

## What good looks like framework and funding digital programmes

NHSX has released the **What good looks like (WGLL)** framework which outlines digital best practice for trust and Integrated Care Systems (ICSs). The WGLL framework provides a long-term structure of how digital transformation should be accomplished and assessed.

The WGLL framework is accompanied by supporting funding guidance entitled **Who pays for what (WPfW)** and a prospectus for the newly created **Unified tech fund (UTF)** for the remainder of 2021/22. Set out below is a summary of the proposed What good looks like framework and associated funding information, followed by discussion of the implications for trust leaders. For any questions or to offer input regarding any part of this briefing, please contact [adam.wright@nhsproviders.org](mailto:adam.wright@nhsproviders.org) and [margaret.steward@nhsproviders.org](mailto:margaret.steward@nhsproviders.org).

### Key points

- In response to trust leaders' call for a common vision of best practice in digital transformation, NHSX has released the WGLL framework which sets out guidance for NHS leaders to support them to digitise, connect and transform services.
- WGLL offers guidance for both individual organisations and ICSs across the following seven measures of success: well led, ensure smart foundations, safe practice, support people, empower citizens, improve care and healthy populations.
- Combined, NHSX positions the WGLL framework, along with the WPfW and UTF guidance as crucial in addressing some of the sector's biggest challenges within the digital agenda.
- Much of the guidance is helpful, however it is incredibly detailed. Trust leaders may have found it more helpful to have had fewer and more focused priorities given the strategic and operational demands on their time.

### What good looks like

The guidance aims to aid NHS organisations and ICSs in identifying areas of need and implementing tools for digital improvement. The table below summarises seven measures of successful digital transformation for individual organisations and ICSs. NHSX intend to provide support for

implementing these measures which will include an annual assessment framework, funding, digital expertise and an online knowledge base.

TABLE 1

Success measure	WGLL for organisations	WGLL for ICSs
<b>Well led</b>	Digital leadership and collaboration are driven at the board level. Boards ensure an appropriate level of digital expertise is present (for example CIO/CCIOs) and establish meaningful governance. Digital strategy should have wide input from across the organisation.	Digital transformation strategy and collaboration are driven by ICS leaders. Integrated Care Boards ensure an appropriate level of system-wide digital expertise, governance and strategic consideration.
<b>Ensure smart foundations</b>	Strong foundations are built through multidisciplinary teams and reliable, modern, secure and sustainable operating infrastructure.	Strong foundations are built within ICSs through multidisciplinary teams and reliable, modern, secure and sustainable operating infrastructure.
<b>Safe practice</b>	A high standard for safe care is maintained through regular review of digital compliance against national standards (for example DTAC and the Cyber Essentials Framework) with oversight from the appropriate safety personnel (for example SIRO/DPO/CSO).	ICSs support a high standard for safe care across organisations within the ICS through regular review against national standards (for example DTAC and the Cyber Essentials Framework) of system-wide security, sustainability and resilience, with oversight from the appropriate ICS-wide safety personnel (for example SIRO/DPO/CSO).
<b>Support people</b>	The workforce is supported to do their jobs well though use of digital tools and systems that are fit for purpose. Shared learnings and training resources are available to support digital literacy amongst staff.	The workforce is supported to do their jobs well though use of digital tools and systems that are fit for purpose. Shared learnings and training resources are available to support digital literacy amongst staff.
<b>Empower citizens</b>	Citizens are empowered to access and actively participate in their health and wellbeing. This is enabled through inclusive user-centred service design and agile patient feedback loops to inform improvements.	Citizens are empowered to access and actively participate in their health and wellbeing. This is enabled through inclusive user-centred service design and agile patient feedback loops to inform ICS-wide improvements.
<b>Improve care</b>	Data is used to inform cost-effective service improvements, transform care pathways and drive digital innovation.	An ICS-wide approach to data is used to inform cost-effective service improvements, transform care pathways and drive digital innovation.

## Healthy populations

ICS-led, population-based and digitally-driven models of care are adopted.

ICS-wide data intelligence is collated and analysed to inform delivery of population-level health improvements.

## Who pays for what

NHSX recognise there are a number of common barriers trusts and ICSs face when it comes to investment in digital technology. The WPFw guidance seeks to identify these and proposes solutions for the sector. This will include consolidating national funding in 2021/22 under a unified tech fund, before moving away from central funding pots and handing ICSs greater control over these decisions from 2022/23 onwards.

The funding barriers identified by NHSX are:

- **Complex funding arrangements:** general uncertainty, lack of transparency, misalignment of priorities, timeliness of money being released, single-year budgets, burdensome bidding processes, wrong mix of capital and revenue support and lack of ICS allocations.
- **Payment, financial and other policies that impede innovative tech investment:** organisational financial targets on non-recurrent savings, activity-based payments, limited incentives for digital transformation.
- **Lack of innovation and measurements for optimising tech investment:** lack of awareness of how much organisations are spending on technology, lack of understanding of measurable benefits and inability to measure financial payback on certain investments.

In 2021/22, NHSX proposes to fix these problems by:

- **Consolidating national funds for transformational tech projects into a single fund** (see unified tech fund below)
- **Improving the timeliness, usefulness and reliability of digital metrics available for benchmarking:** including improved data collection for the model health system as well as creating a digital backlog calculator to help ICSs calculate their “digital debt”.
- **Providing tools and case studies to help ICSs model and track benefits from tech investments.**
- **Revising national policies to better support digital investments.** This will involve:
  - Ensuring compliance with minimum standards, including tougher management of vendors and publishing examples of good practice.
  - Encouraging the uptake of established technologies, with benchmark tools and embedding targets for digitisation in a wider set of national targets and reporting tools.

- Promoting cutting edge innovation and adoption of emerging digital technologies via mechanisms such as the MedTech Funding Mandate and better alignment of financial incentives.

From 2022 to 2023 onwards, NHSX expect ICSs to fund the delivery of all frontline digital transformation from their own budgets. They have articulated the distinction between ICS and national funding below (table 2). Funding will be allocated to ICSs at the beginning of the financial year and there will be no bidding process. NHSX will “prioritise the need for levelling-up tech capabilities” before moving to a fair shares basis. ICSs will be expected to use the WGLL framework to plan and guide their investment decisions.

TABLE 2

ICS funding will cover	National funding will cover
<ul style="list-style-type: none"> <li>• Applications such as EPRs (procurement, development and management)</li> <li>• Cloud services and data centres</li> <li>• Core kit and supplies including laptops, printers, telecoms and networks</li> <li>• Local cybersecurity measures</li> <li>• IT programme management</li> <li>• Training</li> <li>• IT service management</li> <li>• System transformation, for example shared care records</li> </ul>	<ul style="list-style-type: none"> <li>• National products such as the NHS App</li> <li>• National infrastructure</li> <li>• Pilots linked to the NHS Long term plan commitments in advance of national scaling</li> <li>• Things that need to be done across multiple ICS areas, (such as Office 365)</li> </ul>

## Unified tech fund

In 2021/22 NHSX has brought together several national funds into a single pot worth £680m (both revenue and capital). Applications will be open from 31 August, and eligibility criteria can be found in the full [UTF documentation](#). NHSX intend funding to focus on need at an ICS level and demonstrate alignment to ICS Digital and Data Transformation plans. Applications will need to be reviewed and approved by regional and ICS teams. NHS organisations (including trusts) will be able to bid for 8 areas of funding:

- Frontline digitisation (closing date 15 October 2021)
- Shared care records (closing date 22 March 2022)

- Cyber security infrastructure (closing date 23 December 2021)
- Digital productivity (closing date 30 November 2021)
- Pharmacy, optometry, dentistry, ambulance, community (PODAC) (closing date 7 October 2021)
- Diagnostics (closing date 23 December 2021)
- Digital maternity (not taking applications until 18 October 2021)
- Digital child health (not taking applications until 18 October 2021)

## NHS Providers view

### What good looks like

The WGLL framework provides a helpful “north star” for digital maturity within the NHS and sets clear expectations for how NHSX will assess progress of the digital agenda within the sector. The seven success factors are designed to provide all trust and ICS leaders, not just digital leaders, with the guidance needed to advance digital. The WGLL framework is firmly anchored in the NHSE/I ICS digital and data workstream and aligns with national ICS publications, including the ICS design framework. It is a clear and welcome effort to mainstream new national digital guidance within broader transformational planning and articulates the changes in an accessible format.

We welcome the ambitions set out within WGLL. The NHS response to COVID-19 has accelerated digital transformation across the provider sector and every NHS leader has first-hand experience of leading digital changes within their organisation. WGLL therefore provides an important and timely framework for leaders unsure of how to take their organisation to the next stage of digital maturity. Across such an extensive agenda, providers will welcome the clarity and breakdown of the seven success measures.

That said, WGLL provides a series of priorities, some of which go into specific details (for example removing all fax machines). Not all of this is helpful, and it may have been more useful if NHSX had set out even fewer but more focused priorities for trusts and ICSs. Many leaders will continue to find it difficult to create enough capacity and headspace to pursue so many initiatives amid continued operational pressures.

Providers will object to certain aspects of the guidance, such as requiring a trust CIO or CCIO to attend board. This feels a tokenistic response to the challenge of strong board-level leadership of digital. It should be for trusts themselves to decide whether to appoint a CIO or CCIO to the board; some have chosen to do this, others have not.

Instead, it may have been helpful for WGLL to have defined what good digital representation at the board level means in practice. Arguably, both trust boards and integrated care boards will need transformation thinking that will align digital along with other important elements such as quality improvement. Most importantly, the entire board must take collective responsibility for the digital agenda, with each board member clear on their own individual and collective duties, rather than these falling to one executive.

Although NHSX set out clear expectations for supporting the workforce in success measure 4, the forthcoming NHSX support offer will need to make the guidance relevant for staff, which will involve a greater focus on understanding user needs.

We welcome that NHSX has described what good looks like at both system and organisational level. But it is clear collaboration at place as well as system level will be important in delivering all seven success measures.

## Who pays for what and funding

Funding remains the key challenge to delivering on the sector's digital ambitions and ultimately realising WGLL. The WPfW proposals mark a positive step in acknowledging longer term funding challenges and describing ways in which processes can be streamlined and simplified. However, success depends on the amount of funding available to the sector.

The upcoming comprehensive spending review remains the most important opportunity in supporting the sector to deliver on digital. The priority position of the digital agenda may fall if trusts are continually forced to use limited funding to address urgent short terms needs at the expense of longer-term digital investments.

With the appropriate funding available, WPfW will provide a useful framework for investment. The proposals include a welcome shift away from funding digital as a predominately capital expense and towards a more balance revenue-capital model that recognises digital as a managed utility/service. It is also encouraging that NHSX intend to improve the timelines, usefulness and reliability of digital metrics for benchmarking. This will support NHS leaders to better make the case for digital investment, however some more work may be needed to help the sector articulate realistic benefits realisation.

The 2021/22 UTF is a pragmatic first step to realising the WPFW guidance, particularly around streaming central funding processes (although we note it says little on internal revenue and capital investments). NHSX intend to allocate ICS funding in 2022 and 2023 based on “the needs for levelling-up tech capabilities” before moving to a fair shares basis. It is not clear how these needs will be measured, and this clearly presents a number of questions, such as: how to strike the balance between support for less digitally mature organisations and those who are more advanced, as well as ensuring appropriate support for trusts whose services span multiple ICSs.

## Supporting implementation

In What good looks like, NHSX has articulated their vision of the NHS digital agenda and set out their expectations for how NHS leaders can deliver this. Who pays for what has set the groundwork for a funding framework that, with appropriate investment, should enable the sector to take forward these recommendations. It is helpful that NHSX has published both these resources together, designed for both trusts and ICS leaderships to use.

Along with funding, key to the success of WGLL will be that it remains a supportive framework that gives trusts and ICSs the freedom and flexibility to implement these changes locally. Questions remain as to how compliance with the success measures will be ensured, but it is important WGLL does not shift to a more directive and targets based approach.

## NHS Providers' engagement with NHSX

NHS Providers looks forward to working with NHSX as they develop the WGLL support offer, including the proposed assessment framework. This will involve the continued delivery of the [NHS Providers Digital Boards programme](#), which is designed to support trust boards in leading the digital transformation agenda.

We will continue to engage with our members and ensure their views are fed back to NHSX. We encourage all trust leaders, both executives and non executives, to share their views with us.

We welcome thoughts on the following questions:

- *How feasible do you expect the implementation of the WGLL framework to be? What are the expected barriers and anticipated benefits to successful implementation?*
- *What practical challenges does the guidance present, both for organisations and ICSs?*

- *Are there sections of the guidance that require further discussion or clarification? What are the important factors for successful digital transformation that have not yet been addressed in full, if any?*
- *What specific type and level of practical support offerings would be most useful for organisation and ICS leaders striving to adopt the WGLL framework?*
- *What questions regarding the best practice and funding structures for the digital transformation of trusts and ICSs remain unanswered following release of the guidance?*
- *Do you agree that these changes to the financial architecture and payment system will remove the disincentives for digital investment? Are there other disincentives that need to be addressed?*
- *Do you agree with the categorisation of digital innovation priorities and the different approaches proposed for supporting uptake of digital innovations?*

## NHS Providers' press release

### New digital framework set to help trusts prioritise their efforts

Responding to NHSX's newly published [What good looks like](#) (WGLL) framework, the deputy chief executive of NHS Providers, Saffron Cordery, said:

"During the course of the pandemic, trusts have made huge gains in terms of digital transformation. Every organisation has experienced digital changes in the way services have been delivered.

"In order to build on these successes, trust leaders have asked for a common vision of what good digital practice looks like, and where they should next focus their attention as leaders. NHSX's *What good looks like* (WGLL) framework sets out an ambitious north star to help them navigate this new territory.

"We know from our own [Digital Boards](#) programme that peer learning and sharing best practice will help accelerate digital transformation across the sector. We therefore look forward to collaborating with NHSX in developing a support package for trust leaders planning to implement the WGLL success measures.

"This guidance is published at a time when trusts are facing a series of significant challenges: recovering elective care backlogs, supporting the workforce, responding to continuing COVID-19 pressures and implementing the long term plan alongside broader integration changes.



“Therefore in order to meet NHSX’s seven success measures, trusts should be given freedoms and flexibilities that reflect their local context and particular governance and accountability arrangements. We look forward to working with NHSX to consider how different elements of WGLL can be implemented in different ways, in order to help trusts prioritise their efforts.”

## **New funding guidance from NHSX welcome but clarity over long-term funding needed**

Responding to the publication of the [Who pays for what](#) (WPfW) guidance by NHSX, the deputy chief executive of NHS Providers, Saffron Cordery said:

“We broadly welcome the publication of the Who pays for what (WPfW) proposals by NHSX today. Trusts have long called for digital funding to be streamlined and simplified and so today’s guidance is positive step in the right direction. It is encouraging to see the proposals published alongside the NHSX [What good looks like](#) (WGLL) framework, with both documents describing NHSX’s digital expectations for the sector.

“The WPfW guidance helpfully provides more information on what initiatives should be funded by integrated care systems going forward and what trusts can expect to be funded nationally, although this needs to be aligned with proposals in the Health and Care Bill. There is also a welcome consolidation of funds for 2021/22 set out in the Unified Tech Fund that should make it easier for those most in need to receive funding.

“As ever, we also need to be mindful of the amount of funding available for digital innovations and where this fits in a growing list of priorities for health spending. The success of this guidance, and the ability of trusts to progress on the digital agenda, will ultimately depend on the comprehensive spending review settlement later this year.

“After such huge progress made over the last year, trust leaders do not want digital delivery to stall. From board level to the frontline, there is an ambition across the sector to accelerate digital ways of working like never before.

“While the WGLL framework articulates the vision for the NHS’ digital agenda and WPfW guidance has set the groundwork for a funding framework, we need the investment to make this a reality for patients, service users and staff.”