



Stuart Bolton, engagement manager from the Centre of Excellence for Information Sharing, explains how local areas around England are changing the way they share health and social care information, and why this is helping to improve services for patients.

HEALTHY INFORMATION SHARING



make a difference to the lives of service users.

One approach for local areas sitting on this untapped data is to introduce a 'common record', in the form of an Integrated Digital Care Record (IDCR). In simple terms, this is a single point of reference providing sight of some, or all of a patient's data, which can be accessed, and in some cases added to, by a range of health professionals involved in that person's care. The Centre worked with a number of local places including Bradford and Airedale that have overcome the cultural information sharing barriers associated with introducing an IDCR.

Bradford and Airedale

To improve the services on offer to patients, Bradford and Airedale wanted to join up the health and social care information of residents and create a health and care economy of local partners.

Health and social care providers in the area were committed to creating a more integrated local system, where primary care,

secondary care, mental health and social care partners could work more closely and effectively together – saving time, money and putting patients' needs at the heart of their service. This included creating a single record to replace the existing fragmented systems, in which different services held different parts of a patient's health and social care information, and which other health care professionals didn't have access to.

The local NHS foundation trust took a lead role in bringing the relevant partners together, working with primary and secondary care trusts, mental health and social care organisations, GPs and clinical commissioning groups.

One of the key factors was finding a suitable technological solution that would allow this shared data to be stored, accessed and updated. Many GPs, community services and Airedale NHS Foundation Trust were already using SystmOne successfully. As a result, the decision was taken for adult social care to migrate on to SystmOne by the summer of 2016. This will give health and social care professionals access to the

Bradford and Airedale IDCR.

But this wasn't about just getting a common database in place – this was about finding a new way of working between the partners that would bring this data to life. The role played by having 'software in common' went beyond just the practical benefits; the main enablers from this situation were that it provided a common connection and shared starting point between partners across the area, and they were able to quickly reach an agreement over which system should be adopted. This solution gave continuity of use for the existing partners who were already live on the system and using tried and tested software helped to instil confidence across the partnership.

Integral to the project was the change in attitude towards information sharing. This was helped by establishing a robust approach towards partnership working to set out principles to enable inter-agency agreements for the transfer of information and a governance group to oversee and co-ordinate this work. Straightaway, this highlighted the need for strong leadership,

strong partnership collaboration and open communications to keep those involved informed and able to implement the reforms and measures necessary as effectively as possible.

These things combined to help break down the barriers that had traditionally existed between these organisations by developing an improved awareness and understanding of each other's culture and behaviour.

Lessons learned

So what does this example show us about the solutions and change in attitudes and culture needed to drive greater information sharing?

- **Leadership:** One of the biggest barriers to information sharing is the issue of leadership and how important it is when bringing together organisations into a single partnership. Bradford and Airedale identified that strategic and clinical leaders had a crucial influence on pushing these projects forward.
- **Building relationships:** The creation and maintenance of strong, reciprocal

relationships – based on common values and outcomes – was also critical. It helped the different partners involved to discuss issues constructively, secure 'buy-in' from key stakeholders and build the trust and knowledge required to articulate and agree a shared vision for the future.

If you only remember one thing

The historic outlook on information sharing, especially in health, was very much to keep information to yourself, but as the health and social care landscape changes so must views on data. IDCR implementation is helping to change the mindset towards information sharing and shows how it can support the delivery of care where patients are truly at the centre.

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