A Journey Round NPfIT

A Basic Primer on the National Programme for IT

Patients and families

Patients in mind

Patients in your heart

Funding realities

Complex, multidisciplinary, psychosocial

1973

Primary care computing went first

- 1980s 'Free computer systems' tied to Pharma
- 100s of systems by 1990
- 1993 Standards introduced by NHS Management executive
- Read Codes (symptom and sign terms) used as standard for reporting
- Now market consolidation to 4 vendors
- 100% EHR use
Securing our Future Health: Taking a Long-Term View

2002 - Wanless projections

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<th>Standards set at the Centre</th>
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<td><strong>6.7</strong> Standards should be set by the departments and agencies of government which oversee and regulate the health system. They should be well defined and transparent. Many of the standards set by government for the health service should inevitably focus on clinical standards – for example, defining the minimum quality of care which every citizen has the right to expect irrespective of where they live. But in some cases, there may also be a role for the central setting of non-clinical standards. For example, the Review believes strongly that information and communication technology (ICT) standards must be set firmly from the centre.</td>
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<th>Setting the framework in the Centre</th>
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<td>- the Government and the health service must ensure that they have clear and well developed views about the benefits which they want to achieve and how they will be delivered, with patients at the core of the system. The implications for staff training will also need to be considered carefully;</td>
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<td>- to avoid duplication of effort and resources and to ensure that the benefits of ICT integration across health and social services are achieved, the Review recommends that stringent standards should be set from the centre to ensure that systems across the UK are fully compatible with each other; and</td>
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<td>- to ensure that resources intended for ICT spending are not diverted to other uses, and are used productively, the Review recommends that budgets should be ring-fenced and achievements audited.</td>
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What is caring and medicine about?

Connecting to front line politics

Make it simple and structure your plan
Delivering 21st Century IT Support for the NHS

The dream 2002: 4 key elements
- Integrated EHRs
- On-line prescribing
- Electronic appointments and booking
- Infrastructure

60m population
£12.5B budget
227 health systems

The Battle of Clinical involvement
House of Commons
Health Committee

The Electronic Patient Record
Sixth Report of Session 2006–07

National programme for IT

Money

Patient data

Complexity - banking analogy is wrong

Clinical work
Listing
Listening
Feeling
Examining
Viewing
Diagnosis
Illustrating
Handing over
Making sure

NHS Spine outputs

- Connections
  - 21k organisations/27k ICT systems
- Single source of demographic data 80M people
  - 2.6 billion requests/year
- 55M Summary care records
- Electronic prescriptions from GP to pharmacy
  - 1.3 billion EPS messages
  - 50M dispense notifications
- Smartcard registry 1M staff
- Gp2GP health record transfers
  - 77k/month
Single system

Health delivery • Integrated • Partnership • Innovation
Health IT • Enterprise wide • Interoperable • Structured
Funding • Value • Accountable • Transparent

3 core elements to our programme

• A people’s health data movement
• Empowering clinicians with point of care information and outcomes data
• Developing data for population health

Point of care permission to share

Improving Patient Experience
Almost all practices use Patient Access
- Book online appointments
- Repeat Prescriptions
- View clinical records
- Send secure messages

Population health management
Tools of personalised public health
- Access to information
- Citizen learning via social media
- On-line services
- Predictive analytics and early intervention
Patience and endurance