Cross-Party Group on Digital in Wales Meeting – 30/3/2022

Minutes of the meeting of members of the Cross-Party Group on Digital in Wales, held on 30/3/22 12:00pm via Zoom.

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Present:	Rhal	Rhun ap Iorwerth (Chair – MS for Ynys Mon)
	PaRh	Pryderi ap Rhisiart (Secretariat – Menai Science Park)
	HR	Heledd Roberts (Rhun ap Iorwerth MS' Office)
	CQ	Cari-Anne Quinn (Life Sciences Hub Wales)
	CE	Carwyn Edwards (Menai Science Park)
	CF	Cath Fallon (Monmouthshire County Council)
	CL	Chris Laity (Universities Wales)
	DJ	David Jones (Non Executive Director at Ofcom, Ofwat and Qualifications Wales)
	DW	David Wells (Fusion Digital Health)
	DR	Daniel Rees (Swansea University)
	DH	David Hunnisett (Technical Manager at Scienap)
	GD	Gareth Davies (Agor IP)
	GG	Graham Guilford (Bangor University)
	HL	Hamish Laing (Digital Inclusion Alliance Wales)
	HT	Helen Thomas (Digital Health and Care Wales)
	HE	Henrietta Eyre (Fusion Digital Health)
	JI	James Ingram (Scienap)
	JL	Jocelle Lovell (Digital Communities Wales)
	LG	Lynne Grundy (Betsi Cadwaladr University Health Board)
	MLJ	Marie Latham-Jones (Betsi Cadwaladr University Health Board)
	PW	Peter Williams (Welsh Government)
	PMJ	Philippa Morgan-Jones (Scienap)

Agenda Item	Action
Welcome and Introduction to the Group	

This is a group established to look at Digital in the wider sense. We've looked at digital in Agriculture, Skills, and today we look at Health and Care – how can we take advantage of what digital can offer us when delivering health and care services in Wales.

Sion Charles (ARCH Innovation Forum)

Emily Roberts (M-SParc)

Apologies – Natasha Ashgar MS and Carolyn Thomas MS.

Helen Thomas, CEO of Digital Health and Care Wales

SC

ER

National Digital Organisation in NHS Wales. Role is to 'Transform Health and Care for Everyone by providing World-Leading Digital Services.' Helen gave an overview of how the group aims to enable digital transformation, providing the national data architecture from which others can improve and innovate.

Expansion of data is a key area, so that information can be shared cross-sector. DHCW deliver across NHS and Social Care in Wales and aim to do this providing the highest quality service and meeting the demands of the Health Service. Ultimately, it's about supporting the value in data which is generated right across the healthcare system.

Organisations and programmes supporting the work of the DHCW were outlined, including the NHS mobile app, which ultimately will support patients to access data. The high performance and talented workforce ultimately drive the work, and forecasting what skills and disciplines required is currently being undertaken.

Siôn Charles, ARCH, discussing the Welsh Health Hack

An outline of the Welsh Health Hack, delivered in collaboration with organisations across Wales, including M-SParc and the Welsh Government, was provided. The Hack is run as a way of supporting innovation in Health Care. Innovation is required to push things forward; the Hack is a way of solving operational challenges with technology. It allows sharing of risk and rewards, as funding is provided to take the winning ideas forward. It provides industry with a way to work with the NHS, and new relationships are often formed even within teams which don't go on to win funding.

It was noted that the Hack used to be in-person but is now online and works well Pan-Wales. The format of the Hack, from submitting a challenge to funding and support, was shared with the group. The funding allows winners to prototype and see if the solution is viable, before scaling up. A large-scale evaluation of the last 9 Hacks is underway, and there will be data to share from these results on the success of the Hacks.

A social care Hack is being held in June, on the 8th and 23rd! Keep it in your diaries as information is forthcoming.

Dave Wells and Henrietta Eyre, Fusion Digital health

Fusion Digital Health are a Health Informatics Company, whose objective is to solve complex challenges within healthcare, to improve health outcomes and advance medical science. They work with healthcare groups, charities, and industry to solve issued globally.

What's critical to the work is their deep experience across the NHS in the four constituent countries, as well as healthcare across the globe. Their work on health informatics looks at solutions including clinical management, focus areas including preventative health.

Details of the Nutrition Skills for Life project was shared – a connection made via the Welsh Health Hack! All levels of the programme was able to be fully digitised, including resources, games and videos. The Cardiac Rehab project, for connecting the full cardiac rehab team, was also inspired by the Hack, and will allow Fusion Digital to build partnership with apps including Strava to monitor activities and use data to support efficacy of intervention.

The Lifestyle Clinic focused on diabetes health and will address an unmet need by providing a solution to help people across the globe. Finally, Registry Platform is a data-focused platform to support Latin America with lung cancer screening initiative. Health information for cancer diagnosis is something the team are passionate about, and this will cascade into other companies across the world, using an approach originally used in Wales.

Open the session to discussion

CE – There are risks to companies and it can be a challenge to get access to the field; can any companies on the call discuss their experience or what would support them to get into this field, other than of course the Hacks we've heard about.

HE – Expanding the remit of the Health Hack would be good, to see a little bit more about the challenges the NHS face. The more exposure to the challenges, the better. Collaboration is key.

DW – It's a coincidence we've met people through the Hack, but there should be a better way to meet people and share ideas, and see who wants to contribute

Rhal – More networks are required, we have the Life Science Hub, but do we need more in Wales?

DW – Almost a LinkedIn type network is required, so we can share interests and challenges.

HT – We are creating that network with the LSH, to bring health and academia together. Discussing what events we want to run and get people in the room; pre-pandemic this was working well and we are interested in stepping this up.

CQ – Our broader remit at the Life Science Hub for Wales looks at innovating adoption and driving impact through to patients. Many events and initiatives are put together and work well to drive forward change, working with innovation and ensure we make a difference. We are also looking at the broader funding options, to work collaborative and bring some of those strands into the region.

PaRh – Is there such a thing as a 'sandbox environment' where companies who want to innovate can have access to an environment where they can deal with data, safely, is something practical like this available? To allow people to better access digital services in Wales.

HT – Not quite a Sandbox, but we have a library of resources which tell you how you need to interact and connect into the Health care system, through the Digital Wales Ecosystem site.

SC – Regarding networking, this links back to a lot of conversations we've been having, and opportunities do exist, but to make the connectivity work there is more to do. The nature of push/pull needs to be discussed too – there's a lot of push from the outside pushing innovation on the NHS which often demand changing processes and so on. Pull is required from the NHS to pull innovation in. A new pathology laboratory is being developed, and this needs to function and there are opportunities to draw companies into the conversation. It's good to see the enthusiasm of others to follow this model.

DJ – The discussion around digital and technology is about product and procurement, rather than the impact on patients and what the process change is.

Rhal – How about electronic prescribing, where the Pull is there but the Push isn't.

HT – It's about digital transformation here, not innovation, but we have to make sure we can have success in the environment. Investment in the transformation is essential.

Rhal – Invited those from education to say a few words on skills, or the companies represented today to discuss skills.

- JI The issue is a lot more interest in innovation; all areas need help. People who understand the commercial side are required when it comes to funding. This includes an understanding of the procurement process and GDPR. It's starting to improve but there is a way to go.
- HT The biggest challenge we face is the route through from a good idea through to how we land relies on the procurement process, and how do we develop the pathway to enable this to happen without it being such a challenge is required.
- GD We sometimes see digital in silo, but we need to look at the application process. Digital is the normality, the transformation almost has occurred, so we need to look at this paradigm. The value comes from turning the digital into innovation, not just in having strong digital skills.
- DJ A graduate just out of University will see the attraction of working within the NHS, but within a few years those young people may have all moved to different jobs, that curiosity and changing roles is common in digital fields.
- Rhal Getting you people on digital courses has proven difficult for local Colleges.
- HT Getting girls into STEM is important also, we need to role model that there are great careers. 5 years for any prescribing programme to land is a long time, and hopefully we are working on movement here also.

Closing Remarks	
Rhal – Thank you to everyone for their input and comments, and thanks to the team in my office and in M-SParc for preparing the meeting. We've heard messages from key people here today, and we're grateful for those inputs. Information will be shared with the press regarding this meeting today and will aim to keep the focus on this field moving forward, which is the purpose of this group.	