperability and Information Sharing: Facilitate sharing of data beyond individual ICSS	ESSENTIAL		ESSENTIAL	MODERATE	ESSENTIAL	MODERATE
Priority 2: Enhancing data sharing across information systems and organisations	Data & Data Quality: Support improved data quality	MODERATE		ESSENTIAL	HIGH	ESSENTIAL	HIGH
Priority 2: Enhancing data sharing across information systems and organisations	Data & Data Quality: Use data to make meaningful improvements	ESSENTIAL		HIGH	HIGH	HIGH	HIGH
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Address inequalities in access			HIGH	ESSENTIAL	HIGH	NOT APPLICABLE
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Increase digital options within care pathways			HIGH	HIGH	MODERATE	HIGH
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Support safe and informed choice			HIGH	HIGH	ESSENTIAL	HIGH
Priority 3: Improving how people get the support they need	Digitally Enabled Pathways of Care: Support earlier intervention	ESSENTIAL		ESSENTIAL	MODERATE	ESSENTIAL	NOT APPLICABLE
Priority 4: Supporting the workforce to deliver the highest-quality of care	Digital Workforce, Skills & Training: Utilise digital productivity enhancements to release time to care	ESSENTIAL		HIGH	HIGH	HIGH	HIGH
Priority 4: Supporting the workforce to deliver the highest-quality of care	Digital Workforce, Skills & Training: Improve clinical decision-making support	ESSENTIAL		ESSENTIAL	HIGH	HIGH	ESSENTIAL
Priority 4: Supporting the workforce to deliver the highest-quality of care	Digital Workforce, Skills & Training: Increase data and digital literacy	ESSENTIAL		ESSENTIAL	HIGH	ESSENTIAL	ESSENTIAL
Priority 5: Embedding digital products and services in mental health pathways	Digital Workforce, Skills & Training: Build capacity, teams and cultures to support digital ways of working	MODERATE		ESSENTIAL	ESSENTIAL	HIGH	HIGH
Priority 5: Embedding digital products and services in mental health pathways	Assure the quality of digital products and services	MINOR		ESSENTIAL	HIGH	HIGH	HIGH
Priority 5: Embedding digital products and services in mental health pathways	Streamline the onboarding of digital products and services	ESSENTIAL			ESSENTIAL	MODERATE	ESSENTIAL

# Priority 1 – Ensuring the digital basics are in place

People and organisations have the infrastructure, information systems, processes and capabilities needed to provide safe, effective and high quality mental health care.

Build **digital leadership** across organisations

Ensure **clear digital strategies** and plans are in place for mental health

Achieve the **Minimum Digital Foundations**

## Overall Feedback

- Varying levels of digital leadership across the region
- Governance could be improved in the collaborative space with other organisations (e.g. voluntary sector)
- Digital maturity of partner organisations is often unknown

## Examples of existing work:

- Mature infrastructure and achievement of Minimum Digital Foundations at Berkshire Healthcare NHS Foundation Trust
- Digital Strategy Group established in HIOW, supported by smaller groups with view of whole portfolio across the ICS. Recruiting a Digital Programme Manager who will be embedded into mental health team.

## How regional support could help:

- **Facilitate learning** across ICBs to support development of robust digital mental health leadership
- Identifying, signposting and supporting applications for **funding opportunities** to drive developments

# Priority 2 – Enhancing data sharing across systems and organisations

Digital information systems are connected to support the collection, sharing and use of data across organisations to deliver integrated healthcare and meaningful improvements to services.

Support **improved data quality**

Connect provider information systems **within each ICS**

Facilitate sharing of data **beyond individual ICSS**

Use data to make **meaningful improvements**

## Overall Feedback

- The structure of mental health data can make information sharing solutions difficult
- Sharing data with other organisations in the mental health system would be beneficial (e.g. drug & alcohol)
- Inconsistency in funding can slow momentum of good work

## Examples of existing work:

- BOB, Surrey and Frimley are signed up to the Thames Valley and Surrey Care Record to share between ICSSs
- CHIE in place as main interoperability solution in HIOW
- Our Care Connected programme ongoing in Sussex
- Kent and Medway Care Record in place

## How regional support could help:

- Expertise in **mental health data**, how it is used and consumed by others
- Have a **regional overview** to allow expansion of work done by existing programmes

# Priority 3 – Improving how people get the support they need

People are supported to find the information and services they need as quickly as possible, with more choice in how support is received.

Address **inequalities** in access

Increase **digital options** within care pathways

Support **safe and informed** choice

Support **earlier intervention**

## Overall Feedback

- Transformational colleagues provide most value in long-term posts to build relationships and knowledge
- Resource and investment required to support levelling up in geographically diverse areas
- Training in use of language could improve support provided

## Examples of existing work:

- Surrey rolling out epilepsy sensors to alert staff to a seizure to all LD&A care homes
- Sussex are finalising a Digital Inclusion Framework
- Southern Health in HIOW has a mature iTalk service to deliver some services and support earlier intervention.

## How regional support could help:

- Building **transformational capabilities and skill base** to support pathway redesign in posts with longevity (BA, UCD roles needed)
  - Facilitate **sharing of knowledge and best practice from around the country** by linking with national team

# Priority 4 – Supporting the workforce to deliver the highest-quality of care

The mental health workforce is supported to focus on delivering effective mental health care, and have the digital skills and literacy required to engage in digital transformation.

Utilise **digital productivity enhancements** to release time to care

Improve clinical **decision-making support**

Increase **data and digital literacy**

## Overall Feedback

- Providers know their workforce best so funding, rather than support, may be best for this priority
- Enhancing MDT approaches across organisations is key
- The basics need to be in place first to achieve this priority and funding gaps can slow developments

## Examples of existing work:

- Existing digital literacy programmes in place at provider/ICS level
- Sussex utilising HEE tool to survey current literacy levels
- Project at NELFT (Kent & Medway) to enhance clinical understanding of the use of outcomes data

## How regional support could help:

- **Funding** to support digital literacy initiatives
- Expertise to **review existing programmes of work**
- **Consistent funding** to take pilot projects forward

# Priority 5 - Embedding digital products and services in mental health pathways

Digital products and services are designed, trialled and embedded across care pathways using user centred approaches, to enable transformation for the benefit of service users and staff.

Build capacity, teams and cultures to **support digital ways of working**

Assure the **quality of digital products** and services

Streamline the **onboarding of digital products** and services

## Overall Feedback

- DTAC framework used in some areas to assess new products
- Poor capacity in some areas to support end –to-end design
- Digital developments move quickly and systems/tools can become outdated

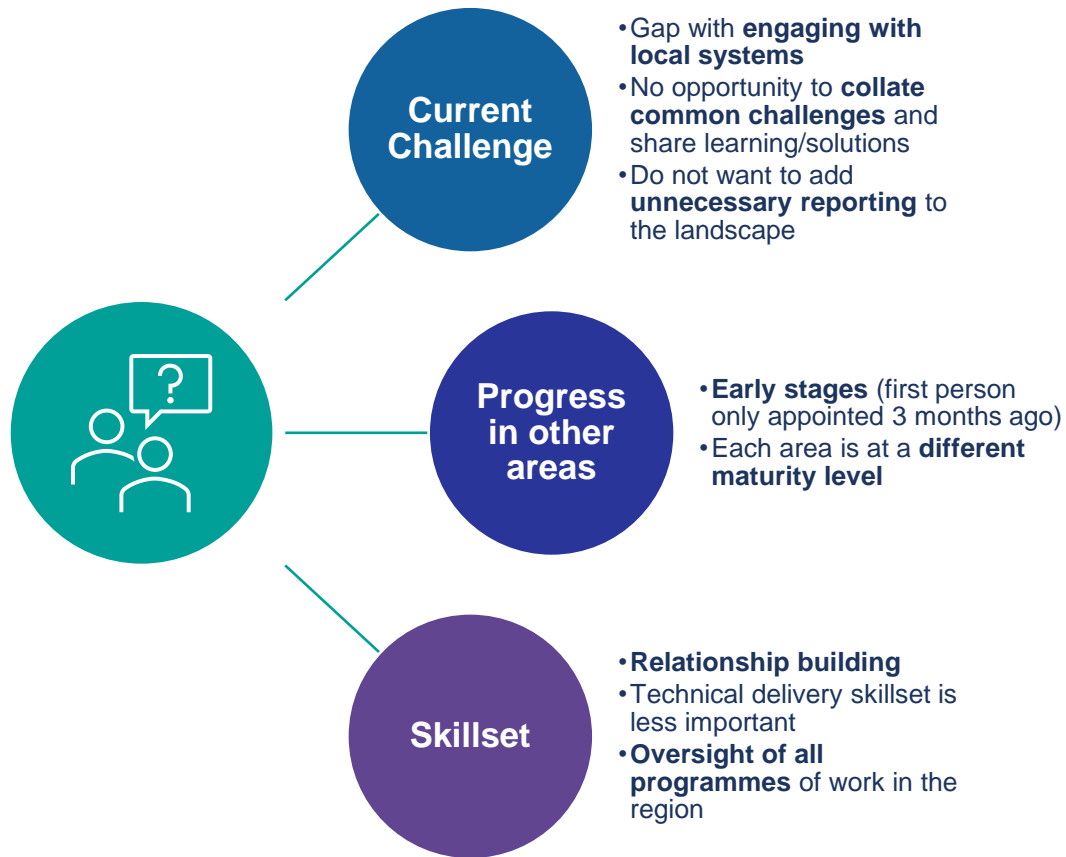
## Examples of existing work:

- Berkshire Healthcare NHS FT is a global exemplar
- NELFT (Kent & Medway) hold user experience task and finish groups, skills labs and other non-traditional methods to embed new products
- Surrey have introduced a Digital Delivery Framework, bringing procurement and IG into early stages of projects

## How regional support could help:

- **Review and assess tools/systems** at regional level
  - **Horizon scanning** of digital trends
- Freeing up of **capacity for clinicians with digital roles**

# National Team Feedback



Joining the dots across health and care

## Key expectations of the role:

1. Hold **initial conversations** with their ICBs to discuss the priorities
2. Establish which of the priorities the ICBs are **focusing on**
3. Collate a **list of specific pieces of work** they're doing to address the priorities
4. Provide **feedback at regional and national level**

# Roles & Responsibilities

- Already in development and working closely with regional teams
- Some support may be needed to scope projects and link to existing work

## Digital Investment Plans



- Only need to run regionally when there is something meaningful at this scale
- Mental health needs to link into wider digital programmes where necessary

## Regional Projects and Programmes



- There must be collaborative working and MDT approaches with other organisations
- Enhancements to the links with digital and wider programme leads

## Representation



- Lots of forums in the space so need to be clear on purpose
- If the Mental Health Digital Forum were to run again, there needs to be clinical **AND** digital representation

## Regional Engagement



- Not yet addressed in some areas
- Desire to have the same transparency of mental health waiting times as is seen in acutes

## Clinical review of standards



- Improved data analysis capacity needed
- Effective communication to colleagues about the reasons for collecting data needed

## Data Quality



# Summary of key themes

Only act at a regional level where it adds value/ work cannot be done at national or local level

The mental health system spreads wider than the NHS (e.g. Housing, Local Authority, Voluntary Sector) and all of these need to have a voice to work effectively together

Sharing best practice between areas would be beneficial

Improve the linkage between digital and mental health teams

Inconsistent funding slows momentum

## Suggestions for regional support

- Facilitation of **knowledge sharing and best practice** across the region
- **Relationship building** to enhance links between providers, digital and mental health teams
- Support to provide an overview of all work, create linkages and **build on existing programmes** at scale
- Someone who **understands mental health data**, the need for free text and how this can be dealt with for interoperability
- Support to **implement transformational expertise** in long term positions (e.g., BA, UCD support)
- Support to **review and assess tools** at scale
- Identifying, signposting and supporting applications for **funding opportunities** to drive developments



# Any Questions?



# Next Steps

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