

Agenda for the Community Pharmacy IT Group (CP ITG) meeting

to be held on 17th November 2021 by videoconference

commencing at 11am and closing at 1.30pm


About CP ITG: The Group was formed in 2017 by [PSNC](#), [NPA](#), [RPS](#), [CCA](#) and [AIMp](#). The meetings are attended by members representing these five organisations and representatives from [pharmacy system suppliers](#), [NHSBSA](#), [NHS Digital](#), [NHSE&I](#), and [NHSX](#). Further information on the group can be found on the [PSNC website](#).

Members: Matthew Armstrong (Chair), Steve Ash, David Broome (Vice Chair), Sibby Buckle, Darryl Dethick, David Evans, Nick Kaye, Sunil Kochhar, Fin McCaul, Graham Phillips, George Radford, Ravi Sharma, Craig Spurdle, Iqbal Vorajee and Heidi Wright.

Secretariat: [Dan Ah-Thion](#).

Zoom meeting

Attendees are encouraged to:

- Join early using a webcam to test access; and use a large screen to view the slides.
- Use the 'raise hand' feature to seek the attention of the Chair.
- Use the chat box to share comments, queries and to respond to each other (Note: time constraints unfortunately prevent every comment being addressed within the allocated meeting time, but comments will be saved to aid the group's work).
- Mute any devices logged into the meeting whilst not speaking (using the Zoom mute button , the device's mute option, or *6 on the phone for toggling mute/unmute).
- Make use of [PSNC's quick reference Zoom guide](#).
- Note: those attending the meeting can extend the invite to additional colleagues within their organisation so that they can dial-into the meeting at the stage relevant to them.
- Please use the Zoom 'rename' feature so that your display name looks like this: <First name> <Surname> (<organisation>).

The Zoom details are in the invite.

Social media: To tweet about the group/meeting (excluding anything confidential) use the hashtag, *#cpitg*

Meeting format: The meeting will be divided into two sections, with a twenty-minute break from 12:10-12:30.

1. **Welcome from Chair** 11.00-11.05am
2. **Member apologies for absence**
At the time of the agenda being finalised, apologies for absence from members had been received from Ravi Sharma.
3. **Minutes of the last meeting**
The minutes of the meeting held on 22nd September 2021 were emailed to the group with this agenda.
4. **Actions and Matters Arising**
Outstanding actions have been carried forward within the workstream updates appendix.

Actions (session 1 of 2)

- | | | |
|----|---|----------------|
| 5. | CP ITG meeting evaluation and planning (1/2) (page 3) (Appendix CP ITG 01/11/21) | 11:05-11:15am |
| 6. | NHS profile manager (page 4) (Appendix CP ITG 02/11/2120) | 11.15-11.30am |
| 7. | NHS Digital Clinical Safety Strategy (page 5) (Appendix CP ITG 03/11/21) | 11.30-11.50am |
| 8. | Interoperability and NHSX strategy (page 6) (Appendix CP ITG 04/11/21) | 11.50 -12.10pm |

Break

12:10-12.30

Actions (session 2 of 2)

- | | | |
|-----|---|---------------|
| 9. | Comments on Shielded Patient List closure (page 7) (Appendix CP ITG 05/11/21) | 12.30-12.40pm |
| 10. | NHSmial and Teams adoption (page 8) (Appendix CP ITG 06/11/21) | 12.40-12.50pm |
| 11. | CP ITG meeting evaluation and planning (2/2) (page 3) (Appendix CP ITG 01/11/21) | 12.50-1.10pm |

Report

- | | | |
|-----|---|-------------|
| 13. | Updates on other CP ITG workstreams projects (pages 9-17) (Appendix CP ITG 07/11/21) | |
| 14. | Post-meeting CP ITG communications and messages | 1.10-1.15pm |
| 15. | Any other business | 1.15-1.30pm |

Upcoming pharmacy/healthcare IT events

- Listed at: psnc.org.uk/itevents; and
- digitalhealth.net/upcoming-webinars-and-events.

Future meetings

Weds 9th March 2022	Weds 8th June 2022
Weds 22nd September 2021	Weds 16th November 2021 (to be confirmed)

Subject	CP ITG meeting evaluation and planning
Date/time of meeting	17th November 2021: 11.05-11.15am and 12.50-1.10pm
Status	Public
Overview	The group will consider how to conduct its meetings and work.
Proposed action	The group is asked to respond to the questions set out below.

The [Terms of Reference of the group](#) state that the group's purpose and that of its meetings are to:

- Bring together colleagues across the whole sector including NHS representatives to:
 - develop relevant [workstreams](#) and to support progress with these;
 - develop a shared [vision](#) for the use of digital technology in community pharmacy;
 - provide a forum to discuss new digital technologies which may impact community pharmacy practice in the future;
 - support the development of user-led recommendations to be considered by suppliers and policy makers;
 - support the distribution of relevant updates, specifications and documentation amongst suppliers and pharmacy representatives; and
 - provide a credible, respected forum for sector-wide engagement with and amongst NHS organisations and other national bodies on the vision, strategy, and operational plans for delivering optimum use of digital technology in community pharmacy.
- Enable members to share experience and expertise and to develop and assess options for realising the sector's ambitions and requirements regarding achieving optimum use of digital technology in community pharmacy.
- Develop an implementation strategy for achieving optimum use of digital technology in community pharmacy and to oversee a joint work-programme to deliver this.
- Provide, through its member organisations, recommendations and advice to community pharmacy and other healthcare organisations – including effective use of digital technology.

[CP ITG action:](#)

Consider how the structure and content of the group's meetings can be improved, to better help the group to carry out its workstreams and achieve its aims.

Discussions and anonymous snap polls will take place during the two sessions (11.05-11.10 and 12.50-13.10). This will enable the group to feed back about their views and preferences, relating to:

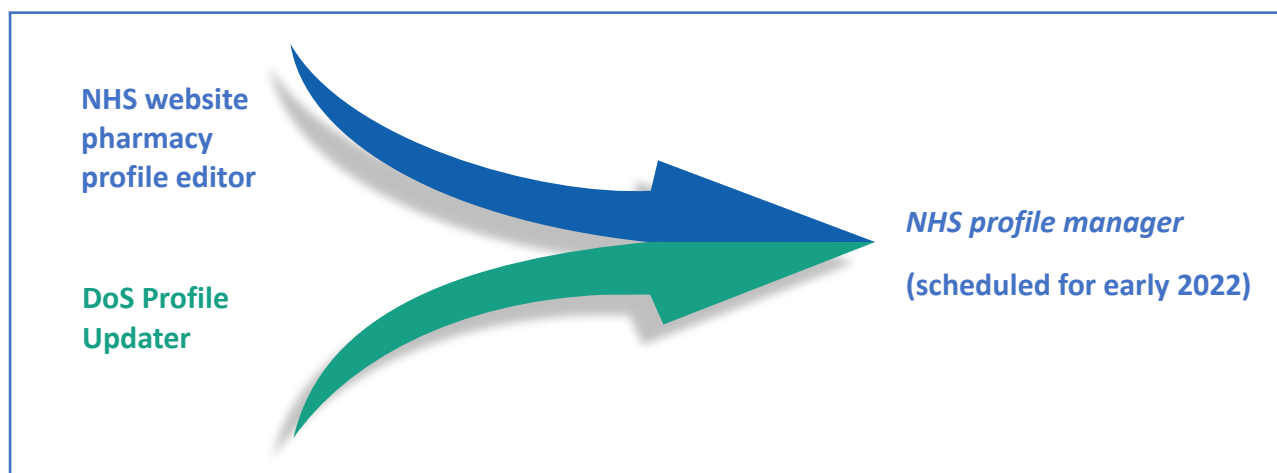
- the balance between briefings and discussion;
- meeting timing/duration options;
- preferred topics;
- breakout room options;
- participation; and
- preferred engagement options for the group's work between meetings (e.g. sub-group calls, emails, and snap polls).

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Subject	NHS profile manager
Date/time of meeting	17th November 2021: 11.15-11.30am
Status	Public
Presenters	NHSX commissioner of the NHS profile manager project
Overview	Community pharmacy contractors currently use two different NHS systems to ensure their pharmacy details are up to date. Work is underway to merge data, systems, and tools so that pharmacy contractors have fewer NHS service updaters.
Proposed actions	Provide feedback on the project following the presentation.

Currently, community pharmacy contractors use two different NHS systems to ensure their pharmacy details are up to date in the Directory of Services (DoS) and on the NHS website: the NHS website profile editor and the DoS profile updater.

A new tool, [NHS profile manager](#) is scheduled to replace both the DoS Updater and the NHS website editor in early 2022. During November 2021, NHS Digital will review all the existing users of the NHS website profile editor and any users who are not using an email address ending with nhs.net will receive email instructions on how to update their login details. This will help all contractors to ensure that they are prepared for the launch of the new NHS profile manager in early 2022.



CP ITG actions:

Group members are:

- encouraged to use [example communications copy](#) to update their networks post meeting;
- invited to see a demo of the new system during a CP ITG subgroup call (scheduled for late November 2021) and provide feedback on it.

NHS Digital will update multiples about the plans concerning the NHS website and DoS Application programming interface (API), during a late 2021 call which is being facilitated by PSNC.

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Subject	NHS Digital Clinical Safety Strategy
Date/time of meeting	17th November 2021: 11.30-11.50am
Status	Public
Overview	The NHS Digital Clinical Safety Strategy makes a case for improved digital clinical safety across health and social care.
Proposed action	The group is asked to respond to the questions set out below.

NHSX, NHS Digital and NHS England and NHS Improvement (NHSE&I) recently published a [Digital Clinical Safety Strategy](#). It aims to improve the safety of digital technologies, now and in the future, with its recommendations including:

- a) Understanding of, and planning for the clinical impacts if IT technologies have downtime.
- b) The Learn from patient safety events (LFPSE) service (which replaced the NRLS service) to have a greater emphasis on digital systems and technologies.
- c) Other reporting mechanisms to align to the LFPSE service - reporting digital clinical safety incident information into the LFPSE should be accessible via all standard incident reporting platforms.
- d) LFPSE mandatory questions will ask reporters if an event is related to an IT or software system, and follow-up questions will ask about the nature of the IT or software problem.
- e) System-wide learning and response related to digital technologies.
- f) IT help desk queries, system downtime reports and, when possible, patient, and public stories should be considered in a triangulated way.
- g) IT suppliers are recommended to produce a clinical safety case report (CSCR) which contains a hazard log that details mitigations and additional controls. This is to be maintained throughout the life cycle of the health IT system and its use and sharing is critical to system-wide learning.
- h) Necessary information will be relayed from LFPSE to NHS Digital and NHSX.
- i) Clinical Risk Management Training such as that equivalent to the relevant Health Education England (HEE) module to be promoted to additional groups working at the intersections of digital clinical safety, including those working in industry and patient safety professionals and health and care workers.
- j) The Clinical Safety Forum to continue to enable sharing of ideas and lessons.
- k) Digital clinical safety to be embedded within future policy and regulatory documents.
- l) A central patient-identifiable database should be created by collecting key details of the implantation of all devices at the time of the operation.
- m) Digital products and services may be assessed against the [NHS Service Standard](#).
- n) A National Digital Clinical Safety Board will be established with responsibility for strategy implementation. It will include policy makers, patients, and suppliers of digital technologies.

CP ITG action:

The group is asked to comment on:

- the strategy and its recommendations;
- suggested actions which could support the pharmacy IT safety agenda; and
- any existing pharmacy or supplier peer-to-peer networks.

Collated feedback will be shared with the Community Pharmacy Patient Safety Group post-meeting.

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Subject	Interoperability and NHSX strategy
Date/time of meeting	17th November 2021: 11.50am – 12.10pm
Status	Public
Overview	NHSX set out interoperability priorities. NHSBSA continue work with suppliers on pharmacy services Application Programming Interfaces (APIs).
Proposed action	The group is asked to respond to the questions set out below.

NHSX recently published an [update on interoperability](#) which included five shared priorities/goals:

- 1) **A new end-to-end process and governance model** for standards development.
- 2) **A standards and interoperability strategy** to be published.
- 3) **An open-source playbook** which will provide guidance to providers and commissioners looking to adopt and implement open-source solutions.
- 4) **A long-term roadmap for standards and interoperability**, this will include a timeline for moving from one version to another and will assist vendors, providers and commissioners with planning and development.
- 5) **A standards portal**, registry of standards used across health and care. Standards may be arranged by use case and easily searchable. The portal will be supported by community features to enable greater collaboration and sharing around standards development, maintenance, and adoption.

CP ITG action:

Comment on:

- these priorities;
- preferences regarding implementation of these NHSX goals; and
- pharmacy IT priorities aligning with NHSX goals.

NHSX can be contacted regarding this programme of work via interop.standards@nhsx.nhs.uk.

Collated feedback will be shared with NHSX post-meeting.

[NHSBSA/NHSE&I update on pharmacy services API work](#)

Report:

- NHSBSA are to update the group.
- NHSBSA are to invite CP ITG PMR/CPCF suppliers and relevant persons to a dedicated call on the topic.

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Subject	Comments on the closure of the Shielded Patient List
Date/time of meeting	17th November 2021: 12.30-12.40pm
Status	Public
Overview	Following Government announcements regarding the end of national shielding in England, the Shielded Patient List (SPL) for England will be closed.
Proposed actions	The group is asked to respond to the questions set out below.

- NHS Digital previously added a 'Shielded Patient Flag' to the NHS Summary Care Record (SCR), this included patients who were on the Shielded Patient List. This enabled community pharmacy teams using the SCRa application to see an alert when viewing the SCR of such a patient.
- Following [Government announcements](#) regarding the end of national shielding in England, the [Shielded Patient List \(SPL\)](#) for England will be closed and changes to patient risk status have stopped being applied. This means:
 - any changes to local patient risk status are no longer captured in the national SPL, or shared with other health and care system partners; and
 - the high-risk flag is not an indicator to be relied upon to assess a patient's current risk from COVID-19 by GPs or in practice management and reporting.
- NHS Digital plan to undertake a managed closure of the SPL during late 2021 and early 2022.

CP ITG action:

The group is asked to comment on:

- any IT implications, including within the SCRa portal and within SCR 1-click systems; and
- whether systems will be able to re-present SPF if shielding is reinstated later?

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Subject	NHSmail and Teams adoption
Date/time of meeting	17th November 2021: 12.40-12.50pm
Status	Public
Overview	NHSmail has tasked an Accenture project team with exploring and boosting NHSmail / Teams usage.
Proposed action	The group is asked to respond to the questions set out below.

- NHS Digital has tasked an Accenture project team with exploring and boosting NHSmail and NHSmail Teams usage, including within the community pharmacy sector.
- Pharmacy use of NHSmail is higher than use within many other sectors, however, usage could be higher still.
- NHS Digital has now rolled out NHSmail MS Teams to 1.3 million users across the NHS since March, and in the space of six months it has been used for 14.5 million calls and has hosted more than 32 million virtual meetings.

CP ITG action:

The group is asked to comment on:

- how to further increase the use of NHSmail email;
- how to boost use of NHSmail Teams usage; and
- what types of professional to professional (one-to-one or more persons) are being conducted via phone when MS Teams could be used instead?

Community pharmacy contractors can also volunteer to participate in the next stage of the NHSmail Virtual Visits booking and consultation platform by stating so during this session or contacting the group secretariat.

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Subject	For report: Updates on other CP ITG work streams
Date/time of meeting	17th November 2021
Status	Public
Overview	This appendix provides a progress report on additional work plan areas which will not be covered in detail during the meeting. The group members are asked to consider the reports, take appropriate actions on the next steps and provide comments on these by emailing Dan Ah-Thion (it@psnc.org.uk) before, or after the meeting, or by commenting during the 'any other business' section of the meeting, if time. The group are also asked to object to next steps before the meeting by emailing it@psnc.org.uk if they so wish. If no objections are received, the group will move forward under the assumption that its members agree.

1a	Supporting the development of interoperability/integration
	Relevant webpages include: /interoperability and /dosesyntax

Shared Care Records (ShCR) update

LPCs and/or local contractors can continue to take steps to gain pharmacy access such as:

- identifying the ShCR project team from the [List of records systems](#);
- learning about case studies such as [Dorset Care Record ShCR pharmacy access case study](#) and the [East London Patient Record \(eLPR\) pharmacy case study](#);
- contacting the ShCR project team and other local partners to find out how to get involved;
- using the '[Planning pharmacy access briefing](#)' and [frequently updated ShCRs webpage](#); and
- reviewing the previous [PSNC/RPS ShCRs/SCR letter to NHS orgs about records access](#).

Other updates:

- PSNC continues to work with NHSX and other relevant stakeholders on the actions set out within the [Shared Care Record \(ShCR/LHCR\) NHSX and pharmacy outputs](#) document.
- Ashley Hannah, NHSX Shared Care Records Programme Director [reflected on the ShCR progress](#).

Local Pharmaceutical Committees (LPCs), ShCR project teams and other parties supporting ShCR pharmacy deployment are encouraged to contact it@psnc.org.uk with technical ShCR information so that supplier and IT support helpdesks can whitelist several ShCR domains at the same time.

NHSX are working with South Central West CSU to develop national Shared Care Records (ShCRs) guidance for the Pharmacy, Ambulance and Community sectors. ShCR usage in Community Pharmacy, Ambulance and Community sectors has been limited. This guidance will promote uptake by providing practical steps for how to join local ShCRs and how to onboard organisations onto ShCR programmes. The work is split into three work packages:

- *Work package one:* Case studies and best practice examples from ShCRs pilot sites and live sites. These case studies will highlight organisations' experiences of using ShCRs and their feedback, including how they overcame any barriers and if any business change processes were implemented.
- *Work package two:* Guidance for PODAC organisations who want to make best use of ShCR solutions. This includes the practical steps required to join and access a ShCR solution.

- *Work package three:* Guidance for organisations who are responsible for the delivery of ShCRs to ensure they follow best practice architecture patterns and make use of existing and emerging national services and standards.

NHSX have commenced work package one and aim to start work packages two and three during November 2021.

Records

- NHSX CEO Matthew Gould [called for NHS data-sharing system and the opt-out process to be simplified](#).
- NHS Digital updated [IT supplier guidance about accessing SCR using the HL7 V3 API](#).
- [NHS App will enable patients at EMIS/TPP GP practices to read all new entries in their health record by early 2022](#).
- [North Cumbria Integrated Care NHS Foundation Trust has expanded the services that share data via the Great North Care Record to include children’s community services](#).
- GPs in the Dorset region are being given click through [access to the Dorset Care Record \(DCR\) using robotic process automation \(RPA\) or artificial intelligence \(AI\)](#).
- Digitalhealth.net reported [NHSE&I are considering commissioning a national arrangement for the Epic electronic patient record within secondary care](#).
- [A trust within North England has integrated its electronic prescribing medicines administration and its pharmacy stock control system](#).

Other updates about interoperability

- NHS Digital updated its guidance for developers on:
 - [Booking and Referral Standard](#);
 - [Fast Healthcare Interoperability Resources](#) (the global industry standard for passing healthcare data between systems);
 - [GP Connect](#); and
 - [Interoperability Toolkit](#).
- [A new Information Standard Notice \(ISN\) was published aiming to support improved medication and allergy/intolerance information sharing across healthcare services in England](#). PSNC has listed the item at [psnc.org.uk/itrequirements](#) and communicated to suppliers about the ISN and the related opportunity to engage with NHS Digital about the ISN and other interoperability projects.
- A [Reinventing interoperability](#) case study set out “why it is the time to put the brakes on business as usual”.
- At a previous meeting, the group agreed to support the capability for anonymised data to be accessible, so that pharmacy teams’ interventions can start to be auditable, and the value of community pharmacy can be better demonstrated. If PMR systems were to be adapted to allow such data sharing, it would require the development of a roadmap and a standard approach to data provision, which may benefit from use of SNOMED CT clinical terms. A PSNC-drafted dataset was prepared and a dataset for the Community Pharmacist Consultation Service (CPCS) could be added. If you would like to help with this work, please contact it@psnc.org.uk.

1b	Supporting NHSmail
	Relevant webpage(s) include: /NHSmail

- NHSmail support pages outline the benefit of the NHSmail Teams “Virtual Visits” patient

consultation platform – namely, this platform enables appointment booking and video consultation. The NHSmail team previously provided a demo to PSNC and CP ITG representatives. Several contractors amongst the small alpha pilot group have begun to successfully use and pilot Virtual Visits. Pharmacy contractors that would like to pilot this are encouraged to contact it@psnc.org.uk with their name, ODS code and telephone number and include 'Virtual Visits pilot' within the email subject title. Prerequisites for piloting: a personal NHSmail account, NHSmail MS Teams, access to a webcam and a suitable computer or mobile device.

1c

Supporting maintenance and demonstration of data security and information governance arrangements

Relevant webpage(s) include: [/ds](#)

Data Security and Protection Toolkit (DSPTK)

- PSNC and NHS Digital are currently updating the Data Security and Protection Toolkit (DSPTK) and related tips. Additional user testing is also planned. If you would like to get involved with this user testing, please contact it@psnc.org.uk.
- NHS Digital may update contractors about the availability of the initial Toolkit version. However, we strongly recommend that contractors hold off accessing the Toolkit until the planned improvements have been finalised and PSNC releases its updated guidance. Contractors will still have adequate time to complete the Toolkit before the submission deadline on 30th June 2022. We will keep contractors informed of any developments.

Other data security updates

- [BMJ reported on the General Practice Data for Planning and Research \(GPDPR\) programme](#), why it is currently on hold, and what the future plans may be for collecting patient data.
- [The National Data Guardian has called for a “commitment to transparency”](#) when developing innovative data tools to avoid concerns like those raised in regard to GPDPR.
- National Data Guardian sought [clarity on Department of Health and Social Care’s draft data strategy](#).
- [Keep I.T. Confidential aims to help NHS staff understand more about cyber security threats](#) and about what to do to reduce the risk.
- Davey Winder, security expert explored [whether healthcare data security may be doing its job](#).
- [Sectra considered the cyber security landscape and how more cloud adoption can help the NHS](#).
- Google's AI firm DeepMind was given the personal records of 1.6 million patients at the Royal Free London NHS Foundation Trust. [DeepMind now faces legal action over NHS data use](#).

1d

Connectivity, business continuity arrangements and dealing with outages

Relevant webpage(s) include: [/itcontingency](#); and [/connectivity](#)

- [Microsoft announced Windows 11 plans](#). Many Windows 10 users are currently eligible for a free upgrade to Windows 11, provided that the computer meets the strict minimum system requirements (e.g. 64-bit processor and 4GB RAM). Pharmacy contractors are advised not to update their machines without the agreement of or supervision from their IT support. Read more: [CP ITG: Windows briefing](#).

- [Analysis: NHS App having an outage caused users challenges](#) with accessing flights and venues

2a

Support reduced burden through tackling issues related to the practical use of pharmacy IT and promoting good IT practices

Relevant webpages include: [/itworkflow](#)

- The group previously identified going paperless as a priority – within its *Digital Priority List* and *Views on the next generation of EPS* shortlists. However, pharmacy teams continue to report considerable use of paper and printing for reasons such as enabling prescription information to move around the dispensary given limited space for PMR terminals. Following work with the group and the paperless sub-group the '[Going paperless](#)' webpage is now available.
- The NHS Business Services Authority (NHSBSA) from October 2021 begun posting out a new version of the paper FP34C submission form. This FP34C version will continue to be issued until March 2022 (for prescriptions dispensed in February 2022), after which FP34C submissions through the Manage Your Service (MYS) portal will become compulsory. [The revised FP34C form includes various improvements](#). Figures for Electronic Prescription Claims and FP10 Paper Claims now have separate entries on the form to ease the contractor [reconciliation process](#) and related [EPS totals comparisons](#).
- PSNC published a [factsheet that explains how pharmacy team members can check if they have an older NHS Smartcard needing replacement](#) ahead of December 2021 deadlines.
- NHS Digital previously added the multi-site 'FFFFF' Smartcard code and SCR rights onto Smartcards with the pharmacist or pharmacy technician role, because of the COVID-19 pandemic. The initiative was supported by PSNC and NHS England and NHS Improvement. [NHS Digital previously confirmed to PSNC that assignment codes will be further extended until 31st March 2022](#).
- NHSX, NHS Digital, PSNC and others are supporting an initiative to rationalise central lists of pharmacy data used within NHS systems and datasets. This will help align data, reduce pharmacy workload, and improve accuracy and data quality. The workstream is also helping to identify future NHS profile manager enhancements, some of which are being added to the roadmap.
- The Prescribing Policy and Charges team at DHSC are conducting discovery work to explore patient digital authentication. The group's comments submitted at the previous meeting and via survey have been [collated](#).

3a

Supporting the development of pharmacy systems

Relevant webpages include: [/systems](#)

- The group previously published its "Use and development of pharmacy systems - Suggested features list v1.0". Additional feedback has led to this document being significantly updated version. Suppliers and the group are encouraged to share final comments, by emailing it@psnc.org.uk during November 2021. The updated list will be published shortly after the November 2021 meeting. See: "[CP ITG- Use and development of pharmacy systems - Suggested features - comments.docx](#)".
- [DMS](#) was introduced as an Essential service in early 2021. NHSE&I and PSNC were keen for suppliers to be given information on the service, IT implications and dataset requirements. Supplier briefings occurred previously. Contact persons on the project introduced themselves to the group: Charlotte Welsh (NHSE&I) and Rob Hills and Ben Tindale (both NHSBSA). There is an objective to progress the specification work further, and for a 'go-live date' ideally by late 2021.

PSNC is continuing to push for this work to be completed at the earliest opportunity. Updates will be published at: psnc.org.uk/itrequirements and psnc.org.uk/dms.

- NHSE&I announced that a national procurement model would be in place to support community pharmacy contractors with the delivery of the Community Pharmacist Consultation Service (CPCS). This was scheduled to terminate on 1st October 2021, but was [extended](#) to the end of March 2022. Related preparations should be finished by contractors no later than February 2021. Contractors are recommended to consider which CPCS IT supplier they want to choose in advance of the next change. From the autumn, contractors will be able to transition to their own contractual arrangements with one of the four assured IT providers: [Cegedim](#); [Positive Solutions](#); [Sonar Informatics](#); or [PharmOutcomes](#).
- NHSE&I has published a [CPCS IT Provider 'Switching' guide](#).
- NHSX have published [a new CPCS Buyer's Guide](#) with inputs from partner organisations including PSNC.

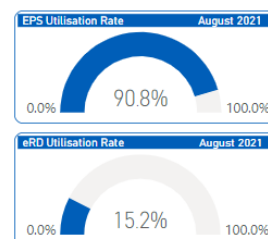
3b

Supporting EPS and its enhancements

Relevant webpages include: [/eps](#), [/rtec](#) and [/itfuture](#)

Electronic Prescription Service (EPS)

- NHS Digital EPS and eRD utilisation rate statistics (for the August 2021 dispensing month) are set out on the right.
- NHS Digital ESP team are working on:
 - Enhancements to EPS dashboard to improve consistency of nomination data and include EPS activity from the non-GP settings.
 - Continuing assurance work for EPS prescribing and dispensing systems for current and Next Gen EPS.
- NHS Digital EPS (Next Generation work):
 - The first system to use the new FHIR prescribing API for secondary care outpatients is aiming to start First-of-Type late November 2021.
 - Another secondary care system supplier is developing against the prescribing API, and more suppliers are engaged – both prescribing and dispensing systems.
 - Development of APIs for dispensing and prescribing system suppliers.
 - Discovery work is ongoing around use of EPS for secondary care outpatients to homecare.
 - Prioritisation of technical developments and potential EPS enhancements continues – considering the value/benefits and technical feasibility. Further cross-setting stakeholder engagement and user research will be taking place on this soon – including a future CP ITG slot.
- The group's [EPS future list](#) is to have priority and feasibility rankings marked against its items. Please contact it@psnc.org.uk if you would like to support this work, such as via a workshop call or by emailing across views.
- EPS Serious Shortage Protocols (SSPs): The current 'NCSO workaround' is being phased out and it is recommended that all contractors and system suppliers ensure they are using the EPS SSP endorsement instead of NCSO as soon as possible. NHSBSA is issuing some guidance and support to system suppliers implementing the EPS SSP feature. Suppliers also have some flexibility as to the extent to which they will support pharmacy team members for example, by asking users to complete any missing or incomplete SSP endorsement information if the required endorsements are not present or not in the specified format. NHSBSA has received examples of invalid/incorrectly endorsed SSP claims submitted via EPS. [PSNC tips explain how to avoid submitting invalid SSP claims](#).



- [The Welsh Government pledged full electronic prescribing within five years.](#)

Real Time Exemption Checking (RTEC)

- NHSBSA has led the RTEC project since January 2020. CP ITG and PSNC have been supportive of its continued roll-out. Read more on RTEC, its phases and continued piloting of Department for Work and Pensions (DWP) RTEC at five pharmacies using PSL at: [RTEC](#). Feedback from RTEC users (PSL/EMIS/Cegedim/Titan/Lloyds/RxWeb systems) has continued to be very positive. Use of RTEC reduces the exchange of paper between pharmacy teams and patients, assisting infection control.
- NHSBSA, DWP and the RTEC steering group plan have allowed the expansion of the DWP RTEC functionality to additional pharmacy contractors since the last meeting – from five to fifty sites.

4a	Consider the development of apps, wearables and technologies in healthcare
	Relevant webpages include: /apps

NHS App

- [NHS App](#) reached [more than 16 million users](#) by October 2021 with over 12 million new users since the COVID-19 vaccination status service was added on 17th May 2021. The NHS App is available on the Google Play store and the Apple App store. [28 million people have registered with NHS login](#) - around half of the English population.
- The NHS App team are working on [further features](#) including: Personal Health Records (PHRs) integration with NHS App: The first supplier, Patients Know Best, was made available in the NHS App from April 2020 and more are expected to go live in late 2021.

Apps and tools

- [NHS Wales selected Malinko to supply its e-scheduling software](#) to all of Wales' community healthcare professionals.
- [Government policy advisers suggested tackling health inequalities](#) partially by making digital tools for accessing health advice available to all.
- [Patients being assessed remotely in general practice, rather than face-to-face, has been raised as a risk factor](#) in reports on five deaths by a single coroner since the pandemic hit.
- [Apps libraries focused on weight management and mental health support were extended across the South-West.](#)
- [Patients are expected to be able to rate GP practices in 'real time'](#) via text message on how satisfied they are with their access to care.
- [The government to pilot a new app linked to a wrist-worn device](#) that issues personalised health recommendations and award points to motivate healthier habits.
- [A project was initiated to explore patterns of use of online services in general practice](#) across Surrey Heath CCG and barriers to their uptake.

Artificial intelligence (AI) and robotics

- NHSX are developing an AI strategy for health and care. PSNC and RPS are commenting onto a drafted version. If you'd like to feed into this work, please contact it@psnc.org.uk.
- The recently published National AI Strategy [aims to boost the use of AI in the private and public](#)

[sector, attract international investment and develop the next generation of tech talent.](#)

- The [new Patient Coalition for AI, Data and Digital Tech in Health](#) formed from members from Royal Colleges, health charities and patient groups intend to ensure patient interests are considered within AI policy developments.
- NHSX' NHS AI Lab and the Health Foundation [awarded £1.4 million to four projects to address racial and ethnic health inequalities using artificial intelligence \(AI\).](#)

5a	To support useful and usable IT beyond pharmacy PMR systems and EPS
	Relevant webpages include: /itfuture

[Integrated Care Systems \(ICS\)](#)

- NHSX confirms 37 of 42 ICSs have ShCR. [Five systems missed the national target to establish ShCR by the end of September 2021.](#)
- ICSs are expected to deliver [‘fully costed digital plan by March 2022’.](#)

[Innovation](#)

- Digital Health Rewired 2022 [called for speakers who can present their digital journeys.](#)
- NHSX has announced that it is to fund and support [14 new projects across the country to help half a million people receive care at home using digital technology.](#)
- Innovation Agency, [described how the AHSN Network has been created to make innovation in the NHS easier to implement.](#)
- A Digital for Boards programme working with trusts across the NHS, and a representative provided advice about [building innovation by focussing culture rather than tech](#) and that *“Digital leaders looking to foster innovation should find out the names of the people involved in innovation programmes and work with them, or create their own programme. Focus on smaller problems first and ensure staff were well supported when using new technology.”*
- InterSystems [argued the airline industry and healthcare can learn from each other.](#)

[IT policy: lessons from the COVID-19 pandemic](#)

- NHSX CEO [shared digital lessons learned during pandemic.](#)
- The Welsh Clinical Portal team [considered the role of technology during the pandemic.](#)
- Digitalhealth.net explored [whether there is some linkage between GP burnout and the increased use of digital services and online consultation platforms since the start of the pandemic.](#)

[Digital clinical safety](#)

- An NHSX clinical advisor set out [Why digital clinical safety matters to everyone.](#)
- NHS Digital Deputy Clinical Director explained how [NHS Digital systems and services keep people safe and clinical safety processes.](#)
- Industry leaders [shared their views on the Digital Clinical Safety Strategy from NHSX.](#)

[IT policy: other updates](#)

- Before the group's March 2022 meeting, a sub-group meeting will review the group's IT vision documents considering recent NHS strategy documents and updates to the Community Pharmacy Contractual Framework (CPCF). If you'd like to join the workshop, please email it@psnc.org.uk.
- CP ITG published its [Pharmacy IT quarterly round-up](#) after the group's previous meeting.
- [NHSX published a 'What Good Looks Like' framework](#) for good digital practice, which highlights the importance of senior level leadership and ownership of digital transformation.
- [NHSX announced funding opportunities for developers that could make appropriate cases to reduce health inequalities and promote sustainability towards a greener NHS.](#)
- [Gov.uk published guidance about how to evaluate a digital health product.](#)
- Government Office for Science published a report on [Harnessing technology for the long-term sustainability of the UK's healthcare system](#). This report presents recommendations aimed at creating system change to improve outcomes for patients and support health care professionals.
- [The health and social secretary Sajid Javid called for the UK to 'level up' digital health inequalities.](#)
- [A new open-source collective has been launched to enable the reuse and co-funding of digital health solutions](#) across the health and care system
- Charlotte Clayton, a digital champion midwife opined on ['Why there is such a slow uptake of digital technology?'](#)
- The chancellor [announced £2.1billion for NHS technology for more 'connected' hospitals.](#)
- [Medicalfuturist.com argued about the importance of clinicians and patients understanding more about machine learning.](#)
- NHSE&I's Director of Transformation spoke on digital transformation: ["Digital change is 'really difficult' but 'essential'"](#).
- Eric Topol and AI expert Kal-Fu Lee released a podcast about ["How machines bring humanity back to medicine"](#).

[NHSX published the 'Who Pays for What' framework](#)

- [NHSX published the 'Who Pays for What' framework](#) to clarify how ICSs and other relevant parties now and in the future can apply for access to IT funds.
- This framework set out that for 2021-2022 national funding for specific transformational technological projects would be consolidated into a single fund - the [Unified Tech Fund \(UTF\)](#). UTF seeks to simplify and consolidate the process for accessing technology funding. The UTF will no longer be taking applications after 22nd March 2022, but some funds close well before this date. Individual ICSs or collaboratives of ICSs can apply for ShCR funding to support Shared Care Records progress. Applications must meet the criteria set out within the [UTF prospectus](#). Several funds were added later, and some have had their close date extended.
- NHSX proposed that for 2022-23 onwards ICSs will be expected to fund the delivery of their tech plans from their own budgets, the total funding envelope available to ICSs and their constituent organisations. They will be given control of more resources with which to do so. National funding will continue to cover national products such as the NHS App; national infrastructure; pilots linked to the NHS Long Term Plan commitments in advance of national scaling; and things that need to be done across multiple ICS areas
- NHSX expect to move away from central funding of frontline tech.
- Views about the 'Who Pays for What' framework can be sent to feedback.wpfw@nhsx.nhs.uk.

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