UK Government Publishes New Policy Paper Outlining Vision for Digitizing Health Care and becoming a Global Leader in Healthtech

Article By:

Daniel Pavin

On 17 October, the UK Government's Department of Health and Social Care (**DHSC**) published a policy paper entitled "[The future of healthcare: our vision for digital, data and technology in health and care](#)" (the **Policy Paper**). The Policy Paper outlines the DHSC's vision to use technology across the health and care system, from "*getting the basics right*", to the UK's "*chance to lead the world on healthtech*", and "*ultimate objective* [of] *the provision of better care and improved health outcomes for people in England*".

The DHSC acknowledges that there are "*many real challenges*" including the presence of legacy technology and commercial arrangements, complex organizational and delivery structures, risk-averse culture, limited resources to invest, and a critical need to build and maintain public trust.

To achieve its objectives, the DHSC has set out in the Policy Paper four 'guiding principles' to operate by:

1. **User need** – including designing services around different user needs (whether the public, clinicians or other staff) to help more people get the right intended outcome and cost less by reducing resources required for resolving issues.
2. **Privacy and security** – such as ensuring the digital architecture of the healthcare system is underpinned by "*clear*", "*commonly understood*" data and cyber security standards, guidance and frameworks, to be mandated across the NHS, "*secure by default*" and based on the General Data Protection Regulation (**GDPR**).
3. **Interoperability and openness** – to help address current "*poor*" interoperability via, for instance, open data and technology standards in adherence with clinical data standards: the DHSC's intention is that that anyone writing code for the NHS's use will know these standards before they start, and technology can be used to provide more granular detail to help fight diseases and treat illnesses.
4. **Inclusion** – to account for users with different physical, mental health, social, cultural and learning needs, low digital literacy or limited accessibility, and the intention that those able to benefit from digital services also may help free up accessibility to resources for those who often have great health needs, not able to use digital services.

Building on the guiding principles, the Policy Paper sets out a series of accompanying "*architectural principle*s", and four key priorities: infrastructure, digital services, innovation, and skills and culture.

Infrastructure

This Policy Paper priority builds particularly upon the first three principles outlined above. For instance, with respect to patients' data, the Policy Paper concedes that the ability to share records between different care levels (e.g. hospitals, general practitioners, and pharmacies) is inconsistent. The Policy Paper also notes that often contracts in place for current systems do not adequately specify the standards of interoperability, usability and continual improvement required. 2017's disruptive "WannaCry" cyber-attack (now acknowledged by the DHSC citing a National Audit Office report, to have actually been "*relatively unsophisticated*") aptly illustrates the importance of data safe guarding and cyber security standards.

To address these concerns, and in order to "*put in place the right infrastructure*" and "*buy the best technology*", the DHSC outlines some of the steps it is taking to build upon the existing safeguards in legislation and security standards, such as via the "***Initial code of conduct for data-driven health care and technology***" (the **Code**, previously discussed here), and the draft "NHS digital, data and technology standards framework" (the **Framework**) published alongside the Policy Paper. The DHSC also refers to the need for *"quick, efficient procurement processes, small and short contracts, and clear documentation*…[of] *datasets and systems*" and to avoid "*building our own versions of … commodity services*" (e.g. email clients and laptops).

Digital Services

The Policy Paper outlines some of the public-facing digital services already provided (e.g. "NHS.uk" and the "NHS apps library") and in development (e.g. "NHS Login"). The Policy Paper notes that digital services are also needed for staff across the health and care sector to prevent "*wast*[ing] *vital time logging on to systems, or transcribing clinical data by hand or over the phone*". Services built, bought or commissioned "*should start with user needs*" and in instances where user needs are unique and industry may not necessarily obtain the economies of scale they need to invest, the DHSC wants to be empowered to build its own digital services in accordance with the government's Digital Service Standard.

Innovation

The DHSC intends to put in place a framework allowing "*researchers, innovators and technology companies to thrive, quickly access support and guidance, and develop products that meet user needs*", and "*support the uptake and adoption of the best of those services*". To create a healthtech "*ecosystem*", the Policy Paper outlines the DHSC's intention to work alongside experts to put in place standards (addressing evidence, privacy, cyber security and access to data), communicate user needs, support access to finance, encourage NHS/Industry collaboration, and improve the procurement process (e.g. reducing the burdens for small companies trying to sell to the NHS, and building on the government's "G-Cloud framework" on its digital marketplace). The focus will be to "*simplify the institutional landscape for support for healthtech*", remove barriers to market entry and encourage innovation.

The DHSC also intends to introduce a 'healthtech regulatory sandbox' to "*test, iterate and de-risk the most promising innovations*", working alongside the Information Commissioner's Office (**ICO**),

National Data Guardian, National Institute for Health and Care Excellence (**NICE**), and other regulators.

The Policy Paper also highlights the potential of Artificial Intelligence (**AI**) to improve diagnosis and care, and the need to enforce the high standards of good practice for the development of these emerging technologies (such as via continued development of the Code).

Skills and culture

The Policy Paper specifies a need across the health and social care system to both recruit and retain specialist professionals (such as data scientists and analytics personnel) who are skilled and well-resourced to make best use of data, while continuing to develop the skills of clinicians and staff already working in health and care services. The DHSC intends for leaders at every level to ensure their staff are trained to use data and technology in their work, and that all health and care organizations have board-level understanding of how data and technology drive their services and strategies.

There will also be a new 'Healthtech Advisory Board', comprising of technology experts, clinicians and academics. The board will be used as an "*ideas hub*" and report directly to the Secretary of State for Health and Social Care.

The UK Government is currently seeking feedback on the Policy Paper and draft Framework (a questionnaire on the Policy Paper is available here).

Harriet Fletcher contributed to this post.

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