NHS

Developing the Maternity Solution

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The CSC Alliance is the North West and West Midlands
Local Service Provider for the National Programme for IT

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Cluster Reference Solution

- Strategic solution development for:
    - iSoft Lorenzo
    - Joint design and development teams with iSoft and Accenture
    - Integrated platform; Cluster-wide, services driven
    - Functionality evolves over time
        - Builds upon patient administration functionality
        - Clinical functionality evolves; simple to complex
        - Agreed release framework; contract driven
        - Integration standards defined

Developing a Maternity Solution

- A Maternity Solution within an integrated patient centric EPR
  - Supports "Pre-cradle to Grave Record"
  - Includes foetal record

- Provides a seamless health record across care community
  - Provides interaction with core generic and all specialist/gp functionality
    - orders and results, scheduling, medicines management
  - Eliminates duplication effort and paper
  - Data capture and clinical coding a by-product of the real time clinical process

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Contract Driven

- Requirements with LSPs
  - Section 118 : Maternity Services
    - Children Services NSF Standard 11
    - National Screening Requirements
- Requirements with NHS
  - Clinical content
    - Data sets
    - Configuration elements
    - Business process

NWWMS Cluster Clinical Services Development Programme

- Principles
  - The CSDP will produce, per release, the clinical content for a standard, Cluster-wide system, compliant with NPfIT technical standards and consistent with the national programme objectives
  - Each SHA will have an equal share in the definition of the Cluster standard system, through their representatives on each ERG
  - The Expert Reference Groups will agree a consensus clinical view in their respective domains
  - The recommendations of each ERG will be implemented in the Cluster standard solution provided their work meets agreed quality criteria
  - The Cluster will establish and support the clinical governance structures and processes required to approve clinical content which is recommended by the ERGs for system testing, deployment and ongoing changes and additions.
  - The work of the ERGs will be as transparent as possible to all clinical stakeholders in the Cluster and the CSDP will support effective consultation and communication, especially with deployment sites

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Cluster Methodology & Approach

- Each clinical ERG will comprise:
  - Appropriate representation from clinical professions / operational roles in Trusts, agencies and SHAs
- Each ERG will provide:
  - core clinical configuration decisions; supporting the test cycle
  - early identification of design issues
  - Nominated test witnesses (via the Cluster / CSC Alliance coordinating team)
  - Feedback on test issues and fixes, via the test issue resolution process
  - Collated, detailed material on clinical working practices, especially those using IT, which represent good practice
  - Complete clinical configuration decisions sufficient to support rapid and clinically effective deployment, to include details of configuration items, fixed and/or locally variable

Cluster Governance

- Expert Reference Group produces:
  - models of benefits and change issues to support deployment, validated by clinicians
  - an audit trail of decisions reached,
  - a known body of clinicians actively involved in their specialism,
  - consultation processes, undertaken to ensure that Cluster-wide standards defined by the groups have broad clinical support
- **Leading to:**
  - Decisions from Cluster Programme Board based on clinical recommendation
- **Additionally:**
  - Input from Connecting for Health
    - Muir Gray 'Do once and share' national projects
    - NPSA/CfH Clinical Hazard Assessment assurance
    - Map of Medicine

Approach to Supporting Maternity Services

Maternity Functions	Solution Functions
• Referral	• Identity Services
• Care Events	• Care Management
• Antenatal Phase	• Clinical Narrative
• Record Stage Onsets	• Charting
• 1st Stage Labour	• Requesting / Resulting Services
• 2nd Stage Delivery	• Structured Care (Care Plans, ICPs)
• 3rd Stage Labour	• Medication Management
• Caesarean Section	• Knowledge Management
• Registrable Birth	
• Postnatal Phase	**Solution Engines**
• Administrative Closure of Maternity Episode	• Workflow
• Standard Reports	• Scheduling
	• Terminology
	• Decision Support