

Securing Excellence in IT Services Operating model for offender health care

Frequently asked questions

February 2013

1. What is the purpose of the IT operating model for offender health care?

The operating model defines how the NHS Commissioning Board (NHS CB) commissions the provision of services from 1 April 2013, when the overall responsibility for the delivery of offender healthcare IT programme passes to the NHS CB. It makes clear the organisational responsibilities associated with these arrangements.

Its purpose is to ensure safe transfer of IT support services and assurance processes from Primary Care Trusts (PCTs) to ensure continuity of support for these important services. The operating model will continue to support IT services as currently provided and further developments of patient records in line with vision of the NHS CB.

2. How will quality improve?

Under the new system, NHS CB through its regional and area teams will commission IT support services from appropriate providers who will have to deliver to quality standards, including compliance with information governance requirements.

3. Who has been involved in the co-production of the IT operating model to ensure the arrangements safely transition?

The IT operating model for offender healthcare has been the product of good matrix working across the NHS CB, involving the Patients and Information, Operations and Finance directorates; as well as offender health commissioners, DH policy leads, PCT cluster directors of informatics, the Department of Health Informatics Directorate (NHS Connecting for Health) and SHA cluster chief information officers.

4. Who will be responsible for the planning and implementation of the national clinical IT system in host agency premises?

The NHS CB will remain accountable for local delivery of these services as well as the responsibility for associated IT assets, replacement and disposal programmes and networking located within these premises. Where necessary the NHS CB will seek approval from the host agency for premises where the service is provided to install networking/cabling in accordance with relevant IT security/code of connection policies. The NHS CB through its area teams will commission an appropriate IT provider (or may choose to deliver themselves) to deliver these

services.

In some cases, the PCT has commissioned the delivery of IT provision through other service providers, and where these agreements are in place the NHS CB through its regional/area teams will manage these legacy arrangements from PCTs through transition subject to review going forward.

5. What is the process for implementing national clinical IT system and support services to support additional service capacity/provision to improve offender health care service delivery?

Where additional capacity or new premises has been approved to deliver offender health care, the NHS CB through its area teams will enable provision of national clinical IT system and associated support services, subject to an approved business case outlining financial arrangements and responsibilities. The NHS CB will remain accountable for local delivery of these services as well as the responsibility for associated IT assets, replacement and disposal programmes and networking located within these premises as per question 4.

6. Who is responsible for the host agency IT services?

The host agency is responsible for its own IT provision. The national clinical IT system and support services are entirely separate.

The National Offender Management Service (NOMS) will remain responsible for local IT provision to support its security systems (eg P-NOMIS) which are entirely separate from health care services and therefore are not included within these arrangements.

7. If existing contracts are in place with IT providers will these be continued for length of agreement?

Yes, where existing arrangements are in place these will be continued based on current contract value in 2012/13.

8. Will there be any changes to budgets for the delivery of this service?

The funding is based on existing costs and where commitments to use the national clinical IT system has been agreed will be incorporated within the NHS CB operational directorate operating budget to commission the IT support services associated with delivery of offender health care. Total funding commitments will need to be maintained within the overall NHS CB Offender Health funding envelope.

The NHS CB will be responsible for the management of revenue and capital budgets.

The NHS CB will continue to commission IT and support services with the Health and Social Care Information Centre (HSCIC) based on current contractual local service provider (LSP) and central funding arrangements for the ongoing development and delivery of LSP and national infrastructure service providers.