



The Presiding Officer
States of Guernsey
Royal Court House
St Peter Port

18 May 2020

Dear Sir,

Scrutiny Management Committee - Commentary on the Committee *for* Health & Social Care and the Policy & Resources Committee's Urgent Capital Bid – Replacement of the Electronic Patient Record System

This Letter of Comment from the Scrutiny Management Committee (the Committee) is submitted in accordance with Section 3 (19) of the Rules of Procedure.

On 2 April 2020 the Committee *for* Health & Social Care and the Policy & Resources Committee published a joint Policy Letter for consideration by the States of Deliberation. It requests funding to a maximum of £20 million for a replacement digital system to better monitor, integrate and organise the Islands' healthcare data

The Committee wishes to make it absolute clear it concurs that it is essential the current InterSystems TrakCare Electronic Patient Record (EPR) system is replaced as soon as practicable. However, the Committee has a number of points it wishes to raise regarding the proposed approach outlined in the Policy Letter. This commentary is based on the Committee having reviewed the previous Electronic Health & Social Care Record (EHSCR) systems Post Implementation Reviews (PIRs) as well as this Policy Letter and the related Outline Business Case.

Firstly, regarding the timing of the submission of the bid, the Committee would question why this bid was not presented to the States Assembly for consideration earlier on in the political term, rather than as an urgent bid under the current unprecedented circumstances. A full explanation as to the timing of this policy letter is therefore requested.

Further, whilst noting that the procurement process has already commenced, pending approval of the Policy Letter, the Committee is concerned that the timescale for implementation is very limited. The expiry date of the current support agreement means that a significant risk exists

that the tendering process will not be completed in the time remaining. No doubt the current unprecedented times will clearly make the tendering and implementation process more difficult. Whilst an excessively long implementation period would not militate towards success, the Committee does question whether the eighteen month period is too short.

Secondly, it is clear that this urgent bid is the initial stage in a wider Guernsey EHSCR system programme. As a replacement system, it does not in itself represent significant enhancement of the functions of the existing system. If full value is to be derived from this procurement, then it must be based on the assurance that it will enable the actual delivery of the further enhancements suggested, specifically in paragraphs 1.4, 4.2, 4.4 and 5.3 of the Policy Letter, and do so in a timely and cost effective manner. The Committee has a specific concern that this development does not encompass full integration with Primary Care systems but is limited to services using the current EPR system.

The Committee is concerned that the Policy Letter does not clearly outline the stages of this programme and the indicative costs of the additional stages. There is also limited commentary on the related financial benefits of this project; a key lesson highlighted following the previous EHSCR system implementation. Whilst the Committee accepts that the case for the proposals is not based on cost savings as such, we do note that there does not appear to be any clear evidence of the financial benefits to be derived from the project; on the contrary, the Policy Letter recognises an additional annual cost of four hundred thousand pounds per annum. On this basis the Committee believes further clarity should be provided regarding the financial benefits and the overall roadmap in place to deliver the proposed Guernsey integrated health and social care records system including links to Primary Care.

Thirdly, the Committee recognises that there does appear to be a full understanding that this project is not merely an Information Technology project, but is in essence a Change Management programme. The Committee further wishes to highlight another of the key learning points from the PIRs undertaken following implementation of the current InterSystems TrakCare system. The PIRs emphasised the need to fully resource so called 'organisational' Change Management by ensuring that senior clinical staff are central to the decision making process in all phases of the programme, including procurement.

Finally, the Committee notes that should the request be approved by the States Assembly, the project will take up a significant amount of the current Capital Reserve but it will not provide any significant benefit to the local economy. The Committee further believes that at this time a general re-prioritisation of the capital investment portfolio should be undertaken, arguably before any individual project / programme are permitted to proceed.

Yours sincerely,



Deputy Christopher Green

President of the Scrutiny Management Committee