

Dear,

**Re: Freedom of Information Act 2000  
Digital Projects**

Thank you for your information request indicated in bold below, which has now been considered under the Freedom of Information Act 2000 by NHS Cheshire & Merseyside Integrated Care Board (ICB). I can provide you with the following information and responses.

Please note from 01 July 2022, Clinical Commissioning Groups (CCGs) were disestablished, and their statutory functions and responsibilities inherited by NHS Cheshire and Merseyside ICB.

**Your Request:**

**SHARED CARE RECORD**

- 1) Does the ICB have a single Shared Care Record (SCR)?**
- 2) What is the software solution for the SCR? Please provide the product name (rather than the colloquial name) and the supplier. Where more than one product is used to deliver a shared care record, please include all software used.**
- 3) What is the term (length) of the shared care record contract for each software product used?**
- 4) When do the current contracts end for the software used to deliver the shared care record?**
- 5) Where multiple products are used to deliver a SCR, is there a plan to use a single system in the future?**
- 6) Does the ICB plan to implement a new SCR solution in the next 5 years, either as a replacement to the current solution or as a new capability?**

## **Our Response:**

Please find listed below the information held by NHS Cheshire & Merseyside ICB in relation to the questions posed regarding shared care records:

1) Across NHS Cheshire & Merseyside ICB there is a mix of locality-based and system-wide shared record, with interconnectivity between them.

2) Please find listed below the provider/product names of the shared care record solutions across NHS Cheshire & Merseyside ICB:

- Philips – Interoperability Solutions
- Graphnet – CareCentric
- Cerner – Health Information Exchange
- Healthcare Gateway - MIG

3 - 4) Philips and Graphnet contracts currently run until March 2025. Cerner contract is dependent on local break clause options.

5 - 6) There is an intention to potentially rationalise digital and data platforms across the Integrated Care System (ICS) in the future and/or a new shared care record system in the next five years.

## **Your Request:**

### **PATIENT CONTACT MANAGEMENT**

**7) Does the ICB utilise Customer Relationship Management (CRM) software for managing and tracking patient contact throughout a patient's care lifecycle?**

**8) What is the software solution for the CRM? Please provide the product name (rather than the colloquial name) and the supplier. Where more than one product is used to deliver a CRM capability, please include all software used.**

**9) What is the term (length) of the CRM contract for each software product used?**

**10) When do the current contracts end for the software used to deliver the CRM?**

**11) Where multiple products are used to deliver a CRM capability, is there a plan to use a single system in the future?**

**12) Does the ICB plan to implement a new CRM solution in the next 5 years, either as a replacement to the current solution or as a new capability?**

**13) If no CRM capability is currently in place and there is no plan to implement a CRM solution, how will the ICB deliver a holistic approach to patient contact across its sphere of influence?**

**Our Response:**

7) No.

8 - 11) Not applicable.

12) No.

13) No documents held specifically detailing this information.

**Your Request:**

**SOFTWARE INTEGRATION**

**14) Can the ICB please provide the quantity of inbound and outbound interfaces to the Shared Care Record (SCR)?**

**15) Can the ICB please provide the detail of any guidelines and principles for interoperability when integrating to ICB-managed systems?**

**16) Can the ICB provide details of any planned future integrations into the ICB digital estate to increase either the quantity or sources of data received into the SCR or to deliver insight and capabilities for population health management.**

**Our Response:**

Please find listed below the information held by NHS Cheshire & Merseyside ICB in relation to the questions posed regarding software integration:

14) There are various ways to count the number of interfaces, but to generalise there are 17 NHS provider Trusts, 9 local authorities, over 300 general practices (using 2 core systems), and a small number of other organisations which publish information to the shared record environment.

15) This is currently under review as part of the wider intention to rationalise digital and data platforms across the ICS. In general, national guidelines around standards and best practice should apply.

16) This is currently under review as part of the wider intention to rationalise digital and data platforms across the ICS. A comprehensive integration roadmap will be developed in due course.

**Your Request:**

**RESOURCING**

**NOTE: For the purposes of answering the following questions, an 'internal' resource is defined as individuals employed directly by the ICB and 'external' resources means all other resources.**

17) Can the ICB please provide an organogram of the ICB's technology team? Please include vacant posts. Where functions or positions are referenced, please identify the quantity of FTE within that function or position.

18) Can the ICB please provide details of the quantity of ICB FTE whose function is to develop and maintain system and data integrations between NHS and non-NHS organisations.

19) How does the ICB currently utilise both internal and external resources to deliver system to system integrations across its sphere of influence? Where external resources are used, please identify whether these are from other NHS organisations or commercial entities.

20) Can the ICB provide details of FTE who have been made redundant since the establishment of the ICB whose primary function was delivering an IT function or capability. Details to include:

- The quantity of employees.
- Job title.

21) Will the ICB require external resources to deliver its technology strategy in the following areas:

- System Integration.
- Analytics.
- Application development.

**Our Response:**

17) Please find enclosed a copy of NHS Cheshire & Merseyside ICB's '*Digital Staffing Structure*' which details the job titles and agenda for change NHS pay bands for each post.

18 - 19) No documents held specifically detailing this information.

20) NHS Cheshire & Merseyside ICB has not made any redundancies for FTE staff delivering an IT function or capability.

21) No documents held specifically detailing this information.

**Your Request:**

**STRATEGY & DIGITAL FUNDING REQUESTS**

**NOTE:** For the purposes of answering the following question, an 'internal' resource is defined as individuals employed directly by the ICB and 'external' resources means all other resources.

22) Can the ICB provide a list of all known funding requests received by the ICB for digital projects. These should include all requests and not just those that have an approved business case. Please include the following detail in your response:

- The funding request name
- The known or estimated funding requirement for each request.
- The financial year in which the request will draw down the funding.
- Whether the activity required by the funding request will be delivered exclusively by internal resources. Where external resources are used, please identify whether these are from other NHS organisations or commercial entities.

23) Can the ICB please provide a copy of its digital strategy.

**Our Response:**

22) NHS Cheshire & Merseyside ICB has not begun the process yet for funding requests for digital projects.

23) Please be advised that a copy of NHS Cheshire & Merseyside ICB's *Digital & Data Strategy* is publicly available on our website via the following link: <https://www.cheshireandmerseyside.nhs.uk/about/digital-and-data-strategy/>

**Your Request:**

**SOFTWARE DEVELOPMENT**

**NOTE:** For the purposes of answering the following question, an 'internal' resource is defined as individuals employed directly by the ICB and 'external' resources means all other resources.

24) How will the ICB deliver against its requirements for technology development? Examples of development would be mobile applications to support the patient pathway or clinical decision support tools. Please include in your response whether the ICB will contain an in-house capability to deliver software developments and what the scope of that capability will be and whether external resources will also be sought.

**Our Response:**

24) No documents held specifically detailing this information.

Should you require any further information or clarification regarding this response or do not feel that your request has been answered as you would expect, please contact us to discuss.

We also wish to take this opportunity to inform you that, where you are not satisfied with the response to your request for information, a formal complaints and internal review process is available.

This can be formally requested by emailing [foi@cheshireandmerseyside.nhs.uk](mailto:foi@cheshireandmerseyside.nhs.uk) and must be done within a reasonable time period (3 calendar months) from the date this response was issued.

Where you remain dissatisfied with our review under the Freedom of Information Act or the Environmental Information Regulations, you may apply directly to the Information Commissioners Office (ICO) for a review of your appeal decision. Generally, the ICO cannot make a decision unless you have exhausted our complaints procedure. The ICO can be contacted at;

*The Information Commissioner's Office*

*Wycliffe House*

*Water Lane*

*Wilmslow*

*Cheshire*

*SK9 5AF*

[www.ico.gov.uk](http://www.ico.gov.uk)

Should you need any further clarification or assistance, please do not hesitate to contact us quoting the above FOI reference.