

# COMMUNITY HEALTH SERVICES DIGITAL COMMUNITY OF PRACTICE (CHSD COP)

(7) March – May 2024



## REPRESENTATION

Attendance: 30

- CDDFT
- GHFT
- NCIC
- NHCFT
- NTHFT
- NUTH
- STHFT
- STSFT
- Local Authority
- VCSE
- Commissioning
- Ageing Well
- Other workstreams
- NHSE

## CONTACT US

NENC CHS Digital Lead:

[Paul Danvers](#)

NENC Ageing Well

Clinical Lead:

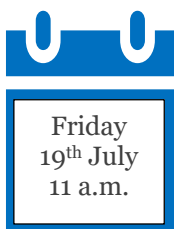
[Dr. Dan Cowie](#)

NEY CHS Digital Senior

Lead:

[Angela Wood](#)

## NEXT CHSD COP



## COMMUNITY OF PRACTICE FOCUS – 24<sup>TH</sup> MAY

The featured showcase for this session was [BreathTec](#), presented by Dr Graham Burns with extensive experience over 30 years in COPD and severe asthma, and Dr Karen Marshall, respiratory nurse consultant at the RVI with specialist expertise in CBT. Some of the key points we heard include:

- Breathlessness is frightening
- Patients with chronic breathlessness have elevated levels of anxiety
- Anxiety drives hospital admissions
- Cognitive Behavioural Therapy (CBT) improves anxiety and is proven to reduce admissions
- Due to a shortage of therapists, a **digital application** is the most practical solution to reach the greatest number of patients

Over a decade ago we developed a program of CBT for patients with anxiety in the context of chronic lung disease. An NIHR study formally tested the program against the best available control. Not only did it improve levels of anxiety, but it also significantly reduced Hospital Admissions, resulting in substantial net cost savings for the NHS.

CBT is proven. The need is immense. However, the shortage of therapists is prohibitive. The only realistic solution is an online program, making the therapy available to anyone, anywhere, anytime. For that reason we created ‘BreathTec’.

To find out more, a [recording](#) of the presentation is available (non attendees can request access) or [contact](#) Graham and Karen.

**e-Rostering and e-job Planning / Workforce auto allocation** – further to previous discussions in our CoP, we are now linked with colleagues within ICB Workforce workstream. We are planning to set up a separate event in July to reach a wider audience which will feature:

- An overview of e-rostering and e-job planning (NHS England)
- A showcase by Docabode who have had success in enabling auto allocation functionality to maximise the use of community workforce, including in UCR teams in Yorkshire

To register interest for yourself or colleagues, please use our contact email address to the left.

## REGIONAL / NATIONAL CHS DIGITAL UPDATES

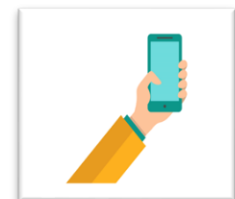
Key messages and events were discussed on the CoP and further information will be shared with members regarding the areas below. If you would like to know more, please contact Paul Danvers or Angela Wood:

- National team priorities include:
  - Frontline Digitisation and Digital Maturity Assessments
  - NHS App and Wayfinder
  - Future Connectivity
  - Connected care records

• National Workshops Summary – Understanding the Digital Needs of Community Health Services – 664 participants completed the survey and 222 people attended 11 deep dive workshops, which have helped to shape priorities for the coming year and beyond. For more information contact [england.communityhealthservicesorg@nhs.net](mailto:england.communityhealthservicesorg@nhs.net).

The 6 workshop themes were:

- Empowering CHS Digital Leadership
- Recovering CHS Waiting Lists
- Empowering Patients through Self-Referral to Community Services



- Digital Enablement to Maximise the Value of CHS Data
- Reducing the Burden of Clinical Administration in Community Services
- Digital Skills Enablement for CHS
- Digital Maturity Assessment – Community teams within Acute Trusts will complete separate DMAs; In NENC this year DMAs are also to be completed by North Tyneside Council and St. Oswald's Hospice
- Faster Data Flows (FDF) – these are being developed to enable daily data flows, data cleansing and submission to CSDS and community Sitreps, with NHS and patient care benefits expected. Pilots are starting nationally and a series of calls and sessions are being set up, to be shared with community providers in the coming weeks
- CHS Data Plan – this includes Community FDF onboarding and development of a CHS data management strategic plan within each ICB
- Funding for Connectivity - wireless innovation trials applications include one being considered in NENC by South Tyneside and Sunderland FT
- A Technology Enabled Care conference is being planned for later this year, with the following possible inclusions:
  - Smart Socks
  - AI in MSK
  - Brave AI – monitoring wellbeing
  - Genie Connect
  - Amazon SmartHouses
  - Painchek
  - Hydration
  - BreathTec
  - VR Headset in Podiatry
- Community Datasets – onboarding to CSDS and Sitreps is stopped and providers will now onboard directly into FDF.
  - CSDS data quality improvements includes:
    - UCR Reason for Referral and Source of Referral
    - CSDS Team Type
    - 999/111 to UCR referrals to be increased