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Dear Councillor

I am now able to enclose, for consideration at the meeting of the **DOVER AND SHEPWAY HEALTH AND WELL-BEING BOARD (SHADOW)** on Tuesday 23 October 2012 at 3.30 pm, the following reports that were unavailable when the agenda was printed

6 **KENT HEALTH COMMISSION UPDATE** (Pages 2 - 3)

- (f) 'Patient Knows Best' Update on pilots in South Kent Coast CCG area – Dr Joe Chaudhuri (attached)

Yours sincerely

A handwritten signature in black ink, appearing to read "Nicky", written over a white, wave-like background element.

Chief Executive

Briefing for SKC HWBB meeting 10.23.12 – Dr. J Chaudhuri

Patient Knows Best:

Essential to the strategy of care of LTC patients is the ability to create and access integrated care plans for each patient, and the ability to access integrated patient information. The information strategy recently published by the DH recognised the power of information, along with key challenges of patient data security, information governance and confidentiality. GPs across Kent have been supporting the work of Kent and Medway in developing and implementing a strategic information technology framework to enable the transformation of care to LTC patients (including risk stratification, clinical management information systems and integrated care planning). Following a review of available solutions that enable integrated care planning, Patient Knows Best (PKB) is currently the only product on the market that offers key functionalities including:

- enabling patients to decide whether to authorise access to all, or parts, of their records including carers
- allow secure messaging between patients and health professionals
- use encryption for all record traffic
- ability to integrate and synchronise with health records held by various providers
- enable patients to decide to withdraw access to all or part of their records on the system

With the financial backing and project support of Kent & Medway LTC leads (by use of the innovations fund), SKC GPs have been asked to pilot PKB in this financial year to continue through the Autumn 2013 (14 months). The pilot will inform the longer term strategic plans for SKC in the management of LTCs.

Benefits:

The patient is in control of sharing and they can delegate that control to others, including their carers and clinicians. This means that information sharing can happen easily

The wider benefits include:

- Enables collaborative working with other agencies e.g. social care; mental health; Macmillan, ambulance, OOHs, etc.
- PKB will provide the scope to enable quicker transformation
- Other benefits will include eventually a reduced workload for community care teams and GPs as making data sharing more streamlined.
- Emergency and out-of-hours staff will also get the immediate benefits from access to current information, if GPs focus on the notifications of the care plans, which will save time while improving quality for GPs and any provider organization using PKB
- Immediate cost savings as patient self-management and awareness is increased – potential reduction in admissions, home visits etc.

SKC Pilot Roll-out:

This is the first use of PKB in a community setting. Swale CCG is also a pilot site.

The PKB system Start/Switch on, is on track to go “live”, end of November 2012 this will include the already agreed health and social care ‘Face’ assessment tool to maintain continuity of current integrated health and social care work rollout.

A targeted training plan has been agreed with health and social care providers to ensure sufficient capacity for the end of Nov start. To date five people have received dedicated training.

Remote hardware devices (digi’ pens and note pads) have been agreed for use for health Initially and social care to follow on, in the Pilot as the initial enrolment into patient knows best

starts in a community setting, often the Patients home. The use of such devices will inform a wider analysis of future ways of working across health and social care and not just the PKB pilot.

The Proactive Care cohorts of patients will be the first groups to enrol in PKB (following consent) as these are already identified as patients who want to be involved and in charge of the managements of their LTC and we plan to build on this synergy.

The commercials, such risk, governance, terms of agreement have been established and currently are managed at a Kent & Medway level.

Jeanette Dean-Kimili
SKC Locality Commissioner, Integrated working and LTCs