General

This update covers current eHealth Strategic and Operational programmes of work.

Integrated Electronic Health and Care Record

TrakCare – Social Work Referrals
Electronic referrals to Social Work went live on Monday 10 August. Referrals are made on TrakCare via a workbench and Social Work staff will view referrals via a secure dashboard in MicroStrategy.

TrakCare – Results Sign-off
Good progress continues to be made with results sign-off in TrakCare with 51% of results being signed off during July 2020.
**TrakCare – Mental Health Order Communications Implementation**
Implementation of Order Comms to 95 Mental Health in-patient wards will commence on Monday 24 August, with the roll-out concluding in the autumn. Staff training is underway via Teams.

**TrakCare – Major Trauma Workbench**
The Major Trauma workbench is due to go live on 24 August. This will support patient flow throughout the Queen Elizabeth University Hospital (QEUH).

**EMIS Web – Family Nurse Partnership (FNP)**
The FNP will go live in EMIS Web on 24 August. There are currently 6 teams now operating across the Board area, delivering the programme to over 550 clients (from early pregnancy until the child is born) circa 10-12 visits to the home with associated documents in relation to Special Needs in Pregnancy Service (SNIPS), child protection, correspondence, referrals and FNP clinical data.

**Digital Support for Multi-disciplinary Teams (MDT)**
The development team are working to complete the work on the Multi-disciplinary Team (MDT) application using MS Teams, MS Power Apps and MS Power Automate functions. Integrations with local Board systems like SCI Store are due to completed by the end of August to allow the pilot for Gynaecology Cancer Services to take place soon after.

**COPD**
Analysis of the current onboarding process for COPD patients has taken place over the last few weeks with progress being made in evaluating the potential for TrakCare workbenches.

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**Safer Medicines**

**Chemotherapy Care**
The fit for purpose testing of the 5.3.5/6.05 environment has started. Agreement has been reached to deploy the Windows 10 Operating System prior to February 2021 go live date.

**Hospital Electronic Prescribing and Medicines Administration (HEPMA)**
The HEPMA Programme Board has approved the selection of the pilot site: Respiratory wards and ARU at QEUH. The pilot is targeted to begin in November 2020.

The HEPMA Team is engaging with clinical staff in these areas to prepare for the pilot.

The initial "drug file" has been received from WellSky (the HEPMA supplier) and is now being validated.

GGC is working with the supplier to integrate TrakCare with HEPMA.
Safer Diagnostics

Laboratory Information Management System (LIMS)
The specification has been distributed to discipline subgroups for final review. A series of workshops have been held to allocate weightings for each section of the specification. These weightings will be used when reviewing the bidder responses.

Work to develop a consortium-wide system map showing interfaces between current LIMS and analytical platforms is ongoing.

Remote Care

NetCall Patient Hub
Installation and testing has been completed in the new patient facing Netcall Hub which is expected to go-live in the next 2 months. This system provide patient with their COVID-19 test results and thereafter other phases will include other test results and appointment information.

In Healthcare (IHC) Remote Patient Monitoring Application
This is a National Technology Enabled Care (TEC) Programme initiative. An “off the shelf” application build tool has been procured.

The national team is at integration to other systems such as the Clinical Portal and Electronic Discharge Transfer (EDT) communication to GPs. The roadmap and timescales are being developed.

Agreement has been reached to work with the Heart Function service as the initial area within NHSGGC, in line with the national process. Dr Clare Murphy is the NHSGGC Clinical Lead for Heart Failure.

NHSGGC has been paired with NHS Ayrshire & Arran eHealth Expert User to jointly work on the Heart Function pathway once finalised by the Clinical Short Life Working Group.

Attend Anywhere/Near Me
The use of Near Me continues to increase, with approximately 14,000 consultations undertaken in July. Service drop-in sessions were run via MicroSoft Teams in July to over 650 staff, which demonstrates the system in use, how to set up and communicate with patients.

Acute and Health & Social Care Partnership Virtual Patient Management (VPM) subgroups have been established to scale up the implementations across services.
Primary Care

GP Back Scanning
The final year of GP back scanning is currently underway to scan circa 200,000 patient paper records within the remaining 48 GP practices, creating additional space to allow general practice to redesign their premises for additional administrative and clinical activity.

Innovations

Industrial Centre for Artificial Intelligence Research in Digital Diagnostics (iCAIRD) (for large scale artificial intelligence research in Pathology and Radiology)
The experimental Safe Haven Artificial Intelligence Platform (SHAIP) for the development of Artificial Intelligence (AI) models in Radiology has been deployed and continues to be developed. There is full integration with local and National Picture Archiving and Communications System (PACS). Over 1m images have been extracted for use in research.

Methods for data de-identification have been developed, allowing image and electronic health records to be anonymised, linked and distributed automatically, at scale.

The Pathology laboratory has been digitised through the introduction of new scanners and digital workflow. Over 330,000 slides have been digitised so far, at around 16,000 per month.

COVID-19 data is now available to researchers using SHAIP. Research is underway within iCAIRD to detect the disease in X-rays/computed tomography (CT) scans, predict its course within a patient, and forecast the impact on hospital resources.

Dynamic Scot – (Chronic Obstructive Pulmonary Disease (COPD) Remote Management)
The information and remote management site has gone live and the first identified cohort of patients have been signed up in NHSGGC within 1,500 patients contacted to date. Funding has been secure for scale up to circa 20,000 patients in NHSGGC with a further phase to scale up to other Boards anticipated.

COVID-19 Assessment Application
This app is now live across all NHSGGC Community Assessment Centres. A successful pilot has been completed at the QEUH Emergency Department/Specialist Assessment and Treatment Area (ED/SATA). A version of the app has been developed to support inpatient ward rounds. Structured data on COVID-19 patients are now available nationally for future research and analysis. Finally, NHS Highland has shown some interest in the adoption of the app.
Asynchronous Video Communication
Asynchronous video communication live across ICU departments for video communication between wards and patient families and Neurology for communication between patients and clinicians related to epileptic episodes.

Dermatology Virtual Appointment
Funding has been secured as the national solution for Dermatology, currently running in NHSGGC, NHS Forth Valley and NHS Grampian.

Patient Recorded Outcome Measures (PROMs) – Cancer Services
A pilot is taking place to scale up across multiple services including cancer hubs nationally across multiple cancer service areas.

CARP (COVID-19 Advanced Respiratory Physiology) Platform
This is a wearable sensor to measure respiratory rates and breathing aimed at preventing respiratory failure, targeted at both COVID-19 and opioid-dependant patient cohorts. Device configuration is ongoing as the beginning of a 6 month pilot and evaluation.

National Trauma Application
This is a trauma app designed to be a digital clinical decision aid which is being developed for all 4 national trauma Centres. The project is restarting following a pause during the COVID-19 period.

Osteoporosis Artificial Intelligence
Funding has been secured and early discussion is ongoing around projects to utilise machine learning to identify the risk of Osteoporosis in patients over 50.

Workforce and Business Systems

Decontamination
Invitation to Tender (ITT) documents have been received from 4 suppliers. Scoring sessions will take place in August along with any clarification sessions, and financial review is planned for August/September with a view to awarding the contract in September. Roll-out of the awarded application will take place between September and March 2021.

Replacement Datix System
Prior Information Notice (PIN) responses have been received from 21 suppliers and financial review has taken place. Boards are to develop their outline business case before the ITT can be advertised.
Telephony Transformation Programme
To date, circa 17,000 telephones have been migrated to the new telephony platform, with a further 19,000 to complete between now and potentially 2021. Glasgow Royal Infirmary has almost completed the move to the new platform, with one building outstanding. It is planned to switch off the old legacy switch at Glasgow Royal Infirmary at the end of September. Work has started on the installation of telephones at the West Glasgow Ambulatory Care Hospital (ACH) in mid-August and, once complete, the team will move onto the Gartnavel campus, where Gartnavel Royal Hospital will be the first building to be migrated.

Anaesthetic Rostering
Five suppliers submitted an ITT return. ITT scoring sessions have now been completed, as have the clarification sessions and the financial review. The preferred supplier is to be informed and contract award is planned for end August. Roll out of the awarded application will take place between September and March 2021.

Technology and Infrastructure

Office 365
Circa 3,000 users who had both NHS Mail and NHSGGC email accounts have had their NHSGGC mail migrated to Office 365. This has resulted in more of our staff utilising Outlook Web Access, a browser-based version of Outlook. Lessons learned from this first bulk migration have been developed and any enhancements to the process will be incorporated in future migrations.

Contact

If you would like more information about anything in this update, or would like to comment, please contact the eHealth Programme Management Office on pmo@ggc.scot.nhs.uk.

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