






# NECS

# Digital Applications

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Enabling care homes to share available capacity in real time to help minimise Delayed Transfers of Care.

Find out more at  
[www.carehomes.necsu.nhs.uk](http://www.carehomes.necsu.nhs.uk)



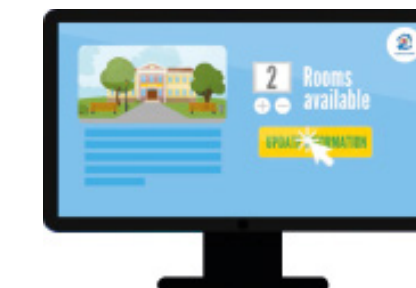
Capacity Tracker enables care homes to share their available capacity in real time and allows users to search for care home availability across England. The system helps people to make the right choice for them, ensuring they don't stay in hospital any longer than is necessary, when discharge from hospital to their own home is not possible.

Capacity Tracker can be used in the individual's own home when they need to choose a care home suitable for their needs.



Check for real time availability

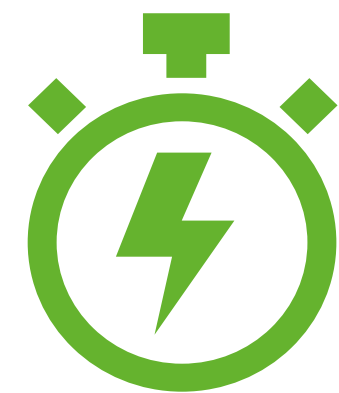
Update your information online



Monitoring dashboard



The Capacity Tracker helps minimise the number of Delayed Transfers of Care and reduces the amount of time discharge teams waste on ringing around care homes searching for vacancies. **Repeat phone calls become a thing of the past!**



It's **fast, secure and completely free** to care homes. It's simple to register too, with **rapid set up** that allows users to have **access within minutes**.



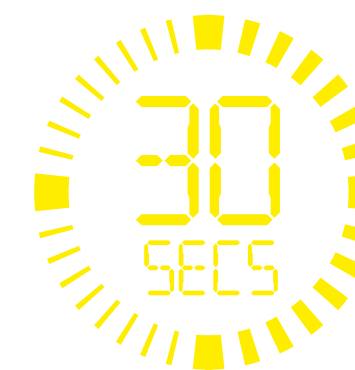
It provides a **view of care homes with vacancies** across the country, supporting effective discharge and reducing length of stay to hospital.



Users can **easily analyse** the nationally published Delayed Transfers of Care data for any hospital trust and local authority in England and benchmark DTOC performance and **track the impact** of initiatives designed to reduce delayed transfers of care.



The Capacity Tracker makes it **easier and faster** for care homes to fill their vacancies.



Care homes can **advertise their vacancies** across the country **within 30 seconds**. These instant updates can be made from any internet connected device, including smartphones and tablets.

## What do people say?

"The Capacity Tracker is the quickest and simplest tool I work with as a care home manager, yet it solves my biggest and most pressing business issue. It's allowed us to reduce vacancies, improve efficiency and forge new links with discharge teams in hospitals, so that they have our availability on a daily basis. Most important of all, my residents can find their care home quickly which reduces their stress and anxiety at a time when they need support and care. It makes a huge difference to families who are normally handed a list of homes and told to start ringing round. Hospitals and local authorities can signpost to homes with vacancies, which saves days sitting in hospital."

**Elizabeth Hancock, Fulford Nursing Home**

"I'm a huge believer in the power of technology to improve the way we deliver public services. The best digital innovations are often brilliantly simple and this new Capacity Tracker tool is a perfect example of the kind of services that we want to cultivate through the NHS Long Term Plan. I want to see more technology like this unlocked for the benefit of people across both health and social care and I urge more hospitals and care homes to sign up."

**Matt Hancock, Secretary of State for Health and Social Care**

"It's really important that all parts of health and social care systems work together... to make sure we can deal with the pressures over winter. Having a tool like capacity Tracker is a real welcome addition to how we manage the situation"

**HC One Director of Commissioning Care**

"Prior to Capacity Tracker, we were often inundated by calls from the hospital health and social care discharge teams for our bed availability. Using Capacity Tracker you can clearly see what is available"

**Marie Shalaw, HC One Care Home Manager**



RAIDR is our Business Intelligence tool, developed in partnership with clinicians, commissioners and providers to provide a single portal to help improve quality, safety and efficiency.

Find out more at  
[www.raidr.co.uk](http://www.raidr.co.uk)

RAIDR gives clinicians and healthcare professionals self-service access to robust, wide-ranging and up to date aggregate and patient level information. RAIDR offers strategically focussed insight for commissioners and the wider integrated care system, underpinning our Population Health Management approach through the provision of a range of risk stratification and population segmentation tools.



RAIDR has multiple dashboards covering a wide range of data sources including:

#### Primary Care Dashboard

Providing access to GP clinical data to identify atrisk patients using multiple risk stratification tools to facilitate targeted interventions and improvements in patient care and data quality.

Supporting linkage of primary care data to secondary care admissions and reporting for national and regional initiatives and programmes.

#### Secondary Care Dashboard

Providing timely access to hospital admissions, outpatient and A&E information, for benchmarking and trend analysis.

Data available at CCG Primary Care Network, locality and practice level, to provide detailed patient pathway timelines.

#### Integrated Care System Dashboard

Developed to meet the national drive for better management of the health of the population, providing population segmentation, risk stratification and performance metric monitoring to support the triple aim.

#### Prescribing Dashboard

Maximising engagement scheme achievement while tracking budget position and providing benchmarking for local and national indicators. Which all supports informed prescribing decisions.



**Urgent Care Dashboard**

Local 'real-time' admissions, discharges, A&E and out of hours contacts giving a system wide view of urgent care activity to improve patient management. Highlighting patients at risk of re-admission to hospital and identification of stranded patients at CCG and practice level.

**Quality & Performance Dashboard**

Performance indicators available at multiple levels including CCG, GP Practice and Provider Trust, with exception reports on key local and national indicators. Using a variety of published data sources to facilitate benchmarking across organisations, incorporating a wide range of printable reports to support performance management including regularly updated scorecard reporting.



**Finance and Contracting Dashboard**

Activity and budget monitoring to identify contract pressure points with single-click printable reports. Benchmarking of comparative spend per head of population with the the ability to drill down to patient level data.

**RAIDR 111 Dashboard**

National dashboard to support the Urgent and Emergency care system. Linking 111 activity data with secondary care data to provide practical pathway analysis.

**UEC Dashboard**

Designed to support the UEC-RAIDR App in giving system wide visibility on urgent and emergency care services and metrics. Providing a holistic view of both near real-time information and historic data to shows patterns of activity and escalation.



### One of our user experiences

“In a few clicks I was able to quickly identify nine patients with potential AF who weren’t being treated, I emailed staff in practice to check out these patients. Very soon afterwards their reply indicated that five could be discounted e.g. they had declined treatment, or the condition had resolved etc. but the remaining four are four potential lives saved. It’s not very often I can have that sort of impact in 30 minutes!”

James Gossow, GP

### Utilising RAIDR to investigate variation in spend

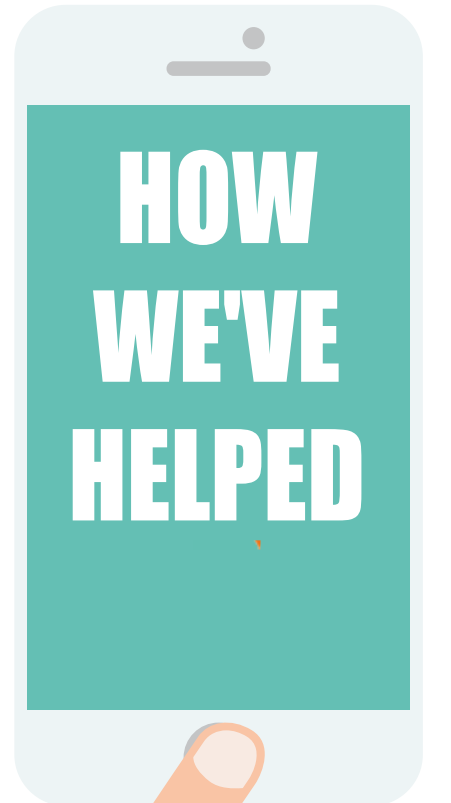
Looking into variation in spend across GP practices CCGs are able to identify those GP practices with high levels of inpatient spend per head. Using RAIDR’s Secondary Care dashboard it is then possible to investigate the potential causes of the variation e.g. individual patients with excessively and unexpectedly high costs but with a zero day length of stay.

### Analysis of frequent calls to 111 to identify vulnerable patients

GP practices are able to easily identify frequent callers to the 111 service and understand the reason for calling, in practice a number of these patients are identified as having mental health needs that the practices were not previously aware of.

### Utilising outpatient data to reduce referrals across a CCG

Using the secondary care outpatient data CCGs are able to conduct pathway reviews and look at methods for improvements to referrals through peer review, this has led to reductions in referrals by as much as 5%.



# RAIDR Case Study

## Atrial Fibrillation Detection and Protection Programme

Atrial Fibrillation is a leading cause of stroke.

NHS Hartlepool and Stockton-on-Tees CCG were high lighted as being an outlier within the Rightcare data for the detection of Atrial Fibrillation (AF) along with subsequent outcomes for this cohort of patients.

Late diagnosis, non-treatment, wrong treatment and under treatment of AF are all common.

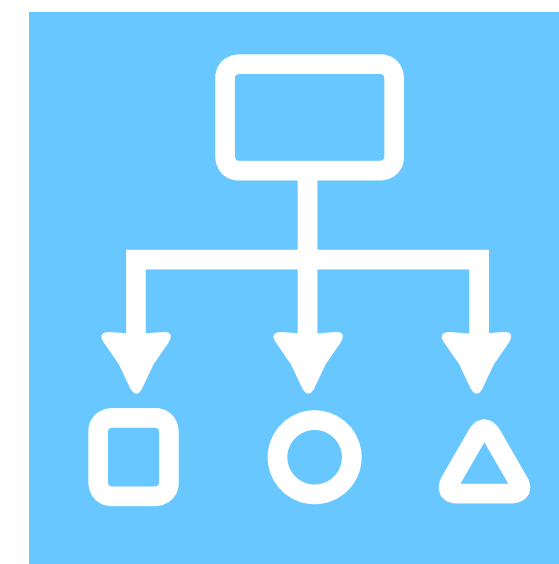
The total population of the area is 287,296 (Stockton-on-Tees - 194,803, Hartlepool - 92,493).



### Objectives

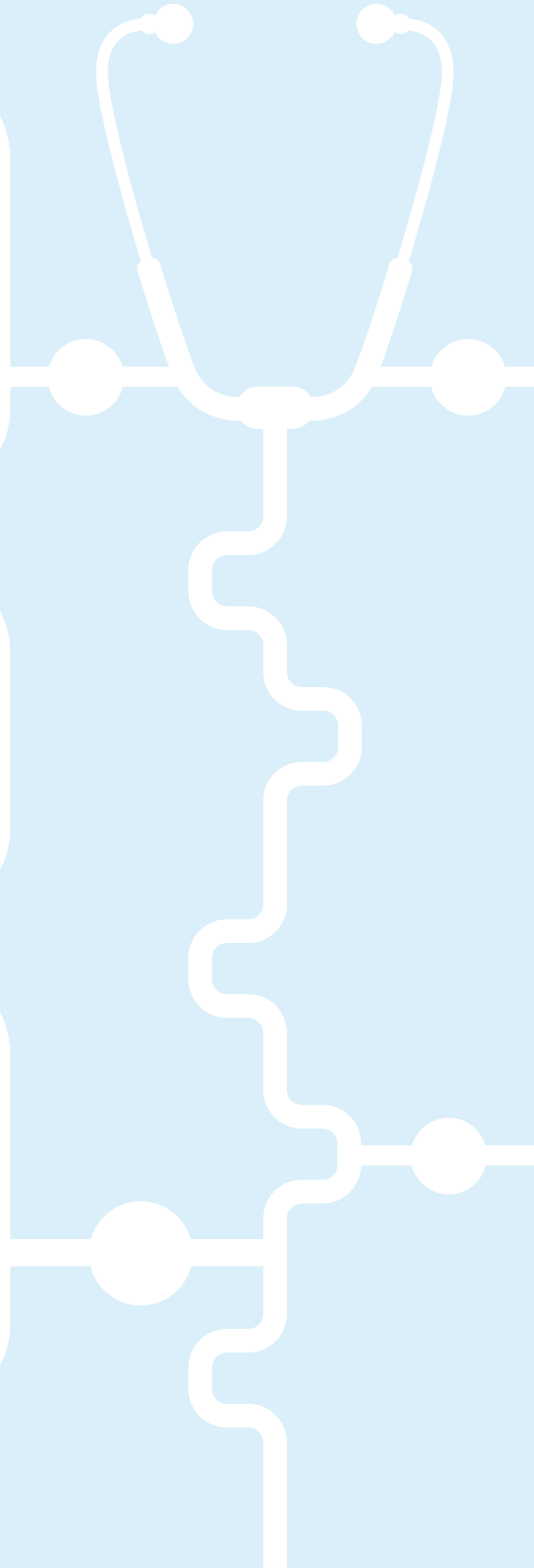
Improve AF detection across the Hartlepool and Stockton-on-Tees locality and the subsequent medicines management in the prevention of stroke or cardiac event.

Reduce the number of strokes and cardiac events, improving the quality of life for individuals through detection and improved protection, allowing for the realisation of subsequent cost savings.



### Methods

In order to reduce the variation, a programme of schemes were developed to tackle the problem.



**Social Media Campaign**

Campaign aimed to:

- Raise awareness of AF
- Improve patient ownership - how to detect AF in yourself and in others
- Myth busting re: anticoagulation, to improve compliance and prevent non-compliance



**GP Practice Visits**

- Provided practice level data
- Explained what that meant in real terms (Number of strokes/quality of life, potential cost implications)
- Clinical audit to help identify missing patients
- Improve subsequent management
- Clinical coding review



**Podiatry Service**

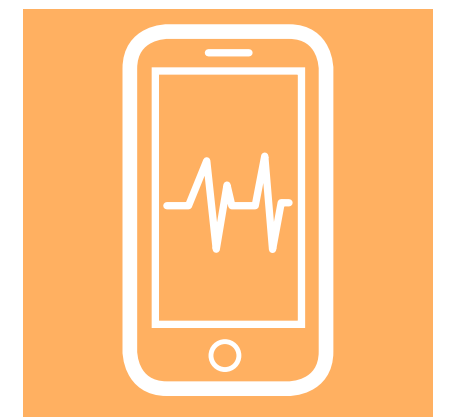
- Doppler test to assess for potential AF
- Results fed back to GP
- GP / practice nurse to follow-up and arrange subsequent management



**Screening Tools**

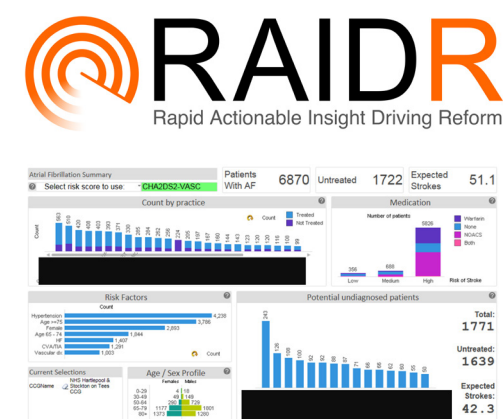
**AliveCor - Benefits**

- Small attachment for phone / tablet
- Take an ECG anytime, anywhere in just 30 seconds
- Does not require a phone signal / Wi-Fi
- Can e-mail / print recording



**Business Intelligence Solution**

All CCGs within the North East and Cumbria area have access to tool called RAIDR – commissioners and commissioning support staff have access to this. Information is taken from clinical systems on a monthly basis and is uploaded to RAIDR to enable reporting.



AliveCor is already used in various settings such as GP practices, by both clinical and non-clinical staff (reception), pharmacies, community health services, social care hubs and secondary care clinics.

### Business Intelligence Problem

We needed to measure success in terms of clinical outcomes.

- What was the scale of the problem?
- How many patients were potentially undiagnosed?
- How many AF patients were receiving treatment?
- How many AF patients were receiving the right treatment?
- How can we use this data in both a strategic report as and as a tool to aid clinicians?



### Business Intelligence Reporting

The AF intelligence report is a high level report produced for CCGs. The report highlights practices who are deemed outliers within their area regarding AF risk factors and/or treatment compliance. The report is produced using RAIDR to ensure that each practice can link the figures back to specific individuals within their practice if needed.



### Results

- Overall, since the initial data extraction in December 2017, HAST CCG has seen a 5% increase in the number of patients diagnosed with AF.
- 45% of practices reported a reduction in the untreated population but 94% of practices increased the number of AF patients receiving treatment overall (including newly registered patients) In total the untreated population reduced by 6%
- There was a 7% reduction in the risk of stroke in the following 12 months for HAST CCG population

### Conclusions

The programme has been very successful and we are aiming to roll it out across other localities including Darlington.

Collaboration with all partners has been key to the project's success, including primary, community and secondary care, pharmacies, Academic Health Science Network, Public Health England, NHS England, and local authorities.

NECS is now collaborating with the AHSN on the next phase of delivery. Having improved detection, and reduced the overall stroke risk for our patients, we must now make sure Primary Care are adequately supported to manage these patients effectively. This means ensuring they have undergone a full assessment, have been prescribed adequate anticoagulation and are within time to refer (TTR) guidelines.



**UEC-RAIDR**  
Urgent Care Application

Real time information about  
the status of Urgent and  
Emergency Care services.

Find out more at  
[www.raidr.co.uk](http://www.raidr.co.uk)

The UEC RAIDR App is an application for mobile devices that provides as near as real time information as possible about the status of Urgent and Emergency Care services across a defined network or geography.

This system-wide visibility of pressures and activity is defined by users of the application. Successful examples in operation include emergency department activity and waiting times, hospital bed availability, ambulance activity and the wider community services that offer admission avoidance and timely discharge support services.



Primary Care and Pharmacy services are also able to report on surge and escalation in real time.

Where UEC RAIDR has been implemented, the App is accessible to download via the Apple App Store and Google Play. User numbers within the selected UEC system are unlimited and are supported by robust approval processes. The roll out provides a much greater system understanding of the real time position and opportunities for collaborative working to manage pressures on the system.

## The RAIDR UEC App provides the following:

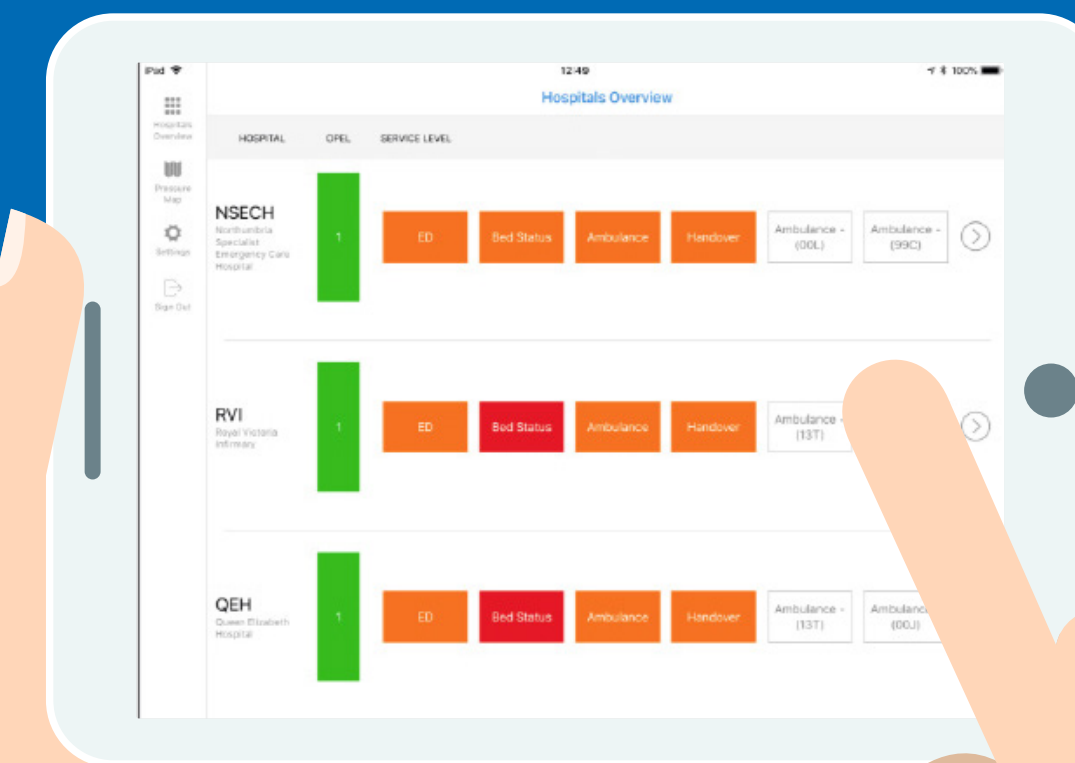
- System-wide visibility on agreed services and metrics, driven by automated data flows from providers.
- Escalation plan capability allowing system wide visibility of actions implemented, when and by who, improving manual processes in place in hospitals and allowing for evaluation of actions and impact.
- Primary Care and Pharmacy input allowing services to report OPEL and surge activity.
- Proactive alerts to the rest of the system including surge warnings.
- Ambulance service view supporting users to understand pressure points in their service.
- Ongoing continuous development, informed by the users of the application.

You can access the App through a number of frameworks including G-Cloud 10, NHS Lead Provider Framework and Health Systems Support Framework.

## How we've helped

The RAIDR UEC App provides users the ability to see an overview of the whole system helping to understand the situation and collectively work together to improve the position.

The app design and functionality is driven by users of the systems to further enhance systemwide ability to respond in times of surge.





## Case Study - Surge Management

The UEC RAIDR App is an application for mobile devices that provides as near as real time information as possible about the status of our UEC Network providers. Using 'notifications' it supports the system to be more proactive in times of pressure.

During periods of surge and escalation, local systems can become operationally challenged with an increase in the demand on services, impacting on patient flow, care, experience and performance.

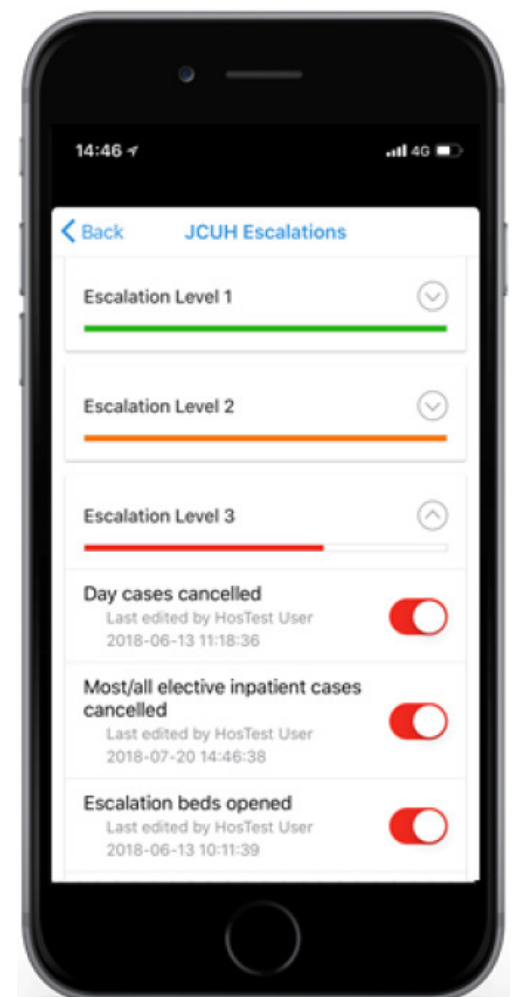
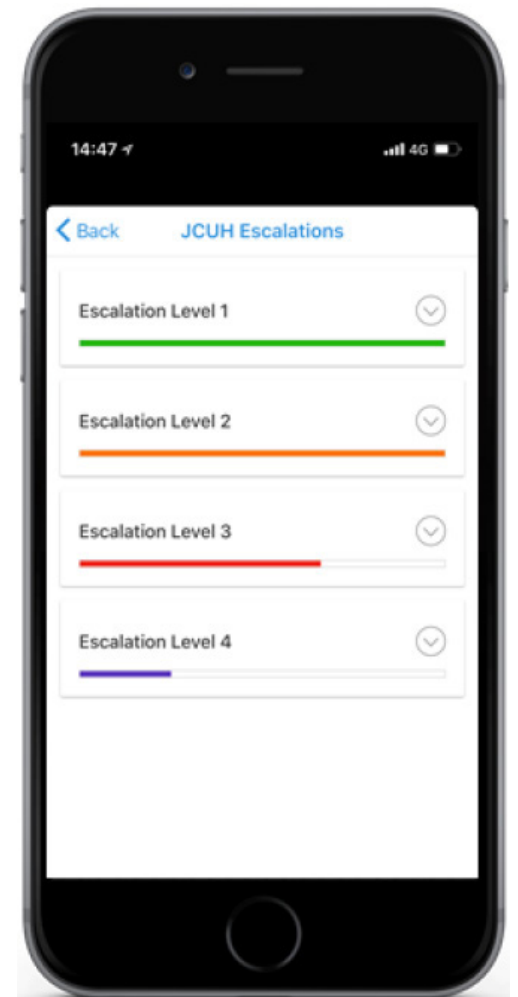
### Solution

NECS surge management team are skilled and experienced, supporting daily operational management of surge pressures across the North East & North Cumbria improving patient flow and supporting the delivery of core services. The team provide expert advice to on-call Directors and out of hours teams, facilitating calls with other providers by initiating action plans and communicating to the wider system using well established tools and techniques to support a whole system approach. The team test plans and provide feedback and recommendations alongside a review of current pathways and models.

They review regional and national policy and pathways supporting the redesign and implementation identifying lessons learned.

### Impact

The North East performs consistently higher against the 4 hour emergency department standard than any other sub-region within the North reporting sustained low levels of OPEL (Operational Pressures Escalation Level) whilst maintaining patient flow and patient safety.



## Quarter 1 2018/19 Results

**A&E 4 Hour Performance**

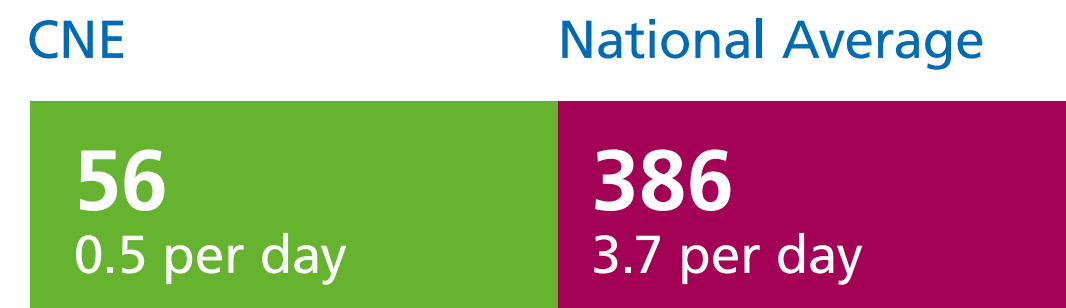


**12 Hour Trolley Waits**

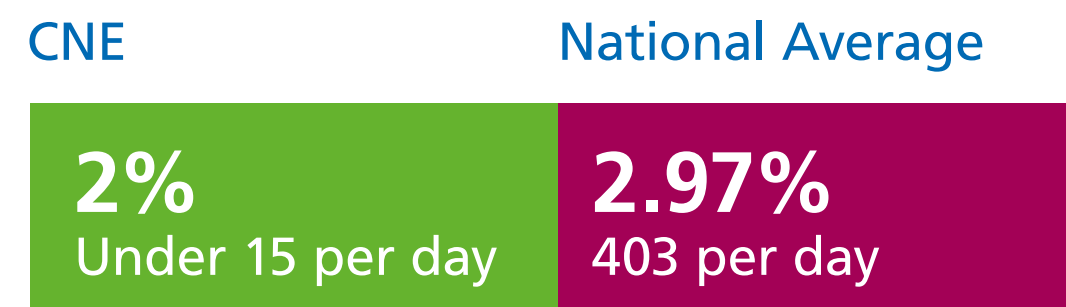


\*Winter 2017/18

**A&E Diverts**



**Ambulance handover delays over 60 minutes**





# vbcchecker

Value Based Commissioning (VBC) and Evidence Based Interventions (EBI) are at the heart of all CCG plans. This ensures efficient use of NHS resources and that patients receive safe care driven by the most up to date clinical evidence to ensure the best outcomes.

Find out more at  
[www.necsu.nhs.uk](http://www.necsu.nhs.uk)



**NECS has developed a comprehensive VBC programme which includes:**

- A web based system that provides an instant funding decision on a patient meeting the policy criteria and prior funding approval for procedures covered in the local policy.
- Experience of deployment of the vbcchecker system to large scale health economies, across multiple CCG localities.
- Development of clinical policies to support policy decision making.
- Expert contract advice on implementation with secondary care providers to ensure that the CCG only funds activity which has prior funding approval.
- Finance and contracting expertise on the reconciliation process at procedure level with providers.
- An evidence base for reducing provider contract demand plans.

## We have had outstanding results in the North East & Cumbria region including:

- A regional Value Based Commissioning policy which is applied consistently by all CCGs with all providers reducing patient inequity.
- Patients undergoing elective procedures only in circumstances where the benefit outweighs the clinical risk.
- A single prior approval scheme for secondary care providers in line with the NHS Standard Contract technical guidance therefore reducing the burden on providers.
- A reduction of 14,000 elective procedures in the first two years of implementation.
- A saving to the local economy of over £18m across the region in the first two years.
- A reduction in the number of patients referred to secondary care for an outpatient appointment for conditions covered by the policy.
- Contribution to provider cost improvement programmes through the reduction in targeted activity.
- A reduction in the number of Individual Funding Requests (IFRs) considered by CCGs by over 50% reducing costs associated with clinical decision making.

“The VBC programme has been one of the most successful QIPP initiatives in the North East this year for which all CCGs have benefitted.”

Richard Henderson, Chief Finance Officer  
North Durham CCG

“NECS, CCGs and all of our providers have worked collaboratively to deliver this innovative solution that really is in the best interests of all of our patients and public that we service”

Joe Corrigan, Chief Finance and Operating Officer  
Newcastle Gateshead CCG

## How can we help your health system?

We are able to provide a range of evidence-based support tools to CCGs and Commissioning Support Units to ensure that Value Based Commissioning and Evidence.

Based Interventions are at the heart of your health system plans.

vbcchecker is designed to be configured to local policies and criteria and can be deployed rapidly across primary and secondary care.

In addition to system access under a user agreement, NECS can provide expert contract and mobilisation resources to manage the roll-out of the programme across your area.

## NECS has developed a comprehensive VBC programme which includes:



**In the first two years of the North East and Cumbria programme, we have achieved:**

A reduction of  
**14,000**  
procedures



A saving to the  
local health  
economy of  
**£18m**





# Annual Review

NECS works across the UK providing care system support services to our health and social care customers, helping them in meeting strategic and operational challenges, to improve outcomes and increase efficiency.

Employing over 1,200 experienced and skilled people, NECS has office bases across the UK and staff working the length and breadth of the country.

Find out more at  
[www.necsu.nhs.uk](http://www.necsu.nhs.uk)

 Follow us  
@NHSnecs





## NECS celebrated its 6th anniversary in April 2019.

Over these years we have achieved 48% organic growth and met our key financial targets every year, re-investing over £10 million back into our customer owners, supporting front line services and creating hundreds of jobs.

Our turnover in 2018-19 was

**£77.8m**

Including **£27 million** of new sales



Our ICT Projects Team won the Healthcare IT award at the 2018 Health Business Awards for a project to deliver nurse-led online appointments.

The **NECS Continuous Improvement (CI) System** has helped us to release over

**£1m**

in **efficiencies** every year since we were established with over 96% of our people having completed our foundation CI training with our internationally renowned CI partner, Nissan.



A senior colleague based in Teesside was awarded **IT Manager of the Year** in 2018 at the UK IT Industry Awards recognising best practice, innovation and excellence.

We have demonstrated our commitment to our social purpose; to make life changing improvements – creating jobs and generating wealth for our communities.

We have fulfilled this by creating over **500 jobs** since 2013. In 2019 we distributed **£1.3 million** in dividends to our customer owners and created a transformation fund which has provided **£1.7 million** for investment in prevention and public health and **£200,000** to children’s crisis services.



We have over

**1,200**

staff in **26 locations** across England and Scotland delivering services in all **7 NHSE&I regions**. Our people are working on numerous national and regional programmes of work including; **International GP Recruitment, Future Services Programme (ICT), Cervical Screening Administration Service Programme, the Care Home Bed Capacity Tracker** and many more.

NECS has enjoyed

### more success outside of the north east and north Cumbria

winning new contracts with local authorities, CCGs, hospital providers and NHS Improvement in the following areas; Derbyshire, Yorkshire and Humber, Midlands and East, London, the Isle of Man and Scotland.



We have re-enforced our commitment to the health and wellbeing of our people by holding various staff awareness events as well as signing the **Time to Change** pledge, which is a commitment to all of our staff to change how we think and act about mental health within NECS. We have trained up **11 Mental Health First Aiders** and have **22 Mental Health Champions** across our organisation to support our people.

We are supporting customers in **NHS Scotland** with service improvement support to Forth Valley Health Board. This included NECS undertaking a comprehensive review of Forth Valley Royal Hospital unscheduled care services which resulted in a long term sustainability plan to co-ordinate system-wide flow. The programme also offered assurance to the Scottish Government in respect of improved performance.

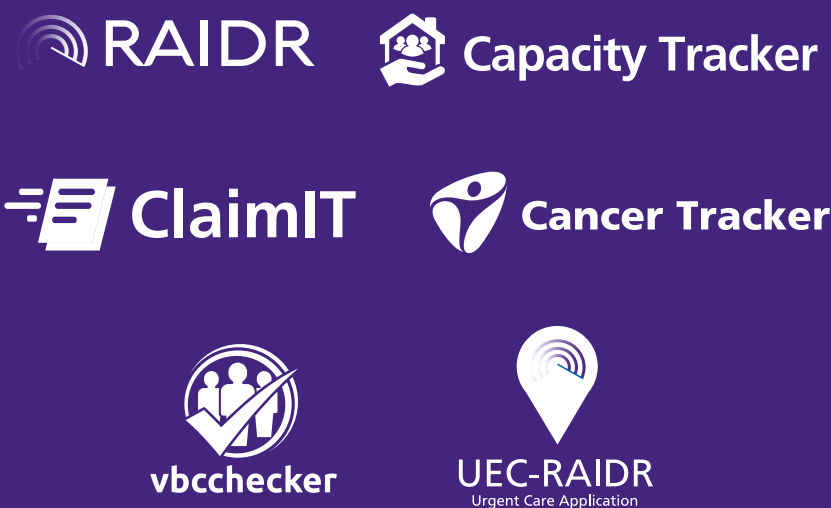


For the 6th year running the NECS Accounting team has achieved its target that cash balances held by all of its client CCGs and NECS at year end do not exceed the agreed level set by NHS England, whilst also ensuring they all achieve the ‘Better Practice Performance Code’ target: >95% invoices being paid within 30 days of receipt.



**RAIDR** our BI tool has evolved with more sophisticated dashboards helping ICSs and STPs with their **Population Health Analytics** and monitoring the impacts of service changes and improvements. **RAIDR** has also developed a **111 dashboard** that is available to every CCG in England.

To support emerging Integrated Care Systems with system-leadership, developing population health management capability and using data to inform and inspire transformational change, we have signed up to a 5 year partnership with the internationally renowned **Streamliners New Zealand** and **The Canterbury District Health Board**.



To enable Integrated Care Systems and STPs to drive improvements to the health of their populations, we have developed a number of digital tools to support integration including the **UEC App** which is supporting the north east to be the highest performing system in England for A&E attendance, the **VBC Checker** supporting the reduction of over 15,000 procedures, **RAIDR** with new CHC and ICS dashboards, **ClaimIT** supporting GP payments and the **Capacity Tracker** supporting the reduction of delayed transfers of care.



NECS is one of a small number of NHS organisations to have achieved a **3 star accreditation** from the ICT Service Desk Institute for the third year running, demonstrating **Global Best Practice** Standard for Service Desk support.

**34%**

reduction in the number of Police calls

NECS is proud to be a partner in the multi-agency project to **integrate services for mental health patients** in Teesside. A control room has been developed to better co-ordinate and provide support for patients resulting in a >20% reduction in S136 referrals. The police have seen a 34% reduction in the number of calls where they would normally have been deployed. The control room now has access to patients' clinical care records, allowing mental health clinical information to be shared at the point of contact rather than ringing other teams for patient records. All new recruits to Cleveland Police have a training session with the mental health co-ordinator.

NECS Clinical Commissioning Intelligence has been working with NHS England clinical leads and business managers to deliver a suite of models that have identified potential **savings of around £30m** by optimising Cardiology services across the UK.



We launched our **Sustainability and Corporate Social Responsibility Strategy** on NHS Sustainability Day. Our new CSR strategy details four organisational priorities: travel and transport, natural resources, supply chain and social value. We have also **removed all single use plastics** from NECS sites.

To improve resident experience and reduce avoidable hospital admissions from care homes, NECS (in collaboration with partners) designed a whole systems approach to supporting the sector. A key aspect of the support included developing a bespoke **Care Home Training and Education Programme** across Hartlepool and Stockton-on-Tees. In year one 1,421 care home staff attended the training with **100% positive feedback** from participants. This has contributed to a reduction in emergency admissions from Hartlepool and Stockton Care Homes by 9% with cost savings of

**£686,836**



## Capacity Tracker

Our award winning digital care home bed **Capacity Tracker** was successfully rolled out nationally and now has over **10,000 users** **spanning 191 CCGs**. Capacity Tracker reports over **30,800 care home vacancies** providing health and social care discharge teams with the information to enable faster, safer discharge from hospital. The **Capacity Tracker** was praised by the Secretary of State, **Matt Hancock** who described the tool as a perfect example of the kind of services he wanted to see develop to deliver the **NHS Long Term Plan**.



NECS secured a place on the **G-Cloud 10 Framework**. The framework enables NECS customers to buy our digital services more quickly and efficiently than traditional procurement methods.

We received an **excellent 65%**

response rate to our Staff Survey in 2018. The outcomes of the staff survey will help us in developing NECS to become a fulfilling and happy place to work and an action plan has been developed that is owned by the a significant cross-section of the organisation including members of the Staff Council, the Full Management group and the Executive team.



NECS achieved

## Cyber Essentials Plus Accreditation

This is a government information assurance scheme that requires organisations to adopt best practice in information security. It is a very high bar to meet and very few NHS organisations have achieved it.



A major programme of service improvement and transformation was undertaken in Continuing Healthcare Services which included applying lean production system techniques to core processes, an overhaul of data quality and the introduction of new digital reporting dashboards designed with customers. We are able to evidence marked performance improvements and a 'substantial assurance' rating for our business processes from NHSE's internal audit.

NECS is a key strategic partner to the **North Cumbria and North East Integrated Care System** helping to develop its approach to **population health management**. There has been an assessment of capability and capacity to manage data, a diagnostic assessment of population health priorities, a suite of PHM dashboards developed in RAIDR for Primary Care Networks, Integrated Care Partnerships and the Integrated Care System. Work has started (in partnership with the North Cumbria ICS and Public Health England) to incorporate public health and social care data sets.



The NECS Consultancy, Advisory and Transformation services have gone from strength to strength. The teams, which have over 70 dedicated members, have customers across the North, the Midlands, East Anglia and Scotland. Assignments have varied from hospital system turnaround in Stockport and Lothian to implementation of the GP Forward View and cancer service improvement in the Midlands. There have also been important programmes delivered for NHS England such as the STP Delivery Unit supporting the development of the national system transformation diagnostic methodology and rolling out the 'bronze level' diagnostic to all STPs in the country. Further evidence of the growing status and reputation of the Consulting Service was demonstrated when short-listed for **4 awards by the Management Consultancy Association (MCA)**. NECS is the only public sector body consultancy accredited by the MCA.



Our Value Based Commissioning application, the **vbcchecker**, is designed to protect patients from having clinically inappropriate treatments and helps ensure most efficient use of NHS resources. A total of 6,200 procedures were avoided in 2018/19 which, along with the quality gain for patients, delivered a £6.7m saving to the local health economy.

The **vbcchecker** now has over 1,000 registered users outside of the North East and is making a valuable contribution to the implementation of the national Evidence Based Intervention programme for which it is one of the demonstrator sites.



NECS was asked by NHS England to design a new model of Health Needs Assessment (HNA) reports for 12 prisons in the Yorkshire and Humber region. Following the HNA, services within NHS England have now been recommissioned based on the report findings with patients' health needs being better met. NECS now has a standard HNA model which can be offered to NHS Health and Justice commissioners across England.



We've leveraged innovative digital technology to quickly provide NHS Trusts with confidence in the size and accuracy of their **waiting lists** using a rapid diagnostic to identify data quality issues at specialty level and critically to target resources to resolve these and their root causes to cost-effectively achieve **sustainable waiting list management**. We also subsequently supported many of the Trusts with accredited RTT training for staff and process improvements to ensure accurate waiting lists going forward. We worked with 18 Trusts last year, reviewed over 2 million pathways via our PTL and Full Waiting List Diagnostic services and identified almost **1 million DQ issues** which enabled the Trusts to target validation activity, supported by NECS as required.

In collaboration with the North Cumbria and North East Urgent and Emergency Care (UEC) Network, NECS has developed the **RAIDR UEC App** providing hospital operational managers and commissioners near real time information on the capacity and demand pressures in their system (bed availability, Emergency Department activity, ambulance activity and pressures in primary care). The **RAIDR UEC App** has played a part in helping the North East remain the best performing A&E system in the country. The App was also successfully deployed into the Leeds system in 2018.



We are supporting NHS England with their ambitions to become paperless by providing recommendations for the creation of national guidance and standards for digital patient records. Our support involved consulting with national stakeholders including CCGs, GP practices and the supplier community, eliciting key information and identifying best practices. Our work has helped to guide and influence the national direction for the digitisation of legacy paper records.



We have been accredited **Positive About Disability** for a fifth year and have recently published our **Gender Pay Gap Report**.

The gender pay gap within NECS has reduced significantly since the 2017 report, moving from a median gap of 12.44% to 3.40%, a **nine percentage point improvement** evidencing our commitment to having a diverse workforce and recognising the benefits diversity brings to the quality of our work and the nature of our organisation.

 0191 301 1300

 [www.necsu.nhs.uk](http://www.necsu.nhs.uk)

 [necsu.marketing@nhs.net](mailto:necsu.marketing@nhs.net)