

26 November 2020

Dear Dr Goodall

NHS Wales Informatics Services

As you are aware, the Committee was scheduled to return to this issue earlier this month, but due to the Covid-19 pandemic, we agreed to seek a further update on progress made on the implementation of the recommendations contained in the Committee's Report, published in November 2018, by letter. I would welcome your detailed comments on the issues in the annex and look forward to receiving your response, by 29 January 2021, to enable the Committee to have the most up to date position as it can.

In addition to receiving a copy of the Welsh Government's response to the recommendations in the Auditor General's recent report on *Welsh Community Care Information System*, I would welcome responses on some specific matters arising from the report. I have detailed these in the attached annex, too.

I look forward to receiving your response.

Yours sincerely,



Nick Ramsay MS

Chair

Croesewir gohebiaeth yn Gymraeg neu Saesneg / We welcome correspondence in Welsh or English.



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NHS Wales Informatics Services

Overall progress updates

- **Progress in implementing previous AGW and PAC recommendations on informatics systems in NHS Wales.** In November 2019, the Welsh Government identified that five of the Auditor General and PAC recommendations had been completed; seven were due to be completed shortly. A further six required further action and needed to await completion of the Governance and Architecture Reviews before considering further.
- **Progress with the development and delivery of plans around ‘digital infrastructure’, ‘digital workforce’, ‘digital commercial’ and ‘digital communications’, and an explanation of how any delay might impact on the development of the new Digital Special Health Authority (SHA).** In November 2019, the Welsh Government stated that the digital infrastructure and digital workforce plans would be complete by spring 2020 and that subsequently it would undertake work on digital commercial and digital communications strategies.
- **Progress towards delivering the architecture review’s action plan by November 2022.** The architecture review set out steps the Welsh Government needed to take within 3–9 months, one to two years and two to three years, to put in place the digital architecture needed to deliver at pace its ambition for health and social care, set out in *A Healthier Wales*. In November 2019, the Welsh Government committed to ‘seeking to make as rapid progress as we can over the next four months and six months’, but also stressed that factors, such as Brexit and recruitment potentially created delivery challenges.

Specific matters

Governance, Strategy and Leadership

- **Action taken since November 2018 to ensure openness and transparency around reporting on progress in delivering digital transformation in Welsh healthcare in advance of the creation of the Digital SHA.** In November 2018, the Committee’s report identified concerns about a culture of self–

censorship and denial amongst those charged with delivering a digital transformation in Welsh healthcare. In November 2019, the Welsh Government identified that establishing the Digital SHA would partly address that issue. However, the SHA will not be operational until April 2021 at the earliest.

- **Reflections on any notable changes in the Welsh Government’s digital priorities and strategic approach for NHS Wales, considering learning gathered through its response to the Covid-19 pandemic.** The Committee’s November 2019 evidence session considered the Welsh Government’s strategic approach as set out in documents, such as its Informatics Plan 2019–2022 and the architecture and governance reviews. The Welsh Government’s response to the pandemic has included multiple IT initiatives across primary, community and secondary care. For example, enhancing the digital and remote working capability of GPs so that they can undertake video consultations.
- **Update on recruitment to key digital leadership roles.** In February 2020, the Welsh Government provided further details about the respective roles of the Chief Digital Officer, the Chief Clinical Information Officer and the Chief Technology Standards Officer. It also stated that the timetable for appointing the CDO remained dependent on the establishment of the proposed NHS Executive SHA, in which the role will be hosted. However, it would also ‘explore alternative options for hosting the CDO in the interim in order to proceed with the recruitment as soon as possible’.
- **An account of how NHS Wales, including NWIS, has engaged with the development and work of the Centre for Digital Public Services and how the Welsh Government sees the relationship between the new Digital SHA and the Centre working in future (assuming continued Welsh Government support for the Centre).** The Committee understands that the Centre’s initial piece of work has focused on using digital technology to improve services for users of Adult Social Care in three local authorities.

Finances and Resources

- **Breakdown of the estimated costs of establishing and operating the proposed Digital SHA, including the estimated operating budget compared with NWIS and the reasons for any differences.** In his September 2019 [Update on Digital Health and Care](#), the Minister for Health and Social Services announced that the NHS Wales Informatics Service (NWIS) would transition to a new digital SHA from April 2021. This was with the intention of strengthening governance and accountability, including plans for a new independent chair and board members with experience and understanding of digital change. The Welsh Government is currently [consulting](#) on various aspects of its proposals for the digital SHA. The consultation notes that ‘some additional expertise will be recruited in order to fulfil the additional functions and responsibilities proposed’ but does not provide information about estimated costs.
- **Update on the Digital Priorities Investment Fund (DPIF) to include a breakdown of the allocation/expenditure to date. As part of this, the Committee would welcome details of how this Fund has been used to support the Covid-19 response, what this may have meant for other planned projects and how those projects might otherwise be funded.** In his September 2019 update, the Minister announced £50m for the DPIF to support delivery of five priorities (transforming digital services for patients and public transforming digital services for professionals, investing in data and intelligent information, modernising devices and moving to cloud services and cyber-security and resilience).
- **Update on any recent work undertaken by the Welsh Government to understand the overall costs and affordability of delivering its digital strategy for health and social care over the coming years, particularly post the architecture review.** In his 2018 [report](#) on Informatics systems in NHS Wales the Auditor General reported ‘In 2016, for the first time, NHS Wales has set out indicative costs and timescales of delivering its strategy. The cost over five years is tentatively estimated at £484 million on top of existing budgets’.

Welsh Community Care Information System

- **The Welsh Government’s position on whether it considers the progress made by the WCCIS Programme to date to be satisfactory.** The Auditor General found that the Welsh Government’s ambitious vision for WCCIS is still a long way from being realised. The report showed that, “as at 31 August 2020, 19 organisations were using WCCIS or had signed deployment orders, with four in active negotiation and six yet to commit. Of the 19 organisations, 13 local authorities and two health boards had gone live. However, ‘live’ can mean different things. Differences in how organisations are choosing to deploy WCCIS currently limit opportunities for integrated working and raise other value for money issues”. There was an initial estimation that all local authorities and health boards could be using the system by the end of 2018.
- **Whether the Welsh Government still considers that a single system rolled out across 29 organisations is necessary to support its efforts to deliver seamless and integrated health and social care. And, if so, what it will now be doing to drive further roll out before the end of the contract term, including any key milestones or update on scheduled go live dates.** The report notes that “...the Welsh Government still considers that a national approach to information sharing between health and social care is an appropriate model to enable the co-ordination of care within the community”. It also found that despite efforts to accelerate the process, the prospects for full take-up of WCCIS and benefits realisation remain uncertain, and some important issues remain to be resolved. For example, around the functionality of the system, data standards and benefits reporting.
- **Update on the anticipated costs of the hardware refresh outlined in the report and the proposed approach to meeting any shortfall in funding. We would also welcome clarification of how the value for money of the hardware refresh is being considered alongside any potential system upgrade to a new software platform hosted in the Cloud and whether an earlier decision on the software platform could have negated the need for the hardware refresh.** The Auditor General found that the Welsh Government has approved approximately £1 million to fund a

contractually required refresh of the hardware supporting WCCIS. Potentially the refresh will cost more than the amount secured and organisations that have signed deployment orders are liable to pay a share of any additional costs. The report also found that before the end of 2020–21, the [WCCIS] National Programme Team expects to complete a detailed appraisal of the costs, benefits and risks of moving to a newer version of the system hosted on the Cloud.

- **The Committee requests a copy of the expected annual report on the progress of the programme for the period to the end of March 2020 and a summary of any additional evidence that the Welsh Government and National Programme Team would point to around benefits realisation.** The report notes that the Welsh Government is expecting the National Programme Team to produce a comprehensive annual report on the progress of the programme, starting with the period to the end of March 2020. That report was delayed by the Covid–19 pandemic. When the Auditor General asked for evidence of local and regional benefits his team received limited feedback. However, the National Programme Team’s [statement](#) at the time of publication said that WCCIS is ‘already making a difference’ and that the organisations that have gone live are ‘seeing the benefits’.
- **Update on progress delivering mobile functionality within WCCIS including the latest position and any results from the mobile pilot and progress in taking enhanced functionality into testing.** The report states that: “Under the original contract requirements, WCCIS must be capable of working on a mobile platform via wireless and 3/4G so that it can be accessed by NHS and local authority staff working in the community. A version of the mobile application based on the original requirements is now scheduled to be piloted before the end of 2020. The pilot has been delayed in part due to the impact of COVID–19 and the capacity of local organisations to support this work. Enhanced functionality has also been agreed and is due to go into testing shortly, for example to include appointments management”.

Issues Relating to other Specific Systems and Outages

- **Update on progress delivering the CaNISC replacement and confirmation that all secured funding remains available.** In November 2019, the Welsh Government confirmed that it had approved £7.5 million to replace CaNISC and stated that the replacement programme would be complete by November 2022, but that it would try to make it happen ‘more quickly’.
- **Update on GP clinical systems, clarifying the current contractual position and how that was arrived at from a procurement perspective.** The Welsh Government’s decision in October 2019 to terminate its contract with one of the providers of GP clinical services left one remaining provider on the framework. In November 2019, the Welsh Government noted that it was reviewing how to proceed, with that review process likely to conclude in January 2020. In February 2020, the Welsh Government noted that NWIS was working with the Health Boards and GP Practices in Wales to establish new contract(s) with the GP System suppliers.
- **Update on My Health Online to include: the number of people currently registered to use My Health Online; work with GP system suppliers to ensure that patients do not need to re-register; and progress in enhancing the functionality available.** In November 2019, the Welsh Government stated that 350,000 people were registered to use My Health Online, but that enhanced functionality and requiring GPs to use the system, meant that ‘uptake will be greater in future’. In February 2020, the Welsh Government committed to working with the suppliers to address the registration issue around the transfer of data between practices.
- **Update on data outages and resilience to include, for the period since 31 August 2019, quarterly outage figures for the data centres and for CaNISC, WLIMS and WCCIS. Also to include an update on any actions the Welsh Government plans to take to strengthen data centre resilience.** The Committee’s 2018 report found that “... the NHS in Wales is struggling to run its own data centres with 21 outages in the first 6 months of 2018 – one outage every 9 days”. At its 2019 evidence session, the Committee returned to issues around outages at the Blaenavon Data Centre and the

resilience of CaNISC and WLIMS based on the updated outage data supplied by the Welsh Government. The Welsh Government stated that it had made additional investment in routine maintenance to make NHS Wales IT systems more resilient and reduce outages.

Auditor General Report on NHS Clinical Coding

The Committee has also noted the Auditor General's recent report on [NHS clinical coding](#). While the report did not raise specific recommendations for the Welsh Government, I would welcome a response to the issues raised under the suggested four key areas for attention on page 33 of the report. These were around national leadership and capacity, training and awareness raising, adopting recognised good practice and using technology to drive improvements.