



**THE *FORWARD VIEW* INTO ACTION:  
Paper-free at the Point of Care -  
Preparing to Develop Local Digital Roadmaps**

This guidance has been endorsed by the Five Year Forward View members and was produced by the National Information Board, in particular with input from the Department of Health, NHS England, the Local Government Association and the Health and Social Care Information Centre.



We would like to acknowledge the support and contribution of all other stakeholders especially the board members of the National Information Board workstream chaired by Dr Stephen Dunn, Chief Executive of West Suffolk NHS Foundation Trust and Rob Tinlin, Chief Executive of Southend-on-Sea Borough Council.

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## Foreword

Towards the end of last year, the national leadership of the NHS set out in the Five Year Forward View its collective vision to drive better outcomes for patients by harnessing the information revolution. This was swiftly followed by the establishment of the National Information Board (NIB) which articulated its strategy for using data and technology to transform the entire health and care landscape - to put data and technology to work for citizens, patients and their carers, support healthier lives and secure safe and sustainable health and care.

A critically important element of the NIB's national vision is local design and delivery. One significant part of this is the production of local digital roadmaps, led by local commissioners in tandem with local authorities, local providers, local citizens and other local stakeholders, for the introduction of fully interoperable digital records, including for primary and specialised care.

This guidance outlines the actions that CCGs now need to take to help us to turn this vision into reality. This is the first stage in a series of planning steps towards supporting their health economies to become 'paper-free at the point of care'. It also outlines the comprehensive package of support we, across the national leadership community, are making available to help - including a programme of national, regional and virtual events for both commissioners and providers to engage with new resources and learn from each other.

Your engagement in this agenda is vital.

# 1. Introduction and context

- 1.1 The [Five Year Forward View](#) made a commitment that, by 2020, there would be “fully interoperable electronic health records so that patient’s records are paperless”. This was supported by a Government commitment in [Personalised Health and Care 2020](#) that ‘all patient and care records will be digital, interoperable and real-time by 2020’. Radically new care delivery models supported by new payment arrangements which are value and outcome based are driving the need for change. This requires information to flow more effectively across health and care to support the delivery of direct patient care.
- 1.2 The Department of Health, its arms-length bodies and key partners are committed to aligning levers and incentives to achieve the ambition of being paper-free at the point of care. Over the coming years, progress towards a fully interoperable digital way of working will become increasingly important for providers and commissioners. It will be a key component of commissioner and provider continuous improvement, performance, regulation and inspection. Progress is expected to be made in all settings and local digital roadmaps will be the basis for planning and monitoring how this is to be achieved.
- 1.3 In April 2016, as part of the annual Clinical Commissioning Group (CCG) planning process, CCGs will be required to submit their plans - local digital roadmaps - for how their local health and care economies will achieve the ambition of being paper-free at the point of care by 2020. We expect CCGs to engage with provider and commissioner partners across health and social care in completion of these plans.
- 1.4 The purpose of this guidance is to help CCGs to prepare for production of their roadmaps, and to be clear about what they will be required to do now and over the coming months.

## 2. Why do local health and care economies need local digital roadmaps?

- 2.1 Patients and citizens expect that whenever and wherever they access services, those caring for them can easily access comprehensive, accurate and timely information. They anticipate professionals working with modern information systems that bring together all of the relevant information available – from diagnostic tests and clinical notes, case histories to records of personal preferences. Whether it's patient frustration about not being remembered or professional concern about managing care in the face of unknown risks, patient experience and the effectiveness and safety of care will be improved through the creation of paper-free environments delivered at the point of care.
- 2.2 Delivery of this ambition is complicated and takes time. Activities may include procuring the necessary software and hardware technologies from the market, ensuring that the systems can hold and transfer data to our legally-defined standards and effecting the business change and training to embrace and use the technologies and move away from managing clinical workflows with paper and whiteboards. Workflows and technologies need to work for the broader workforce, both clinical and professional, across the health and care economy.
- 2.3 To maximise our collective chances of achieving the 2020 ambition, we require health and care economies to embark on this journey now, building on existing collaborative working, or in some cases, starting working together for the first time.
- 2.4 Local digital roadmaps will generate momentum across a local health and care economy, inform local investment prioritisation and support local benefit realisation strategies.

### 3. Why should CCGs lead the development of roadmaps?

3.1 We believe CCGs are best positioned to lead and co-ordinate development, ensuring that roadmaps are aligned with wider service development in the health and care economy, as detailed in CCG and Local Authority commissioning plans.

3.2 The 'seeds have been sown' for CCGs to undertake this role. The [2015/16 Planning Guidance](#) contains the following paragraph:

"Sixth, to deliver the NIB's framework Personalised Health and Care 2020, local commissioners will be expected to develop a roadmap for the introduction of fully interoperable digital records, including for specialised and primary care. Although not due for publication until April 2016, it will be important to make progress on this key enabler next year."

The [CCG Assurance Framework](#) for 2015/16 states:

"As commissioners of secondary care, and with responsibility for the GP IT budget, CCGs are uniquely placed to achieve safe, digital record keeping and the digital transfer of patient information across care settings within their health and care economies. They will need to understand and can fulfil their obligations for digital interoperability."

The recently published [CCG Assurance Operating Manual](#), under the 'planning' component, sets out the following requirement for a CCG to be classed as 'outstanding':

"Plans provide a firm basis towards moving secondary care providers from paper-based to digital processes and the digital transfer of NHS Number and discharge summaries across care settings."

The current [GPIT Operating Model](#) makes a number of references to joining up care across different settings and sets out a responsibility for CCGs to drive integrated care through delivery of their local IT strategy.

3.3 Previous technology funding programmes - the Safer Hospitals Safer Wards Fund, Integrated Digital Care Fund and Nursing Technology Fund - required only limited CCG engagement. We expect that for future technology funds, CCGs will be more integral to the process of allocating, awarding and distributing funding.

3.4 To support CCGs in delivering the ambition of paper-free at the point of care within the next five years, the Care Quality Commission (CQC) and NHS Improvement will also have a key role in monitoring individual progress of providers.

3.5 The 2016/17 Planning Guidance will provide further detail and associated templates for the development of local digital roadmaps.

## 4. How will roadmaps be utilised?

- 4.1 Both during development and upon completion of the initial version, local digital roadmaps should communicate future intentions to local stakeholders and inform local strategies – broader service development, transformation and commissioning plans and investment prioritisation.
- 4.2 Local digital roadmaps will be considered as part of the CCG assurance framework from 2016/17 onwards, and CCGs should expect to be held to account for meeting the milestones in their roadmap. We recognise that for milestones that are a number of years out, flexibility to change plans may be appropriate.
- 4.3 The detail of future technology funding is expected to emerge in 2016, including the process through which it would be allocated. As a minimum, we would expect any initiatives for which funding is sought to be included on the local digital roadmap.
- 4.4 To support transparency and openness, the final versions of the local digital roadmaps should be published locally, with NHS England ensuring that roadmaps from across the country are easily accessed.



## 5. What is the immediate requirement of CCGs?

- 5.1 Local digital roadmaps are required to be submitted in April 2016. We anticipate local momentum on roadmap development will pick up significantly in January 2016, driven by the publication of the 2016/17 planning guidance, which will incorporate further information and templates for roadmaps. Also by then, the scale of potential technology investment available at a national level should be known following publication of the Government's Spending Review. However, local health and care economies who already have momentum on this agenda should continue to press ahead.

### Footprint

- 5.2 As an initial step towards development of the roadmaps, CCGs, working in conjunction with their Director of Commissioning Operations (DCO) teams, are required to establish the 'footprint' of their local digital roadmap and the governance arrangements under which roadmaps will be developed and signed-off. Templates to capture this information are provided on the [NHS England website](#), and examples of completed templates are provided at Annex A. Completed templates should be endorsed by local DCOs and returned to [england.digitalroadmap@nhs.net](mailto:england.digitalroadmap@nhs.net) by 30th October 2015.
- 5.3 The footprint for a roadmap will cover either a single CCG area, or multiple CCG areas. Individual CCGs will decide whether or not to cluster together with neighbouring CCGs in the development of a single roadmap. Every CCG is expected to be part of one footprint.
- 5.4 Factors that may drive clustering include: having momentum already around a 'regional' integrated digital care record; sharing a common key provider; a track record of partnering for strategic planning (e.g. for system resilience); a track record of partnering in informatics (e.g. for administration of GP IT); sharing a senior informatics resource (e.g. a CIO working for multiple CCGs); having a common Health and Wellbeing Board.

### Involvement of other organisations

- 5.5 Providers should be engaged in roadmap development. In developing the first version of the roadmap for April 2016, those providing services to a range of NHS commissioners (acute, community, mental health, ambulance services, and providers of specialised services) should be aligned to the footprint containing the lead CCG commissioner. A solution to be implemented by a provider in one local health and care economy may be the solution, or at least the foundation of one, required for another economy, and plans and milestones should be shared as appropriate. In any case, for subsequent roadmap iterations, providers will be expected to build on their initial plans and fully contribute to roadmaps in other footprints where they are a significant provider.

- 5.6 Every local authority (with a social care responsibility) is expected to align to one footprint for roadmap development. Where the boundaries of a local authority overlap with the geographical area of multiple footprints, the plans and milestones specific to the local authority that are developed collaboratively within the one footprint should be shared and incorporated within the other footprints' roadmaps.

## **Governance**

- 5.7 A clear governance structure to support roadmap development is critical, with representation from all key footprint partners. Governance arrangements are expected to continue beyond April 2016 to oversee delivery. Local areas may already have the foundations for such governance arrangements in place.
- 5.8 Each footprint should also agree the sign-off route for the roadmap well in advance. We would encourage the Health and Wellbeing Board (or relevant sub-group) to be involved in the sign-off of the roadmaps. NHS England will assure completed roadmaps.

## 6 How will progress towards a paper-free NHS be monitored and measured?

- 6.1 Between November 2015 and January 2016, CCGs and providers will be expected to complete a digital maturity self-assessment. Returns will be audited, initially by NHS England. The framework for digital maturity will have an emphasis on 'meaningful use' rather than 'software deployed'. The self-assessment will inform local digital roadmap development.
- 6.2 These assessments will be collated into a 'digital maturity index', providing a benchmark of maturity across the NHS. The self-assessments will be commissioned on an annual basis, allowing progress towards 'paper-free at the point of care' to be monitored. The 'digital maturity index' will be included within the CQC inspection regime.
- 6.3 NHS England is currently piloting the self-assessment questionnaire and developing an online tool. The self-assessment tool, with associated guidance and deadlines for completion, will be issued in early November 2015.

## 7 What support will be available for completing the roadmap?

7.1 To support commissioners and providers to mobilise towards this objective, a series of regional workshops are being held as follows:

- Bristol - 29th September
- Birmingham - 1st October
- London - 5th October
- Leeds - 6th October
- London - 8th October

The events are being designed to cover development of footprints and governance arrangements, completion of the digital maturity self-assessments, and development of the local digital roadmaps. They will also provide an opportunity to influence the thinking on the roadmap templates, and to hear from local health and care economies that have already made significant progress towards paper-free at the point of care. Registration for an event can be undertaken through the [NHS England website](#).

7.2 Regional teams from NHS England's Patients and Information Directorate are available to offer support on footprint and governance identification. They can be contacted as follows:

- London Region – Mike Part, Regional Head of Digital Technology, [mike.part1@nhs.net](mailto:mike.part1@nhs.net)
- Midlands and East Region - Martin Wallis, Interim Regional Head of Digital Technology, [england.pi-mande@nhs.net](mailto:england.pi-mande@nhs.net)
- North Region - Janet King, Regional Head of Intelligence, [janet.king16@nhs.net](mailto:janet.king16@nhs.net)
- South Region – Lois Lere, Regional Head of Digital Technology, [england.pandisouth@nhs.net](mailto:england.pandisouth@nhs.net)

7.3 We will develop or collate and disseminate further resources on an ongoing basis. Existing resources include the [priority digital standards](#) confirmed by the NHS England board and also the [National Information Board Interoperability Strategy](#) which outlines the key building blocks for information sharing. We have also published an [Interoperability Handbook](#) outlining the different options that organisations may take to share information digitally. Any local resources with potential for broader dissemination should be forwarded to [england.digitalroadmap@nhs.net](mailto:england.digitalroadmap@nhs.net).

7.4 We will develop a digital platform and a programme of national, regional and virtual events to enable commissioners and providers to engage with new resources and to learn from each other.

## 8 Key dates

September to October 2015	Local engagement to determine the footprint and governance for the roadmaps
30th October 2015	Submission of footprint and governance templates
Early November 2015	Digital maturity self-assessment questionnaire and guidance issued
November 2015 to January 2016	Digital maturity self-assessment questionnaire returns received and quality assured
December 2015 or January 2016	Planning Guidance issued, incorporating templates and further guidance for local digital roadmaps
January 2016 to April 2016	Development of local digital roadmaps
March 2016	Digital maturity index published
April 2016	Submission of local digital roadmaps

The NHS England team responsible for the local digital roadmap programme can be contacted at [england.digitalroadmap@nhs.net](mailto:england.digitalroadmap@nhs.net).

# Annex A:

## Example Completed Footprint and Governance Templates

These example completed templates are for Lead CCGs and Partner CCGs. They use Leeds CCGs as an example to illustrate a fully comprehensive return.

Interactive 'live' templates for both Lead and Partner CCGs to complete are [available here](#).

## Example completed template for Lead CCG

Information Requested	Guidance	Response
Lead CCG	<p>State the name of the CCG who will act as the 'lead' for communicating with NHS England on behalf of the organisations in the footprint.</p> <p>(Note - this does not imply that they take the leading role above other CCGs in the roadmap development process)</p>	Leeds North CCG, as the nominated CCG Informatics lead for the city
Partner CCGs	<p>Identify any other CCGs who will be partners in the local digital roadmap footprint.</p> <p>(Note - this may be a null response if the CCG identified above has chosen not to work within a cluster)</p>	<p>Leeds West CCG</p> <p>Leeds South and East CCG</p>
Providers	<p>Identify the providers who have agreed to play an active role in the development of the local digital roadmap. It is anticipated that all providers with a lead commissioning relationship with any CCG identified above would be listed here.</p> <p>Please also identify any Providers that you anticipate would have been involved at this stage but were not, and provide any explanation as to why this is the case.</p> <p>(Note - we are not asking for a list of all providers who are contracted by the CCGs above)</p>	<p>The Leeds Teaching Hospitals NHS Trust</p> <p>The Leeds and York Partnership Foundation Trust</p> <p>Leeds Community Healthcare</p> <p>107 GP Practices (via the 3 CCGs)</p>
Local authorities	<p>Identify any local authorities who have agreed to play an active role in the development of the local digital roadmap.</p> <p>(Note - this may be a null response if the overlapping local authority is a member of another footprint)</p>	Leeds City Council - Adult Social Care and Children's Social Care
Footprint rationale	<p>Please provide a statement of why the footprint and partners set out above are appropriate.</p> <p>For CCGs working in clusters, please reference (as appropriate) common key providers, common Health and Wellbeing Boards, track record of working together, joint informatics roles.</p> <p>For a CCG not working in a cluster, please explain why clustering is deemed not appropriate.</p>	<p>Leeds has a long track record of working together as a city to deliver an Informatics 'blueprint' that describes the city's strategic information and technology direction and future state. We have a single H&amp;WB and a single Leeds Informatics Board, which has senior representatives from all partner organisations across Leeds health, care and academia. One CCG is nominated to take the city lead for Informatics coordination. The chair of the Leeds Informatics Board is a GP and the 3 CCGs have a shared Director of Informatics post. Other posts are shared across the city, for example a single Informatics portfolio manager.</p>

Information Requested	Guidance	Response
Organisations providing support in the development of the roadmap	This might be a Commissioning Support Unit, an Academic Health Science Network, academic institution or independent organisation. A null response indicates that support arrangements have not yet been identified.	University of Leeds
Governance	Please outline the proposed governance and sign-off arrangements for the local digital roadmap. Indicate to what degree these governance arrangements are already established.	<p>The main body overseeing roadmap development will be the Leeds Informatics Board, which meets on a monthly basis. This is an established forum with representation from the parties listed above.</p> <p>Additional oversight will be by Provider Informatics Boards and the 3 CCG management teams.</p> <p>For sign-off, in addition to the bodies above, the Leeds Health and Wellbeing Board will sign-off. They meet every 2 months, so formal approval is targeted for their March meeting.</p>
Contact details for the individual who will be leading the roadmap development	Please provide name, job title, organisation, e-mail address and phone number.	[Details provided]
DCO endorsement of footprint and governance proposals	Please confirm that your proposals, as detailed in this template, have been endorsed by your DCO.	[Details provided]

Interactive templates for lead and partner CCGs to complete are [available here](#).



## Example completed template for Partner CCGs

Information Requested	Guidance	Response
Partner CCG	State your name as a Partner CCG within your local digital footprint.	Leeds West CCG
Lead CCG	Please state the name of the CCG who will act as the 'lead' for communicating with NHS England on behalf of the organisations in your declared local footprint.	Leeds North CCG
Confirmed governance, participation and endorsement	Please note here that you have actively agreed the declared local digital roadmap footprint.	We confirm that we actively agree the declared digital roadmap footprint and are full members of the Leeds Informatics Board that will oversee roadmap development.
Contact details for the key individual(s) in the CCG who have been actively involved in decisions regarding declared local digital roadmap footprint.	Please provide the name, job title, organisation, e-mail address and phone number.	[Details provided]

Information Requested	Guidance	Response
Partner CCG	State your name as a Partner CCG within your local digital footprint.	Leeds South and East CCG
Lead CCG	Please state the name of the CCG who will act as the 'lead' for communicating with NHS England on behalf of the organisations in your declared local footprint.	Leeds North CCG
Confirmed governance, participation and endorsement	Please note here that you have actively agreed the declared local digital roadmap footprint.	We confirm that we actively agree the declared digital roadmap footprint and are full members of the Leeds Informatics Board that will oversee roadmap development.
Contact details for the key individual(s) in the CCG who have been actively involved in decisions regarding declared local digital roadmap footprint.	Please provide the name, job title, organisation, e-mail address and phone number.	[Details provided]

Interactive templates for lead and partner CCGs to complete are [available here](#).

The NHS Five Year Forward View sets out a vision for the future of the NHS. It has been developed by the partner organisations that deliver and oversee health and care services including: NHS England, Care Quality Commission, Health Education England, Monitor, the National Institute for Health and Care Excellence, NHS Trust Development Authority and Public Health England.

