

Dear Department of Health and Social Care, NHS England and NHS Improvement (NHSE&I), NHS Transformation Directorate, NHSBSA and NHS Digital

We are passionately supportive of NHS community pharmacies being able to provide the best possible care and having the best IT to be able to do so. We are proud that the sector has been able to advance its patient medication record and NHS IT, for example:

- More than 95% of prescriptions being sent electronically.
- Frequent use of those health care records available – the Summary Care Record (SCR).
- A wide use of the NHSmail system.

We care passionately about working with our NHS.

We do not wish to delay or prevent innovation and change. We welcome changes which benefit pharmacies, their patients and the NHS. However, we would welcome a deep consideration about how policy makers can ensure that IT system providers in the pharmacy sector are provided with adequate notice ahead of changes being made to ensure the best possible running of pharmacy IT systems and changes.

We have some suggestions in regard to pharmacy supplier and NHS co-working. We hope these suggestions will improve NHS and pharmacy IT.

1. Working with staff from NHS agencies

NHSE&I / NHS Transformation Directorate (NHSTD) / NHS Digital IT should assign a system supplier liaison head for each of PODAC areas (pharmacy, optometry, dentist, ambulance, care). The role should include an awareness of the multi projects ongoing and should engage with the other NHS technical teams for coordination purposes.

2. Notice so that proper IT planning can occur

As stated we do not want to see any delays with the introduction of new technology and advanced functionality however adequate notice is vital to ensure:

- Proper testing and planning.
- A reduced chance of technical problems being introduced with a change.

It is expected that for minor changes one months' notice would be welcome. Whilst for major changes which could impact IT supplier roadmaps and require significant developer time (some of which may need to be resourced from outside of in-house staff) extra notice would be important.

It would be helpful for pharmacy suppliers to be notified at an early stage so we can provide comments about IT project planning associated with future changes and estimates of the time required at our end to implement a change.

Additionally planning and notice will ensure that other agencies also make the necessary preparations e.g. the NHS Business Services Authority (NHSBSA) which calculates pharmacy NHS activity and the NHS Electronic Prescription Service team, which on occasion will need to change the pricing systems or EPS to accommodate some types of change.

3. Engagement

Suppliers welcome being able to conduct confidential discussions and if needed under non-disclosure arrangements, so that suppliers can make extra preparations ahead of announcements of changes which impact IT project planning.

In the past there are times when announcements are made via press to community pharmacies about IT changes and this occurs before pharmacy system suppliers have been notified.

This change in which we are pre-notified would set the running order of some key priorities and provide IT System providers with the headlines so that suppliers can be undertaking the appropriate research steps well in advance to inform future developments.

4. IT assurance processes

We are supportive of:

- **Improved NHS IT assurance processes.**
- **Appropriate IT assurance team resource within NHS Digital and NHSE&I** – i.e. suppliers would ask NHS to review whether there is sufficient NHS staff available for assurance work to prevent frequent ‘bottlenecks’ delaying assurance progress.
- **NHS projects require appropriate cross departmental support** within the NHS to facilitate prompt assurance. This has been lacking throughout recent projects. Can the NHS Roadmap be prioritised across all relevant NHS departments so that there is improved alignment of these priorities? We believe the alignment between NHSE&I / NHS Transformation Unit / NHS Digital will help in this regard.

5. Collaboration and specifications

We would propose:

- **Submit key information about their company and solution once to the NHS** (shared as required amongst NHSE&I/NHSBSA/NHS Digital/NHSTD). E.g. NHSE&I/NHSD/NHSTD to hold a joint database of system suppliers working with NHS standards or working with NHS providers and ensuring that pharmacy Patient Medical Record system suppliers are included within this database. In the past suppliers are asked to resubmit the same information in relation to almost every NHS IT project.
- **A unique NHS supplier reference code being assigned to each supplier that works with the NHS** (partially to help with the above) – potentially the use of Organisation Data Service (ODS) code and standardised system supplier categorisation might assist.
- **Developments could be a consultative approach with IT system suppliers;** based on any new service or change – once suppliers understand the headline outcomes that the relevant stakeholders are looking to achieve and any mandated integration routes, suppliers can then start to formulate what the delivery to NHS pharmacy contractors may look like. This collaborative approach would help IT system suppliers deliver the best possible user experience and smooth the route to market/ uptake of the new service. Once suppliers understand the outcomes and upcoming changes, suppliers can incorporate these into our product discovery processes which will ultimately encompass full end-to-end workflows to ensure the best experiences for the pharmacy users.
- **Improved communication of any new service/ change** - this communication should include when IT system suppliers were informed and how NHS is working with the suppliers to help deliver the solution. Ideally the pharmacy market would have total visibility of the inception of the new service/ change – including how the project is progressing. This is vital as the IT System providers are frequently the first port of call for Pharmacy with any questions related to NHS communications and there have been numerous occasions whereby suppliers cannot effectively answer pharmacy customer questions as suppliers had not been previously informed.
- **For each IT project IT system suppliers benefit from being able to embark on a project with a set of requirements (that have jointly been worked up) and timeframes.** Open, transparent communications are essential throughout any project and so an additional requirement would be strict governance of any project. This will allow development resources to be used as efficiently as possible. This will ideally remove the types of challenges suppliers have faced with projects in which there have been significant delays (sometimes fully outside control of supplier) and changing NHS requirements all of which caused immense financial implications for suppliers.

In conclusion

We believe as a consequence of implementing these recommendations, there would be greater and speedier interoperability and improved systems: which enable improved outcomes for patients.

Yours sincerely

Pharmacy Patient Medical Record IT system suppliers