

BOARD MEETING

24 May 2018

Paper Title:	Mental Health Clinical System Implementation Update
Section:	Public
Lead Director:	Medical Director
Paper Author:	Martin Brittain – Clinical Systems Programme Manager
Agenda Item:	12
Presented For:	Assurance
Paper Category:	Quality

Executive Summary:			
Overall Delivery Confidence (RAG)			
Current Project Status: April	Amber	Expected Status for Next Period: May	Amber
Status for LAST Period: March	Red	Expected Status for End of Year	Green
Current Status Breakdown			
Milestones / Project Timeline Status	Expenditure / CIP Status	Quality Outcomes / KPI Status	Benefits Status
Amber	Amber	Amber	Amber
Overall Delivery Confidence Commentary			
<p>The project go-live date remains on target (12th July) although training delivery has slipped by two weeks due to configuration quality issues relating to the Learning disabilities unit.</p> <p>Phase 3a of data migration has been successfully completed, with active engagement from Clinical staff in the data checking process with no significant new issues to report</p> <p>The trust has arranged meetings with CCGs and NHS England specialised services commissioners to talk through the implementation timeline and governance processes, potential impacts for datasets and contractual reporting and agree ongoing communication pre and post go-live.</p>			

Recommendations:
<p>That the Board</p> <ul style="list-style-type: none"> Agrees that the report provides assurance of satisfactory progress in implementation of the new electronic record for mental health.

Governance/Audit Trail:

Meetings where this item has previously been discussed (please mark with an X):					
Audit Committee		Quality & Safety Committee		Remuneration Committee	Finance, Business & Investment Committee
Executive Management Team	✓	Directors		Chair of Committee Meetings	Mental Health Legislation Committee
Council of Governors					

This report supports the achievement of the following strategic aims of the Trust: (please mark those that apply with an X):	
Quality and Workforce: to provide high quality, evidence-based services delivered by a diverse, motivated and engaged workforce	✓
Integration and Partnerships: to be influential in the development and delivery of new models of care locally and more widely across West Yorkshire and Harrogate STP	✓
Sustainability and Growth: to maintain our financial viability whilst actively seeking appropriate new business opportunities	

This report supports the achievement of the following Regulatory Requirements: (please mark those that apply with an X):	
Safe: People who use our services are protected from abuse and avoidable harm	✓
Caring: Staff involve people who use our services and treat them with compassion, kindness, dignity and respect	✓
Responsive: Services are organised to meet the needs of people who use our services	✓
Effective: Care, treatment and support achieves good outcomes, helps to maintain quality of life people who use our services and is based on the best available evidence.	
Well Led: The leadership, management and governance of the organisation make sure it's providing high-quality care that is based around individual needs, encourages learning and innovation, and promotes an open and fair culture.	
NHSI Single Oversight Framework	

Freedom of Information:
Publication Under Freedom of Information Act
This paper has been made available under the Freedom of Information Act

Mental Health Clinical System Implementation Update

Work stream progress reports

a) Timeline

The project go-live date remains on target (12th July) although training delivery has slipped by two weeks due to configuration quality issues relating to the Learning disabilities unit. These issues have now been resolved and the re profiling of the training schedule is underway. Additional contingency planning has also been considered to enable any post go live training support to be made available for staff as required.

b) Clinical Leadership - Preparation for Go-Live

Clinical engagement has been forthcoming in relation to post go live planning and preparation to recognise that staff will require a period of adjustment and support due the change in system use. Clinical leads have also made preparation to enable champion users to be trained and be made available to support colleagues post go live.

c) Data Migration / Quality

Phase 3a of data migration has been successfully completed, with active engagement from Clinical staff in the data checking process with no significant new issues to report. All previous identified issues are in the process of being resolved in conjunction with our system provider TPP, although final confirmation from TPP on timescale resolution is still outstanding.

d) Unit Configuration

Mental Health Core functionality such as Risk Assessment and Care Planning recording procedures have been reviewed and approved by Clinical Steering Group. Development of service specific unit configuration continues and remains on track at this time.

e) Training

Further to the reported slippage, service specific training has now commenced. The current training figures evidence that 517 staff have attended 'new starter' training, but 84 bookings have been cancelled due to implied clinical pressures and 97 bookings 'did not attend'.

In order to meet the training requirement prior to go-live, the training team will produce management information to evidence where potential issues exist and to escalate to Deputy Directors for resolution. At this stage no final numbers or tolerances have been set in terms of pre go-live acceptance for training, other than to monitor progress over the course of the next number of weeks in the run up to go-live and to assess the associated risk accordingly.

f) Reporting

The testing and configuration of datasets, reporting infrastructure and KPI outputs continues utilising the SystemOne deployment system. Further progress to report includes;

- The deployment system has recently been updated with a fresh cut of Rio migrated data. This was essential to enable the continuation of MHSDS testing as TPP limit MHSDS extracts to the previous 6 months.
- TPP have provided the new MHSDS v3 output and testing has commenced.
- A number of reporting and dataset output issues remain outstanding and are with TPP for resolution.
- To support MHSDS requirements TPP have acknowledged and agreed to create clinical coding to support Children Young People's IAPT assessments as currently there is a lack of suitable read codes.
- CDS testing has identified some data incontinences which are currently being investigated by TPP.
- Work is ongoing with clinical services, data migration, configuration leads and TPP to ensure requirements to enable future reporting post SystemOne go live are in place

The trust has arranged meetings with CCGs and NHS England specialised services commissioners to talk through the implementation timeline and governance processes, potential impacts for datasets and contractual reporting and agree ongoing communication pre and post go-live.

g) Data Sharing

The Trust has taken the decision not to share out at this stage. This has been assessed by the Caldicott and IG as the most appropriate step given the sensitivities in relation to sharing. This approach instead allows time for clinicians to have consent conversations with individual's patients directly when they see them. This will also mitigate the current risk associated with subject access request and the inappropriate sharing of information following a SAR via GP's

In terms of a general communication it has been agreed that the Trusts website will act as the platform to announce the change of system to provide assurances around how we are protecting the data held about service users and patients.

1. Contingency

The revised go-live date of 12th July still remains close to the potential revised end-of RiO rolling contract on 31st July. Servelec (the RiO supplier) has advised that extension will be possible at a minimum of 5 days' notice. Trust should consider if a further extension of RiO, would mitigate transfer of data and post go-live validation risks.

2. Financial

There are no financial exceptions to report at this stage following the approval of the additional £60k to support the resource requirements of the deferred go-live date, 12th July 2018.

3. Assurances

An Internal Audit draft report issued on 16th April indicated a significant level of assurance associated with project control mechanisms and governance arrangements in place to support the implementation of the new Mental Health Clinical System.

4. Risk Issues Identified

High level project risks/actions remain on the corporate risk register. These are summarised in the table below.

Risk	Likelihood High/Medium /Low	Implication	Mitigation
Major delays or complications in the implementation of SystmOne for Mental Health: -			
<i>i) Non-budgeted financial expenditure on an extended RiO contract</i>	Medium	Unplanned expenditure in 2018/2019 financial year	Finance informed at the earliest opportunity. Procurement team involved in supplier engagement.
<i>(ii) A suboptimal electronic patient record with adverse effects on the quality of care</i>	Medium	Negative ability on patient outcomes and increased clinical risk.	Clinical input sought throughout the project. Clinical sign-off required for developments.
<i>(iii) Reputational damage to Trust and loss of staff confidence in new system</i>	Medium	Negative long term effect on recording and reporting.	Engagement planned both internally and externally to the Trust.
The Trust is unable to meet its Mandatory/Statutory Contractual reporting requirements	Med/High	Financial penalties	Consistent engagement with CCG's to ensure visibility of risk and associated mitigation plans.

7. Monitoring and review

It is recommended that Board receives a further update on this important transformational project in June.