

# Powering Patient First

Using IT to improve care at Brighton and Sussex University Hospitals – 2018-21



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# Using technology to work smarter

## Foreword

At Brighton and Sussex University Hospitals (BSUH) care is our first priority and we are constantly looking for ways we can improve patient care. Technology is integral to those improvements. From providing single electronic records to electronic prescribing of medicines and everything in between, smart use of technology can reduce the risk of human error and improve consistency, efficiency and performance.

The Trust's overarching strategy, Patient First, looks at how we can continually improve outcomes and experiences for the people we care for, through empowering staff – whether in small steps or big changes – to transform our services for the better.

This IT strategy aims to equip our staff, our patients and our partners with the necessary information, tools and support to "power" Patient First. It is about how we can learn from our experiences to improve systems today, and make the best use of technology in the future.

### As our care evolves, so must our IT.

Technology has a strong role to play in achieving the specific improvements we are required to make. It will provide the systems and solutions that help transform the quality and financial sustainability of our services. We are committed to developing a world-class set of IT services and support, across all our sites and clinical specialisms, for those we treat today, and for those we are training for tomorrow.

**At the heart of this strategy we recognise this is not about "more" or even simply "better" IT – but how we will all use technology differently.**

We have developed a strategy that goes beyond just improving specific functions or specialisms to helping transform the way we work together, a strategy which put patients first.

And to achieve this, our strategy does not stop at our hospital walls, but links to the work going on in our GP surgeries and our communities; a strategy that responded to the changing way in which people of all ages are interacting with the world, including through digital technologies.



# Developing our strategy

BSUH is an acute teaching hospital providing services to our local populations in and around Brighton and Hove, Mid Sussex and the western part of East Sussex. We also provide specialised and tertiary services for patients from across Sussex and the South East of England.

## The Trust operates from two main sites:

- Royal Sussex County Hospital in Brighton, which includes the Royal Alexandra Children's Hospital and the Sussex Eye Hospital and is the Major Trauma Centre for the region. It is our centre for emergency and tertiary care.
- Princess Royal Hospital in Haywards Heath has a 24/7 Emergency Department for its local population and is also our centre for elective surgery.

Central to our work is our role as an academic centre, a provider of high quality teaching, and a host hospital for cutting edge research and innovation. We work in partnership with Brighton and Sussex Medical School, Health Education England, Kent, Surrey and Sussex Postgraduate Deanery and the Universities of Brighton and Sussex.

In 2016/17, we spent £630 million treating over 800,000 people, with 8,200 employees supported by 450 volunteers.

## Technology and our patients

For an increasing number of people in our community, technology represents greater access to help and support, and more control over their own lives.

Overall, 86% of adults in the UK now have access to the internet at home, and 71% are carrying a smartphone in their pocket, with 4G take-up increasing across all socio-economic groups. Looking at our local populations, three quarters of men and women aged 65 to 74 are recent internet users, and people over the age of 75 are the fastest growing group of all.<sup>1</sup>

However, we understand that not everyone wants to be online, or to have their information shared electronically. For those that do want to interact with us digitally, we will make our information and services accessible, working and developing together in a way which is best for them.

Our strategy is aligned with work across Surrey and Sussex and the rest of England, to improve the way we work, to meet our statutory and regulatory responsibilities, and to transform outcomes for our patients and our communities.

## Supporting the Trust's priorities

In April 2017, the Executive Team from Western Sussex Hospitals NHS Foundation Trust (WSHT), led by Chief Executive Marianne Griffiths, took on the management of the Trust.

Under this agreement, the Trust has identified 5 priorities for delivery:

- Enable BSUH to exit Financial Special Measures
- Enable BSUH to exit Quality Special Measures
- Address issues of leadership and culture inhibiting service improvement
- Implement a three-year plan to improve A&E performance
- Effectively oversee the 3Ts hospital development programme.

Our strategy will support staff at all levels to achieve meaningful change, both through continuous improvement and through major projects and programmes.

There are three key areas through which we will achieve this:

- Supporting the 3Ts programme
- Powering Patient First
- Empowering our Communities.

## Supporting the 3Ts programme

The 3Ts redevelopment is a major investment programme worth £485 million to replace all the buildings on the front of the main Royal Sussex County Hospital site.

Although the 3Ts redevelopment extends beyond the planned end of this strategy, our plans are designed to align with and support the Stage 1 Building (replacing the wards and departments of the Barry Building) due to complete in 2020; and to build the technology foundations for Stage 2 (which will house the new and expanded Sussex Cancer Centre) starting in 2020.

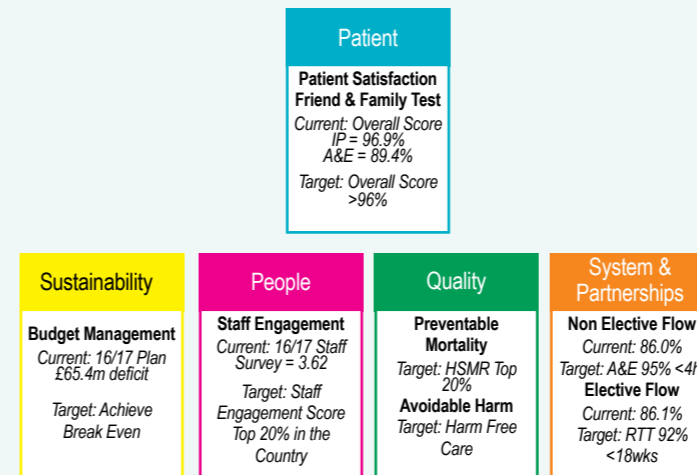
This is about ensuring that our 21st century buildings are underpinned by 21st century technology that enables excellent care.

## Powering Patient First

Patient First is about taking us where we want to be – a provider of world-class services to our patients and communities, delivered in a high-quality and financially sustainable way.

This means standardising the way we work, redesigning our systems, and changing the experiences of staff and patients. It means ensuring that all front-line staff are empowered to initiate and lead positive change.

Patient First has four strategic themes, each with its own "True North" objective:



In order for the Trust to achieve these objectives, we will need to invest in our systems and infrastructure to take us to the next level of performance.

We will replace technologies that aren't working well and extend those that are working.

We have worked to identify what is working well now, where technology barriers to excellent care exist and what are our priorities are for improvement. We have done so in partnership with colleagues in the wider health and care system, including Brighton & Hove CCG and the local Sustainability and Transformation Plan (STP) for Sussex and East Surrey.

## Empowering our communities

Our local population is growing, and ageing. Our staff are treating increasing numbers of people living with multiple, long-term conditions – conditions which cannot be cured, but which with effective management, should not be a barrier to a long and happy life. Across the NHS as a whole, supporting people with long-term conditions now accounts for £7 out of £10 of spend – a figure which is growing annually.<sup>2</sup>

Managing increasingly complex health conditions successfully means working in partnership – across our organisation, with our patients and their carers, and with colleagues in primary care, community, mental health and social care, as well as other public and voluntary sector organisations.

We can't expect patients to understand the intricacies of how care is provided through primary, secondary and tertiary providers. Instead, we need to make it as easy as possible for our patients to access the care and services they need and ensure the information flows between organisations to make the transitions as seamless as possible.

Our systems need to support us to manage large volumes of information securely, and share them in real-time. This represents an opportunity to work with our patients and communities in different and better ways.



<sup>1</sup> "Internet Users in the UK", ONS (May 2016)

<sup>2</sup> "Five Year Forward View" p6, NHS England (Oct 2014)

# Developing our strategy

## Understanding where we are

Central to developing this strategy has been the active engagement of over 850 of our clinical, operational, and support staff through interviews, joint workshops and online surveys; supplemented by conversations with local partners and stakeholders, including patient representatives, commissioners and GPs.

Through this research, we have identified four priority areas for development over the next three years:

- **Enhancing our systems, to improve safety, eliminate waste, and ensure that every patient gets a great service, each and every time.**
- **Supporting our staff, ensuring that our IT functions are there for them and that they have the knowledge and skills they need.**
- **Integrating with our partners, including GPs, community, mental health and social services to establish a “digital health and social care community” to improve all we do.**
- **Working with our patients, to enable them to be fully involved at each stage of the management and delivery of their care.**

## Enhancing our systems

Of 800 survey respondents, 54% of staff reported the support that Trust IT systems provided them with “Excellent” or “Good” support to their work; but a significant percentage - 46% - found them to be “Poor” or “Very Poor”.

In total, people identified hundreds of systems in use across the Trust, together with a large number of supporting databases and spreadsheets. The result is duplication and inefficiency. Most of the systems don’t support one another and many remain paper-heavy, despite being electronically based.

In addition, finding a working computer and accessing wifi are frequently challenging as is the operating speed of many of our machines, which are currently slow leading to lost staff time when services are stretched and time is at a premium.

Improving electronic services in areas such as ordering tests and prescribing; providing more intuitive, user-friendly systems (with greater clinical involvement in their design and roll-out); and enabling single-sign on, to access key information and data, are priorities for system development.

We have plenty of room to improve, including better support for clinical decision-making; optimisation of the management of medicines, medical records and tests; and how we govern and engage people in digital development.

## Supporting our staff

We asked people what their experience was of our IT teams. Many people talked about their positive experiences of support. There was broad recognition that the way in which IT responded to requests was improving, but also that issues remain.

People told us that communication from the IT teams – whether providing timely feedback (even if just to explain why there was no immediate solution) or in prioritising existing and new requests – had often been poor. They highlighted projects that prioritised functionality over the user interface, leading to systems being bought and implemented that were not being used.

We know creating improved trust in IT means changing the way we work. People asked us to:

- **Ensure all requests are appropriately followed up**
- **Find creative ways to meet their and their patients’ needs**
- **Support staff to make better use of what exists already.**

Finally, many people spoke of the need for more comprehensive technical support for systems which are already a core part of delivering patient care – ensuring these systems are “resilient” and that there is help and assistance available if something goes wrong, 24 hours a day, 365 days of the year.

## Integrating with our partners

Whilst 76% of staff felt their ability to share information with internal colleagues was either “Excellent” or “Good”, 20% reported this to be “Poor” or “Very Poor”. This was found to be increasingly hard for those involved in sharing information with other organisations, with patients and their carers.

People talked about the concerns following high-profile losses of data in both the public and private sectors and their perceptions around the risks, particularly if records cannot be demonstrated to be secure or complete.

There was an equally strong concern around the lack of reliable information and data hampering both the provision of services for individual patients and their ability to manage the overall flow of people through the Trust, which included ensuring that beds are available for all those who need them.

These concerns were echoed by local GPs, in managing increasingly complex, long-term conditions where the ability to find information about their patients and interact directly with specialists in the hospital were seen as key to enhancing people’s outcomes.

People want new technology that takes into account frontline needs (e.g. “fits in nurses’ pockets!”) and enables secure and convenient communications. We also heard that IT needs to raise awareness of what information and systems already exist.

At an organisational level, people spoke of the need to establish better clinical governance of information across the Trust, and to improve information sharing with key partners including local GPs.

Critically, there was desire to develop, over time, a single trusted place to go which allowed individual specialists to customise what they see, helping them do their jobs as quickly, safely and efficiently as possible; an approach which also would learn lessons from unsuccessful “one-size-fitsall” implementations of the past.

## Working with our patients

In this area, respondents highlighted opportunities to use advances in digital technologies, automation and machine-learning in order to help people stay well, improve access to care when they need it, intervene earlier when they become unwell, and identify and escalate issues automatically before they become more serious.

More “apps-based” solutions; better use of digital communications, including email and online video consultations; automatic monitoring and alerting, tracking key clinical indicators; and direct access for patients and carers to relevant information and records, were all suggested as developments that would allow staff to improve the support they can provide, within and outside of the hospital.

Systems already in use in parts of the Trust, such as PatientView, developed by the Renal Community, and Patients Know Best, which seeks to put ownership and control of clinical data and information in the hands of patients, were cited by consultants as platforms which are already making a positive difference to the way in which they interact with those they are caring for.



# Our plan

Good IT is, first and foremost, about people. It is about using technology as a tool to improve quality and outcomes for those we serve.

Appropriate investment in our people, our IT systems and our infrastructure will enable us to manage the growing expectations and demands upon the Trust's services.

For many of us, too often our experience has been of IT programmes that over-promised, and under-delivered. We are focussed on improving the quality of our care and the financial sustainability of our services, as part of investing in long-term improvements in our Trust.

Many of our current systems are old, do not work well together and are difficult to support. As a result, it can be hard to access and share information both within our hospitals, and with our patients and those who are involved in their care. The continuing use of paper-based records, whilst currently vital to our work, creates the potential for delays and risks.

In each of our four priority areas, we have drawn up an action plan which sets out our key aims and the activities we will undertake – in the short, medium and longer term.

In practical terms, this means by 2021 we will have:

- developed our key systems and infrastructure to join-up key clinical and operational information and data around patients and staff, showing measurable improvements in the quality, safety and efficiency of our care.
- established service standards across all aspects of our IT, and shown those standards are being consistently met, with the right knowledge and resources in the right place at the right time.
- have solutions in place for local health and other professionals to share information and data securely, to support improved patient experience and outcomes, with explicit, informed consent.
- enabled people to access help, information and support in relation to their own health and wellbeing, in a way which enhances, rather than takes away from, their personal relationship with the professionals and people who care for them.

Making this happen will mean working together to transform the way our IT systems and infrastructure work.

It means working as a single organisation, with our patients and with our partners, to "co-design" solutions which meet real people's needs – recognising and managing the risks and pitfalls along the way.

It means being clear on what we are spending to achieve these aims, and ensuring that any new funding is used in the most efficient way possible, learning from experiences in our local areas and beyond.

And it means co-ordinating, owning and managing change, to ensure that our investments in technology really do put patients first.

# Our plan

## Working with our patients



### Objective 1

*Enable our patients to interact directly with us in the management of their health and wellbeing*

#### What will we do?

We will establish options for moving forward our current work on patient portals in a way which will improve patient engagement with the Trust.

- Working with patients, carers, staff and with our partners, we will identify the opportunities for patients to access information and support in the way which is most convenient for them.
- We will evaluate the options for interactive appointment systems, electronic referrals and the associated business case for enabling appointments online.
- We will enable patients and carers to update and add to their own information including relevant clinical data, requirements and preferences in relation to their care. This will include giving patients the ability to consent to, and control, how their information is shared across relevant professionals and with those involved in their day-to-day care.

#### What will this achieve?

Improving bookings and management of appointments help us to improve the accessibility of our services, whilst also supporting our staff, patients and carers to get the most out of the resources available.

**People and their authorised carers will have improved access to their health and care information online**, including discharge summaries and letters, medications, immunisations, laboratory results, and care plans. They will be able to make updates to their own patient records.

We will reduce delays and improve visibility in the management of patient interactions, allowing patients and carers themselves to track and escalate issues online. Where appropriate, we will give patients access to results and advice online, reducing the need for outpatient appointments.

**Using a "Multi-channel" access to healthcare advice and support, we will give patients and carers the best quality help where and when they need it**, increasing accessibility and convenience of care through increasing roll-out of virtual clinics.

#### What will success by 2021 look like?

BSUH will be in the top 20% for patient and staff experience surveys

### Objective 2

*Pilot certified tools and products which enable patients to improve the management of their own wellbeing*

#### What will we do?

We will explore opportunities to harness the growth of mobile and internet use within our communities to support patients in the management of their own health and wellbeing. We will:

- Work with patients, clinicians and local partners, we will identify remote monitoring technology, which can be used in people's homes, to provide safeguarding and support closer to home.
- Identify health apps and related technologies that can be used by patients and carers to help them manage and improve their own health and wellbeing while exploring options for integrating third-party apps into our clinical systems and portals, to share data and improve quality of care.
- Explore opportunities to support patient appointments to be carried out using commercial video conferencing technology where appropriate.

#### What will this achieve?

Patients will be able to manage their care and improve their health and wellbeing using a range of apps that work with our internal systems giving them the best quality help when and where they want it.

#### What will success by 2021 look like?

- BSUH in the top 20% for patient satisfaction.
- An increased number of patients managing their own care and staying out of hospital.

# Our plan

## Supporting our staff



Supporting our staff is about ensuring that our IT functions provide robust support, around the clock, ensuring staff are equipped with the skills and technologies they need to perform their roles and to adapt to future opportunities and challenges.

### Objective 1

*Extend our IT support, development and reporting capabilities to respond flexibly to the needs of staff and patients.*

#### What will we do?

We will review support arrangements across all current and planned systems to ensure that we have the right mix of skills within our IT functions, available when and where they are needed. We will:

- Work with staff to review and update our service standards to include round-the-clock support for key clinical systems and monitor and report against our published service standards
- Embed our commitment to customer service through new governance structures, organisational processes, IT support systems and individual training and support to all IT staff.

#### What will this achieve?

Staff will have access to IT systems, services and support 24/7 for all core services and will receive training to address gaps in their knowledge and skills

#### What will success by 2021 look like?

- Quarter-on-quarter improvements in customer satisfaction through enhanced IT performance and customer support
- Quicker resolution time of issues when they do occur
- Reduction in system downtime
- Our training materials and plans will be fully updated to reflect the new systems and technologies
- Improved staff confidence in their ability to resolve questions and issues without relying on IT
- A measurable increase in the capacity of Trust staff to address their own IT needs.

### Objective 2

*Improve the IT capabilities and confidence across our Trust.*

#### What will we do?

We will work with staff to identify and prioritise the development of IT skills and confidence. We will:

- Develop an updated catalogue of training on available systems.
- Identify the best way of meeting staff needs within available budgets, including through the use of self-service materials, online courses, 1-2-1 and group sessions, and wherever possible a “train-the-trainer” approach to enable colleagues to support each other.
- Continue to develop our clinical portal and knowledge base to ensure that people can find and access the resources they need.
- Continuously update training materials as we develop new technologies and capabilities.
- Ensure non-clinical systems are capable of supporting the organisational ambitions for better management information to assist planning and control.
- Better understand the scope of services and how they interconnect to help our teams prioritise service delivery and ensure we can provide the required joined-up information to clinicians when they need it to provide effective patient care

#### What will this achieve?

Improved cybersecurity through awareness and training across the Trust. Staff satisfaction will increase as they are able to make better use of our IT systems and problem-solve without having to log a helpdesk call.

# Our plan

## Integrating with partners



Integrating with our partners is about establishing a digital health and social care community which shares information, communicates and collaborates, joining-up around those we serve to improve health and wellbeing.

### Objective 1

*To improve the experience and outcomes of care by joining up patient information and data around the needs of the patient.*

#### What will we do?

We are working with local health and care partners to deliver care safely, efficiently and effectively by having the right information, in the right place and at the right time. Personal information needs to be handled securely, with the informed consent of the individuals to whom it relates:

- Develop easy, clear and shared processes and systems for confidentially sharing patient data working with colleagues across the Trust, GPs and other healthcare partners, and building on existing infrastructure and good practice.
- Jointly evaluate the options for a shared patient record, building on local and national bestpractice.
- Ensure that the chosen solution meets our core objectives of reducing mortality, improving outcomes, delivering safe and reliable care, and improved patient and staff experience.
- Successfully implement across all of our core clinical areas, linking our teams to colleagues in primary and community care and other relevant local public services

#### What will this achieve?

- A fully tested, live platform, based on local systems and national best practice, for sharing information with GPs and other clinicians in primary, community and other acute trusts, with the appropriate governance and protocols to ensure the safe management of data.
- The ability to access and update care plans for the patients who attend our services using patient and clinician feedback to enhance information sharing and ensure effective continuity of care after discharge.

#### What will success by 2021 look like?

- Ongoing reductions in unplanned admissions through improved management of individuals' needs, linking our specialists to colleagues in primary, community and social services
- Improvement in the quality and the efficiency of our services including enabling patients “to tell their story once” and our staff to eliminate unnecessary duplication of tests and clinical activity
- Ongoing reductions in delayed discharge for people ready go home or to a more appropriate, care setting, through better co-ordinated care planning.

### Objective 2

*Enable improvements in care and quality for all patients, as part of the move towards providing more integrated, long-term support to all of our local populations.*

#### What will we do?

Our Local Digital Roadmap sets out ambitions to close gaps around the care and quality by making better use of information to prevent ill health, promote recovery and support well-being through:

- Increasing analytics capability to use more data to create insights, improve outcomes and drive decision making for planning, management, measurement and learning.
- Continuing to pursue risk strategies, using personal data to determine which patients are at high risk of certain outcomes.
- Exploring wider opportunities for using analytics to target individual interventions and guide resource allocation.

To support of the development of better integrated care across our region, we will:

- Work with commissioners and other healthcare providers to bring together information and data we hold, enabling us to track activity and cost and ensure resources are appropriately targeted.

#### What will this achieve?

Patient data will be shared between health providers securely and in real time to provide the best opportunities for managing patient care. The data will also help us identifying groups of patients at high-risk of hospitalisation, enabling us to support early intervention to keep those patients healthy and well.

It will also increase our ability to track the impact of improvements, showing us how local healthcare resources are being used, across organisations and traditional boundaries, to support improved health and wellbeing.

# Our plan

## Enhancing our systems



Supporting our staff is about ensuring that our IT functions provide robust support, around the clock, ensuring staff are equipped with the skills and technologies they need to perform their roles and to adapt to future opportunities and challenges.

### Objective 1

*Ensuring that in future, hospital records and files are stored and managed electronically, improving the efficiency and effectiveness of the care we provide.*

#### What will we do?

We will replace our current Patient Administration System (PAS). This will improve information sharing across the Trust as part of a broader programme of linking up our key clinical systems and developing our electronic records.

We will join-up systems and support, harnessing the expertise of Trust's clinical teams to ensure that the outcomes are designed and built around them.

We will:

- Ensure our solution fully meets the needs of staff and patients, with development that is clinically-led and governed.
- Link to and enhance our existing investments in portals such as our PANDA system that bring key information together where and when it is needed.
- Extend electronic records to all areas of the Trust safely managing the transition from current paper systems and ensure that systems work together.

#### What will this achieve?

Clinicians will be able to access electronic patient information, increasing efficiency and accuracy. Paper-based systems will be replaced and new electronic systems will be connected to ensure the data we hold works through all systems.

We will reinvest savings from reduced management and storage of paper records in our Trust's frontline work.

### Objective 2

*Expanding our use of technology to detect patients at risk, support early intervention, and ensure that patients receive the correct treatment every time.*

#### What will we do?

We will use the implementation of the new PAS and the roll-out of proven technologies, such as e-Observations, to make the delivery of core patient management easier for staff and patients. We will:

- Review and map clinical systems and get rid of systems that are unnecessary or out of date.
- Ensure existing systems are meeting the user needs and new systems are evaluated against a full set of user requirements and aligned with what the different areas of the Trust have in place already.

#### What will this achieve?

We'll be able to make best use of useful systems and free up time and space for new ones by getting rid of anything that doesn't work the way it should.

### Objective 3

*Enhancing the way we communicate across the Trust, improving the timeliness and quality of our clinical care.*

#### What will we do?

We will work with Clinicians to ensure that our priorities are driven by clinical and patient needs with a view to improving the efficiency and effectiveness of how we work across different parts of the Trust and best use technology. We will:

- Improve access to key clinical information to allow staff to access the data they need, quickly and effectively, without having to move between multiple systems.
- Review the use of technology to help staff record and update key patient information in realtime, including potential use of voice-recognition and apps / mobile based technologies.
- Enable fully electronic order communications between radiology and pathology and all secondary care areas to eliminate paper forms and transcription errors.
- Align systems and processes to support Patient First and streamline the way we work together.

#### What will this achieve?

All staff will be able to access the key clinical information they need, where and when they need it, in a timely and efficient way. Staff will have clarity on what tests have been ordered for which patients, improving the quality of patient care by minimising the taking of unnecessary blood samples, and reducing clinical risk by eliminating any uncertainty as to whether or not a particular test has been carried out.

### Objective 4

*Evolving our information reporting systems to help us better manage our activity and performance, and target areas for further improvement.*

#### What will we do?

We have a large number of systems that deliver essential services but that act as "islands" of management and reporting information. Joining up this information can improve the way we work and measure our outcomes. This will require us to share information in a structured and secure way. We will:

- Reorganise our systems to bring together clinical, activity, finance, contracting and performance data in real time, enabling us to identify and manage opportunities and issues across the Trust.
- Make specific reporting requirements for clinical specialities readily available across systems to reduce the workload of production.
- Make information accessible so areas of the Trust can create their own reporting and performance dashboards to better manage their daily activities.

#### What will this achieve?

Individuals and teams will be able to track their data and use it to address issues arising and manage their performance to best focus on patient care.

### Objective 5

*Ensure our core technology infrastructure is flexible, secure, and meets our long-term needs in a cost-effective way.*

#### What will we do?

As we expand the amount of information we hold and make accessible, we will continue to update our infrastructure, processes and procedures. We will:

- Work with suppliers to ensure that our systems and data are being managed appropriately, are accessible to all those who depend on them, and are safeguarded in line with the Government's National Cyber Security Strategy.
- Review options for cloud-based storage, computing and networking provision, as we enhance the digital capabilities of our Trust and our partners.
- Improve connectivity through ensuring full access to WiFi across the Trust.
- Standardise hardware and extend use of "Single Sign On" technology to improve access to the information and data they need to perform their individual roles.
- Explore options for staff to use their own devices as part of a "Bring Your Own Device" (BYOD) process, underpinning decisions with clearly defined encryption and acceptable use requirements.

#### What will this achieve?

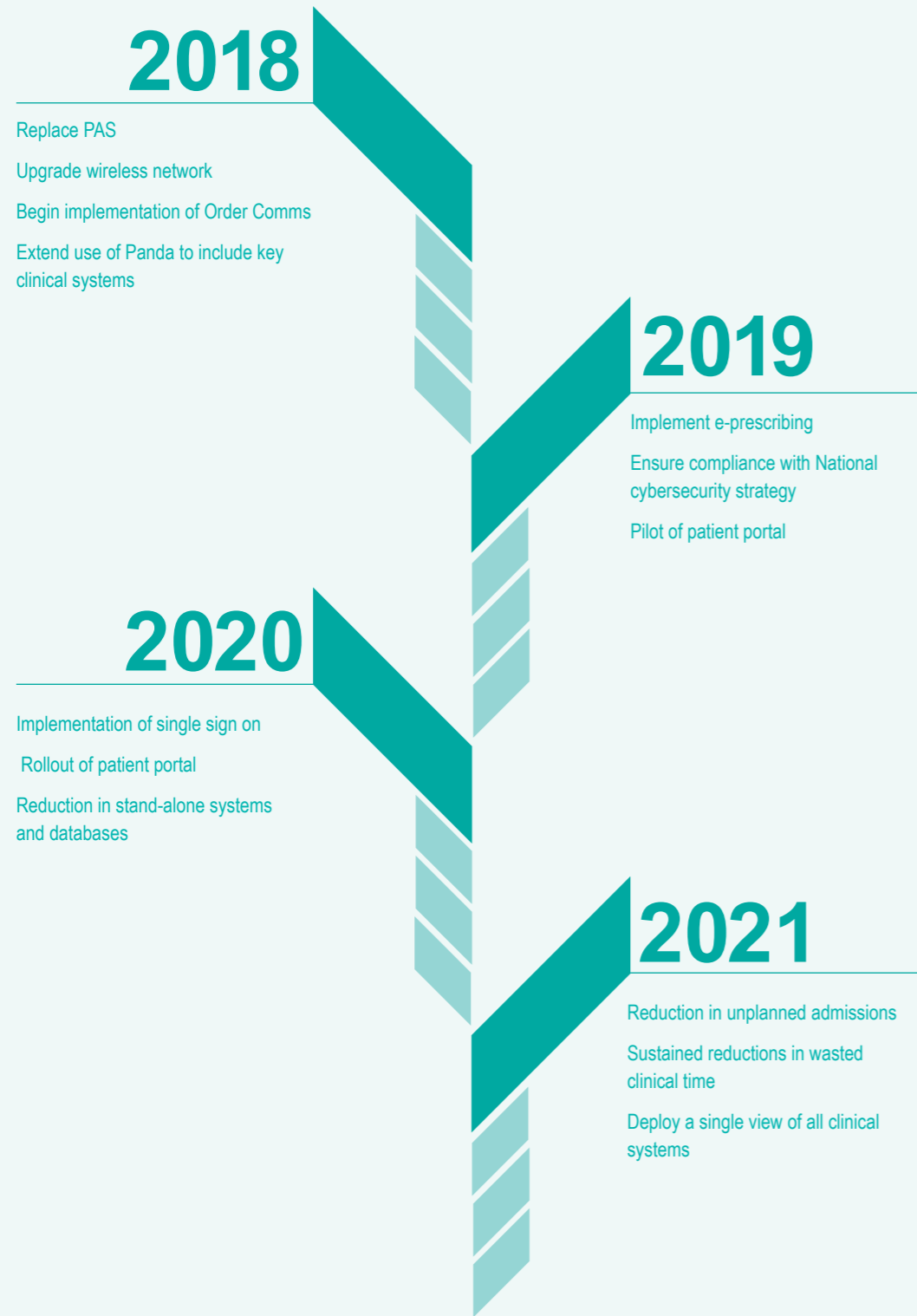
This will bring our systems firmly into the 21st century, increasing access and ease of access for all staff while making best use of available technology and protecting the Trust against the risk of cyberattack.

#### What will success by 2021 look like?

- 100% of staff will be able to access the information and data they need to perform their roles safely and effectively, where and when they need it, through the device most appropriate and convenient to them and their role at the Trust
- New network and storage capabilities will enhance access and data processing required to meet the overall aims of this strategy, in the most cost-effective way possible.
- Our Trust will be in the top 20% for patient and staff experience surveys

# Timetable

All these proposed changes are timetabled to take place over the next three years to 2021.



# Financing the strategy

The Trust is currently in financial special measures, and one of the overarching objectives of the management contract and a True North objective of Patient First is to balance the books. This strategy will deliver extensive cost savings, but will require upfront investment if we are going to meet our ambitious targets. We require investment in three forms:

- **Capital costs**, for the hardware and software needed to make information and data secure and accessible to those who need it, as we expand our capabilities within and outside the Trust
- **Implementation costs**, ensuring we have the right project management, design and technical resources and clinical input to ensure that new systems it will fully meet the needs of those who will be using them and will be implemented in a cost-effective and timely way.
- **Ongoing operational costs**, including providing 24x7 support to our key clinical systems, and having the ability to flex and evolve those systems in response to the changing needs and demands of our patients, staff and partners.

Too often, technology projects have over-promised and under-delivered expected financial and efficiency benefits. However, we know that:

- Preventing illness and returning patients to health more quickly saves money and provides immeasurable benefits to the individual.
- Storing and managing vast quantities of paper records and the associated system inefficiencies are expensive and force us to compromise on standards of care.
- Without clear, reliable data, it is impossible to accurately target where we can make further improvements or recognise success

Upgrading our current systems, and harnessing new technologies successfully, is fundamental to our ability to demonstrate that care is this organisation's first priority.

For each element of this strategy that involves specific capital, implementation or operational costs, we will:

- Develop a clear business case, working with clinical and finance colleagues, to capture the options, costs, benefits and how we will track and manage these, including any potential savings.
- Seek approval for funding through the Trust's annual budget setting round, with prioritisation of investments and co-ordination of planning developed collectively with all areas of the Trust.
- Work with partners including public sector, voluntary and community sector and private suppliers to share the costs and the benefits of technological innovation

By phasing and prioritising implementation of our strategy over the next three years and by focussing on developments that deliver the greatest value to our patients, we will make best use of the limited funding in this period.







Brighton and Sussex  
University Hospitals  
NHS Trust