

DECEMBER 2009

The Scottish Government eHealth Programme aims to improve patient care through advances in technology, resulting in better access to health information, quicker test results for clinicians and joined-up GP and hospital services. This monthly newsletter is intended to keep NHSS up to date with national developments in the eHealth programme and to highlight some of the exciting projects going on at local level.

FIRST MEETING OF CLINICAL PORTAL PROGRAMME BOARD

The newly-established Clinical Portal Programme Board held its first meeting in Edinburgh on 24 November. The Board has been established to provide strategic direction to portal development throughout NHS Scotland. Membership is not yet complete but current details can be found [here](#)

The Board discussed the terms of reference and remit to which it will operate, the delivery approach to establishing the clinical portal, the importance of reaching early decisions on clinical portal options and the need for good communications to keep the clinical community updated on progress.

Following the meeting, Programme Board Chairman Derek Feeley said:

‘Clinical portal is one of the key deliverables of the eHealth Programme, with the potential to provide enormous benefits to clinicians and patients alike. The establishment of a Clinical Portal Programme Board and the senior level of representation on it reflects the importance with which NHS Scotland takes portal development. This Board will provide strategic direction and leadership to the clinical portal programme.

‘Strong support exists for clinical portal development among Board Chairs and Chief Executives, but bearing in mind that there are already two clinical portal solutions operating in GG&C and Tayside, there is widespread agreement that we must avoid a proliferation of solutions and recommend that a limited set of solution options be made available across NHS Scotland. This will help build a shared approach to portal development and avoid unnecessary costs and technical reinvention. Working collaboratively across NHS Scotland, we will seek to identify a solution that enables us to support Health Boards in realising this strategic objective.

The eHealth Team

Paul Rhodes
Programme Director

Strategy

Defining the purpose and vision of the eHealth programme.

Lead: Alan Hyslop

Architecture & Design

Creating the capability to join up systems across NHS Scotland.

Lead: Eddie Turnbull

Change & Benefits

Exploring opportunities in existing systems and communicating benefits.

Lead: Alastair Bishop

Programmes

Supporting and co-ordinating existing key technology projects.

Lead: Lesly Donovan

The team are based at St Andrew's House and can be contacted on 0131 244 2373 or via e-mail:

Hehealthcommunications@scotland.gsi.gov.uk

For more information on eHealth projects, visit:
www.ehealth.scot.nhs.uk

Further information is available at: www.ehealth.scot.nhs.uk

'One of the early decisions this Board will make is to take stock of the products and services already available to us. A discovery project by a consortium led by NHS Lothian is looking at the existing technology and services currently available and what else the marketplace can offer. The consortium will report its findings shortly and this will inform the Programme Board's decision on the recommended solutions to be taken forward.'

For further information about the eHealth Clinical Portal Programme Board contact Julie Falconer at julie.falconer@scotland.gsi.gov.uk

NHS BOARDS WORKING TOWARDS HEAT TARGET ON eREFERRAL

NHS Boards are working to increase their electronic management of referrals and achieve the HEAT target of 90% of referrals managed electronically from December 2010. This will benefit patients by improving safety, reducing delays and enhance the efficiency of the referral process nationally.

This work presents two key challenges. The first is to increase the number of GP referrals sent to secondary care services electronically. Considerable progress has been achieved in this area over the last six months and 91% of referrals are now sent electronically. The second is to ensure that when electronic referrals are managed in secondary care for appropriate service and priority, the result is fed back to GPs.

NHS Boards are developing new ways of working to improve the patient experience and achieve the HEAT target. Examples of good practice include:

- **NHS Highland:** realising that their current Patient Administration System may not meet the requirements of the HEAT target by the due date, the board has implemented a contingency plan to enable the target to be met whilst a new system is developed. As a result the board is now exceeding its planned trajectory for 2009/10.
- **NHS Grampian:** has undertaken a programme to explain the benefits of sending referrals electronically to GP practices and are using local GP facilitators to raise awareness and address training issues.

New eReferrals Network

The first eReferrals Network Meeting for Board eReferrals leads recently took place - sharing good practice and building up a network of peer support.

Feedback from the event was positive and another meeting is scheduled for 19th January 2010 at the Royal Infirmary of Edinburgh. This will provide updates and discussion on successful initiatives by NHS Boards and a forum for the exploration of further initiatives to accelerate the development of electronic management of referrals.

For further detail concerning this event, or to register an interest in attending, please contact: sg.ereferrals@luht.scot.nhs.uk

Further information is available at: www.ehealth.scot.nhs.uk

DIGITAL DICTATION REAPS MAJOR REWARDS

Phase 1 of NHS Dumfries and Galloway's digital dictation project is reaping early rewards with significant reduction in the length of time between dictation of letters and the letters being posted. In June there were 1,300 letters taking longer than 14 days to be posted after dictation, in November that has reduced to 31.

This has been achieved without any increase in medical secretary resource through process change and redesign enabled by a digital dictation and transcribing system. Typing rates have improved from 660 minutes per week in June, to 790 mpw in November.

D&G introduced digital dictation at their Royal Infirmary site in 2009, replacing analogue equipment and enabling changes to the process of letter creation which has delivered these significant results.

Phase 1 of the project allows the following:

- Urgent letters are easily identified from the list of files and can be processed first.
- Team leaders and managers can monitor workloads across all secretaries, identifying pressure points and redistributing work.
- Secretaries can access the audio information quicker via the central server as files are downloaded as soon as clinicians 'dock' their device rather than waiting for a tape to arrive.

Phases 2 and 3 of the project will lead to further reduction in overall process time by allowing:

- Auto-population of letter templates with clinic and patient details.
- Use of stored health and social care professional's details and commonly used distribution lists.
- Online checking and correction by clinicians.
- Electronic distribution to GPs and others.

A full case study of NHS Dumfries and Galloway's Digital Dictation project can be downloaded [here](#).

Elsewhere, NHS Fife are evaluating the potential roll out of a digital dictation system whilst NHS Forth Valley, NHS Borders, NHS Lothian and NHS Lanarkshire are all evaluating the potential roll out of voice recognition which builds on the efficiencies that digital dictation can enable.

For further information please contact Carolyn Malcolm or Murray Glaister: carolyn.malcolm@nhs.net , murray.glaister@nhs.net

Further information is available at: www.ehealth.scot.nhs.uk

NHS FORTH VALLEY ROLLS OUT SCI GATEWAY TO DENTAL PRACTICES

GP Practices in Forth Valley have been using SCI Gateway to send protocol-based electronic referrals since 2005. Now, with the availability of N3 communication lines in dental practices, this application is available for dental practices as well.

The use of SCI Gateway solves several problems with the old method of posting referrals:

- Referrals reach the receiving organisation much more quickly.
- All referrals are tracked in SCI Gateway, so none can get lost in transmission.
- Practices can check referrals to determine when they have been seen, and receiving organisations can change the display to reflect a referral's current status.
- The referral template includes specific requirements, which ensures that these are completed before the referral can be sent.

Using SCI Gateway, practices in Forth Valley can refer patients to Oral Surgery, Orthodontics, Community Dental, or a private orthodontic practice. Four dental practices participated in the pilot over the summer that helped refine the process. During this three month period almost 200 referrals were sent.

Alistair Bryden, *General Dental Practitioner (GDP)* in Grangemouth identified one of the primary advantages: 'There is now the facility to monitor the entire referral process from the practice [visit] to the patient being seen by the receiving consultant or practitioner.'

Joe McManners, *Consultant Oral and Maxillofacial Surgeon*, called SCI Gateway a win-win combination: 'The receiving clinicians can develop referral questions, which help to pin point the issues they need answered...This helps concentrate the mind of the referring clinician and [can] even be used as an aide-memoire in the surgery.'

Tom Ferris, *Clinical Director Dental Services*, identified an additional benefit encountered during the pilot: 'One positive and unexpected consequence was the fact that three medical practices were able to refer to us.' This means that patients who may be uncomfortable visiting a dentist have a simple alternative method of referral through their GPs.

On 06 October an evening meeting was held to launch SCI Gateway for all dental practices in Forth Valley. Over the next few months, Forth Valley eHealth personnel will be visiting practices to set up Gateway and train personnel.

Gordon Morson, *General Dental Practitioner* in Alloa and *Chair, Forth Valley Local Dental Committee*, shared his vision for the future: 'In the long term, we hope a clinical system will interface with this, providing even more information for specialists. In the meantime we can look at each proforma and make changes, where necessary, to improve the quality of data we receive.'

Further information is available at: www.ehealth.scot.nhs.uk

For further information contact Eric Hill, *Senior eHealth Facilitator Trainer*, NHS Forth Valley at 01786 434748 or eric.hill@nhs.net.

If you're interested in doing something similar and would like some support or would like to discuss in more detail please contact Claire Lawrie, Strategic Change Facilitator on 07919 298 114 or email ehealthchangeteam@scotland.gsi.gov.uk.

ONE-DAY EVENT TO SEE eHEALTH IN ACTION

RCN Scotland and the Scottish Government are holding a one-day eHealth event called *eHealth in Action* on 18 January 2010 at Victoria Quay Edinburgh. The event, which is free of charge, is intended for a wide audience of clinicians, managers and educationalists. It will give you the opportunity to:

- see various kinds of technology and other uses of eHealth in action.
- try out a range of interactive resources.
- try new initiatives in a safe and friendly environment.
- find out about the RCN eHealth contribution to eHealth.
- find out what RCN resources are available to you.
- hear about the Scottish Government's commitment to using eHealth to support high quality healthcare in the NHS.
- find out how you can contribute to eHealth.

Go to the RCN's website [here](#) for more details or contact Kathryn Clark at RCN Events on 020 7647 3585 or email Kathryn.clark@rcn.org.uk

PORTFOLIO MANAGEMENT GROUPS HELP TO DELIVER eHEALTH PROGRAMME

The eHealth Programme Board has established 4 Portfolio Management Groups (PMGs) to oversee and help implement key eHealth systems and products through their operational shelf-lives. Groups have been established in 4 categories – clinical, public health, business systems and infrastructure.

The PMGs will monitor and coordinate activities and submit regular reports to the eHealth Programme and act as a forum to consider how changes to the products and systems within each portfolio will support the delivery of the eHealth Strategy.

Further details will follow in our next newsletter.

For further information contact Phil Burnside at phil.burnside@scotland.gsi.gov.uk

Further information is available at: www.ehealth.scot.nhs.uk

EVENTS TO NOTE

Date	Event	Venue	Details
3 December 2010	Living and Dying Well	Herriot Watt University	Click here
18 January 2010	eHealth in Action	Victoria Quay, Leith	Click here

Further information is available at: www.ehealth.scot.nhs.uk