

## THE CSC INTEGRATED GP SOLUTION

### Northern Lincolnshire Local Health Community

**NHS**  
Connecting for Health

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**TREVOR WRIGHT,**  
DIRECTOR OF INFORMATICS

#### INTRODUCTION

The NHS vision is to have a more modern, efficient, patient-led health service which gives patients more choice and control over their own health and care. The aim is to deliver new, integrated IT systems and services to help modernise the NHS and ensure that care is patient-centred. This requires delivering the right information to the right person at the right time.

For many NHS organisations, the vision of a fully supported and integrated health service is a long way away from the current reality of paper-based processes and disconnected systems. The emphasis on joined-up, patient-centred care drives the need for modern and integrated IT systems delivered in a strategic and cost-effective manner. With new policies and reforms impacting work practices, improved patient care and service is increasingly reliant on a proven, dependable infrastructure that can be managed on time and on budget.

This is how Northern Lincolnshire local health community (LHC) is making the journey from vision to reality with the support of the Local Service Provider, CSC.

#### BACKGROUND

Northern Lincolnshire LHC supports a population of over 330,000 patients, across two primary care trusts (PCTs) – North Lincolnshire and North East Lincolnshire. The LHC covers:

- 56 GP practices and 173 GPs
- Two Social Services departments
- 400 community and child health professionals
- Extended allied health teams

Northern Lincolnshire has a widespread community, distributed across a largely rural area with two main urban centres in Grimsby and Scunthorpe.

#### SITUATION

An IT audit identified that GPs were using 57 stand-alone systems. Primary Care Trusts (PCTs) were funding software licenses for multiple systems as well as paying for, and maintaining, local servers for each practice. PCTs needed to manage relationships with each supplier and pay for support and training.

Community and child health teams were updating patient records by using separate electronic systems or paper-based processes. Information could not be shared across care settings and management reporting was cumbersome.

Organisational boundaries were also proving difficult to manage with a greater need to share information securely and appropriately between health and social care teams. Recent policies placed a greater emphasis on joined-up care based on patient's needs, requiring collaborative case management for patients with complex and long term needs. Existing processes and systems were not able to cope with such demands.

With the advent of practice-based commissioning, Northern Lincolnshire did not have an effective IT infrastructure to support working across practices and care settings. As Trevor Wright, Director of Informatics recalls: “Our infrastructure was struggling to cope with the demands and we had a huge problem with data quality.”

*“The system is so easy to use. Paperwork used to be a struggle, but this system has allowed us to be so much more productive. It allows us to take administrative tasks from the clinicians so that they can get on with the business of patient care”*

**MAUREEN O’KANE,  
PODIATRY ADMINISTRATOR  
AT NORTH LINCOLNSHIRE PCT**

#### **OBJECTIVES**

Northern Lincolnshire had a number of clear objectives for the programme of change:

- To deliver improved patient care, sharing information appropriately at the right time. Trevor Wright emphasises: “We are real advocates of the National Programme for IT (NPFIT) and wish to evolve to a shared care record solution as the strategic way forward.”
- To deliver patient-centric systems and processes and improve working practices, through the use of high-performing IT, reliable infrastructure and extensive use of a shared care record solution.
- To mitigate risk and ensure strong governance and clinical buy in so that the change programme was delivered effectively, supported by a single supplier to ease the local burden of maintenance, support and training.
- To deliver value for money for the LHC and provide cost savings that could be re-invested in front-line patient care.

#### **DELIVERING THE SOLUTION**

Through the NPFIT, the LHC has deployed the CSC Integrated Primary Care Solution built on SystemOne GP, Community and Child Health and the CSC Single Assessment Process (SAP) Solution. GPs already using SystemOne have been successfully upgraded to the spine-enabled integrated solution.

The LHC started a change management initiative in advance of implementing the technology. The LHC had a clear long-term strategy that IT transformation would enable a wider cultural change through improved processes and services. Clinical support would be vital and dedicated clinical leads from the local health and social care community were central to this strategy. Doug Scott, Head of Development and IT Services, says: “By managing the change programme, the team was able to bring about a large transformation with a clinical information pull strategy rather than a push approach.”

The use of clinical leads and local trainers ensured that local needs were met and that the project was successful. Northern Lincolnshire LHC worked with their LSP and used their business change methodology, which helped to identify how local processes and training could be aligned to the new systems. This was especially valuable for deploying the SAP and Child Health solutions, where the systems could

be implemented in line with the needs of the care professionals. Dedicated local NHS trainers would then provide the appropriate training, tailored to the needs of each user group.

As SystemOne was already being used by a number of GPs in Northern Lincolnshire, it was a logical first step to migrate these practices to the spine-enabled CSC Integrated Primary Care Solution. The first GP practice went live in September 2005. As the LHC deployed the spine-enabled Child Health and Community solutions, the practices were able to enjoy the benefits of integrated shared care records envisioned by the change programme. In December 2005, the SAP Solution went live linking health and social care colleagues—delivering secure and collaborative management of patient care.

The LHC led the change programme and the LSP provided project management skills, system implementation expertise and deployment support. Data migration was successfully managed in each care setting, including the migration from existing GP and child health IT systems. Northern Lincolnshire was also the pioneer for SAP data migration. Doug Scott emphasises the role of the professional deployment team: “The LSP provided high quality project management and a structured process for deployments which we desperately needed.”

#### **BENEFITS**

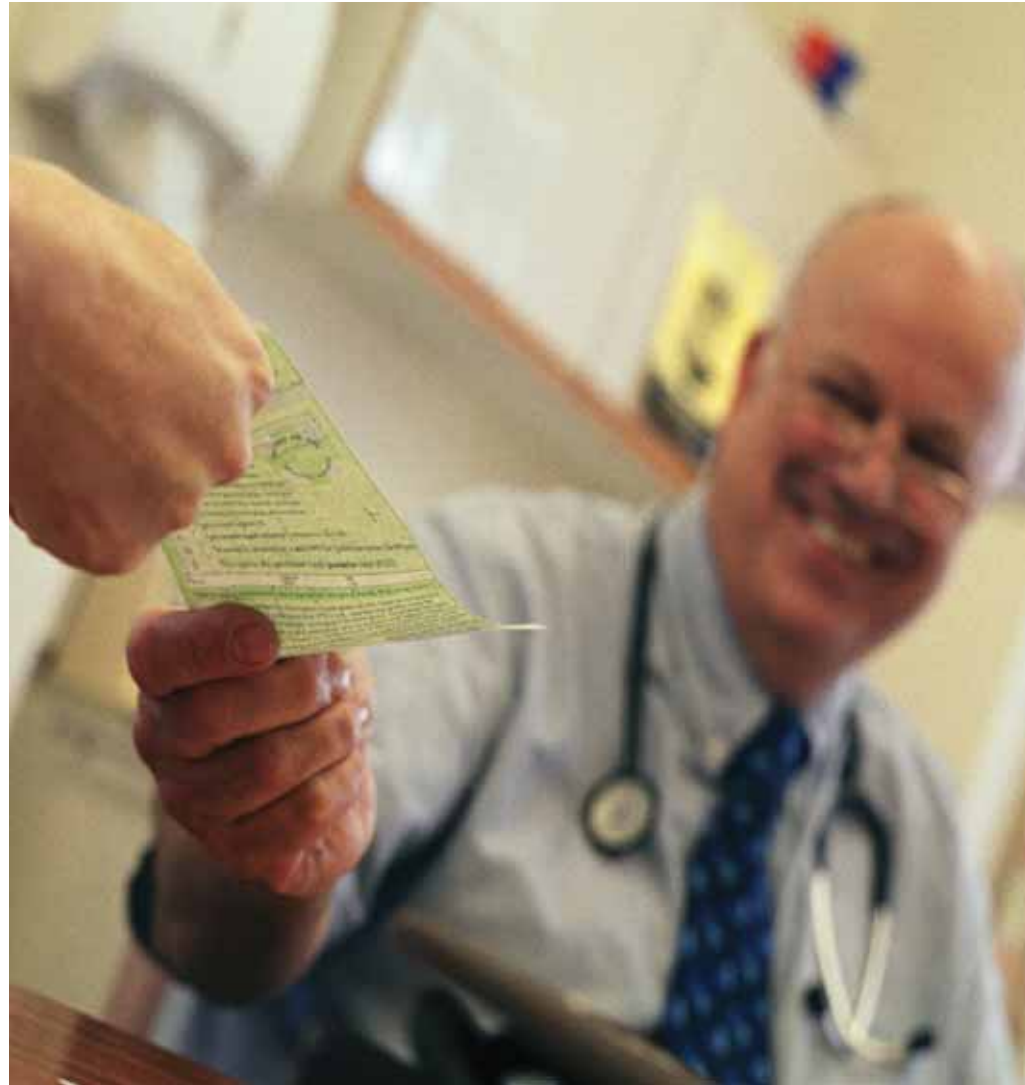
Moving to a centrally hosted service has provided an immediate saving of £157,000 a year from licence fees alone – money to be reinvested in improving clinical services. With centrally-performed upgrades and no need for local back-ups or IT maintenance, local resources are not being spent on managing multiple systems. The headache of IT management has been relieved across all GP practices. “Managing SystemOne across our IT infrastructure is much simpler than managing the plethora of stand-alone systems we had before, and configuration changes and upgrades are much simpler to deploy,” says Doug Scott. “Users are able to provide feedback to SystemOne developers through chat rooms in the system. Staff are happy that systems are developing and improving, at pace, and it is great that clinicians are able to feedback and influence product development.”

Northern Lincolnshire clinicians are advocates for the use of these systems. Electronic case loads and referrals mean that less time is spent on paperwork and more time is dedicated to patient care. The ability to manage notifications and alerts on a single record ensures that clinicians across care settings and locations are able to communicate effectively and provide an improved patient service. Practices have also benefited from SystmOne's GP-to-GP record transfer functionality. Patient details can be sent between practices electronically in real time, allowing the full clinical record to be retained when registering a new patient and saving significant time and effort.

The CSC Integrated Primary Care Solution has delivered immediate benefits for the podiatry team. Previously, clinicians had limited access to information from the 15 clinics in the area. Appointments were difficult to manage and patient records were being carried around and hand-written on paper. If a record wasn't held by the clinician, it would require a long call to the central office to recall information over the phone – if a phone was available and the call was within office hours.

Andrée Borrett, Head of Podiatry at North Lincolnshire PCT, says: "The clinicians have been on board since day one. We are much more in control of our caseloads now and it is a great benefit having the notes in front of us when we see a patient. In the past, these notes could have been 20 miles away, but now, the information is available as and when we need it, which supports our clinical judgement." Appointments are simple to manage and schedule electronically and clinicians have instant access to the patient's record, helping them to deliver a better patient service.

Back at the central office, the team has benefited from improved communications and quality of information. Maureen O'Kane, Podiatry Administrator at North Lincolnshire PCT, says: "The system is so easy to use. Paperwork used to be a struggle, but this system has allowed us to be so much more productive. It allows us to take administrative tasks from the clinicians so that they can get on with the business of patient care. If a clinician is ill, or we need to change the date of a clinic, we can do this easily at the click of a button." With the link to the national



spine, the patient's NHS number and demographics are easy to find and keep up-to-date. Patient records can now be recorded, shared appropriately and accessed securely, as and when the podiatry team needs it.

The consistent use of systems and processes facilitates the improvement of data quality. Structured templates, care plans and standardised reports means less time is wasted collecting information from different systems and helps to ensure that information is completed in full. Using a shared system has increased accessibility – users can now view and update patient details appropriately from any site connected to the NHS Network (N3). For example, a nurse can log in from any N3-enabled practice and record vaccination details that can be viewed by the GP at another practice.

The NPfIT requirement to move to hosted solutions has improved security and service reliability. Trevor Wright talks about one example: "Previously, if a GP's premises were broken into and their clinical system stolen, they could be without a clinical system for 10 days until a replacement was sourced. With the CSC Integrated Primary Care Solution, they would be operational in less than an hour. Only the stolen PCs need to be replaced."

From the outset, the LHC has embedded a culture of information sharing across organisational boundaries. Trevor Wright says: "Our primary benefit comes from the extended use of shared care record systems." By adopting the suite of systems offered by the CSC Integrated Primary Care Solution, clinicians are today able to share clinical information, with appropriate access, as and when they need it. Alongside this, SAP has provided a solution for the effective case management of patients with long term and complex health and social care needs. With the SAP solution, health and social care professionals are able to work together and share information appropriately, enabling a truly joined-up approach to care management.

## THE FUTURE

Already, 64 per cent of GP practices in Northern Lincolnshire LHC are using SystemOne. The aim now is to continue rolling out the CSC solutions to meet the NHS vision of integrated and shared care records. Doug Scott says: "It is vital that we think strategically, not tactically. The more we can use SystemOne the better." Trevor Wright adds: "The National Programme ensures that our systems are fit for purpose and will continue to be, putting us in the best position to deliver national NHS reform." Through a shared patient record on a single solution, SystemOne is providing the necessary level of clinical information and services to support this reform. With the SAP solution providing for effective communication and closer working between health and social care professionals, the LHC is leading the way in joined-up working and patient-centred care.

Being at the heart of NPfIT means that Northern Lincolnshire is helping to shape the direction and development of the programme. Taking a long-term approach to the change programme ensures that the LHC saves money and effort, improves processes for staff, and ultimately provides better service for patients.

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## ABOUT THE CSC ALLIANCE

*The CSC Alliance is the Local Service Provider (LSP), appointed by the NHS, for the North, Midlands and East of England, as well as for a number of key London hospitals. Leading the Alliance is Computer Sciences Corporation (CSC), specialists in delivering IT services and solutions across the globe, employing some 9,000 professionals in the UK, and 75,000 worldwide.*

## ABOUT THE PROGRAMME

*The National Programme for IT was established by NHS Connecting for Health to support the delivery of world class patient care and services. At the heart of the programme is the Care Records Service, providing an integrated electronic care record that will support an estimated 500,000 staff and over 25 million people across our regions, including over 4,000 general practitioner practices, 100 hospitals, 25 prisons and 20 ambulance trusts.*

## Computer Sciences Corporation

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