### Consultation Response Form

Organisation (if applicable): Royal Pharmaceutical Society

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# Question 1: We would like to know your views on the proposed functions of the new Digital Special Health Authority

At the Royal Pharmaceutical Society, we are supportive of the proposed functions of the new Digital Special Health Authority; 'Digital Health and Care Wales' (DHCW) . Overall, we are confident that the functions will lead to the digital agenda having a greater prominence with our health and social care services and improved patients care and experience.

Whilst reiterating our support for the functions, we do have some commentary and suggestions outlined below.

## National Plans & Strategies

We welcome the acknowledgment that the DHCW will "work within the Welsh policy framework including the principles of all relevant Welsh Government strategic commitments, including A Healthier Wales and any successive policies". In the case of *A Healthier Wales*, a strong digital infrastructure with expertise across the system will be crucial in delivering the strategy and sustainable health and social care services in Wales.

As the professional body representing pharmacists, we would particularly emphasise the strong digital focus in the professions' long-term, 2030 vision; *Pharmacy: Delivering A Healthier Wales*. 'Harnessing Technology' is one of the four key themes of the strategy, with priories including:

- Modernising systems and eliminating the need for paper and handwritten medical notes, medication charts and repeat prescription forms.
- Developing electronic prescribing systems across primary and secondary care.
- Introducing central patient electronic health records.

We would not expect a reference to specific strategies and plans to be included in the consultation document on the overall functions of DHCW. However, we do expect that from the onset of the new organisation being established that work programmes will include plans to support the delivery of existing strategies (such as *Pharmacy: Delivering a Healthier Wales*), as well as condition-specific delivery plans.

### A digital workforce

At present, the digital skills and knowledge of the health and social care workforce in Wales is generally limited. This is a fundamental barrier if we are to meaningfully meet the ambitions of *A Healthier Wales* and make full use of "digital technologies as a key enabler of change".

We are generally supportive of DHCW's proposed role to "assist Health Education and Improvement Wales (HEIW) to provide digital workforce transformation, education and improvement". However, on a point of language, we would suggest that the DHCW should be seen as an 'equal partner' to HEIW, rather than having an 'assisting role' in this area.

With input and expertise from the new authority, we hope that a programme of workforce development tailored to each professional group can be undertaken so that the entire health and social care workforce are upskilled to the required level. This should be done in collaboration between the new digital authority and HEIW, with support and input from professional bodies.

#### Consistent and better use of health and social care data and patient information

At the Royal Pharmaceutical Society, we are of the opinion that the use of data within health and social care in Wales can be improved and simplified. We are therefore supportive of the proposals relating to the 'Standardisation of Digital Systems and Open Platforms' and 'patient health information', discussed on page 8 of the consultation document.

Empowering the new DHCW as both a data controller and processer will hopefully lead to;

- an improved understanding of the wider health and social care landscape
- improved all-Wales data,
- Greater system efficiency through better understanding of patient behaviours and pathways.

As a consequence planners at national and local levels will be better equipped to increase efficiency and further tailor service delivery to the needs of patients.

#### Supporting 'ground up' initiatives

It is noted in the section focusing on 'application development and support' that DHCW will "work closely with the Health and Care sector in Wales and stakeholders to develop digital applications and systems". This is an important commitment as we know that often the best ideas and solutions come from front line health professionals.

However, in reality, too often professionals will develop ideas, demonstrate outcomes and effectiveness through empirical evidence but the final step of putting their ideas into practice will prove to be impossible. This is usually due to a lack of resources, finance or expert technical support. Therefore, proactive expert support and input from DHCW at the proposal stage to health professionals who are developing digital innovations would be a positive development. This would ensure that initiatives can be developed in a way that are aligned and integrated into existing systems from the onset. We are aware of a number of proposals and projects developed by front line pharmacists over recent years that would have benefited from such support.

# Question 2: We would like to know your views on the proposed board structure for the new Digital Special Health Authority

We are pleased that the concerns of the Welsh Audit Office and the Welsh Parliament's Public Account Committee around governance, accountability and oversight are being addressed. It has become increasingly evident that the 'hosting' of NWIS under the statutory framework of Velindre NHS Trust is not conducive to effective scrutiny and delivery.

We are satisfied that the proposed board structure is appropriate and will lead to significantly better scrutiny and governance. Crucially, establishing a peer to all other NHS Wales bodies will ensure the rightful prominence of digital within the system at a time where technological advances are sure to play a greater part in society as a whole.

Question 3: If you believe that one or more of the proposed functions of the new Digital Special Health Authority overlaps with a function already being undertaken by a different organisation in Wales (that is not NWIS), we would like to know your reasons and any evidence to support your views on those issues.

No comment.

Question 4: We would like to know if you believe whether a further function or set of functions should be included within the responsibility of the new Digital Special Health Authority and for you to set out your reasons and any evidence and research to support your view.

We have nothing to suggest at this stage. However, we would encourage the Welsh Government and the new board overseeing DHCW to keep an open mind if it were to become evident that new functions should be added to the body.

Question 5: We would like to know your views on the effects that 'A Digital Special Health Authority for Wales' would have on the Welsh language, specifically on opportunities for people to use Welsh and on treating the Welsh language no less favorably than English. What effects do you think there would be? How could positive effects be increased, or negative effects be mitigated?

With its NHS Wales Trust status, we expect that the new authority will be expected to comply with the same Welsh language standards that came into place for other NHS Wales trusts and local health boards on 30 May 2019.

At the RPS we would stress the importance that developers are careful to ensure that the Welsh language is treated equally to English at the stage where public facing platforms and services become available and in use. This is particularly important for older Welsh speaking citizens who may be less confident when using digital platforms.

Question 6: Please also explain how you believe the proposed policy 'A Digital Special Health Authority for Wales' could be formulated or changed so as to have positive effects or increased positive effects on opportunities for people to use the Welsh language and on treating the Welsh language no less favorably than the English language and on treating the Welsh language no less favorably than the English language.

We have no suggestions.

Question 7: We have asked a number of specific questions. If you have any related issues which we have not specifically addressed, please use this space to report them:

# **DHCW's Pharmacy Team**

We would like to highlight the important and high-quality work on pharmacy projects delivered by NWIS staff over recent years. This has included award winning projects for excellence and innovation such as the development of the 'Choose Pharmacy' IT platform and the infrastructure supporting the community pharmacy 'Sore Throat Test & Treat' service.

We are pleased that the consultation recognised the "quality of the skilled workforce already within NWIS" and notes that "all staff will be transferred to the new organisation". As discussed above, digital advancement is a cornerstone pharmacy's long-term vision in Wales. However, in order to meet this vision, we would encourage the new authority to increase the number of

members of staff who can input from a pharmacist/pharmacist technician perspective. We fear that without further specialist pharmacy input to support the staff currently employed by NWIS, the capacity of the new authority to deliver the aims

aims of *Pharmacy: Delivering a Healthier Wales* will be severely limited. We understand that such decisions will not be made at this consultation stage, however we hope that the newly formed board and senior management team will consider staff capacity at an early stage.

#### Driving Digital Change at Pace And Scale

The forward refers to the "significant challenge of driving digital change at pace and scale". It is however a challenge that has to be met. Unfortunately, as highlighted by the work of the Welsh Audit Office and the Welsh Parliament's Public Account Committee over recent years, too often this challenge has not been met, with frustration at the pace of delivery being a common theme among health professionals and the public.

Examples from this year such as the national roll out of video consultation services demonstrates that delivering rapid digital change at scale can be done. It is vital that efficient and quick delivery is at the heart of the new organisations and the barriers to this are identified and resolved.

Within the pharmacy profession there is considerable frustration that electronic prescribing systems are not in place within Wales. This is despite the fact that an initial national plan to implement an Electronic Prescribing and Medicines Administration (EPMA) system was developed in 2007, with an initial aim to deliver this by 2010. We expect that delivering electronic prescribing systems for both primary and secondary care at pace and scale will be an urgent priority for the new Digital Special Health Authority.