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Adoption of the ORUK Standard across Lancashire & South Cumbria health and care ecosystem

Linda Vernon, Head of Digital Empowerment

ORUK Steering Group, 9th Sept 24

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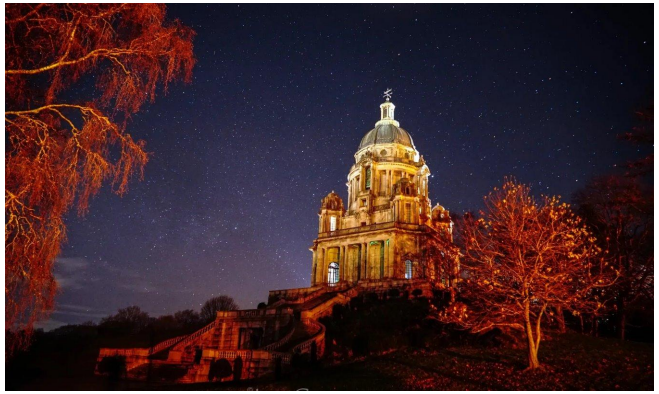
Lancashire & South Cumbria …

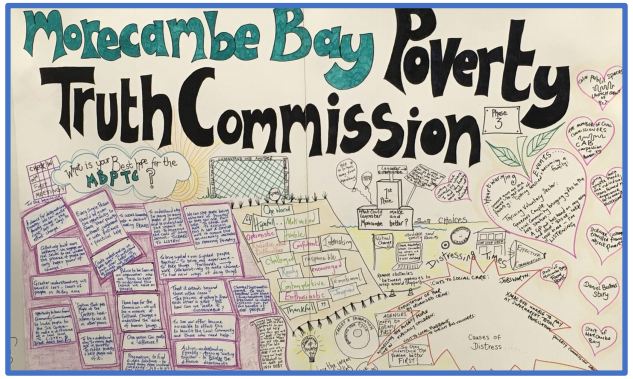
Blackburn with Darwen Borough Council

Lancashire County Council

Westmorland & Furness Council

Blackpool Council
BUILDING A BETTER COMMUNITY FOR ALL





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The health and well-being of our population

We face a number of challenges in Lancashire and South Cumbria which have a direct impact on people's health and well-being.

Approximately 40% of ill health in Lancashire and South Cumbria is caused by smoking, not enough exercise, being overweight and taking illegal drugs.

13% of people live in fuel poverty and are unable to afford to heat their homes, which is higher than the national average of 10.6%

Nearly a third of our residents live in some of the most deprived areas across England

18.5% of adults smoke. The National average for England is 17.2%

Only around a fifth of adults are meeting the recommended levels of physical activity

Between 12% and 38% of children are living in poverty compared with the national average of 30%

Digital & Data Strategy 2024-2029

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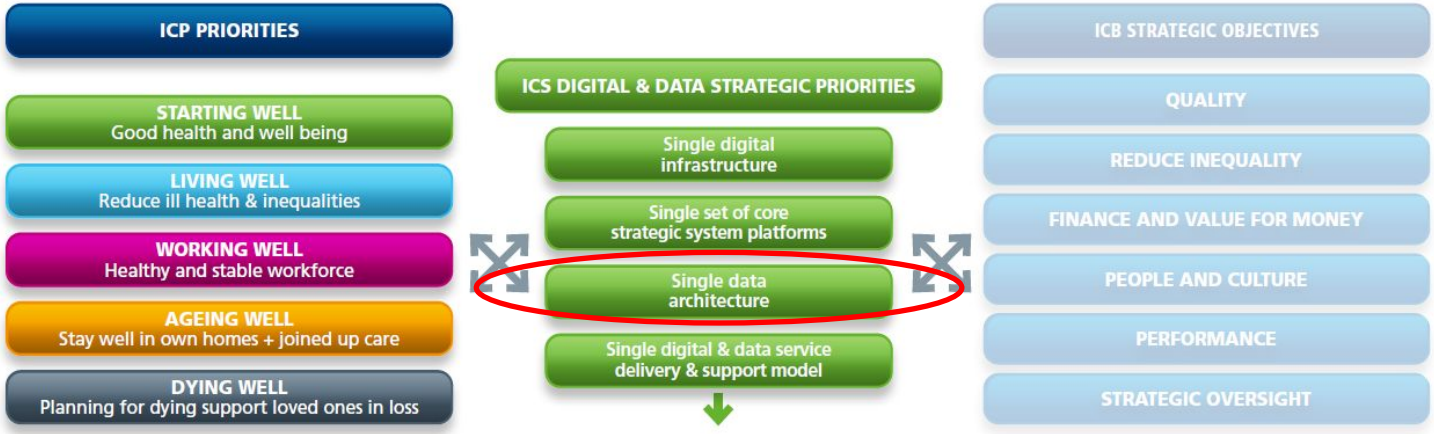
3. DIGITAL & DATA STRATEGY OVERVIEW
Alignment with ICP Priorities



DIGITAL AND DATA PRIORITIES SUPPORT ACROSS THE ICP WHOLE POPULATION LIFE COURSE APPROACH

Good health and well being

A single set of core care systems will include maternity, neonatal and child health services that enables the delivery of high quality services to children, young people and their families focused on their specific health and well-being needs.

As many of these services are delivered in community, a single integrated digital infrastructure enables high speed access to systems from any location

Reduce ill health and inequalities

A unified approach to data architecture, platforms, skill sets and services will allow the system, Places and Neighbourhoods to use population health data and intelligence to increasingly understand the cause and effect of health and care challenges faced by different communities, and share solutions that can be effective in the long term in prevention

Healthy and stable workforce

Utilising data in the single data warehouse and information from core care systems will enable proactive health and well-being services to be offered to working age adults and young people through primary care, VCFSE and local employers.

Stay well in own homes + joined up care

Our core platforms (such as telehealth and shared care record) will enable older people to remain independent for longer through reduced deterioration and support delivery of a coordinated package of care across multiple services focused on their specific needs.

Planning for dying support loved ones in loss

Our core care systems will support sharing of appropriate information across services, including end of life care choices, to reduce repeat requests for information at this difficult time for individuals and their families

7. STRATEGIC PRIORITY 3 - Single Data Architecture

Our Ambition: By 2029 we will have a single set of data platforms and tools to support reporting, service planning, population health management, continuous improvement, research and innovation

DIGITAL & DATA STRATEGY 2024 - 2029

7. STRATEGIC PRIORITY 3 - Single Data Architecture

CASE STUDY:
Digital Catalogue of voluntary, community, faith and social enterprise (VCFSE) sector services

- **The challenge:** There are multiple but ever-changing services provided by VCFSE organisations that are available to people in need across the system. Up to date records of them are critical to underpin any prevention ambition to be able to refer people into community support. However, it is a significant overhead to create and maintain multiple up-to-date and accurate views.

  Historically, up to half of on-line service information is inaccurate and there is significant effort invested by individuals and teams networking mainly via emails to remind each other and source specific advice on what is available. Our population were missing out on services that could support them and resources are wasted tracking down what is available and to whom, at any given point in time.

- **What we implemented:** A Digital Catalogue, accessible by any frontline team through various digital mechanisms, which provides a single searchable up to date source of services and contact information. The information is maintained, standardised with an open data standard (Open Referral UK) and assured through a central function – thus sharing this overhead between partners. There is also standardised reporting to enable monitoring and maintenance of data quality and identification of potential gaps in service provision, informing future commissioning decisions.

- **Impact:** 3500 service records have been created from 350 providers – with this information being updated / checked every two months. The information is being re-used by employees from over 15 separate service areas and organisations, with the information also being used to update 3 other Directory solutions. Accuracy has improved from 56% to 97% and 80% of users report a better experience. More people (both care providers and service users) can find out about current local services, increasing their support networks and access to early interventions, increasing their positive experience and ultimately supporting better long-term outcomes.

- **How my day has changed:** "The greatest value of the Digital Catalogue programme is knowing that the information is being checked and maintained. It is a more efficient process to search for and find appropriate support and the team feel confident to signpost people into identified support offers because they know the service information is still relevant and accurate." Social Prescribing Team Coordinator

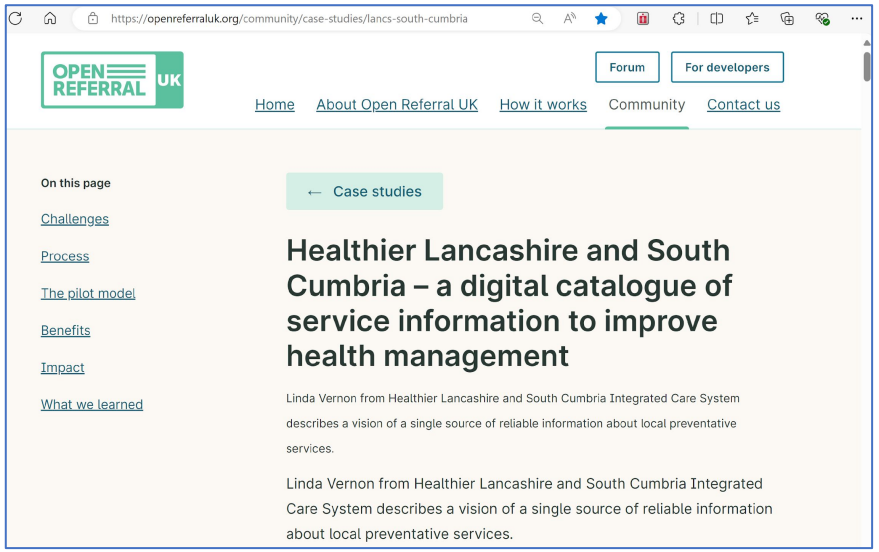
- **How we will continue to make progress:** Information can be re-used into any process or tool as required. This could include therefore re-using the information to support chatbots, new apps, online triage, as well as updating any web-pages (where these are currently updated manually). and can be embedded into PEP functionality. The model can expanded to cover "Information and Advice" as well as referring to local groups and services.

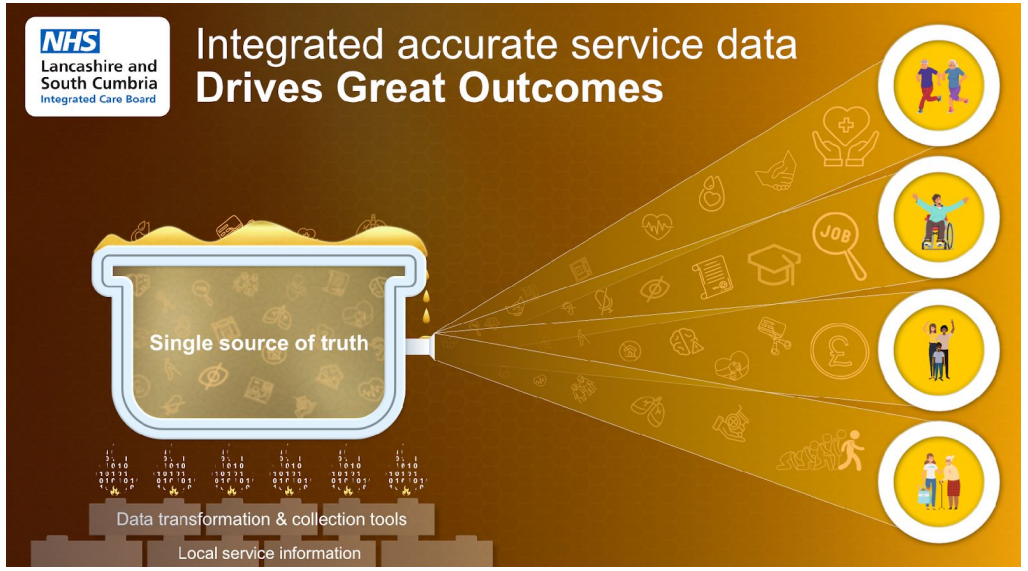
  A big focus for 2024-2025 is considering how the tools can be direct citizen-facing. A pilot version related to Childrens Services is in development for Summer 2024, alongside planned linkages to clinically governed best practice advice related to family and child issues.

A single data architecture across the system will enable enhanced access to data to support system level pathway design and service transformation together with a Secure Data Environment that will support research and development of innovation partnerships with industry and academia to drive further innovation.

ORUK adoption in LSC …

- "The Digital Catalogue"
  - single version of the truth
  - Re-sharing of data
- Personalised care agenda
- Funding
- Leadership
- Benefits
- Slow burn – low-hanging fruits (and some challenges)





Problem Statement

- Currently, in excess of 600 stand-alone lists / directories pan LSC
- Experiences for professional and citizens users are very poor
- Self-care / empowering patients – is not being enabled
- No view of sufficiency / gaps (of 3rd sector offers) to inform strategic commissioning
- No reliable data-set for re-use into chatbots, self-triage, PEP, Apps

Opportunities

- Adult and Children's Social Care (inc SEND)
- Family Hubs
- Women's Health Hubs
- Patient Engagement Portal – PEP+ / NHS App, inc Set for Surgery / Waiting Well
- 'What's Happening Around You' directory
- CVD prevention app
- Lancashire & South Cumbria System Intelligence Service

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Data Collection

Assurance

Consumption

Service Providers

Have a choice of input tools or processes.

Service collection software

Entering information into an online tool

Open Referral Spreadsheet

Submot informaiton in spreadheet format

Online forms

Or using an online form

Management information

Reporting on data quality, common searches and gaps in service provision

Assurance

Data is checked monthly for richness, accuracy, and any duplication

Single Source of Truth

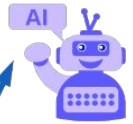
Data is transformed to Open Referral format and pulled into the Data-Catalogue

Updates and errors

All stakeholders are encouraged to alert the assurance team to errors

Language translations

Service descriptions can be translated into multiple languages as necessary



Chatbots

Citizen Apps

Existing websites and Directories

Service Finders

Front line worker systems

Citizens

Front line workers

Current project overview

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Projects

- Citizen Service Finder Account A social media account experience for people to set their preferences (area, needs, attending type, cost parameters etc) and then get updates as relevant services change / update their offers
- Re-use / integration of the information Deliver two sets of integration – to feed other tools, Apps or Directories from the Catalogue. Engagement with WHAY, MECC, West Lancs Local Authority, Haslingden Directory, Healthier Together
- Ongoing adoption and roll-out – Across Primary Care, Social Care and Police. Work with teams who wish to make use of the data or who want to use service finder
- Business case and plans for April 2025 Engagement through Place-based Governance to establish a robust understanding of the opportunity, define the business case and make decisions about how to continue to roll-out capabilities from April 2025.

Anticipated Outputs and Benefits

- System resource benefits
  - Less effort maintaining accurate records
  - Less time receiving updates (as we just access when we need it)
  - Less time looking for information when it is needed
- Health outcome benefits
  - Better experience looking for support
  - Increased trust in the information
  - Increased likelihood that people will access preventative support

2024-25 priorities

- Secure funding to continue to deliver existing projects until March 2025
- Engagement with senior leadership
  - ICB Directorates – Population Health, Primary Care
  - Health and Wellbeing Boards
  - VCFSE
  - Place-based leadership
  - Other sectors – police, fire, etc.
- Business case and plans for April 2025
  - Promote federated ownership of the model
    - ICB fund data collection software and coordinate programme
    - Place fund data assurance model
    - Functions and services fund ‘digital front door’ and any APIs
  - Governance – shared ICB and place / digital and non-digital to establish a robust understanding of the opportunity, define the business case and make decisions about how to continue to roll-out capabilities from April 2025.

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