NHS
Greater Glasgow and Clyde

Scottish PACS Programme

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NHSGG&C

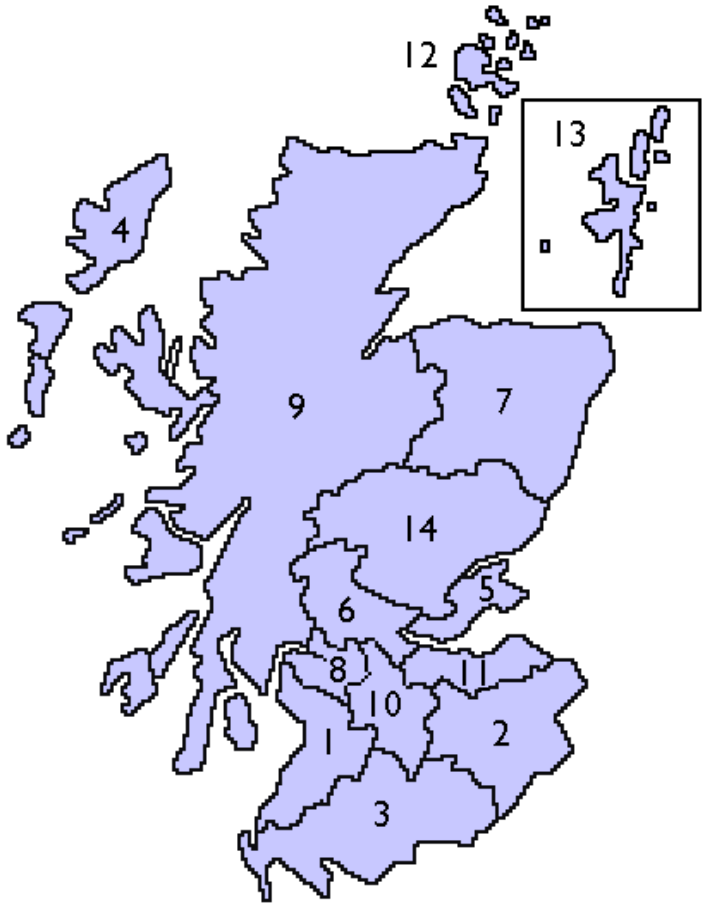
Patients at Centre

- EPR
- Single RIS
- Single PACs
- Local archives
- National archive
- Resilience of the system

Health Board areas

- **NHS Scotland Health Boards**

- 1 NHS Ayrshire and Arran
- 2 NHS Borders
- 3 NHS Dumfries and Galloway
- 4 NHS Western Isles
- 5 NHS Fife
- 6 NHS Forth Valley
- 7 NHS Grampian
- 8 NHS Greater Glasgow and Clyde
- 9 NHS Highland
- 10 NHS Lanarkshire
- 11 NHS Lothian
- 12 NHS Orkney
- 13 NHS Shetland
- 14 NHS Tayside



Project Management of PACs in Scotland

- Business Justification
- Manage by exception
- Focus on products
- Tailor to suit the environment
- Learn from experience
- Manage by steps

Change Control

The Sudden Realisation: “The Project's Going Live“

- Develop robust Go-Live Plan
- Focus on Transformational change – lasting change!
  - Communicate – Why?
  - Model behaviours
  - Reinforce change
  - Put in place robust ‘Change Control’ process
    - Finance
    - Time
    - Quality

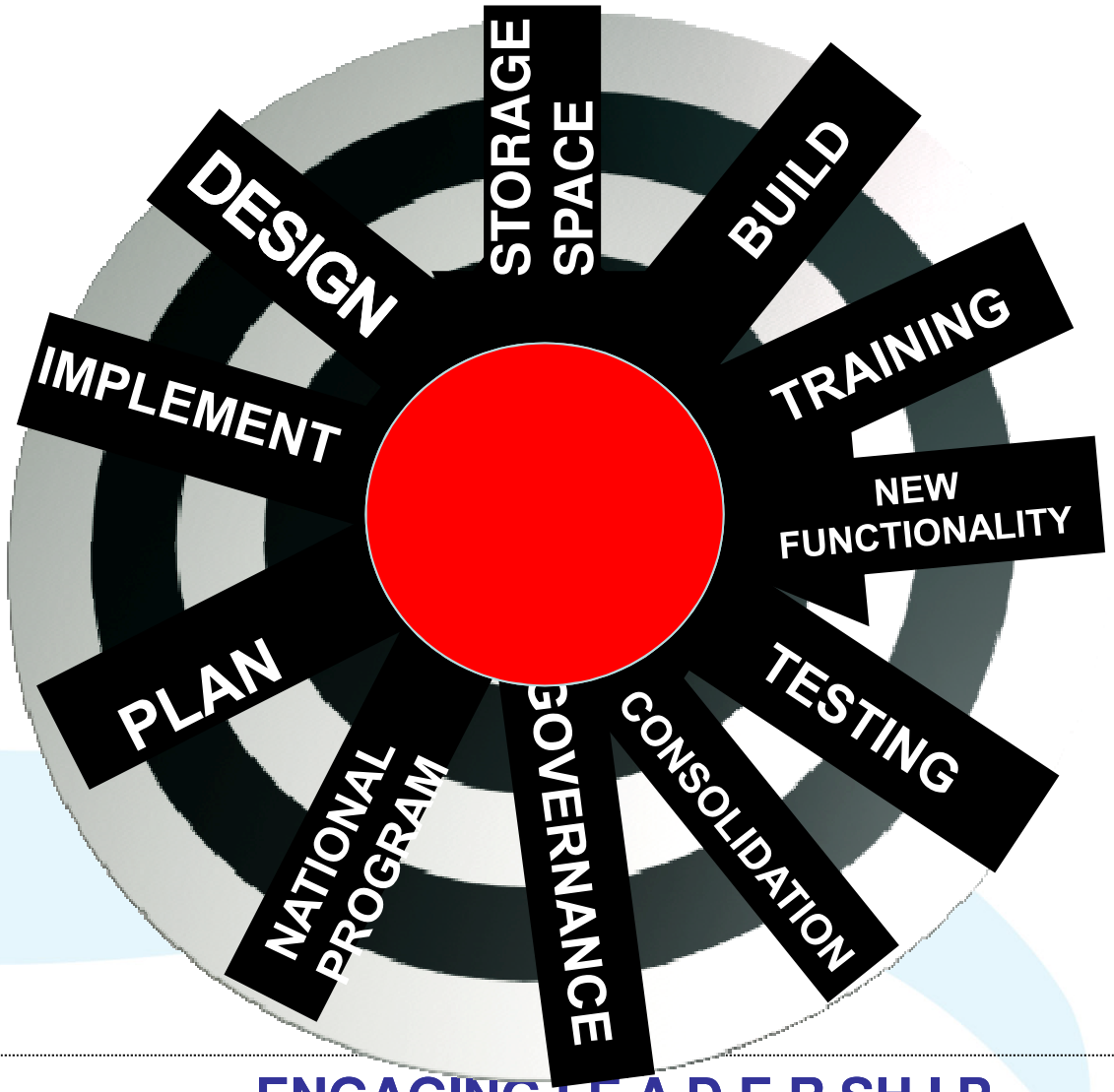
Scottish V11 Rollout

- National Program
- Largest country-wide implementation in the world
- Some Sites dependent on Carestream RIS V10
- Operationally and financially complex

Challenges with National Rollout

- Differing needs across boards
- Technology different at each board
- Financial Management
- Timescale management – delays have huge impact on other boards

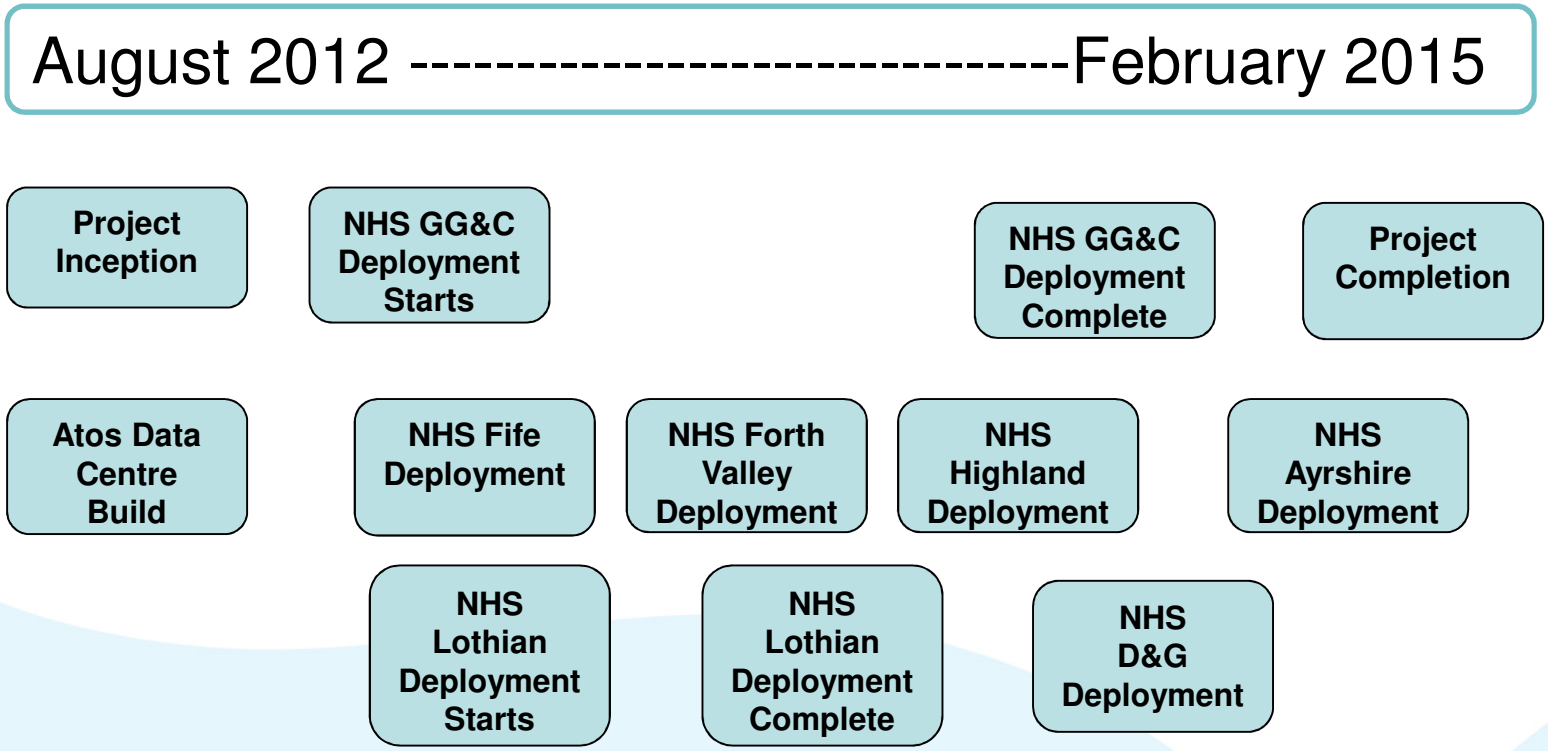
PACS v11



GOVERNANCE

ENGAGING LEADERSHIP

Key Milestones in PACS V11 Program



NHSGGC National Refresh

- Largest and most complex
- Instance consolidation
  - Significant Data Migration
  - Extensive testing
- Storage Costs will be significantly reduced with V11 compared to remaining with v10

NHSGGC V11 Rollout - Risks and Issues

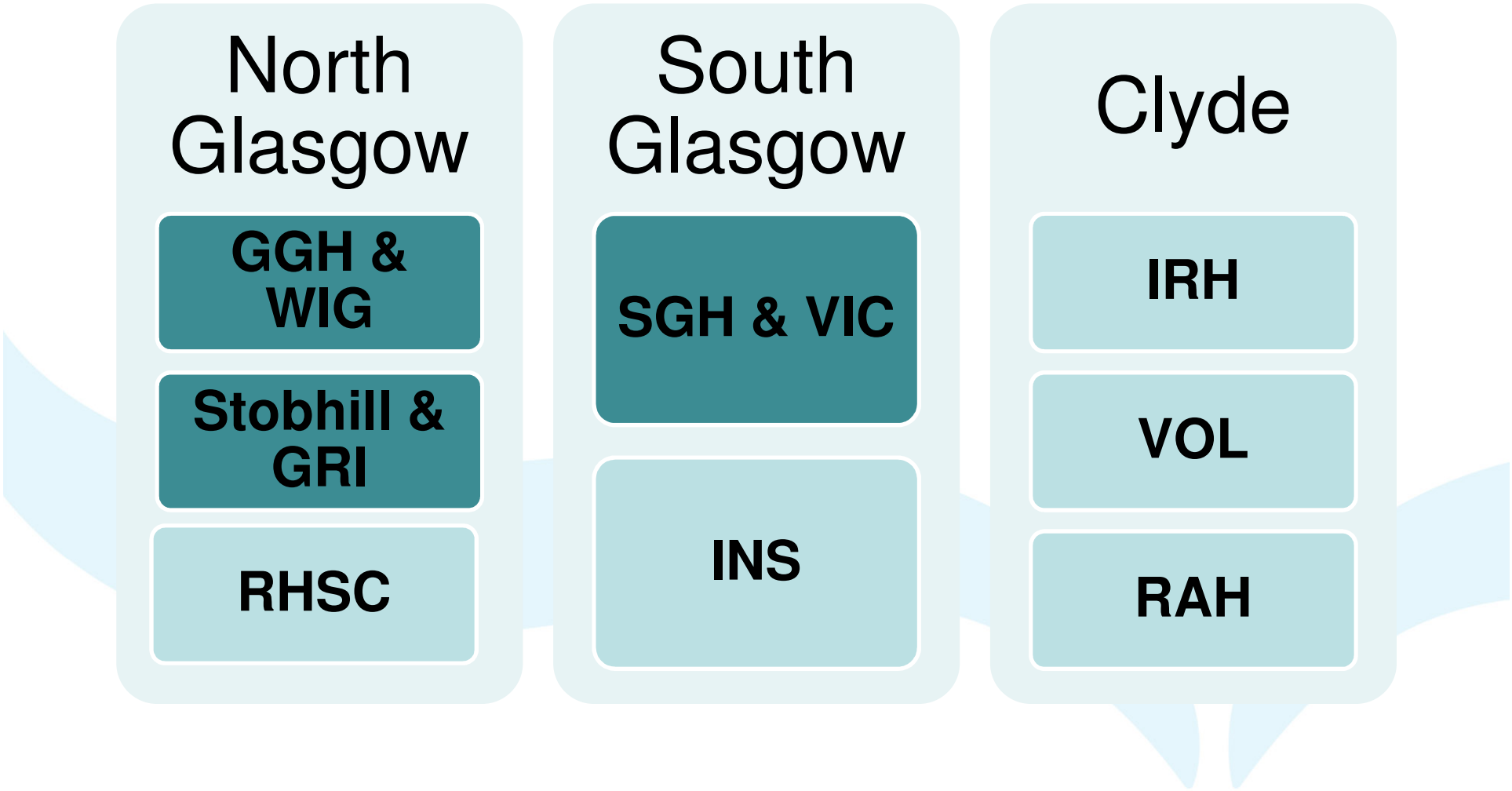
- Competing resources with New SGH and wider ASR program
- Complicated instance consolidation
- Overspend on national storage costs
- Deadlines missed by other boards
- Sheer scale of GG&C

NHSGG&C V11 Rollout
Pre V11 rollout

NHS Greater Glasgow and Clyde

North Glasgow	South Glasgow	Clyde
GGH	SGH	IRH
WIG	VIC	VOL
Stobhill	INS	RAH
GRI		
RHSC		

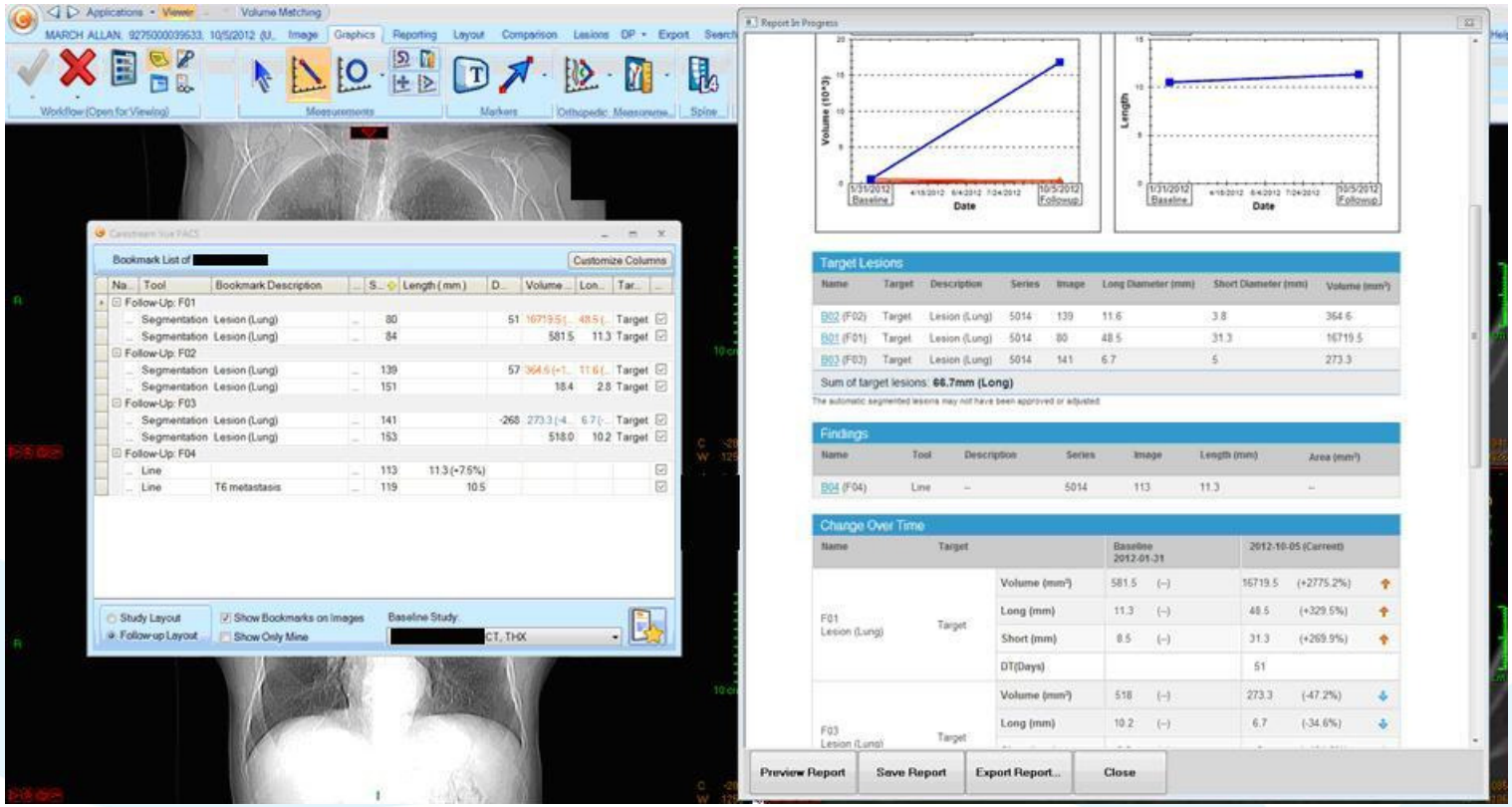
NHSGG&C V11 Rollout
Post V11 rollout



Key V11 Benefits

- Global Work lists (GWL)
- Better Image Compression
- Much Improved User Interface

Key V11 Benefits
Lesion Management



Funding

- Rollout funded by Scottish Government
- Hardware funded by boards
- Support costs split between boards and NSS
- Substantial Double Running costs
- Large increase in storage costs

Storage Cost Drivers

Investments in new scanners, 64,128, 256 CT

faster, thinner slices

Higher matrix images (1024 x 1024) This will give a 4x increase in size

“Real time” CT – e.g. cardiac CT angiography. 3000-5000 slices common

Storage of 3D reformats.

Changes in clinical practice inc more detailed imaging techniques

18 weeks increasing throughput

Technology driven clinical practice

Service changes e.g. mainstreaming of non-invasive cardiology techniques

Data Retention policy

Breast Screening

- National Digitisation program
  - Mobile and static
  - Completion by March 2015

- Underpinning technology
  - Carestream PACS
  - ATOS RIS