

NHS READINESS
Integrating & Commercializing Digital Health Technology
Knebworth Park Hotel 27th February 2019

I attended this seminar because I sit on the steering group for the Electronic Medication Optimization Pathway (EMOP) with Jeremy Dearling and hoped to learn more about how the NHS interfaces with digital technology developers. Although I have a somewhat dated company computer background, I cannot claim to have really understood all of the statements about technology made at this event!

Stuart Thomas introduced himself as Sector Support Executive of The Localised Enterprise Partnership (LEP) of the Hertfordshire Growth Hub, who are one of 35 Regional Growth Hubs. He said that 82% of digital technology developers benefit from the advice and support from their organisation. The Department of International Trade used to provide 100% of funding for suitable projects but now it is more like 30%. There is however £79M government funding for detection of disease. There is also funding for Low Carbon Workspaces such as LED lighting and thermal insulation of facilities.

Mark Otto Smith introduced himself and the Economic Growth & Innovation Program of EAHSN. He mentioned the Mental Innovation Exchange and Small Business Research Initiative (SBRI) for information guidance and support and in particular the development of the MyCOPD APP to support Chronic Obstructive Pulmonary Disorder. NHS England often use Innovation and Technology Payments to fund medical software developments so local Clinical Commissioning Groups (CCG) do not have to pay individually.

Les Sweetman (Central Midlands) and Jasbinder Sandhu (East of England) who are heads of Digital Technology for NHS England showed how Digital Solution Providers can best engage with the NHS. Every STP has a Local Digital Roadmap. Mid & South Essex STP has been assigned £8M to make all staff computer systems identical. The Digital Revolution Outline Framework has been developed and can provide CCGs with funding for IT innovations under the Health Systems Support Framework (HSSF).

Unfortunately, NHS funds are not allowed to be carried over from one financial year to the next. They recently had to quickly spend £23M in the last 6 weeks of the financial year!

Data on hospital waiting times is already available on the main NHS computer systems so developers can use this as part of their digital solutions together with vehicle fuel economy calculations for the projected trip to an A&E department.

The NHS is being challenged because between 2017 and 2027 there are expected to be an additional 2 million people over the age of 75. NHSX is a working group attempting to bring all NHS digital organizations together.

Vikesh Tailor, who is the Regional Interoperability Lead for NHS England talked about National and Trust Interoperability requirements for digital health providers.

The NHS requires that all new applications have an Integrated Digital Care Record and suppliers must provide an Open Standard strategy and programming structure. They must also use an Application Programming Interface (API) as has been adapted by banking, insurance and transport sectors. The API sits between the Client and the Supplier. The NHS has adopted an international standard for API called

Fast Healthcare Interoperability Resource (FHIR) which is colloquially pronounced as “FIRE”. Very few existing systems are yet compatible with FHIR.

One example is CareConnect which is driven by DigitalHealth London Accelerator Network (part of the Interopen Community) which provides a Local Health & Care Record (LHCR) and allows a consistent exchange of information between the patient and their health care professional. This is on trial at five exemplar sites including London, Humberside and Manchester. LHCR's are locally delivered but nationally supervised.

Marcus Hinde from NHS England explained about the NHS Apps Library on the NHS homepage which only recently went live at <https://www.nhs.uk/apps-library/>

This already contains about 80 validated Apps and portals and there are 110 APPs in the review pipeline. The validation process has resulted in a 230% increase in visits to these approved Apps on the Apps store. The NHS has a number of approved Apps assessors who use a Digital Assessment Questionnaire which checks on eligibility, registration, evidence of outcomes etc. They are recruiting more authorised Apps assessors. They are working with the Apps store to provide identification in the Apps store of the Apps which have NHS approval. There are estimated to be something like 250,000 commercial Apps already developed which are relevant to health so screening these for suitability is an essential process.

Clinical Commissioning Groups (CCG) can fund development of some Apps so when we download the App it is free to the patient at the “point of care”. It was not clear if a Mid Essex CCG sponsored App would be freely available to patients out of their area.

Paul Osman East of England Citizen's Senate

4/6/2019 10:52:00 AM C:\Users\paulo\Documents\Word Main Directory\Health & Medical\Citizens Senate\NHS Readiness Integrating Health Technology in the NHS.docx