



HSCN & Wifi Progress Update

10th May 2017

Revolutionising the data network for health & social care





- 13 years old
- Health focus
- Private network
- BT does most
- Ended 31/3/17



1.5m users 14,000 connections 44,000 sites JANET, PSN gateway

- Ready for future
- Integrated care
- Private and internet mix
- Competitive market
- Started 1/4/17

c £150m pa

c £75m pa post migration

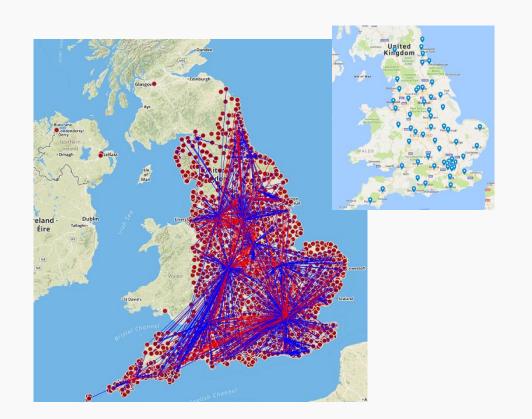
Delivery – Why do HSCN?

- Reduced total cost of ownership and better VFM
- Integration of health and social care
- Regional collaboration and local determination pushing money and buying responsibility locally
- Enabling reuse existing infrastructure / services where appropriate
- Establishing a competitive marketplace
- Support the move to presenting public sector applications on the internet
- Mitigate escalating security risks to patient data

Progress highlights

- The N3 service ceased on 31 March and the Transition Network is operational
- The Supplier Compliance process is operational with 7 suppliers awarded HSCN compliance and a further 10 in the assessment process
- The Peering Exchange has been built and will be operationally live from 22 May
- The Security Capabilities have been contracted for
- In-house build of the Service Co-ordinator function is supporting HSCN
 Transition service and is on-track to support full HSCN from September 2017
- Testing of the end to end solution is planned from July to September 2017, with live use by early adopter consumers from September 2017
- Access connectivity procurement to support migration starting now

Migration Scope





5144 Ethernet Services



8233 Broadband Services



3929 VPN Services



11,838 VPN Token Services



1577 Voice Services



539 Video Services

High level Timeframe

Timeframe	Milestone/Deliverable
July 2017	Pilot testing
September 2017	Early adopter live use (v limited)
November 2017	Formal migration start
January 2018	Ramp up to peak migration start
October 2020	Migration Complete

WiFi Introduction

Dec 15

- Dame Martha Lane Fox Recommendation "Free wifi is a public amenity and should be available in health and social care settings.
- Jeremy Hunt announces High level policy/intent "Everyone using the NHS expects it to be a world leader in digital healthcare and free wifi is an essential part of making that a reality.
- NHS Wi-Fi Programme established and delivery milestones announced -NHS Wi-Fi included in portfolio of NIB delivery projects endorsed by the Secretary of State which are renamed 'Paperless 2020'.
 - NHS WiFi Delivery First stage of delivery commences with Primary Care
 Early Adopters

Apr 16

Jan 17



NHS Wi-Fi – Principles

- 2 Projects Primary Care (GPs) and Secondary Care (Acute, Community and Mental Health)
- Scope of delivery capability covers patients and staff
- National standard (IG, IS, Accessibility, Usage)
- National funding and support (standards, toolkit)
- Local delivery Project Management, Procurement, Implementation, Contract Mgt.
- Procurement Frameworks, Encouraging Collaboration and Aggregation
- Roaming Encouraging move to national, pan-government roaming solution

Benefits for Patients and Staff

- Supporting patients to digitally interact with NHS services and applications and stay in touch with friends and family
 - Check-in on arrival, complete pre-appointment health questionnaires, update contact information and provide feedback
 - Receive local tailored information (local clinics / flu jabs information)
 - Stay in touch through access the internet / social media
- Supporting staff to access the systems/services they need at the to support their role, enabling new models of care (e.g. online consultations), and allow enhanced mobility.

Primary Care – Progress

Primary Care

- First stage commenced in Jan 17 with 20 CCGs participating as WiFi Early adopters
- EA CCGs have each received funding, procured, and installed kit, with the majority now live
- This represents approximately 1,000 practices and circa 5 million patients
- Toolkit and Standards made available to EA CCGs (systems must meet national standard)
- Scope covers all GP Practices in England. Local procurements from established frameworks.
- Funding is revenue only flowed to CCGs via NHS England GPIT funding and covers implementation charges + 2 years of live service (managed service contract)
- Remaining CCGs (approx. 190) expected to implement by 31 Dec 17
- Aggregated Procurements (e.g. via Crown Commercial Services) encouraged

Secondary Care –Progress

Secondary Care

- Investment Justification drafted to cover first cohort of Trusts (Trusts identified as having no or little patient wifi who are able to implement in near future)
- Toolkit and Standards used for Primary Care adapted for Secondary Care (systems must meet national standard)
- Scope covers all Acute, Community and Mental Health Trusts (227). Local procurements from established f/works. Aggregated Procurements (e.g. via CCS) encouraged
- Funding likely to be capital only (provided by DH) and will be contribution towards local costs
- Contract type not specified but service must meet nat. standard & be in place for min 24mths
- Secondary Care delivery expected to commence spring/summer 2017
- Current expectation all secondary care providers will implement by Dec 18.

High level Timeframe

Timeframe	Milestone/Deliverable
Jan-Mar 2017	First stage of delivery - Primary Care (GP) (early adopters)
May/June 2017	Next stage of Primary Care delivery (GP) (wider rollout)
Summer 2017	First stage of delivery –Secondary Care (early adopters)
Winter 2017	Next stage of Secondary Care delivery (wider rollout)
December 2017	Target end date capability delivery in primary care (GP)
December 2018	Target end date capability delivery in secondary care