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Bwrdd Iechyd Prifysgol
Caerdydd a'r Fro
Cardiff and Vale
University Health Board

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Suzanne Rankin
Chief Executive

9th January 2023

Russell George MS and Mark Isherwood MS
Chairs of Health and Social Care and Public Accounts and Public Administration
Committees
Welsh Parliament
Cardiff Bay
Cardiff
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Dear Russell and Mark

Thank you for the opportunity to provide information on the issues outlined in your letter from 5th December 2022.

Provided below are responses to each of the questions posed – for clarity we have reproduced each question as provided in your letter. These responses have been provided by David Thomas the Director of Digital and Health Intelligence.

1. Whether your health board has agreed to adopt the Welsh Community Care Information System (WCCIS)

Cardiff and Vale University Health Board (The 'HB') has an established, well-used Electronic Patient Record (EPR) in use across Mental Health and Community Services.

The EPR, a system called PARIS, now holds 23 million case notes, a further 2 million clinical assessments and 1 million attached documents, created by the over 4,800 active users of the system. The HB has not yet agreed to adopt 'CareDirector', the current identified WCCIS solution. Responses to question 3 outline the reasons for this.

2. If so, an overview of the current position in implementing WCCIS within the health board

Not Applicable as WCCIS not adopted.

3. If your health board has chosen to use a different system instead of WCCIS:

a. The reasons for deciding to do so;

The decision to continue using the PARIS EPR solution has not been explicitly made, but is the result of multiple factors which prevent the

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HB from establishing a viable business case for the adoption of the CareDirector platform. These factors include:

- A significant increase in clinical risk due to:
 - Loss of system functionality when assessed against the existent Paris EPR, and a resulting reduction in service capacity to redress this;
 - Poor quality of reference data, and disparate approaches to adoption of CareDirector across Wales;
 - Loss of local interoperability preventing the flow of information across settings within Cardiff and Vale UHB;
- Cost:
 - CareDirector represents a 400%+ increase on local maintenance costs, and the PARIS EPR would need to be kept running to ensure continuity of the patient record;
 - Implementation costs were estimated in 2017 to be in excess of £3M;
- Platform longevity. The technology underpinning CareDirector will no longer be supported by Microsoft from 2026;
- Ability to realise benefits. Whilst the Vale of Glamorgan local authority has adopted CareDirector, Cardiff Council has a long-term contract for a cloud-hosted social care case management platform, negating any benefits arising from utilisation of the same platform across Health and Social Care in the Cardiff region.

b. Whether that system is interoperable with WCCIS;

The HB is looking to facilitate interoperability across clinical systems via the Local Data Repository (LDR) as part of the National Data Repository (NDR) Programme. Records held in PARIS will form a part of this work, and so it would be considered 'interoperable' in that sense.

The HB is partnering with its local authorities and has set up a Digital Care Region (DCR) Steering Group to own the governance foundations for record sharing between local health and social care organisations. This approach is consistent with and supportive of the National and Local Data Resource (NDR, LDR) programme aims for the sharing of data.

The HB has supported data standards work within the national programme extensively, and by virtue of having an EPR in place already, has been an early adopter of data standards for scoped services, as those standards have been published.

The DCR partnership is limited by the funding arrangements for the WCCIS programme, which remains focused on the provision of the CareDirector platform, to the detriment of local authorities and health board services which have been unable to adopt this platform.

c. Any potential risks that have been identified, and how they are being managed

The HB acknowledges the ongoing risk stemming from the absence of an effective information sharing mechanism in the Vale of Glamorgan local authority region, but is seeking to mitigate this through the Digital Care Region approach outlined above.

Equally, the UHB remains concerned that:

- The recommendations of the 2022 strategic review, especially on dissociating the WCCIS Programme from the CareDirector platform, and for the programme to adopt a platform-agnostic approach, have not been progressed;
- Current horizon-scanning work to identify a future WCCIS platform or platforms is being carried out from the perspective of those sites using the CareDirector solution, without consideration for the requirements of health and social care organisations using other products;
- Funding and resources continue to be directed at adoption of the CareDirector platform only, to the exclusion and detriment of organisations utilising other platforms.

Thank you again for the opportunity to comment and I hope that this information is useful to your committees.

Yours sincerely

Suzanne Rankin
Chief Executive