



# **Health and Social Care Information Sharing: Progress and Challenges**

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Chair, Information Sharing Board

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 **The need for information sharing**

# Public Service Reform



# Improving Health and Wellbeing outcomes

- More people living independently at home, in good health, for longer
- People have a positive experience of well-coordinated health & care services
- People using health & care services are safe from harm
- Health and Social Care staff have a positive experience of working in a good place



# Integration and collaboration

- Public Bodies (Joint Working) (Scotland) Act 2014.
- Children and Young People (Scotland) Act 2014.
- Legislation is driving the integration and re-shaping of services at delivery level.
- Demand for digital enablement of routine collaboration, multi-disciplinary team working and generally, access for authorised personnel to records held across health and care systems.



# Data Management in Scottish Public Services

- Data Vision
  - Data are used to support the delivery of outstanding public services.
  - Citizens feel confident that personal data are being shared responsibly to create better and more responsive services which meet their individual needs.
  
- Identity Management and Privacy Principles for data sharing
  - Only acquire and hold minimum needed for specific purposes
  - Avoid centralised databases of personal information
  - Control access to personal data on a needs led basis
  - Where record linkage is needed, matching is better than sharing persistent identifiers
  - Clear guidance on identifiers in common use, e.g. CHI, UCRN



# Health and Social Care Information Sharing Strategic Framework

## Vision

By 2020, digitally enabled information sharing solutions will be in place in Scotland so that everyone, including citizens, involved in health and social care can:

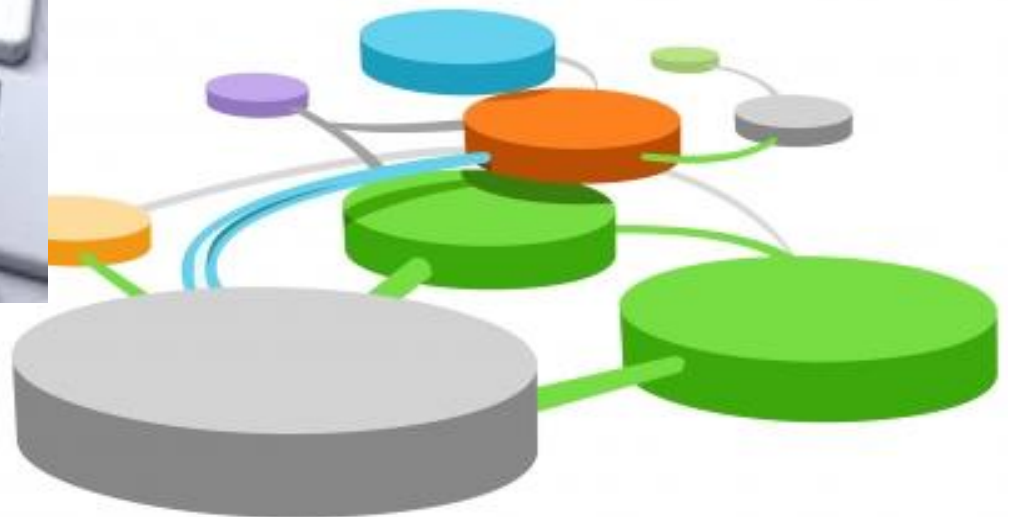
- access the services and information they require quickly and easily at the point it is needed, and in accordance with the law;
- provide or enter information once, which can then be reused proportionately;
- share information appropriately, with the relevant people, for efficient, effective and safe care;
- have a common understanding of the information they share and confidence in its quality, integrity and security.





# Business led ICT systems – the aspiration

- Modern designed for purpose systems - not IT silos
- Access at point of care for agile, multi-skilled teams
- Digital records and sharing to be the norm
- ICT supports common tasks, workflows & communication



# Reality check – how it feels at the frontline

- More demand, increased complexity
- Simple things – sharing documents / email- are difficult
- Continued reliance on paper and meetings
- Systems not intuitive to use
- Quality of equipment issues
- Staff act as manual systems integrators in the system
- Care providers do not access systems
- Doubts about privacy & confidentiality

*Anecdotal evidence suggests Social Workers spend less than 20% of their time with service users. (SOCITM)*

**exasperation** (noun)

A state of anger, impatience or great irritation





# **Role of the Information Sharing Board (ISB)**

# Information Sharing Board (ISB) Approach

- ISB is coordinated by Scottish Government eHealth Division with cross-public sector representation from Local Authorities, NHS Scotland, the Third Sector and the Scottish Government.
- 6 Themes of the *Health and Social Care Strategic Framework for Information Sharing, 2014-2020*:
  - Building Partnerships
  - Putting people at the centre of their care
  - Applying information governance
  - Developing and using standards
  - Exploiting information sharing infrastructure and technology
  - Working collaboratively to drive progress

<http://www.gov.scot/Publications/2015/02/2900>



# ISB Delivery

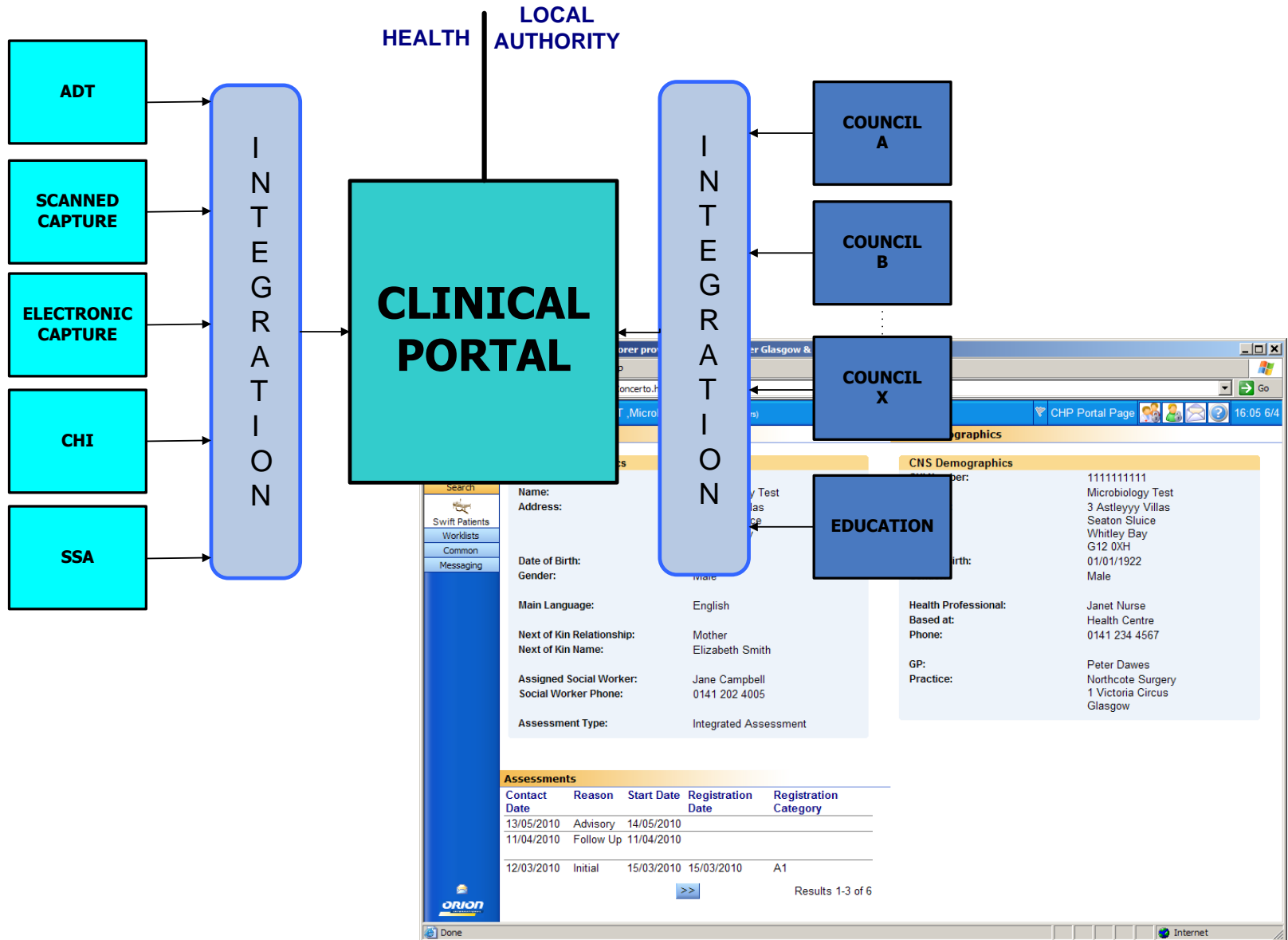
- Strategic Framework, 2014-2020
- National comparative study of information sharing architectures
- Information Sharing Maturity Model
- Information Sharing Architecture Framework
- Direct funding of local partnership plans (£3M over past two years, £1.5M in 2015-16)
- Support for specific national and local initiatives e.g. SEEMIS development for GIRFEC, Ayrshare store Lothian, GG&C



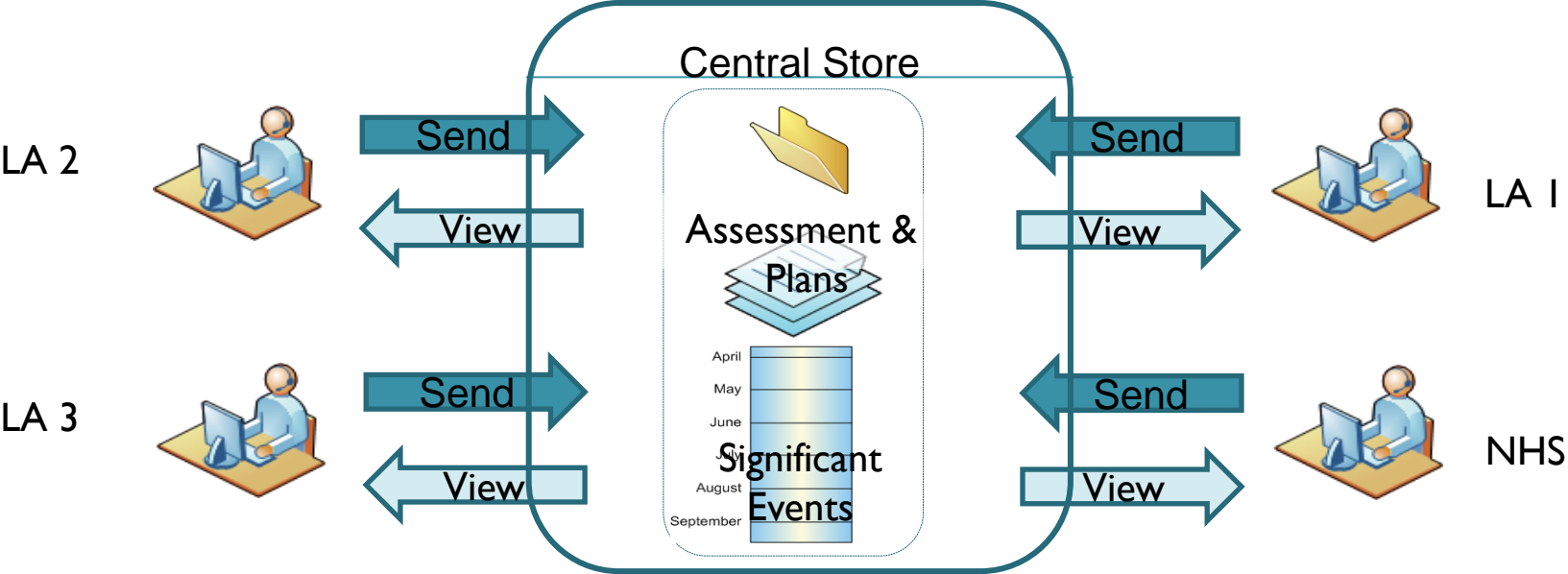


# **Work in Progress**

# Data Sharing Portal model



# Central store model





# Worked example: Children's Services

Child Health



Education



Social Work



AYRshare

North Ayrshire Council



Social Work



Education



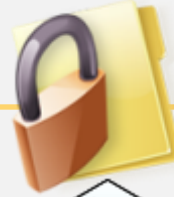
Social Work



Education

East Ayrshire Council

# AYRshare child's record



plans

September 12

M	T	W	T	F	S	S
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

chronology

matching

integration

notifications

South Ayrshire Council



Social Work



Education



Child Health

NHS Ayrshire & Arran

# Local partnership priorities

- Local Data Sharing Partnerships (DSPs) consist of NHS Boards, Local Authorities and may include other agencies including Police, Fire & Rescue, Housing and Third Sector.
- ISB funding supports a range of information sharing plans across all of Scotland's partnerships, including development of:
  - Multi-agency Portals;
  - Multi-agency Stores;
  - Shared ICT infrastructure and services;
  - Data matching services;
  - Messaging Hubs
  - Hospital to Home discharge;
  - Shared case management systems;
- Not uniform – prioritisation varies across GIRFEC and HSC integration drivers





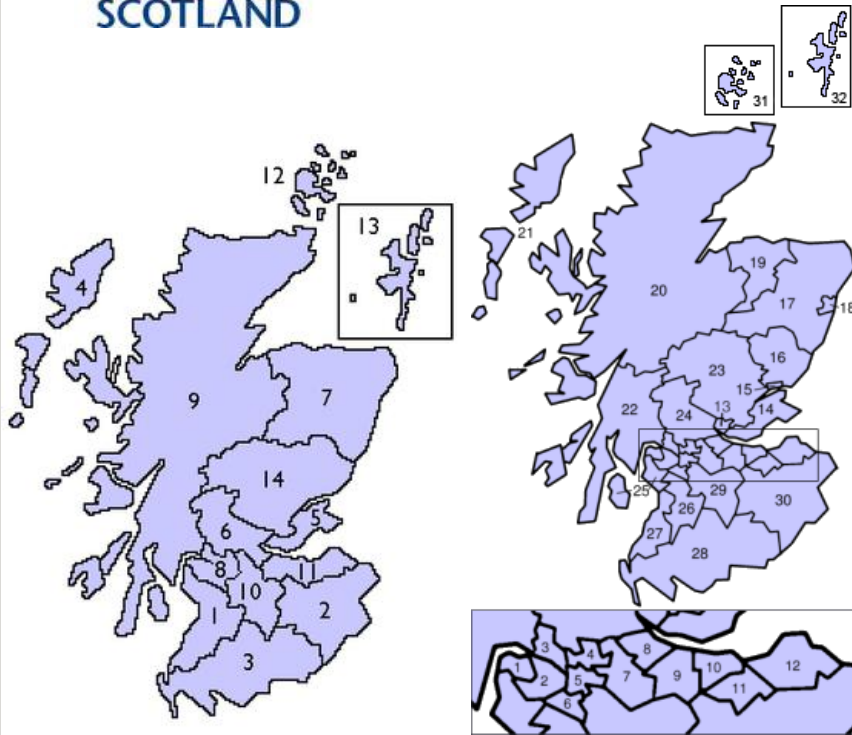
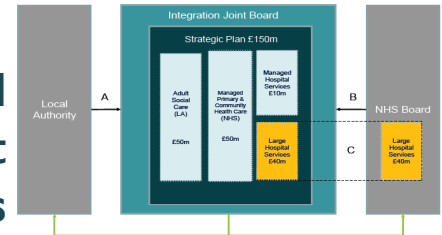
 **Challenges for  
information sharing**

# Organisational Landscape

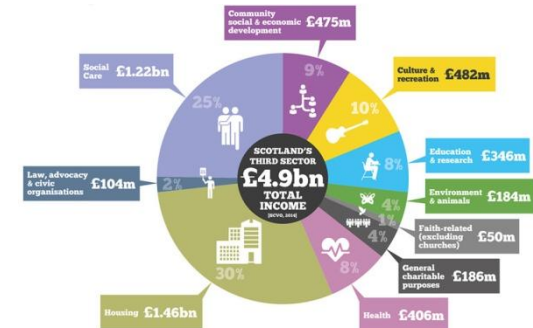


Local Government

Integrated Joint Boards



Third Sector



NB: Turnover of Scottish third sector charities based on SCVO classifications and using a sub-set of 2012/2013 charity income data from OSCR.



Housing Associations

+ non-geographic boards



... many other independent care providers

# Competing priorities for partners

- Integrated Joint Boards and children's services partnerships will need to set out how data sharing issues will be managed to aid professional decision making ... while also making arrangements for:
  - Finance and Resources
  - Partnership governance
  - Clinical and care governance
  - Communication and Engagement
  - Commissioning Services
  - Delivering local services
  - Managing Performance
  - Workforce development



# Multi-agency ... working?

- Shared purpose but different:
  - arrangements for governance and accountability;
  - organisational cultures;
  - forms of service provision;
  - approaches to information classification and data handling;
  - standards and styles for recording information;
  - roles and responsibilities for information governance
  - business processes, often only joined at the edges;
  - legacy investments in technologies that may not be compatible.





# Information as an asset



***“An information asset is a body of information, defined and managed as a single unit so it can be understood, shared, protected and exploited effectively.”***  
***“ (UK Gov)***

***“People and organisations can do nothing without information. Yet information remains the ‘Cinderella’ resource among those at the organisation’s disposal.”***  
***(SOCITM)***



# Digital ...Transformation?



**Work =**


The brief period during the day  
when I use old technology




## Risk of getting it wrong...

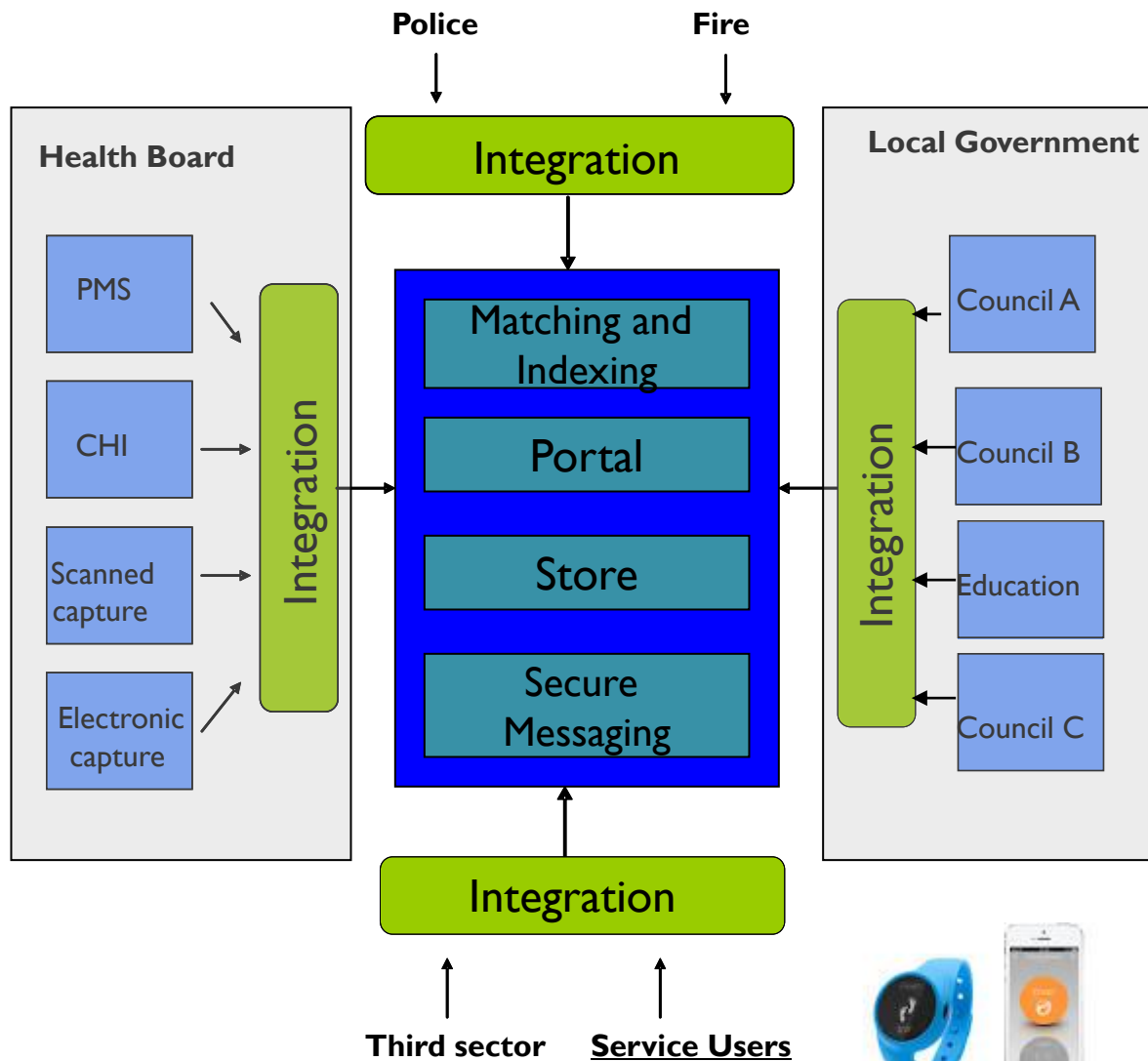


*“Many citizens are becoming increasingly concerned about what happens to their data... and are pushing for better protection and transparency.”*



 **Information Sharing  
Principles and  
Architecture**

# Technology challenge in sharing case records

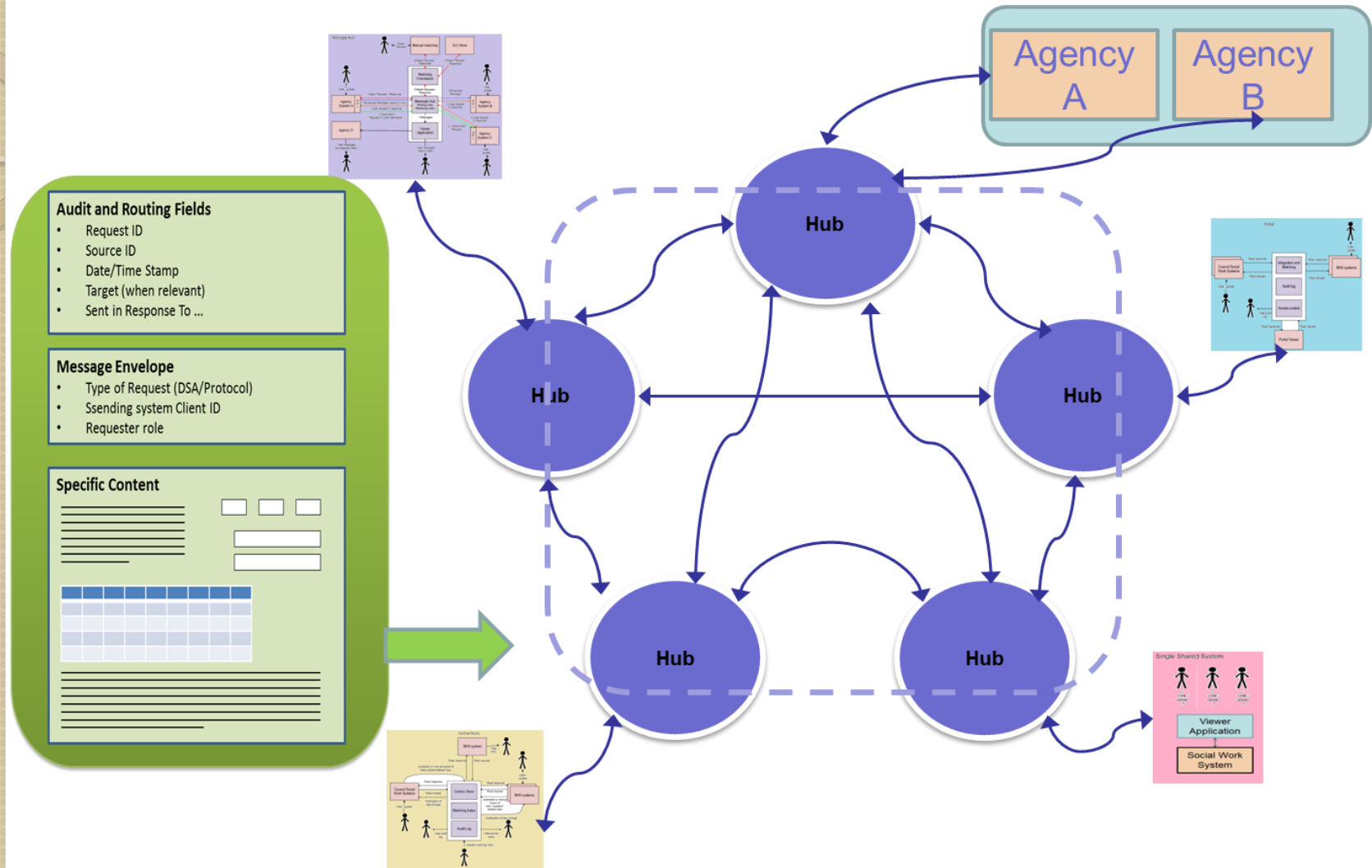


# Information Sharing Architecture

- Information sharing will be governed by a national Architecture Framework and comply with other applicable standards.
  - solutions will support the implementation of the Framework.
  - where practical, common solutions will apply.
- Aim is large scale interoperability - the ability of two or more systems to share, communicate and co-operate
- **Interoperability Working Group**
  - collaborative design of information sharing solutions;
  - oversees agreement on what could be implemented on a national or regional basis;
  - makes recommendations on standards and technology development to ISB and other governance groups.



# Information Sharing Architecture Vision



**Objective :** support integration of health and social care services by removing system barriers to information sharing and enabling messages to be shared across organisational boundaries.

# ISB commission on GIRFEC information sharing

- Children and Young People (Scotland) Act 2014 generates a number of new information sharing and handling requirements:
  - support for the Named Person Service;
  - recording and sharing of wellbeing concerns, chronologies, child's plan.
- Stage 1: Stock take of the information sharing landscape and the state of readiness of local partnerships to support new duties with technology enablement.
- Stage 2: Detailed analysis of processes, information flows and systems architectures to support GIRFEC implementation.

# Questions for the development of health and social care records management systems

- Is it appropriate to continue with multiple “main” case management systems?
- How important is fully integrated records and workflow capability?
- Can some services be consolidated onto one system?
- Portals are proving helpful, but what more is needed – beyond viewing shared records?
- Is a single, co-created and managed electronic record achievable?
- What critical fixes & improvements to systems that staff use today should receive priority?
- **What is the target state – at national, regional, local levels?**

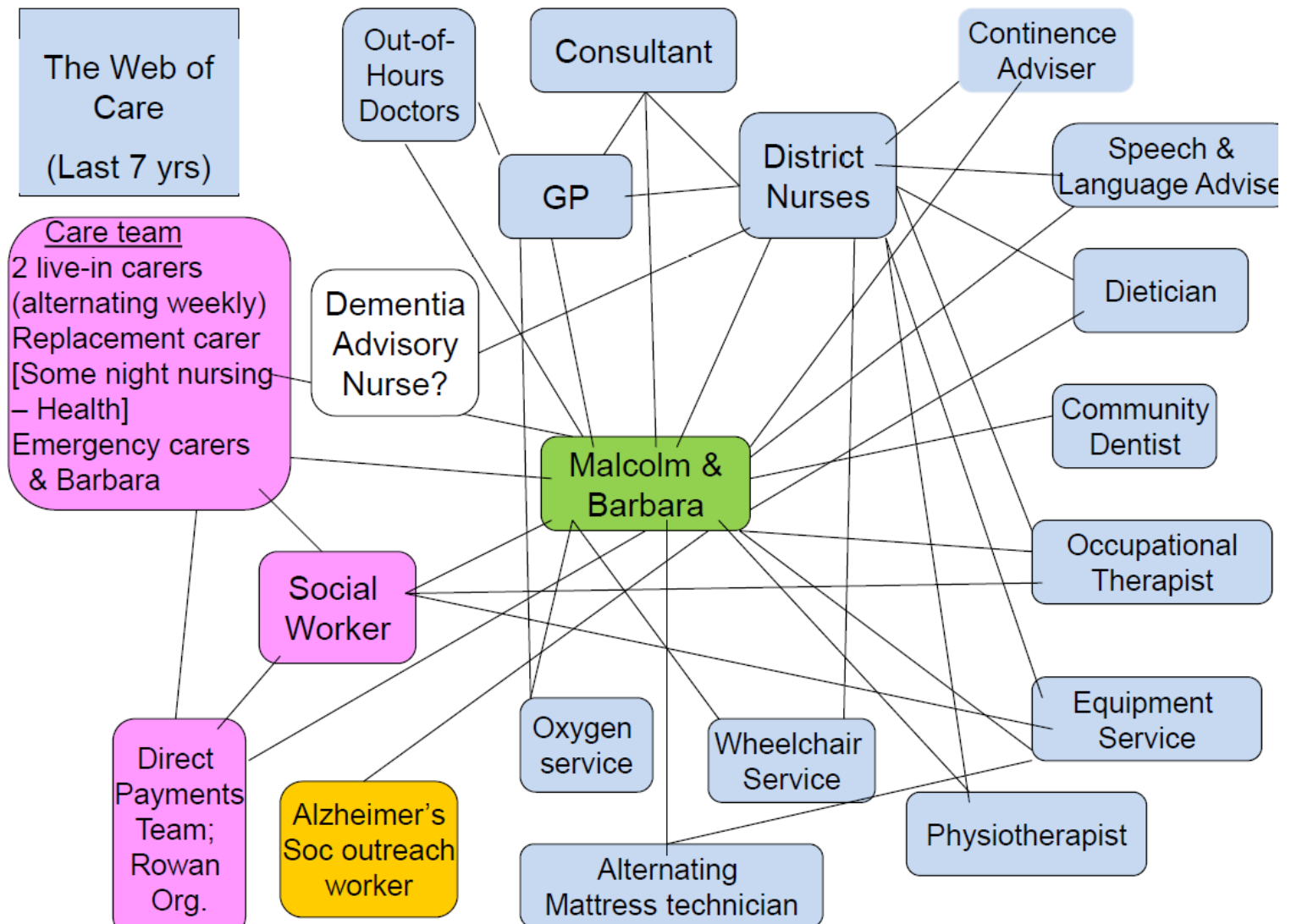






# **Information Governance**

# How do you put in place IG for all of this..?



# Information Management

## Case Based Information

(Structured data – delivered through portal views, shared stores or direct exchange)

- Shared Chronologies
- Shared Plans and Assessments
- Child Protection Messaging
- Alerts
- Shared Key Information

## Management Information

(Holistic view combining data from both health and social care)

- National Targets and Measures
- Real or near real time management information to assist decisions on services,
- quality and performance
- Resource allocation/budget management

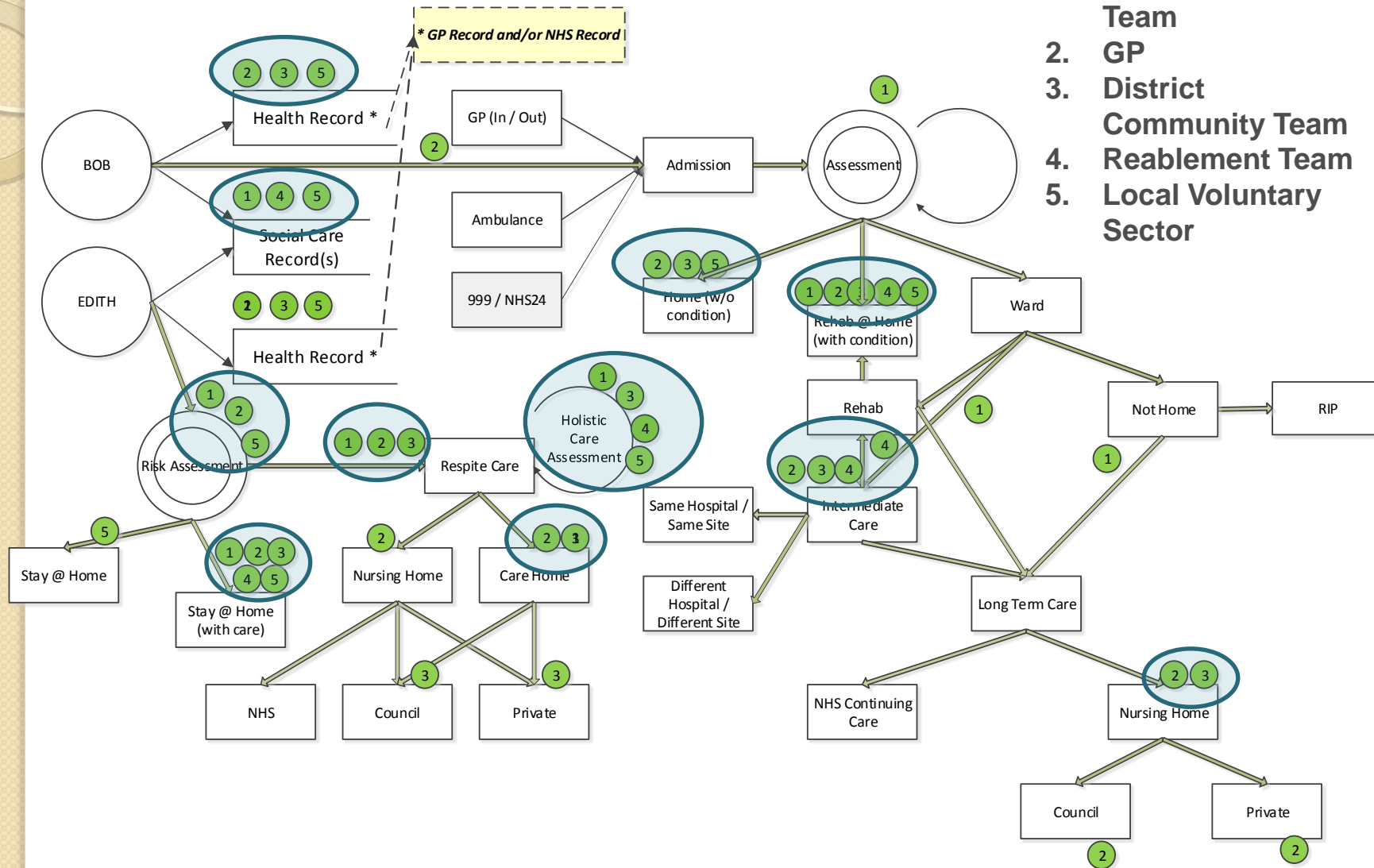
## Messaging

(Unstructured, but secure, conversations between professionals and with clients )

- Trusted directories
- email and other collaboration tools

# Information Sharing Agreements

- Touch Points**
1. Rapid Response Team
  2. GP
  3. District Community Team
  4. Reablement Team
  5. Local Voluntary Sector



Thank you to Neil Harding, Lockheed Martin, for permission to use

# Enablers of partnership governance

- Promote adoption of the Information Sharing Toolkit for Scotland
- National / regional templates for information sharing agreements
- Public Benefit and Privacy Panel
- NHSS Information Security Policy Framework
- SWAN Code of Connection/security policy
- Accredited safe havens for data



*A shared understanding of what we need to share*

## What does this mean for frontline staff?

- Confidence in the means of accessing and sharing information needed to do your job.
- Confident in explaining to service users what can and cannot happen to personal information they provide.
- Can say 'No' to inappropriate use of information or report a concern.
- Encourage service users to co-produce and manage as much information as possible.
- Trust and respect between those from different professions (e.g. clinician, social worker, community nurse, charity etc.) to handle sensitive data.

# A shared understanding of what we need to share

**“The duty to share information can be as important as the duty to protect patient confidentiality.”**

*To share or not to share, The Information Governance Review*

**“The proportionate sharing of information at an early stage, where practitioners have concerns that a person is at risk, applies just as much in the case of adults as it does for children. ... the Data Protection Act and guidance ... provides the governance framework to support the appropriate and proportionate sharing of information in a safe and secure manner.”**

*Information Commissioner’s Office*





# **Partnership Working**



# Principles for partnership working

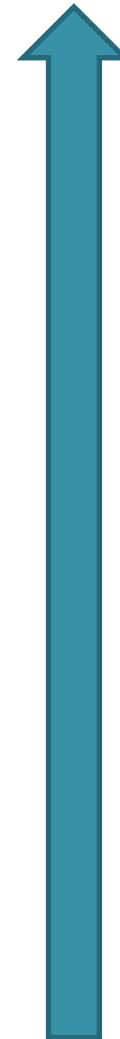
- Local partnerships to drive progress and innovation, collaborating with others to promote efficiency and sharing of good practice.
- Local partnerships to:
  - consider information sharing as a key strand of their integrated governance arrangements
  - work together in regional groupings where appropriate
  - build in links with national collaboration groups, such as the ISB
  - maintain close relationships with all of the other organisations with whom they will need to share information in order to deliver health and social care.



# Information Sharing Maturity Model

Partners will require arrangements & processes for:

- Information management
- Governance structures
- Supporting infrastructure
- Training, workforce development, and culture change
- Person-centred care planning and review
- Assessments, Requests for Assistance, Chronologies and Plans
- Professional Details
- Messages and Alerts
- Matching and Indexing



<b>Level 5</b>
<b>Optimised</b>
<b>Level 4</b>
<b>Managed</b>
<b>Level 3</b>
<b>Business Enabling</b>
<b>Level 2</b>
<b>Established</b>
<b>Level 1</b>
<b>Initial</b>



# **ISB Priorities**

# Information Sharing Board Priorities

- **Partnership Engagement**
  - Business analysis to define shared data sets and workflows
  - Local self-assessment and planning against ISB maturity model
  
- **Information sharing architecture and ICT plans**
  - Adoption of interoperability standards and tools
  - Local IM&T plans aligned to national architecture vision
  
- **Information Governance**
  - Frontline practitioners know and understand what information they can share and with whom
  - Consistent information governance guidance shared and applied

