RCN Scotland's response to the Scottish Government's consultation on Updating the Digital Strategy for Scotland

https://consult.gov.scot/digital-directorate/digital-strategy-for-scotland/

This discussion document has been co-produced with COSLA. We wish to build on this collaborative and partnership approach to digital with other organisations and sectors across Scotland to maximise the impact of the strategy. Thinking about this:

1.
Do you think there are opportunities to realise this collaborative approach?
Yes
Please explain why:
There are a number of items in the narrative and a number of the 'potential actions' that will be more successfully realised in practice if nurses, health care support workers and other health care professionals are involved collaboratively from the start of any new or renewed processes. Nursing needs to be a key stakeholder in the design and implementation of systems within digitally enabled health and social care. For further detail see our response to question two.

2.
Of the opportunities which you have identified, which do you think are the priority ones? We are particularly interested in your responses to the narrative and actions set out in Sections 4 'No one left behind' to Sections 9 'An Ethical Digital Nation':

Section 4: No One Left Behind
Clearly, the inclusivity described in this section and the references to wellbeing implicitly encompass the provision of health and care services in order to ensure access to them. In particular; 'digital inclusion that tackles inequality and promotes wellbeing' must, in the field of health and care, mean that the provision of 'equipment and data packages and digital skills training to those in greatest need' is such as to enable and empower those people to engage with professionals who themselves have been appropriately skilled and equipped to provide equitable care and secure patient wellbeing. 'An education system that builds digital skills' must be one of lifelong learning. For health and care staff, such as nurses and health care support workers, that lifelong learning must be accessible via their employers and supported by them. It is especially important that the nursing workforce receives sufficient time out of the working day to undertake this learning if its benefits are to be realised.

Section 5 Services Working for All
We agree that 'people and businesses want services that are accessible and simple to use' but must point out that this applies also to staff in the organisations that provide these services. While it is important that services should be 'inclusive and designed around the needs of their users, rather than the organisational structures or traditions of the organisations that provide them', when it comes to digital systems, 'users' should include all

those who must use them to both access and to deliver the service. Innovation should address the day-to-day challenges faced by the public and by staff providing services. It is true that existing 'organisational structures or traditions' should not be the basis for service (re)design but it is similarly not sensible to develop a service with a simple, patient friendly front end that introduces multiple frustrating complexities for staff. That is why we suggest that nurses, health care support workers and other health care professionals are involved collaboratively from the start of any new or renewed processes to create these services – alongside patients and people who use services. This is the true meaning of co-production and it will be crucial to executing the actions detailed here entitled 'Transform key public services' (which mentions health and social care) and 'Accessibility'. This will also have the benefit of ensuring no mismatch in cultures between clinical staff and those responsible for commissioning systems.   The 'Near Me' online video consulting programme is referenced as a case study in the consultation paper and the recent evaluation report on it ([here](#)) made it very clear that face-to-face contact must remain an option for reasons of inclusivity and patient wellbeing.

Section 6 Transforming Government
We agree that digital technologies can drive 'efficiency' in terms of this section, which includes the NHS. An extensive RCN consultation of nursing staff addressed opportunities to improve patient care and addressed challenges faced in adapting to digital technologies - and our members offered a clear compelling vision of a digitally enabled health and social care system that improves patient outcomes, enhances the working lives of nursing staff, and makes services more efficient. However, in the context of the Health and Care (Staffing) Act 2019, of persistent nursing vacancies across all fields of practice in Scotland, and of our remarks above, in health and social care efficiency must be about the safety, quality and delivery of care with the involvement of patients, staff and others such as families and carers. It cannot be assumed that undertaking some processes or services digitally will or should lead to crude efficiencies intended to curtail the time spent on care or the number of professionals able to provide it. True efficiency in a digitally enabled health and care service would mean nursing staff were able to devote more time to the people and populations who need their services and result in better outcomes for patients and a better experience for staff.

We broadly support the provision of a digital academy and the pooling of digital and data expertise, provided both are able to tailor their support to uniquely different public services.

We have no comment on sections 7 (A Digital and Data Economy) or 8 (A Vibrant Tech) Sector

Section 9 An Ethical Digital Nation

Just as it is important for any digital services to function in an ethical way for the benefit of the public, especially with respect to safety, security and privacy, it should also function this way for staff. For example, as interactions between public and professionals conducted digitally become more easily recordable and capable of being widely circulated online both patient and professional should enjoy appropriate protections.

3.
Is the vision that we have set out in the supporting narrative in each of these sections the right one?
If you have ticked 'no' or you think we could improve the vision please explain why:

Yes
We would refer to our answers to question two.

4.
Do you think that the potential actions set out in each section will deliver the vision set out in the supporting narrative?
If you have ticked 'no' or you think we could improve any of the actions please explain why:

No.
We say 'no' to this question only in that we do not think that the suggested actions will deliver the vision without the kind of collaborative involvement of and support to health and care staff that we describe in our answers to question two. We understand from our involvement in the Mobilisation Recovery Group that the Digital Health and Care Strategy for Scotland (2018) will receive a 'refresh' in due course. The consultation paper notes, on page six, that there will be 'sector specific action plans in areas such as planning and health and social care'. We trust that any digital strategy and/or action plan for health and social care will flow as much from the refreshed Digital Health and Care Strategy as it will from the renewed, overarching Digital Strategy. We will make more detailed comment on that sector-specific strategy once it emerges. We have set out our thinking on digital health and care across a number of documents in recent years to which we would direct those conducting the consultation. We submitted a response to the consultation on the 2017 version of the digital strategy, which was focused on primary care and was written in conjunction with the Primary Care Clinical Professions Group (PCCPG). It is available here. We also provided views to the Scottish Parliament's Health and Sport Committee Inquiry into Technology and Innovation in the NHS in 2017 here as well as to the same Committee's 2020 enquiry into primary care here. Three further key documents are:
- 'Principles for a technology-enabled health and social care service' (2017), also made in made in conjunction with the PCCP here

- 'Enhanced care in the palm of their hand: Developing mobile technologies for Scotland's district nursing teams' (2017) here
- 'Going the Extra Mile' (2015) here

In alignment with the needs of the public, other public services and their workforces, the nursing workforce requires a Digital Strategy to deliver:
1. Appropriate technology, IT infrastructure and kit so that nursing staff have the tools to do their jobs using digital technology to deliver services in health and care settings and remotely away from base as appropriate to their role. This will benefit patient care and enhance the working lives of staff.
2. Digital skills, education and training to facilitate the delivery of digitally enabled health and social care services.
3. Development and implementation of digital systems and services in health and social care involving the public and health and care staff, including nursing staff. Innovation should also address the day to day challenges faced by staff. Interoperability between systems, shared common languages and access to information to support decision making are key to allow for the appropriate safe, secure sharing of information to improve patient care whilst designing for accessibility and simplicity of use by both patients/service users and staff alike.

So far, this has not been delivered consistently across Scotland or across constituent areas of the health and social care service landscape.

5
Are any of the potential actions more important than others?
No
Please explain why:
RCN Scotland's priority is for the Digital Strategy to work holistically and as much in support of our members as it does for others in Scotland.

6.
How realistic do you think it will be to deliver these potential actions?
Please explain why:
For those actions on which we have commented, we consider that it is realistic to expect them to be delivered. With the right support and allocation of sufficient resources - including being afforded the time to learn – the nursing workforce is more than capable of rising to the challenge. The digital future is already transforming the way nursing care is delivered and it is vitally important that all nursing staff are equipped to lead this change.

7.
Is there anything else you wish to comment on that has not been covered elsewhere?
No