



PWYLLGOR ARCHWILIO A SICRWYDD RISG AUDIT AND RISK ASSURANCE COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	18 October 2022
TEITL YR ADRODDIAD: TITLE OF REPORT:	Welsh Community Care Information System (WCCIS) – Management Response
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Executive Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Anthony Tracey, Digital Director

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

Following the release of the Auditor General’s report (July 2022) into the Welsh Community Care Information System (WCCIS), the following report outlines the main risks identified, main recommendations and a stocktake of the programme in the context of a changing landscape of the implementation of WCCIS within the Health Board.

Cefndir / Background

In December 2012 it was agreed that a Joint Procurement should be undertaken for a ‘Welsh Community Care Information System’ (WCCIS). Services will be commissioned by each Local Authority / Health Board / Trust by raising a separate Deployment Order under the Master Services Agreement held by Bridgend Local Authority which will establish a direct contractual relationship between the supplier and the Health Board. The contract duration for the WCCIS procurement was designed as being limited to, but available for a period of 8 years plus an optional 4 years as required.

As a result of a ministerial statement the Health Board included reference to the implementation and adoption of the WCCIS within the 2015 Integrated Medium Term Plan. Subsequent Board and Committee reports acknowledged, the ambition of the WCCIS Project was to provide high quality, people-focused, local, integrated care to ensure the whole system is safe and effective, with people receiving the right care, at the right time, in the right place, from the right person. This ambition was also reiterated within the ‘A Healthier Mid and West Wales,’ where the transfer of care to the community is paramount for the future health and well-being agenda being progressed by the Health Board. Underpinning this approach is the expectation that digital solutions need to be delivered which integrate and share information between services and act as an enabler to transformational business change.

For Hywel Dda, a pilot of the WCCIS system was agreed to enable Ceredigion Community Nursing and integrated Teams to ensure services and support for individuals, families and communities were more effectively planned, co-ordinated, and delivered. It was aimed to

support information sharing requirements, case management and workflow for all organisations. Ceredigion Local Authority is the only Authority within the Health Board boundaries that has taken WCCIS, and expressed an interest to work with the Health Board on the Health element of the system in the pilot.

In August 2017 the Health Board received an outline business case for the implementation of WCCIS within Hywel Dda in pilot form. This pilot implementation would run for 12 months within signing the Deployment Order. The initial deployment order is for community nursing and integrated teams only as proposed by CareWorks (the systems supplier, now changed to Advanced), however the Health Board had the ability to define what they consider to be an integrated team. Mental Health and Therapies were excluded unless part of an included integrated team, and a separate deployment order will be needed for implementation to any other area.

The Committee should note that it was always the intention of the WCCIS Project to begin with the implementation within the Community Nursing sector as they do not have any digital collection systems and would benefit the most from implementation. Mental Health teams have a robust clinical reporting system, as do Therapies for the secondary care elements. As stated above, if Therapies are in the community and are part of the in scope integrated teams, then they will be included within the pilot.

Whilst the Health Board supported the adoption in principle of WCCIS at the January 2018 Public Board, and at an In Committee session of the November 2018 Board, the position statement noted that the business justification case has not been approved due to the high costs involved. Therefore, subsequent papers to Health Board committees looked to gain the necessary assurances, to consider signing a deployment order and subsequently implement WCCIS within pilot form.

ARAC should note the approval was given to rollout only to the contracted level of users, and that the pilot will be utilised to provide an evaluation for the full business case which will be presented to subsequent Committees for a decision on whether to extend the pilot and move to full implementation within the Health Board.

Asesiad / Assessment

Audit Wales published a report on the Welsh Community Care Information System (WCCIS) in October 2020, where they found that implementation and roll-out of WCCIS was taking much longer and proving more costly than expected. Despite efforts to accelerate the process, the prospects for full take-up and benefits realisation remained uncertain. Some important issues around the functionality of the system, data standards and benefits reporting were still to be fully resolved.

As a direct response to the 2020 Audit Wales recommendation a WCCIS Strategic Review was jointly commissioned by the WCCIS SROs and Welsh Government and commenced September 2021. The Strategic Review recommended a series of actions to 'reset' and 'course correct' the programme. The Welsh Government announced further funding for national programme management to take this work forward. It will also provide further financial support to Health Boards and Local Authorities to support implementation

The approach taken by strategic review was to utilise the UK Government's 7 lens of Transformation¹ as the underpinning review framework, to develop a picture of the complex

¹ [The 7 Lenses of Transformation - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/the-7-lenses-of-transformation)

transformation exploring a number of key themes. One of the main themes was the 'people' element, which looks to explore the stakeholder management, culture, and behaviours of the programme. However, the review did not take into account some of the system functionality issues which have been expressed both in the Auditor General's report and by users within the Health Board.

Current Position Statement

WCCIS is currently used by about 258 staff consisting of District Nurses, Porth Gofal integrated team and Children's Disabled Health Team in the Ceredigion area, Flying Start teams in both Carmarthenshire and Pembrokeshire with plans in place to implement generic Health Visitor and Looked after Children teams shortly. Other teams are limited to paper based or use of spreadsheets to manage and report caseloads although work is being undertaken to look at making use of the Eclipse system used in Pembrokeshire and Carmarthenshire.

The following is a position statement from a Hywel Dda perspective against the summary key issues outlined within the Auditor General's Report:

Key Issue 1

Relevant to my specific recommendations, the Welsh Government commissioned research to gather views from users and others about the performance and functionality of the system. The survey findings in June 2021 highlighted the system was having a more negative than positive impact on most users' ability to do their work. Preceding the Strategic Review mentioned above, there was also a programme assurance review which concluded in November 2021 and a further one scheduled for November 2022. Digital Health and Care Wales (DHCW) also completed an exercise to learn lessons from the contracting approach for WCCIS

Response

The Health Board would fully support the approach detailed above and would agree that there have been a number of negative experiences from staff around the use of WCCIS within Hywel Dda. As result of the issues the Digital Director wrote to the programme director for WCCIS outlining the following specific user issues. Please note that this is not a full list of the user issues. The local WCCIS Programme team have held a number of workshops with the users and currently hold an issue log which is reviewed at each WCCIS Steering Group.

- Within Community Nursing, Health Visitors and Community Therapies services there remains a level of support for WCCIS and a desire for other teams to begin using the WCCIS system now that performance of the system appears to have been stabilised. However, HDUHB is reluctant to bring new users on to WCCIS and to increase licence numbers until the Mobile App and Integration is available. The Mobile App and Integration are approximately 26 months behind the original delivery date.
- The local WCCIS Programme team are currently working through the specific issues that have been raised by the community district nurses, as they have highlighted that the system without mobile integration, and contemporaneous note taking the system is not fit for purpose.
- Community nurses do not have the time, nor should they need to make written notes at the time of the patient encounter and then transcribe these notes into WCCIS at a later time and while the scanning into WCCIS of hand-written, paper-based documentation is possible, linking the scanned image to the patient record is time consuming and limits the ability to extract useful data for reporting and analytics from the system.

- District nurses need to be able to refer to existing information about a patient and without mobile or offline access to relevant patient information or documents the district nurses need to take paper notes with them. The paper file for a patient needs to be as complete as possible which means that the paper files need to include any documentation that is created on WCCIS which leads to printing from WCCIS to go into the paper file.
- Access is also needed to non WCCIS documents which are created electronically and form part of the 'single patient record.' Documents such as Outpatient Clinic letters and Discharge Advice Letters cannot be accessed via WCCIS as the integration work has not been completed.

Key Issue 2

Ongoing rollout has seen two more local authorities 'go live' with the system since my report while one further Health Board has now signed a 'deployment order'. However, it remains the case that patchwork approaches to implementation mean that even where the system is live, it is not being used to its full potential or on a consistent basis. We have updated our interactive data tool which provides further detail on the overall roll-out position across the 29 organisations.

Response

- Carmarthenshire and Pembrokeshire Local Authority have made it clear that without significant improvements in the Local Authority functionality that they will not be migrating from their current supplier (Eclipse). This means that the original concept of WCCIS, of the potential benefits of a shared electronic record across Health and Social Care will not be realised. In order to progress this approach a piece of work sponsored by the Integrated Executive Group (IEG) has begun. The Digital Teams within Health and Social Care have been working on the development of a Regional Data Lake (RDL) which will look to develop seamless integration and regional interoperability by leveraging the data from the systems and making it available to practitioners.
- The project will be to develop a cloud-based solution where a Hywel Dda regional consolidated, chronological view of the services will be provided on any citizen when needed. This requirement covers Health and Social Care and will potentially expand into other areas such as the third sector, Education and Probation.
- The Discovery Phase of the project has been completed, and each of the Digital Teams is now working through the technical design of leveraging the data from each of the systems into a regional data lake via robotic process automation with the NHS Number being the key citizen identifier. The proposed delivery date for a beta version will be November 2023.
- Whilst this development will not improve the functionality of WCCIS or deliver a system for the recording of data around a patient it will leverage the data from the system to assist with planning of services, and closer working between the health and social care teams.

Key Issue 3

Central support costs for the period to 31 March 2022 – excluding local costs to individual organisations and other opportunity costs – remain at around the £30 million expected at the time of my report, although the profile of those costs has changed. The Welsh Government has now committed a further £8.31 million for national programme support and support for Health Board and Local Authorities in accelerating implementation for 2022-23 to 2024-25. The Welsh

Government has agreed that this figure may increase to up to £12 million if required. The overall business case for WCCIS has not yet been updated, something that I recommended should happen in advance of committing more funding. The Strategic Review has also now recommended that the business case be updated

Response

Whilst this relates to the wider WCCIS programme and the need to update the national business case, the same principle will be applied to the local business case. As previously stated, the initial pilot licences of 400 have not been exceeded, and although requests have been made for the rollout of WCCIS into other teams, this would exceed the current licences, a decision has been made by the local WCCIS Steering Group that a further business case would be required. A paper was considered at the Agile Digital Business Group for the extended rollout of WCCIS. The Group concluded that following the outcome of the strategic review, and the updating of the national business that the adoption of WCCIS should be limited to only those licences already committed, until such time that the local business case based on the national business case can be presented through the relevant committee structure and the Board.

Key Issue 4

Key aspects of functionality continue to be delayed. Areas where work continues to be needed include Welsh-language requirements, mobile functionality and interfaces with other NHS Wales systems. As of June 2022, all these areas of functionality remain outstanding although mobile functionality is due to be piloted later this calendar year and most of the interfaces are also now expected by the end of 2022. When I reported previously, it had been estimated that the remaining updates would be delivered through to the end of 2021.

Response

The Health Board has raised similar concerns to the National Programme Director and also directly with the Executive Team of DHCW. The main functionality issues are:

- Lack of a mobile application
- Lack of integration with the Enterprise Master Index, Welsh Patient Administrative System, Welsh Clinical Communications Gateway and Welsh Clinical Portal. Please note that this is not an exhaustive list of integrations required
- Lack of contemporaneous note taking the system

At their recent meeting with DHCW the Health Board have asked for a confirmed date for the delivery of the mobile application, however the programme and supplier are not in a position to supply a date.

Key Issue

System performance issues became particularly acute during Autumn 2021 but overall system performance has since stabilised.

Response

Although the performance issues have stabilised the navigation throughout the system is not user friendly and has not been designed with the user in mind. The feedback from the service is that the system is unintuitive, and sometimes unresponsive

Key Issue

National data standards work has continued but is still not complete. Development of these standards is key to realising some of the benefits of WCCIS.

Response

The Health Board would agree with this observation. However, the ability to create local forms has allowed the rollout within the agreed teams to continue. Significant data standards work is still required across the other disciplines such as Mental Health and Therapies. As we are not planning to adopt within these disciplines the impact of this is minimal upon the Health Board.

Key Issue

The overall arrangements for reporting the benefits from WCCIS implementation, which have been the subject of discussion and review from the outset, have still not been resolved.

Response

The Health Board would support this conclusion. Whilst there have been benefits from the implementation, such as the introduction of digital infrastructure into the nursing teams, via laptops and smart devices, the use and digitalisation of their working practices has been delayed due to the ongoing issues of WCCIS. The Health Board are currently working with the National Programme to reengage with the benefits work, and business case development, however there is a resistance from staff to continue to engage with the product development without a tangible benefit for them.

Summary

The foundation of WCCIS and the concept of shared electronic record across Health and Social Care is still valid and will be the cornerstone of the Health Board strategy. However, the vision for WCCIS is still a long way from being realised, and as such means that the Health Board should look to explore alternative options. The deployment order was agreed in 2018, which means that the Health Board is out of contract in March 2023, however we have the option to extend for a further 3 years.

The Digital Transformation Programme within the Community setting has been complex, however the issues that have been experienced with WCCIS have hampered the continued improvement. To that end the Health Board is actively looking at a replacement solution for district / community nursing which will allow the flexibility outlined in the feedback from user. The system will need to be user designed to allow ease of use and provide the reporting and the interoperability required for the strategic direction of the Health Board. There are examples where this approach which have been implemented such as the London Care Record², the Great North Care Record³ and the Dorset Care Record⁴. The Digital Director along with the WCCIS Programme Lead will be looking to provide an options paper to the Health Board within the next 6 months, with proposals on a way forward to ensure that there is continuity of service. The WCCIS Steering Group which has representatives from all services within the Health Board will be used as the platform for discussion.

Argymhelliad / Recommendation

The Committee are asked to

- **NOTE** the current position of WCCIS within the Health Board
- **NOTE** the responses to the Auditor General's Report

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

² [The London Care Record - South East London ICS \(selondonics.org\)](https://selondonics.org)

³ [Home - Great North Care Record](#)

⁴ [Dorset HealthCare :: Dorset Care Record](#)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	Not Applicable
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Risk Number 270
Safon(au) Gofal ac Iechyd: Health and Care Standard(s):	All Health & Care Standards Apply Choose an item. Choose an item. Choose an item.
Amcanion Strategol y BIP: UHB Strategic Objectives:	All Strategic Objectives are applicable Choose an item. Choose an item. Choose an item.
Amcanion Cynllunio Planning Objectives	All Planning Objectives Apply Choose an item. Choose an item. Choose an item.
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2018-2019	9. All HDdUHB Well-being Objectives apply Choose an item. Choose an item. Choose an item.

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Not Applicable
Rhestr Termiau: Glossary of Terms:	Included within the body of the Report
Partion / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Archwilio a Sicrwydd Risg: Parties / Committees consulted prior to Audit and Risk Assurance Committee:	Not Applicable

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	The resources to support taking forward the related business case are being quantified and finalised in order to determine related funding sources will be included within the Business Justification Case
Ansawdd / Gofal Claf: Quality / Patient Care:	Quality, safety and patient experience is a major theme underpinning the development of the WCCIS.
Gweithlu: Workforce:	The implementation of this system will impact on a wide range of community staff across the organisation.

	Change management will be a key element of the work to support staff through this change. The workforce resource to prepare, implement and maintain this system has been clarified as part of the developing BJC.
Risg: Risk:	<p>Hywel Dda UHB currently has too many systems / processes and care information that are not fully integrated in a timely or consistent way. There are risks associated with the management of care and the transfer of patients between services.</p> <p>Some services do not have electronic systems to capture patient information, reliant on paper which is not accessible across the organisation or to partner agencies.</p>
Cyfreithiol: Legal:	None at this time. All information governance issues are considered nationally with local support and now through Hywel Dda Steering Group.
Enw Da: Reputational:	The introduction of WCCIS will strengthen and develop local partnership working across Health & Social Care.
Gyfrinachedd: Privacy:	WCCIS will ensure that information sharing processes are adopted by all services and access to patient information instant and consistent within one system, in full compliance of the Data Protection Act and the General Data Protection Regulation (GDPR)
Cydraddoldeb: Equality:	Development of the WCCIS to provide a single All Wales Integrated Health and Social Care IT Solution which will ensure equitable access to all patient clinical details, regardless of location in Wales or source of information