Technology and Innovation in the NHS
Glasgow City Health and Social Care Partnership

Please find the following views from Glasgow’s Health and Social Care Partnership regarding the above:

1. **What do you consider have been the main successes of the existing Scottish Government’s eHealth and telecare/telehealth strategies and why?**

   In Glasgow these strategies supported by the national Technology Enabled Care Programme has facilitated significant increases in telecare referrals over the past 2 years. It has enabled wider application of assessment based technology to allow service users’ needs/risks to be better identified. Telecare is increasingly recognised as a key enabler for keeping people safe within the home environment. A growing proportion of all telecare referrals in Glasgow are for more advanced equipment reflecting a movement towards integration within the personalised assessment process. This suggests a closer integration with assessment practice. The programme has also enabled the extension of support service out with the home to support people suffering from dementia.

   In general the strategies have helped develop a more coherent technology based system which adopts a more lateral approach in applying its use to support the care system and for patient self-management.

2. **What do you consider have been the main failures of the existing Scottish Government’s eHealth and telecare/telehealth strategies and why?**

   The introduction of less developed technology approaches such as use of digital platforms and home mobile health monitoring have been more difficult to progress compared to the more established telecare system. More requires to be done to highlight the advantages of using relatively simple technologies to support individuals to remain at home and at critical care transitions such as hospital discharge. This will be important as digital based technology requires to be adapted to meet the challenge of the telephony system’s switch from analogue to digital.

   The forming of the new partnership structure and the associated transitions has contributed to a planned implementation. There also appears to be some disconnect between the Board’s E-Health department and local health teams over roles and responsibilities with implementing telehealth strategies. This leads to some issues with the challenge of overcoming the cultural resistance to technology based solutions to increase support for self-management and more efficient local health systems.

3. **How well does the Scottish Government’s draft Digital Health and Social Care Strategy 2017-2022 address the future requirements of the NHS and social care sector?**
The provision of a robust infrastructure of reliable connectivity across the whole of our country requires to be emphasised as a priority otherwise the ambition to digitalise the health and care system will not be realised as telecom suppliers move from analogue to digital connections and in turn create risks for existing users.

4. Do you think there are any significant omissions in the Scottish Government’s draft Digital Health and Social Care Strategy 2017-2022.

The Health and Social Care Delivery Plan notes that there is an opportunity to bring together all IT, digital services, telehealth and telecare, business and clinical intelligence, predictive analytics, digital innovation and data use interests in health and social care. However the effective coordination of this will require a new approach and skill set within public sector institutions. The main question is how will innovative approaches and development of digital technology be applied to change the way service users/patients connect/interact with services. There are further barriers over procuring the required technologies and how user data will be safely managed.

5. What key opportunities exist for the use of technology in health and social care over the next 10 years?

- Providing accessible care more cost effectively when users need it
- Increased confidence in the use and potential of technology through the use of mainstream technology to keep people safe at home
- Reducing bureaucracies of public sector agencies in meeting service users’/patients’ needs
- Enabling the focus of scarce resources to those most in need with technology being used more systematically to support preventative needs and highlight emergency risks
- Integration of Health and Social Care plus other 3rd Sector providers
- Single source systems
- Better inter-operability between different systems
- More streamlined, centralised control centre models with a single vision and wider capacity for implementation to be adopted across all sectors to include a range of technologies.
- Development of a robust ethical framework to protect users of technology

6. What actions are needed to improve the accessibility and sharing of the electronic patient record?

Identification of accessible data sharing arrangements where the patient owns the record and can be in control of the benefits this provides regarding effective clinical and social care decision making
7. **What are the barriers to innovation in health and social care?**

- Silo based working within partnerships which fail to agree the best service pathway and fully exploit the innovative use of technology that best meets stakeholders' needs and preferences
- Cultural resistance to change in management of risk and acceptance of benefits produced
- Skills gap in workforce
- Ability to make effective partnership with innovative organisations
- Lack of focused leadership to introduce change
- Limitations of a narrow equipment market with limited range of devices
- Lack of digital connectivity
- Affordability to users re services and connectivity