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- · My Health Online
 - Patient portal
 - Maternity Ante Natal
- Chronic Disease Support
 - · Diabetes remote monitoring
 - · Diabetes information sharing

Service Improvement Projects Current Portfolio



- · Test requesting and results reporting
 - Specification completed
 - Procurement process within Care Management System Strategy
- Transfer of Care Communications
 - Specification
 - National solutions procured for integration in CMS
 - Local interim improvement/readiness pursued
- Medicines Management (scoping)
- · Patient identification

The Individual Health Record



- Initial benefit emergency, out of hours, community
- Later long term care, self care etc.
- Incremental development
 - Clinical communications
- Summary GP systems
- Content
 - Demographics
 - Care relationships
 - Events
 - Summary information especially medication
 - Personal privacy information
- · Pilot Project Out of Hours Gwent Community

Care Management Strategy



- Action 'in common by agreement' with NHS Wales to address the provision of systems to support health care processes
- · Jointly owned with local organisations
- Use Service Orientated Architecture
- · Build incrementally
- New/ replacement functionality common across Wales
- · Common 'portal' for clinicians
- · Strategy being consulted upon with service now
- Completed June 2006

Infrastructure and Readiness



- · Access devices and networks
- · Duplicate records and data quality
- Project management
- Training (ECDL)
- Workforce Strategy
- Professional Development
- Strategic Partner
- 76% resource invested locally in first year

How we do business

"Using good governance to get stakeholder commitment"



- •National Conferences with 'real time' decision making
- •Clinical Leadership of all Service Improvement Projects
- •IHC Clinical Team National & Local Networks
- •Director level visits to all Trusts/LHBs quarterly
- •All-Wales National Architecture Design Board
- •International Advisory Board
- •Chief Exec and Assembly sign off Business Cases

The National Architecture Week



- - Agree how information technology will best be applied to care processes at the clinical interface.

 Agree the optimum approach to the acquisition and deployment of systems
 Clarify the boundaries between nationally and locally provided services

- Common by design
 Common by agreement
 Local by agreement
- People
- 100 attendees
 50% Clinicians, 50% IMT Professionals/Managers
- Opened by Anne Lloyd
 Outcome reported to team of Chief Executives
- Duration

 - 5 days
 No 'tail off in numbers'

Informing Healthcare Priorities 2006/7



- National architecture strategy for local & national care management systems (CMS)
- Private sector capability & capacity (Infrastructure/Strategic Partner)
- Clinical communications increase availability of what's already there (SIPs>CMS)
- Building secure universal access to clinical patient information "starting with what matters most" (IHR)
- Patient safety through improving identification and medicines management (SIP> CMS)

Informing Healthcare Priorities 2006/7



- New models of service provision particularly for those with long term conditions (SIPs>IHR and CMS)
- My Health On Line Improve web based information available to carers and patients (SIP> IHR)
- Access to clinical guidelines and knowledge (Infrastructure/CMS)
- Health Informatics Professional Development (Infrastructure)
- Even More Clinical Engagement Nurses & GPs (How to do business in Wales!)