Digital Transformation in the NHS
Response submitted by the Royal College of Midwives

Executive summary

Women using maternity services today are either of a generation for whom the internet has been a daily part of their everyday lives throughout adulthood, or they are digital natives for whom digital technology has been an integral part of their entire lives.

The fact that an early target for the rollout of digital maternity records was exceeded by 50 per cent is a clear sign that there is an appetite for this.

Digitalisation has vast potential, from saving the health service money by eliminating duplication of work through to safer care thanks to all a woman's care record being more accessible.

But these improvements do not happen by magic. It needs investment, absolutely. The NHS needs to recruit or train Digital Midwives to work in every trust. But it is not just extra money. Trusts need to be mindful of the need to develop systems that can speak to other systems, so-called interoperability. Without that the benefits of no more duplication of work and enabling healthcare workers to deliver safe care thanks to accessible care records is more muted.

Our experience of how the NHS has functioned during the national lockdown shows us that the NHS can embrace more technology and that it can improve care. This is the moment for the NHS to take forward the digital agenda, and maternity care is a perfect candidate for any such initiative.

We need to advance this process before muscle memory returns us thoughtlessly to the old way of doing things. That is why throughout this submission we have included suggested deadlines and timelines for certain actions to be taken (e.g. a Digital Midwife in every maternity service within 12 months).

Thank you for this opportunity to submit evidence to this inquiry. We hope it is helpful, and of course we would welcome the additional opportunity to give oral evidence to answer any questions that the Committee may have.

List of RCM recommendations

We recommend that within the next 12 months every maternity service has a Digital Midwife in post, and where a trust is large a team of Digital Midwives may be required to drive forward digital transformation and clinical informatics of maternity care.

Given the success of the rollout of digital records within maternity, with the main target exceeded by 50 per cent, the RCM recommends that all women in England should have the option of holding their maternity records digitally within three years.

The RCM recommend ring fenced funding for digital maternity transformation for maternity services.

There is huge potential for the rollout of digitalisation in maternity care. As a shop window for the NHS, maternity services must not be side-lined in work that is underway. The RCM therefore recommends that future initiatives for digital exemplar programmes ensure the sharing of learning to include maternity services and harness the unique opportunities in the maternity pathway.

Strategies are useless if they are filed away soon after publication, be it on an office shelf or digitally on a chief executive's laptop. The RCM recommends therefore that the NHS nationally must have systems in place to ensure that trusts have up-to-date digital strategies and are accountable for delivering on them.

We recommend trust wide digital transformation plans are required to include maternity services.

Women accessing maternity services are the digital native generation and are familiar with using technology in their everyday lives. We recommend that all maternity services offer digital access for women to self-refer for their maternity care and that their entire maternity journey is supported by digital technology to provide access to a complete digital maternity record for both for the clinician and the woman to the record wherever they are.

We recommend that all maternity records conform to interoperability standards to share information between all clinicians involved in a woman's care.

Systems must be able to speak to each other, otherwise the potential benefits of digitalisation are lost. The RCM therefore recommends that the clinical workflow and women's journey through the maternity system is considered and interoperability is utilised as standard with all IT systems to reduce duplication and data silos.

We recommend that all maternity systems undertake a digital skills audit to identify midwives learning needs and specialist skills training is made widely available to drive up skills, efficiency, and the quality of care they can deliver.

Introduction

The Royal College of Midwives (RCM) is the trade union and professional organisation that represents the vast majority of practising midwives in the UK. It is the only such organisation run by midwives for midwives. The RCM is the voice of midwifery, providing excellence in representation, professional leadership, education, and influence for and on behalf of midwives. We actively campaign for improvements in maternity services and provide professional leadership for one of the most established clinical disciplines.

In this submission, the RCM outlines our perspective on the recent publication "digital transformation in the NHS"[1] highlighting significant issues in previous attempts to improve the digital maturity of the NHS and recommendations we would support as part of this.

Digital transformation of the NHS is a huge challenge

The RCM agree that digital transformation of the NHS will be a huge challenge both at a local and national level. The cultural shift of healthcare workers to engage with new digital technologies may be challenging, but maternity services which have undergone this transformation have reflected very positively following this.
We recognise the importance of leadership as integral to achieving effective digital transformation, and this leadership is required both at a national governance level but also within maternity services at a local level.
The RCM has found that trusts that employ a Digital Midwife have made much more progress in digital transformation of their maternity service. The Digital Maturity Assessment (DMA)[2]

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[1] NAO 2020. Digital Transformation in the NHS
[2] NHS Digital 2018 Digital Maturity Assessment

demonstrated that trusts who scored low on digital leadership also scored low across all other measures of digital maturity. The Digital Midwife is a clinical specialist role that only drives improved use of digital technology but also the collection and use of data to better inform service change. [3][4]

We recommend that within the next 12 months every maternity service has a Digital Midwife in post, and where a trust is large a team of Digital Midwives may be required to drive forward digital transformation and clinical informatics of maternity care.

The NHS has not made the expected progress since 2014, including against a headline target to achieve a 'paperless' NHS.

The RCM is supportive of the ambition to become paperless in the NHS. We recognise that many maternity services are still very paper heavy, and this is leading to inefficiency and time wasted on duplication of documentation. This time taken away from direct patient care has a significant negative impact on the care provided. Inefficiencies in sharing of patient information may lead to delays in care and a poor experience for women who may have to repeat their medical history at each consultation.

Paper based health records cause significant clinical risks in maternity care as all clinicians involved in a woman's care are reliant on one document which is not easily accessible. This is especially apparent for women with complex health needs or who require support from multiple services within maternity and other specialist services.

Maternity is unique compared to other areas of the health service, where women are expected to carry their paper records with them at all times during their pregnancy, and thus these important records are not available to health professionals unless the woman attends with them. Although some services have gone paper free and provide access for women to view their electronic record, this is still the minority of trusts.

We welcome the success of the work by NHS Digital to provide 100,000 women access to a digital personal health record for their maternity care. This target was over exceeded, with 150,000 women being offered access to digital records by the end of the project. This demonstrated enthusiasm both within maternity service providers, and the women using those services to access their health records electronically[5].

Given the success of the rollout of digital records within maternity, with the main target exceeded by 50 per cent, the RCM recommends that all women in England should have the option of holding their maternity records digitally within three years.

Recent investment in digital transformation has not been sufficient to deliver the national ambitions.

The RCM recognise that digital transformation will require significant investment in local and national infrastructure to support the ambition.

The fact that NHS maternity services in England have been short of over a thousand midwives – in some years, several thousand midwives – demonstrates just how cash-strapped the service continues to be. Maternity care is a shop window for the NHS. An opportunity to help women and their families make positive changes to their health still relatively early in life – to quit smoking, for example. This is not the area in which to cut back; it's the area in which to invest for the future.

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[3] RCM 2019 Manifesto https://www.rcm.org.uk/media/3669/rcm-uk-manifesto-a4.pdf
[4] RCM 2020 Digital Midwife, Career Framework
[5] NHS Digital 2020. Women's Digital Care Record 'Accelerators'. Project Analysis Report. NHS Digital.

A lack of money was given as the most common answer by Digital Midwives when asked why they had not achieved digital transformation within their trust and was identified as the primary reason by 66% of Digital Midwives

When Digital Midwives were asked on the reasons why they had not improved their local digital maturity in maternity, the leading reason was a lack of available finances to support this[6].

The RCM recommend ring fenced funding for digital maternity transformation for maternity services.

The Global Digital Exemplar (GDE) programme is helping a small number of trusts

1 in 3 Digital Midwives have never heard of the GDE programme, according to a 2020 RCM survey conducted by the RCM and only a quarter identified they had received any learning from a GDE site to support their transformation. The value of this programme is not being adequately felt within maternity services, and the learning is not widespread across the NHS yet.
The RCM has noted the limited learning from the GDE Programme within maternity services. Despite the progress made by GDE sites, opportunities have not been adequately shared and digital specialist staff are unaware of how to engage with this programme and access the learning. The GDE programme has been delivered in isolation to other objectives and has not be aligned with digital transformation targets in maternity from the Maternity Transformation Programme.

There is huge potential for the rollout of digitalisation in maternity care. As a shop window for the NHS, maternity services must not be side-lined in work that is underway. The RCM therefore recommends that future initiatives for digital exemplar programmes ensure the sharing of learning to include maternity services and harness the unique opportunities in the maternity pathway.

Trusts' digital maturity has improved, although significant challenges remain.

Despite the Maternity Digital Maturity Assessment (DMA) in 2018, there has been limited improvement in the digital maturity of maternity services from this. Despite a detailed report including guidance was produced, organisations were never required to demonstrate any learning or changes to their service delivery and there has been no measurable expectation of minimum digital maturity. The DMA was completed in isolation, and without planned follow up or repeat it is not possible to adequately assess its impact or lack of impact on the improvement of digital maturity.
In a recent survey of Digital Midwives, 55% identified that their trust had written a digital strategy following the DMA, however only 5% identified that they had delivered that strategy and 17% had not delivered on any of that strategy, while 47% had partially delivered.

Strategies are useless if they are filed away soon after publication, be it on an office shelf or digitally on a chief executive's laptop. The RCM recommends therefore that the NHS nationally must have systems in place to ensure that trusts have up-to-date digital strategies and are accountable for delivering on them.

Changing national strategies have contributed to a fragmented environment, which makes achieving current ambitions more challenging

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[6] RCM 2020. RCM Digital Midwives Survey

Digital maternity transformation is often fragmented within NHS Trusts from trust wide digital transformation plans. Often seen as 'too difficult' to include due to the unique pathway, many maternity services are left behind while the rest of the hospital improves digital maturity.
In a recent survey, half the Digital Midwives who responded identified that their maternity department was less digitally mature than the rest of the trust. This poses significant safety risks within maternity care provision for increasingly complex maternity care[7].

We recommend trust wide digital transformation plans are required to include maternity services.

Digital transformation is essential to the NHS's Long-Term Plan to improve services and will need a high-quality implementation plan

The RCM support the NHS long term plan's digital ambitions. We support digital first options within maternity care to improve women's access to digital health information and their maternity records. It is integral to support women's choice in how their maternity care is delivered and support all options for utilising digital technology such as video or telephone consultation if preferred.
The RCM are supportive of the use of remote monitoring technology to support women to have access to increased monitoring and reduce unnecessary disruption to their personal lives attending unnecessary appointments. This has been shown to be effective in maternity care and should be supported in all maternity services for appropriate conditions.

Women accessing maternity services are the digital native generation and are familiar with using technology in their everyday lives. We recommend that all maternity services offer digital access for women to self-refer for their maternity care and that their entire maternity journey is supported by digital technology to provide access to a complete digital maternity record for both for the clinician and the woman to the record wherever they are.
We recommend that all maternity records conform to interoperability standards to share information between all clinicians involved in a woman's care.

Achieving interoperability of data and IT systems is a longstanding aim and essential to current plans for digital transformation, but it will be very challenging to fully achieve

The RCM believe the sharing of data in maternity care is very important in providing safe effective care during a maternity journey which is a multiagency pathway. Maternity care is provided by midwives, with the assistance of maternity support workers, obstetricians, health visitors, GP's, mental health services and pharmacists, to name a few, and it's imperative that all of these agencies have appropriate access to the important information about both the mum and baby.
Repeated re-entry of data onto multiple systems is an issue in maternity care which is wasting valuable clinical time for midwives. Where data is not duplicated into multiple systems there are also risks of silos of health information. 90% of Digital Midwives report that in their trust midwives have to login to 3 or more IT systems daily to provide routine midwifery care with 35% identified they used 5 or more during a typical shift.
This is not only a waste of valuable time, but is a clinical risk due to not having easy access to a woman's full health information.
The lack of requirement for interoperability as an essential feature to digital systems has led to multiple silo systems within health care, often with maternity services having a different electronic system to the rest of the hospital system. This also is apparent not just within one NHS trust, but

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[7] RCM 2018 State of Maternity Services Report https://www.rcm.org.uk/media/2373/state-of-maternity-services-report-2018-england.pdf

across a Local Maternity System (LMS) of maternity hospitals within a geographical region where women move between different trusts frequently causing fragmented care. The lack of information sharing within the LMS creates significant clinical risks, especially when women with complex medical conditions require care from multiple hospitals to manage their pregnancy safely.

Systems must be able to speak to each other, otherwise the potential benefits of digitalisation are lost. The RCM therefore recommends that the clinical workflow and women's journey through the maternity system is considered and interoperability is utilised as standard with all IT systems to reduce duplication and data silos.

Specialist skills are in short supply and national bodies have not finalised plans to improve the workforce's digital skills

There is no clear pathway for clinicians to become digital/informatics specialists within maternity services. There are also area of the workforce who will require extra support to improve their digital skills and consideration must be given to appropriate training and support systems to achieve this at a local level.
Digital midwives reported that 10% felt they had received sufficient training to do their specialist role and 65% had not received any training at all. However not all trusts have digital specialist midwives in post and therefore further lack that specialist knowledge.

The wider maternity workforce have unknown digital skill levels as this has never been widely assessed. Comparatively a recent survey by the RCM in Wales, found that midwives were very keen to improve their digital skills, with 62% wanting to learn more about how digital will affect the delivery of maternity care and 19-40% wanted to improve specific skills in commonly used programmes such as word and email.

For many midwives who spent the early part of their career without the need for any digital skills in their working lives, the need for training may be greater. Provision needs to be made to understand the digital skills of all staff and support learning of new technologies Without adequate training, there may be significant clinical safety risks due to the mismatched skill mix within the workforce.

We recommend that all maternity systems undertake a digital skills audit to identify midwives learning needs and specialist skills training is made widely available to drive up skills, efficiency, and the quality of care they can deliver.

Recommendations we support from the NOA Report:
- Ensure that the expected technology plan for health and care includes an implementation plan with specific objectives and measurable actions that are required
- Collect more data to enable a better understanding of the full cost of delivering digital transformation and prioritise the work programme
    - Alongside the implementation plan, develop specific resources and plans for high-risk issues
    - Strengthen the incentives and levers to encourage local organisations to invest sufficient resources in digital transformation
    - Prepare a strategic workforce plan to support digital transformation.
- Simplify and strengthen national governance arrangements
- Use digital maturity assessments of local organisations to gather additional information

- # Submission complete
  - Your submission reference is **IQI174554**
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