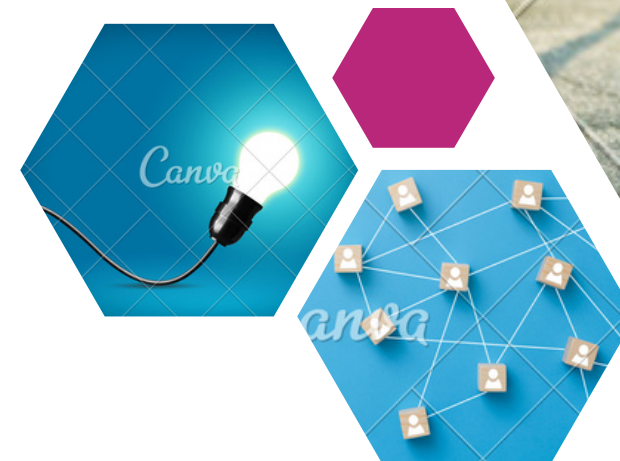




# Digital and Data Strategy

March 2023

Frimley Health and Care  
Integrated Care System



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# Executive Summary

Frimley Health and Care is a **partnership of local health and care organisation's aiming to reduce inequality and increase healthy years.**

As a partnership of health and care organisation's our focus is on:

- **Starting Well:** Improving the lives of babies and children in their first 1001 days.
- **Living Well:** Cardiovascular disease and supporting our population to maintain Healthy Weights and to quit smoking.
- **People, Places & Communities:** Engage with our diverse population to ensure they are represented and create opportunities for community decision making.
- **Our People:** Strengthen partnership working by creating a joint workforce model and widen access to employment.
- **Leadership and Cultures:** Deliver our equality, diversity and inclusion ambitions, and nurture a shared learning culture to stimulate and accelerate change
- **Outstanding Use of Resources:** Invest in preventative and wellbeing interventions, digital innovation and making the best use of our physical assets.

Digitally, we aim to build on our strong digital foundations by providing our population and employees will the digital tools and technology they need. This Digital and Data Strategy will support our aim to reduce inequality and increase healthy years by focusing on:

- **Foundational Infrastructure:** Harmonising our Digital Assets, to enable collaboration and digitally enable care transformation.
- **Sharing and Using our Information:** Better informed decision making at point of care, by broadening the use of shared care records and increasing the use of data for proactive decision making.
- **Empower our Employees & Residents:** Putting Residents at the centre of their wellbeing and care, by advancing their digital competency and continuing to digitise services and converge systems.
- **Population Health Management:** Data driven, digitally enabled care, by moving towards a single shared Analytics platform and expanding data inputs and proactive capabilities.

# Foreward

After a century of rising living standards, life expectancy and real incomes, our population is now facing a set of challenges which have not been experienced for many decades. For many of our residents, however, the COVID-19 pandemic which hit at the start of this decade, painfully exposed some of the inequalities which have been present for generations. The last three years have highlighted some of the main inequities which are major contributors to deprivation, variation in health outcomes and lived experience of residents of our geography.

In the months leading up to the unforeseeable onset of the pandemic, public sector leads in the Frimley Health and Care ICS geography had started the process of identifying these disparities and putting plans in place to address them. The Frimley ICS Strategy, *Creating Healthier Communities*, which was published in the Autumn of 2019, recognised these challenges and partners agreed on two core objectives; firstly to **reduce health inequalities** and secondly to **increase healthy life expectancy**.

The onset of the global pandemic significantly underlined the importance of these areas of focus. Never before in the modern day, had the lives and liberties of our residents been so restricted, and subsequently disadvantaged, in such a short period of time. Almost three years later, even with COVID-19 causing less of a daily impact, this offers little in the way of comfort to our residents; the economic shock resulting from this period and the subsequent cost of living crisis indicates an extremely difficult period ahead for all of us. As we enter 2023, we know that our residents rightly expect better access to health and care services, shorter waiting times for treatments and a better physical environment from which these services are delivered.

This context demonstrates the importance of this refreshed strategy, which sets out our collective ambitions as a partnership over the years ahead. Readers will note that the mission remains largely unchanged from three years ago, but much of the approach will be new, reflecting a fresh urgency and focus on the significant number of people in our population who experience an unacceptable degree of variation in their quality of life and health outcomes.

Undoubtedly, the world will continue to change rapidly over the years ahead and our strategic purpose and intent will need to adapt accordingly. This strategy therefore is a response to the 'here and now' of the challenges in front of us and is likely to evolve. Our aim is to ensure that the new Integrated Care Partnership can capitalise on the dynamic brief with which it has been established and create the collective sense of purpose which will be needed to deliver both the priorities set out in this document and the as yet unknown difficulties which will continue to emerge.

Despite the unprecedented challenges which lie ahead of us, we remain optimistic for the strength of our partnership and the huge impact which can be made for our population by working together. On this basis, as leaders of public sector bodies from the breadth of the Frimley geography, we commend and support this refreshed strategy to our residents.



# About the Frimley Geography and System Partnership

The organisations involved in planning and providing public services locally, are working together with the community to shape future improvements.

Frimley Health and Care brings together Local Authorities, NHS organisations and the Voluntary Sector together with a clear shared ambition to work in partnership with local people, communities and staff to improve the health and wellbeing of individuals, and to use our collective resources more effectively.

The system has a diverse population of over 800,000 people in a broad geography which spans East Berkshire from Bracknell to Slough, North East Hampshire, Farnham and Surrey Heath.

Our partnership, comprised of dozens of Public Sector and VCSE organisations, is led by committed clinical and professional leaders. We have been working together since 2016 when our very first partnership plan was published which set out our aspiration to unlock the benefits of greater partnership working and use our collective resources more effectively to improve the health of our population.

As a result, considerable progress has been made promoting health and wellbeing, improving care and services, and making services more efficient. We have brought people together to integrate services and work across organisational boundaries, regardless of the system and organisational architecture which regularly changes around us.

Given the challenges of the period since the last strategy was produced in 2019, the partnership has come together to create this newly revised and refreshed strategy. This new strategy builds on that work and describes the shared ambitions and priorities which will be delivered, and which will make the most difference to individual people's health and wellbeing.

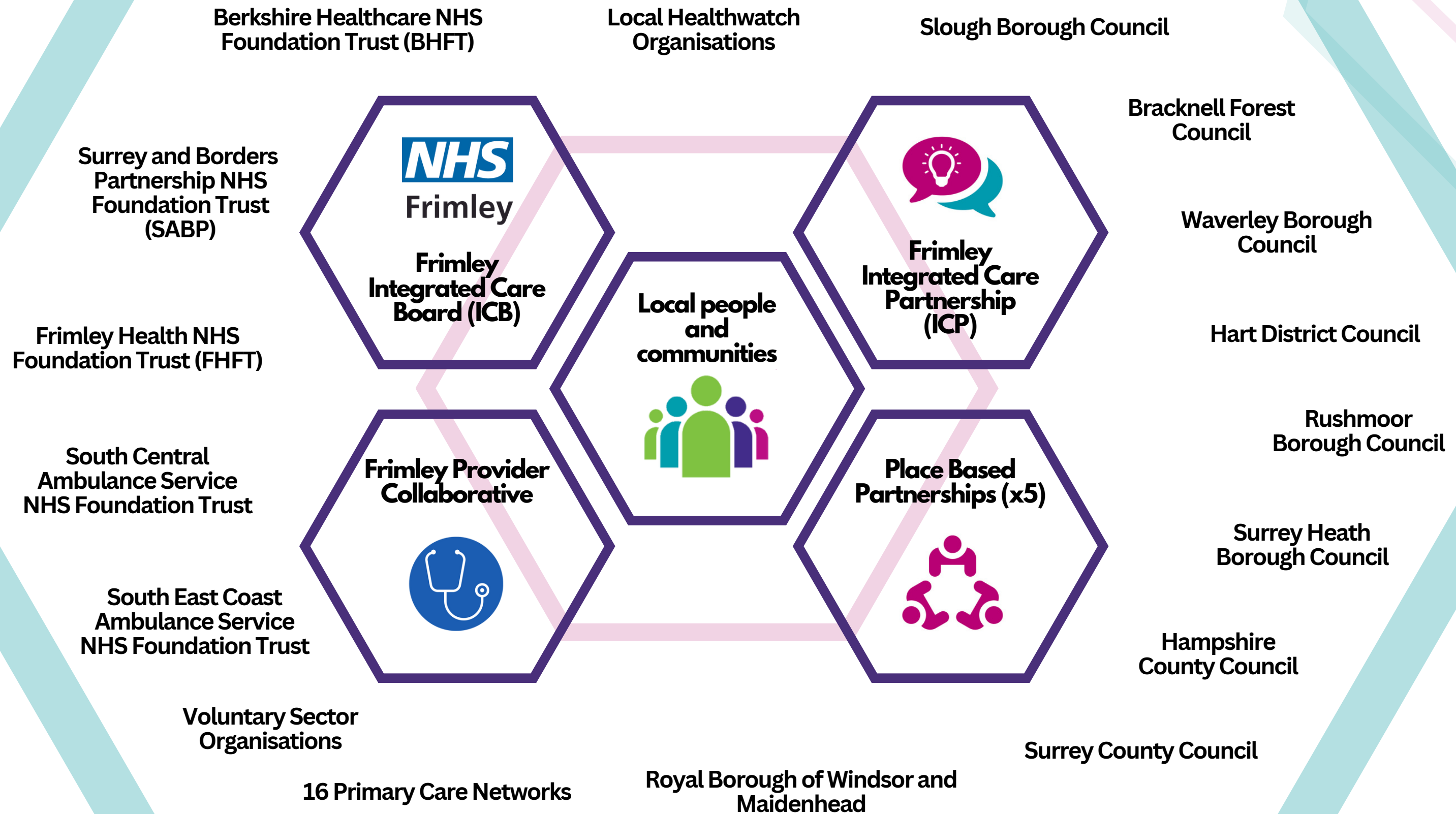


Approximately 800,000 people live across five Places that make up Frimley Integrated Care System

- Bracknell Forest
- North East Hampshire and Farnham
- Royal Borough of Windsor and Maidenhead
- Slough
- Surrey Heath

Bracknell Forest ◊ North East Hampshire and Farnham ◊ Royal Borough of Windsor and Maidenhead ◊ Slough ◊ Surrey Heath

# Frimley Health and Care Integrated Care System (ICS)



# Frimley ICS Executive Strategy

## Our Objectives

We remain committed to delivering the two overarching objectives which were defined by the 2019 Frimley ICS strategy; *Creating Healthier Communities*. Our partnership focus will continue to be defined by delivering improvements against the following two headline measures:

(1) **Reducing Health Inequalities** for all of our residents who experience unwarranted variation in their **outcomes** or **experience**

(2) Increasing **Healthy Life Expectancy** for our whole population, ensuring an improvement not just in length of life but in the quality of those years as well.

## Our Strategic Ambitions

The Strategic Ambitions which were established in 2019 are retained with new areas of focus and energy against a refreshed set of priorities which better reflect the challenges of 2023 and beyond.

- **Starting Well**
- **Living Well**
- **People, Places & Communities**
- **Our People**
- **Leadership and Cultures**
- **Outstanding Use of Resources**

Each of our Strategic Ambitions will focus on a discrete number of headline priorities in the 3-5 years ahead, which are likely to be some of the most challenging that the health and care system has ever faced. You can read more about these, and the other areas of work for each ambition, in the dedicated sections of this strategy document between pages 13 and 35.

## Our Headline Commitments in this Strategy

### Starting Well

- Addressing health inequalities through a focused approach to meeting the needs of vulnerable children who experience deprivation and poverty
- Initiatives to improve the lives of babies and Children in the first 1001 days through to primary school.
- Supporting and strengthening partnerships around health visiting and school nursing, working in partnership between the NHS, Local Authorities and Public Health to make improvements in these vital roles.

### Living Well

- A renewed focus on cardiovascular disease and its causes which contribute to hundreds of avoidable deaths annually
- Working with partners across Places and Public Health to help our population maintain Healthy Weights
- Helping people in our population to quit smoking by supporting them with advice and alternatives

### People, Places & Communities

- A clear approach to engaging with our population at place and system levels
- Ensuring all of our diverse populations are represented with the creation of an ICS inclusivity framework
- Exploring citizen leadership and creating opportunities to develop decision making in our communities

### Our People

- Creating a joint workforce model for health and care to give our people fulfilling and varied career opportunities
- Widening access to employment and keeping the people we have by ensuring we provide great places to work
- Strengthening partnership working and new models of care for our staff, residents and their communities

- Deliver our system equality, diversity and inclusion ambitions
- Use our leadership networks to accelerate the spread and adoption of system change

# Alignment of our Digital Ambitions to our ICS Strategy

Utilise digital innovation to deliver greater value for our population

Our Digital Strategy is shaped and guided by our strategic ICS ambitions.



# Alignment with our Partner digital strategies

## Frimley Health & Care Digital Strategy

**Frimley Health NHS**  
Currently being drafted

**Surrey & Borders Partnership**

1. Involve you and work in partnership
2. Make things accessible and inclusive
3. Innovate, learn and improve
4. Give you back time for a better life
5. Ensure choice and open approaches
6. Test assumptions, build trust and make it safe
7. Create an individual and positive experience
8. Work with you for the best possible outcome
9. Use data to gain insight and inform decisions

**Rushmoor Borough Council**

1. A new technology opportunity
2. Council Working Differently
3. Everyone included
4. Working Together Joined-Up
5. Improve health, wellbeing and generate economic growth
6. Engaging Young People
7. Better Informed Better Connected Digital Democracy

**Berkshire Healthcare NHS**

“We will release more time to care, improving our population’s health through our digital integration with the care providers in our region and automation of our processes. Our patients will have more choice on how they receive their care and will be able to engage more effectively in their own health and well-being.”

1. See and treat more patients whilst improving the quality of care we provide
2. Improve patients access to care and empower them to manager their own health
3. Support our employees to build a digitally ready workforce

**Hampshire County Council**

1. Helping everyone join in
2. Supporting Business Growth
3. Customer in Control
4. Digital by Default
5. Public Services together

**Surrey County Council**

1. Supporting Independence
2. Tackling Inequality
3. Investing in Digital Infrastructure
4. Connecting Communities
5. Agile Workforce
6. Empowering Staff
7. Data and Insight

## Common re-occurring themes:

- Digital first
- Digital Inclusion (ensuring access to non-digital solutions)
- Collaborative working
- Patient self-management
- Effective Digital Infrastructure

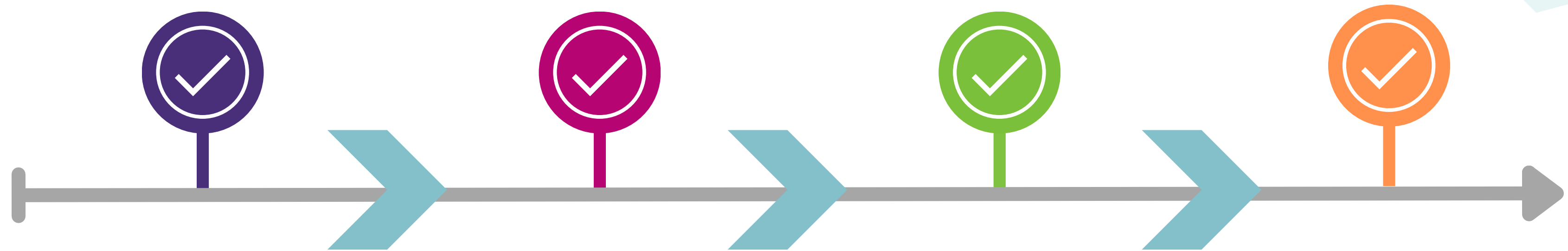


# Our approach and timeline for developing the Digital Costed Plan

Developed through high levels of consultation and engagement across Frimley ICS

Lessons learned through digital adoption during COVID

Ensured alignment to NHSX's digital maturity/what good looks like framework



Outline **discussions with SLT** on priority workstreams for Frimley ICS and themes to be covered in Digital Costed Plan

ThoughtExchange **surveys and focus groups** with Frimley colleagues.

Taking all feedback and suggestions, incorporating business as usual activities and national plans we have developed the **draft digital strategy** and reviewed with the **digital leadership team**

**Iteratively review and update** draft digital strategy, and present to Digital strategy for **Trust Executive & Board agreement**

# ICS wide survey highlighted a need for better, more reliable technology with easy access to shared information

We conducted 3 ICS-wide surveys. These gathered a total of 55 thoughts from 56 people across different organisations. Each survey received a good number of responses, especially survey 2 showing the greatest traction

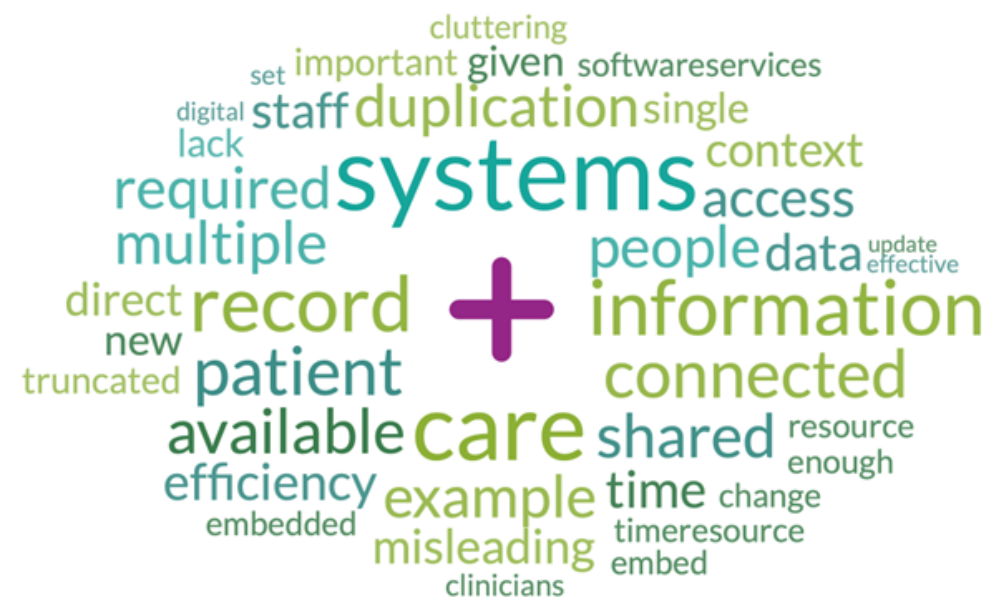
## Survey 1: Foundational Infrastructure

*How does digital technology currently hinder frontline staff in their day to day work?*



## Survey 2: Sharing and Using our Information

*What are the barriers to sharing information across health and care settings?*



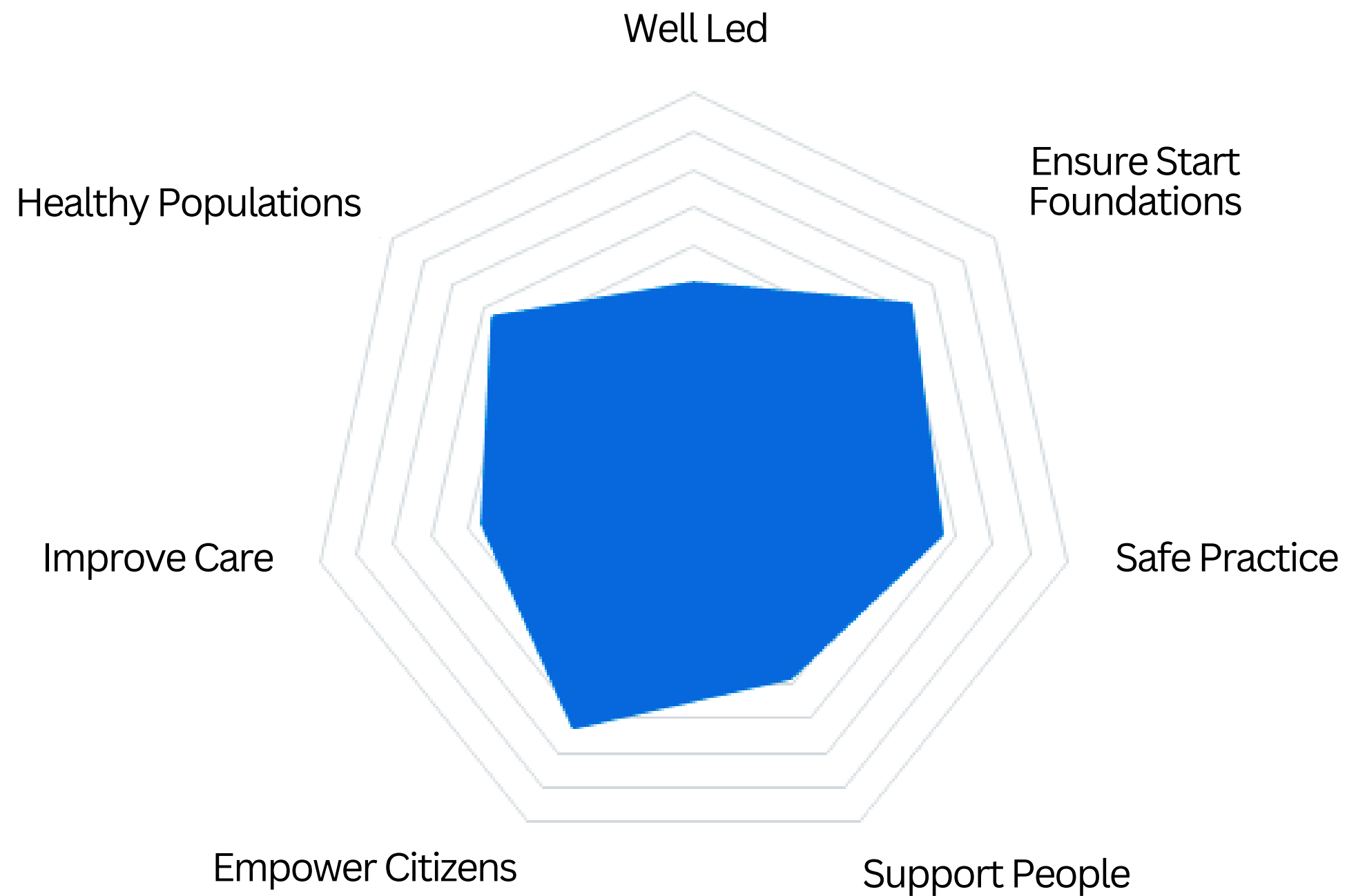
## Survey 3: Empowering our Employees and Residents

*How can we digitally empower our employees and residents to enhance the level of care we are able to provide?*



# We have used our WGLL self-assessment to inform our Digital strategic objectives

12



- 1 Foundational Infrastructure**  
*Harmonising our Digital assets*
- 2 Sharing and Using our Information**  
*Better informed decision making at point of care*
- 3 Empower our Employees & Residents**  
*Putting our Residents at the centre of their wellbeing and care*
- 4 Population Health Management**  
*Data driven, digitally enabled care*

# The principles that will guide our digital choices

1. **Empowering our residents** to know their numbers and share their numbers through remote management.
2. **Improve quality and safety of care** by putting more relevant information in front of the professional at each point in care.
3. Moving from siloed to **integrated care** by reducing the risk over transfer of care points by providing timely information and allowing professions to work together.
4. Moving from reactive to **proactive care** using our population health insights to cohort residents and prioritise care interventions.
5. **Prioritising Employees and Residents with the highest needs**, ensuring digital and non-digital access channels are freely available and accessible thus reducing inequalities.
6. Reducing the **demands on urgent care** by digitally monitoring and anticipating the deterioration of our at risk residents.
7. An end to end **digital ecosystem** starting with population health insights and ending with transformative early action to avoid crises.
8. **Using data to evaluate the potential, impact and value** of digital transformation.

# Our Digital Vision

## Foundational Infrastructure

*Harmonising our Digital assets*

- Leverage our existing Digital Assets
- Continuous improvement of our Infrastructure; availability, performance and security.
- Align our investment in technology, hardware and software solutions and standards to facilitate more seamless integration and information sharing.
- Sharing resources and environments; doing it once and at scale.
- Using digital transformation to enable collaboration and seamless flexible working.

## Sharing and Using our Information

*Better informed decision making at point of care*

- Improving the transfer of care through a shared technical architecture, digital interoperability, closer integration and seamless information sharing amongst partners organisations.
- Develop the breadth of our data shared amongst health and care professional to include more social care partners and voluntary organisations.
- Increasing the safety. depth of our data available at the point of care with more expansive datasets and free form information from health and care partners.
- Increased numbers of unique users and uses of shared care record data at the point of care to improve the quality of care
- Investing in clinical networks supporting integrated digital transformation at a system level.

## Empower our Employees & Residents

*Putting our Residents at the centre of their wellbeing and care*

- Build a resident culture of self-management through ready access to digital information and support applications and the ability to know and record their numbers.
- Advanced workforce digital competency through training, resources, support and the right equipment and infrastructure.
- Empowering health and care staff to focus and prioritise their care with access to near real time intelligence of need, demand, activity, and outcomes.
- An inclusive digital culture that addresses inequalities and caters for those who can't access or use digital resources equally.

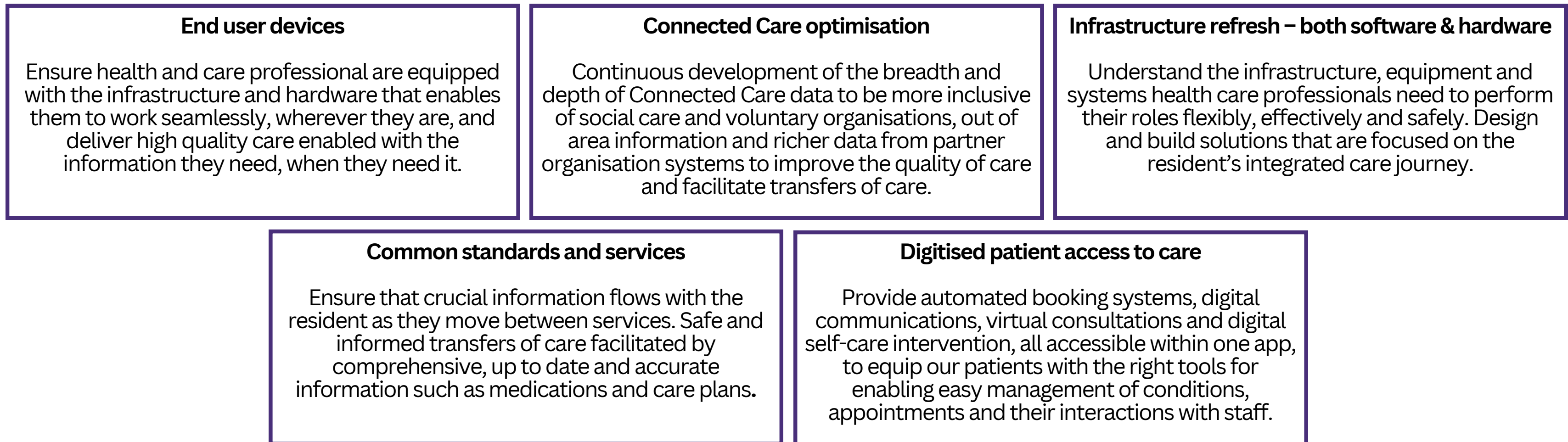
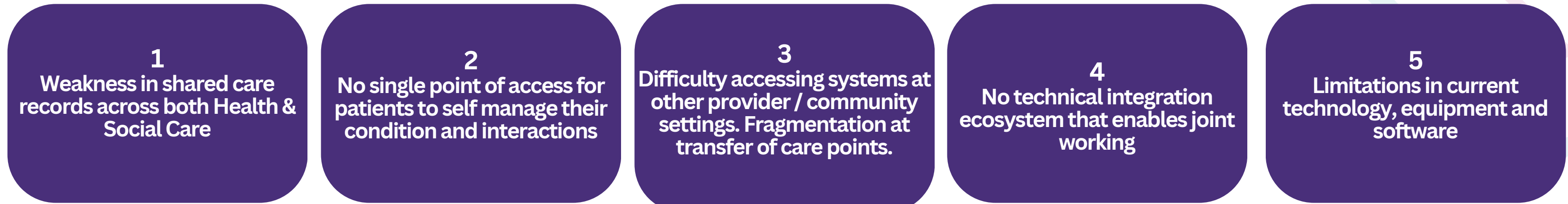
## Population Health Management

*Data driven, digitally enabled care*

- Add additional datasets from across the Integrated Care Partnership to enable greater analysis to inform proactive and preventative health and care services
- Meet the increasing demand of our Health and Care customers
- Partner across Thames Valley & Surrey to benefit from economies of scale and to share data and functionality
- Continue to invest in our Connected Care solution

# Survey Findings: Foundational Infrastructure

The Foundational Infrastructure survey asked: **How does digital technology currently hinder frontline staff in their day to day work?** This revealed 5 key challenges, which will be addressed by the initiatives included in this Digital Costed Plan.



# Foundational Infrastructure: Objectives, Initiatives and Outcomes

## Foundational Infrastructure *Leveraging and harmonising our Digital Assets*

- 1. Digitally enabled care transformation
- 2. Leverage and harmonise our Digital assets
- 3. Enable collaboration and seamless flexible working
- 4. Continue to improve our Infrastructure; performance and security

## Initiatives

**Optimise our existing Digital assets**, through the continuous improvement of our core systems such as EPR integration and wider staff and resident access. Deploy flexible, ubiquitous infrastructure solutions such as GovRoam.

**Extend virtual care model into other services and specialities**, learn from our remote monitoring pilot to enable patients to be more independent and to better engage and manage their own care needs.

**A system wide remote monitoring** platform for resident self management and care, app framework to enable residents to focus on wellbeing, develop healthier lifestyles and self refer and recover.

**Support Innovation and pilot innovative digital solutions** to increase capacity and release more time for patient care, including Robotic Process Automation of clinical and operational administrative tasks.

**Create communities of expertise**, to establish common standards and processes, and to pool scarce expertise. For example: Architecture, Analytics, Cyber Security, Data Communications, Integration and Networking.

Continuously develop **Connected Care** to be an insight driven proactive decision making tool leveraging capabilities such as System Insights V2

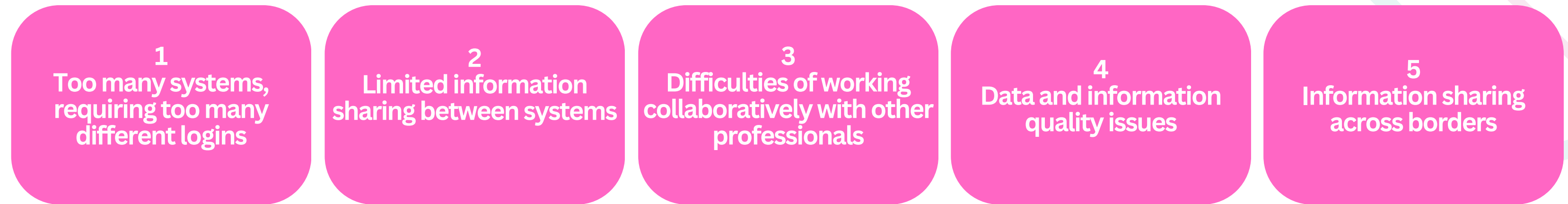
## Outcomes

**These Initiatives will improve the care we provide to our residents, by:**

- Improving the core systems used by our staff.
- Converging digital solutions, technologies and processes; making it easier for our staff to work across Providers and reducing practice variation.
- Enabling our staff to have greater flexibility to work anywhere and be able to securely and seamlessly connect to the systems they use.
- Making it easier for our staff to collaborate across providers and provide integrated care services.
- Engaging residents in self management through an integrated remote management solution enabling early intervention and crisis avoidance.
- Facilitating faster and more responsive integrated services by providing the right information to the right person at the right time.
- Releasing time for resident care through productivity efficiencies arising from convergence, process standardisation, and collaborative working.
- Accelerating the adoption of new digital solutions, ways of working and innovation through common infrastructure and greater collaborative working.

# Survey Findings: Sharing and Using our Information

The Sharing and Using our Information survey asked: **What are the barriers to sharing information across health and care settings?** This revealed 5 key challenges, which will be addressed by some of the initiatives included in this Digital Costed Plan.



**Stakeholder Alignment**

Create and nurture system level clinical and operational networks to identify common priorities, approaches, investment and tactical deployment of integrated system solutions that enhance and simplify workflow and transfers of care.

**Single sign-on solution**

Implement a single-sign-on solution to simplify and speed up logon into the systems

**Interoperability and data & information quality**

Implement a shared technical architecture to ensure seamless flow of data between systems, irrespective of the systems being used. This will also ensure that quality data is provided, collected, stored and managed correctly and effectively to support greater use of our data.

**Uniform standards**

Create centralised support and structure across the ICS with uniform standards and rules for interoperability and Information Governance, to significantly improve the information flow within the ICS.

**Collaborative Working Environment**

Implement strategies and solutions that facilitate seamless, cross-organisational communications to share collaborative communications as well as data sharing.

# Sharing and Using our Information: Objectives, Initiatives and Outcomes

## Sharing and Using our Information *Better informed decision making at point of care*

1. Broaden the use of our Connected Care shared care record through enhanced depth and breadth of data
2. Improve the sharing of information across Providers and enable seamless transfers of care
3. Implement a shared open systems architecture
4. Level up our BI capability across providers
5. Increase the use of data and information for proactive clinical, operational and strategic decision making

## Initiatives

**Enhance our shared care record**, Connected Care, by building upon its current capabilities and embedding additional datasets from across the wider 1.ICS and stretching into other sectors e.g. education, voluntary sector and community pharmacy.

**Broaden use of shared information** by better facilitation of integrated working and proactive care. Enabled through new modules that support professionals work together and directly involve residents.

**Improve the sharing of health and care plans** between all partners and our residents, prioritising according to need. Enabling seamless transfers of care by sharing consolidated datasets at points of transfer and closed loop notification of events.

**Implement a single open systems architecture, data warehouse infrastructure and reporting tool** to use data to improve care through adopting clinical decision support tools and operational dashboards.

**Improve systems interoperability** between partner systems through adherence to agreed open systems architecture standards and data management standards to enable easier direct integration and data sharing.

## Outcomes

**These Initiatives will improve the care we provide to our residents, by:**

- Sharing information across organisations and disciplines and enabling collaborative working
- Accelerating health and care decision making and planning
- Reducing delayed admissions and discharges through seamless transfers of care and sharing of information
- Improving multi-disciplinary care by enhancing access and sharing of real time information
- Optimising the use of our shared care record, Connected Care, and using data to inform care
- Greater user satisfaction from continuously improving Connected Care, making Connected Care the main source of patient information
- Implementation of a shared technical architecture (Target Data Architecture), including use of open standards, to drive integration and sharing of information

# Survey findings: Empowering our Employees and Residents

The Empowering our Employees and Residents survey asked: *How can we digitally empower our employees and residents to enhance the level of care we are able to provide?* This revealed 4 key challenges, which will be addressed by some of the initiatives included in this Digital Costed Plan.



**Digitally Enabled Workforce**

Further the awareness and capability to realise the transformative potential of digital solutions through leadership and development programmes such as Wavelength.

**Digitally Enabled Population**

Champion and maximise the use of Digital solutions across across the resident population, by providing support, information, training and necessary resources to increase digital adoption.

**Digital Leadership**

Drive awareness and representation of digital at a senior leadership level through the inclusion of senior digital roles in strategic board decision making

**Focus on Digital Equality & Inclusion**

Enable Digital Academy to focus on ensuring Digital Equality and Inclusion. All providers to collaborate on ensuring all Residents wishing to use Digital solutions have the right opportunities to do so, for example provision on Digital Lending Libraries.

**Communications Strategy**

Embed digital communications into wider ICS communications strategy and reinforce identity as a digitally mature ICS promoting the use of digital solutions. Thus, enhancing our online presence and creating a stronger digital presence.

# Empower our Employees and Residents: Objectives, Initiatives and Outcomes

Empower our Employees and Residents  
*Putting our Residents at the centre of their wellbeing and care*

## Initiatives

## Outcomes

1. Empower our Residents to be at the centre of their care
2. Support Digital Equality & Inclusion
3. Empower our Workforce to drive the digitisation of services and convergence of systems
4. Advance the digital competency of our Workforce and Residents

**Implementation of Patient accessible record/s and consolidation of access points** via the NHS app, enabling our Residents to better interact and manage their Health and Care plans.

**Digitally empower our workforce** by developing awareness and capability to realise the transformative potential of digital solutions through leadership and development programmes such as Wavelength.

**Establish internal & external Digital Champions Networks** to encourage use of Digital, Digital Equality and Digital Inclusion. Main priorities to include marketing of Digital solutions, providing support, and device libraries whilst respecting and supporting non-digital channels.

**Drive Digital awareness through the wider ICS communications strategy**, including enhancing our social media presence and promoting use of Digital solutions.

**Expand use of Digital solutions such as remote management that support Residents** to manage their own health and care. Utilising text message support, self-care apps, virtual consultations, and virtual ward technologies.

**Continue to digitise working practises and processes**, focusing on releasing time to care, and converging systems where appropriate.

**These Initiatives will improve the care we provide to our residents, by:**

- Empowering Residents to be at the centre of their care and to undertake greater self-management.
- Facilitating joined-up care delivery by providing access to more comprehensive and holistic Personal Health Records.
- Enhancing data security and information governance to keep Resident information safe and secure.
- More effective sharing of our People across Providers through Shared training records, Digital ID passports and a Common Directory.
- Tackling digital exclusion and digital inequality to prevent socially deprived or hard-to-reach groups experiencing a double disadvantage.
- Raising the digital competency of our People and releasing more time to care for our Residents.
- Increasing the efficiency of administrative tasks and increasing the use of Digital to support care.
- Improving the quality of care and providing greater service capacity to allow for more Residents to be cared for and improving their experience.

## Population Health Management *Data driven, digitally enabled care*

- 1. Expand data inputs and proactive capabilities
- 2. Move towards a single shared Analytics platform
- 3. Optimise our use of data for provision of care

## Initiatives

Improving user experience, front end design and user support to help increase uptake and adoption of population health tools

Expand available data inputs housing, education employment and interfacing with the voluntary sector.

Create a single shared technical architecture across the Provider partnership

Embed real time clinical decision support to support long term conditions.

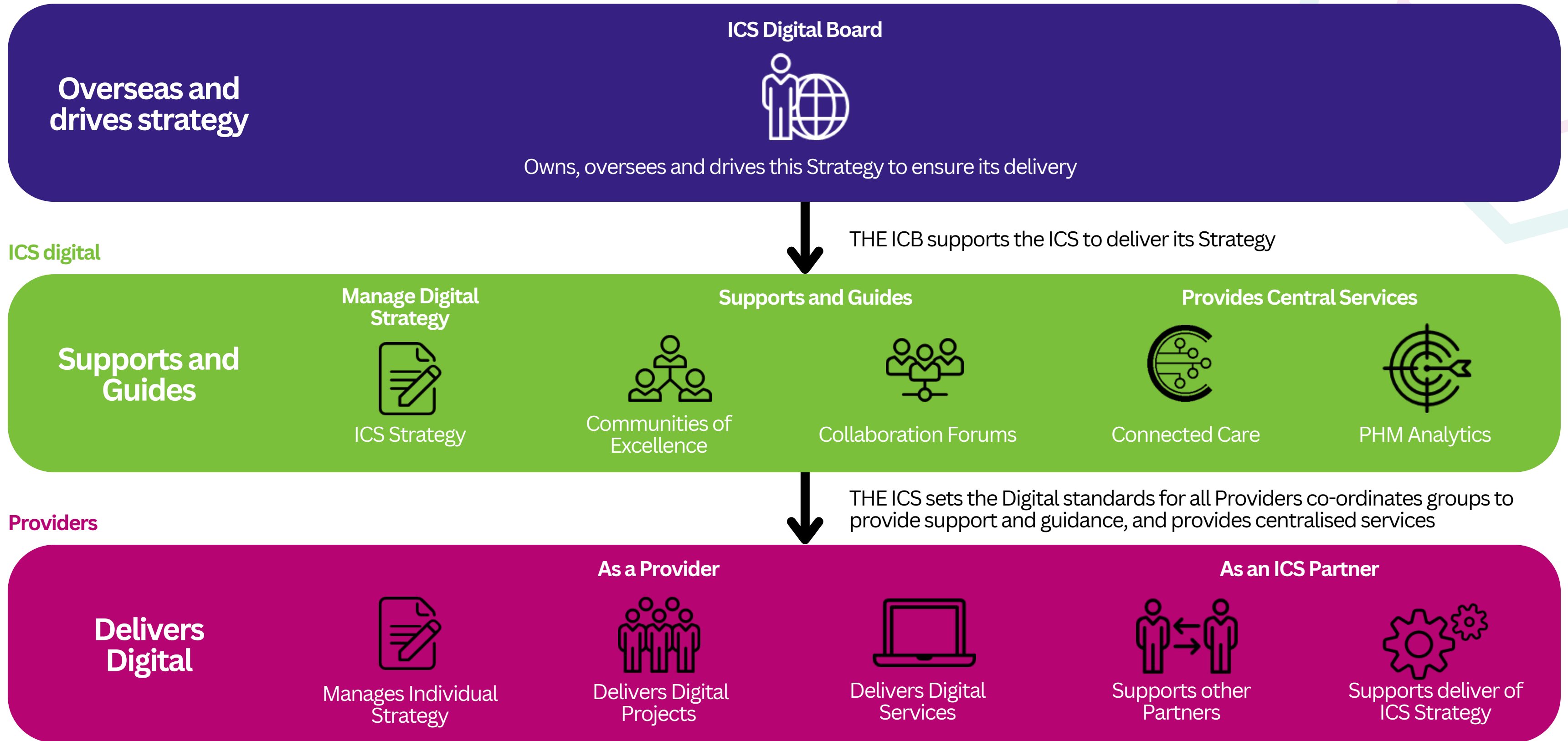
Optimise our patient pathways based insights from PHM data Facilitate MDTs for effective co-ordinated care, transfers of care and continuity of care.

Drive a culture of evaluation and continuous monitoring where data insights help drive and unlock improvement opportunities

## Outcomes

**These Initiatives will improve the care we provide to our residents, by:**

- Enabling care providers to proactively identify patients where there are opportunities to improve outcomes based on analysis of their health data
- Use of population segmentation to help manage urgent demand
- Improved understanding of the needs of the population, enabling opportunities for new or improved services to be identified
- Near real time and continuous evaluation of projects to enable continuous improvement cycles and clear measurement of impact
- Establishing clear links between strategic priorities at system level, and identifying priority cohorts in our population, for example, identifying and supporting our “Core20Plus5” cohorts in order to achieve our strategic goal of reducing health inequalities
- Improved management of long term conditions and reduction in variation
- Improved effectiveness in dealing with proactive workloads in primary care



# Summary of Digital Costed Plan

Digital Strategy summary	FY 22/23	FY 23/24	FY 24/25	Total	Notes
1. Foundational Infrastructure		£13.2m	£12.7m	£26.9m	
2. Sharing and Using Our Information		£3.0m	£2.75m	£5.75m	
3. Empowering Our Employees & Residents		£5.6m	£4.3m	£9.9m	
4. Population Health Management		£4.0m	£2.8m	£6.8m	
<b>Total</b>		<b>£25.8m</b>	<b>£22.6m</b>	<b>£48.4m</b>	

To deliver the objectives described in this Digital Costed Plan we have estimated the total costs to be in the region of £46m over the next three years, all of which is currently unfunded. It is important to note that these are estimated rough order of magnitude (ROM) costs and that further work will be required before any investment.

If and when any future funding opportunities arise, we will use this Digital Costed to prioritise investments and will develop the necessary business cases to fully understand the investment.

# Costed Plan (1) – Foundational Infrastructure Summary

INITIATIVES	FY 22/23 (£ 000'S)	FY 23/24 (£ 000'S)	FY 24/25 (£ 000'S)	TOTAL (£ 000'S)
Prove Robotic Process Automatic as a means to maximise productivity, increase output and reduce workload		500	500	<b>1,000</b>
Establish Centre of Excellence for Cyber Security, assurance and delivery		100	100	<b>200</b>
Integrate fragmented Cyber Security initiatives to enhance robustness and mitigate potential future challenges		1,500	1,500	<b>3,000</b>
Equip workforce with the right tools and equipment		3,000	3,000	<b>6,000</b>
Create a centralised Procurement and Commercial Management team		100	100	<b>200</b>
Converge and expand Foundational Infrastructure hardware & software capabilities, to reduce variation and maximise value. For example: moving to Cloud Services.		2,000	2,000	<b>4,000</b>
Continue to optimise the use of Digital solutions across all Partners, including EPR and levelling up of Digital maturity.		5,000	5,000	<b>10,000</b>
Provide the technologies required to enable seamless flexible and mobile working. For example GovRoam.		1,000	500	<b>1,500</b>
<b>Total</b>		<b>£13,200,000</b>	<b>£12,700,000</b>	<b>£25,900,000</b>

# Costed Plan (2) – Sharing & Using Our Information

INITIATIVES	FY 22/23 (£000'S)	FY 23/24 (£000'S)	FY 24/25 (£000'S)	TOTAL (£000'S)
Enhance Connected Care through improving data quality, including enhancing the integration of EPR data and using Connected Care to improve transfers of Care throughout care pathways		500	500	<b>1,000</b>
Increase use of Connected Care through marketing to attract new users and the training of new users		200	200	<b>400</b>
Establish Centres of Excellence for Information Governance, Data Analytics, and Interoperability		250	250	<b>5,000</b>
Implement a shared technical architecture (Target Data Architecture) to drive integration and sharing of information		750	500	<b>1,250</b>
Level up the BI capability across our Providers, including creating a BI career path, such that there is consistency and confidence in reporting		100	100	<b>200</b>
Build an outstanding imaging service across the SE2 Imaging network, through digital integration and innovation		2,000	2,000	<b>4,000</b>
<b>Total</b>		<b>£3,000,000</b>	<b>£2,750,000</b>	<b>£5,750,000</b>

# Costed Plan (3) – Empowering our Employees & Residents

INITIATIVES	FY 22/23 (£000'S)	FY 23/24 (£000'S)	FY 24/25 (£000'S)	TOTAL (£000'S)
Establish a Digital Champions Network (1 FTE and regular internal/external events)		75	75	<b>150,000</b>
Establish a Digital Academy to lead professionalisation of our dedicated Digital workforce		1,500	1,000	<b>2,500,000</b>
Enhance quality & availability of Employee & Residents Digital Training Programmes		150	150	<b>300,000</b>
Create 'one system workforce' to enable collaborative working across Health & Care partners, Place and Neighbourhood teams. For example: Record Sharing, Service Directory, Tasking and Joint care planning.		200		<b>200,000</b>
Digital Equality & Inclusion for Residents (Digital lending libraries & other initiatives to combat inequalities)		250	250	<b>500,000</b>
Publish a Digital Communications Strategy and deliver on its ambitions, including social media presence		100	150	<b>250,000</b>
Resident engagement to support their self-management, including the creation of Service Directory, use of Resident data and marketing of Digital solutions to maximise uptake		400	400	<b>800,000</b>
Expand use of digital solutions that support Residents to stay at home. For example: Remote monitoring & Virtual Ward technology, virtual consultations and digital self-care technologies.		1,000	600	<b>1,600,000</b>
Implementation of Patient accessible medical record/s and consolidation of access points, via NHS app, enabling Residents to better interact and manage their Health and Care plans		1,000	850	<b>1,850,000</b>
Continue to digitise working practises to eliminate non-digital processes, converge systems where appropriate		750	750	<b>1,500,000</b>
Converge and integrate Partner staff training policies and systems to alleviate unnecessary 'repeat' training		100	100	<b>150,000</b>
<b>Total</b>		<b>£5,525,000</b>	<b>£4,275,000</b>	<b>£9,800,000</b>

# Costed Plan (4) – Population Health Management

INITIATIVES	FY 22/23 (£000'S)	FY 23/24 (£000'S)	FY 24/25 (£000'S)	TOTAL (£000'S)
Extend Connected Care to be an insight driven proactive decision making tool		500	500	<b>1,000</b>
Expand available data inputs (Fire/Police/Social Care/Housing/Judicial System/VCSE)		500	250	<b>750</b>
Create a single shared technical architecture across the Provider partnership		2,000	1,000	<b>3,000</b>
Embed real time clinical decision support to support long term conditions		500	500	<b>1,000</b>
Optimise our patient pathways based insights from PHM data		250	250	<b>500</b>
Facilitate MDTs for effective co-ordinated care, transfers of care and continuity of care		250	250	<b>500</b>
<b>Total</b>		<b>£4,000,000</b>	<b>£2,750,000</b>	<b>£6,750,000</b>