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Jane Dwelly, Vice President of CHIME International, moderated this discussion and was joined by Nordic's Terri LeFort, President International; Bill Meredith, Vice President Strategy and Transformation; and Dan Prescott, Vice President EHR Transformation.

Participating CHIME International members:

**Diarmaid Crean**
Former Chief Digital and Technology Officer (NDTO)
Sussex Community NHS Foundation Trust

**Jacqui Cooper**
Chief Nursing Information Officer (CNIO)
Health Innovation Manchester

**Sarah Hanbridge**
Chief Clinical Information Officer (CCIO)
Leeds Teaching Hospitals NHS Trust

**Debbie Loke**
Executive Chief Digital Information Officer (Executive CDIO)
University Hospitals of Derby and Burton NHS Foundation Trust

**Harpreet Sood**
GP Partner
London

## INTRODUCTION

The National Health Service (NHS) is undergoing a self-described "once-in-a-generation opportunity" to modernise. Technology is at the heart of its long-term strategic plan to support all NHS England healthcare organisations — acute, ambulance, and mental health trusts, as well as community providers — to transition from paper to digital systems.

This Frontline Digitisation (FD) effort, which launched in 2021, will rely heavily on data convergence — the seamless integration of patient information across primary, secondary, and community care. Yet, despite significant investments, progress remains uneven and challenges mount. Short-term funding cycles, fragmented governance, and the complexity of electronic patient record (EPR) implementations continue to hinder the NHS's digital ambitions.

There's a sense of optimism about the future of NHS digitisation as this transformative initiative will advance data convergence and build a sustainable digital foundation for the NHS that empowers clinicians, improves patient care, and enables a more efficient and resilient healthcare system.

To address the challenges and embrace the opportunities, CHIME International, in partnership with Nordic, convened a thought leadership roundtable with experts from across the UK healthcare landscape. This report explores their insights on the critical role of external partners, the governance structures needed to support long-term innovation, and the strategies that can turn digitisation into a true enabler of patient-centred care.

## BRIDGING THE GAP BETWEEN VISION AND IMPLEMENTATION

Despite substantial investment in digital health technologies, the NHS continues to grapple with a disconnect between ambitious goals and on-the-ground implementation. A recurring theme in the roundtable discussion was the challenge of short-termism.

"One of the biggest problems we've got is that technology follows the money," Loke noted. She reasoned that funding projects only to the point of minimum viability stifles innovation and leads to repeating the same cycles in the future.

The consequences of this short-term approach are significant. Shared care records often lack full integration, covering only select clinical elements while administrative and operational data remain siloed. LeFort emphasized that realizing the full benefits of digital transformation requires a long-term commitment and sustained investment, noting that organizations must "stay the course" to achieve meaningful outcomes. Without such a commitment to sustained investment and interoperability, panellists warned that the NHS risks perpetuating a cycle of partial implementations and missed opportunities.

Crean pointed to the rapid rollout of EPRs as a prime example, stating, "There's FD money coming out, and many trusts trying to roll out EPRs … in as little as six weeks." He warned that this rush to implement without proper planning risks poor data quality and makes system-level integration a "nightmare".

This disconnect between vision and implementation is further compounded by issues such as a lack of continuity in personnel overseeing digitisation projects and a lack of ongoing training and support for end-users. These challenges underscore the need for a more strategic and sustainable approach to digital investment, one that prioritises long-term planning, robust governance structures, and ongoing support for staff.

## THE ROLE OF DATA CONVERGENCE IN NHS MODERNISATION

Data convergence, the ability to unify disparate systems and provide a seamless flow of patient information, is a cornerstone of NHS digital transformation. However, the roundtable participants emphasised that technology is only one piece of the puzzle.

Cooper cautioned against the misconception that convergence is simply about implementing a unified digital system. "The really important bit is the standardisation of care pathways," she stressed, highlighting the challenge of aligning workflows across different organisations and care settings. "But there's nothing national about the NHS," she stated. "We all do things in a different way, even from our neighbouring organisations, or from our colleagues in a different ward or speciality."

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London

Sood added another layer to this challenge by highlighting the need to consider care beyond the hospital setting, stating, "How do we think about care outside of hospitals into the community and that primary and secondary care interface, which historically hasn't been very good?"

The NHS number, a unique patient identifier, holds the potential to facilitate convergence, yet its use remains inconsistent. "Interoperability plus that unique identifier could speed up convergence," Cooper noted. Without national mandates for interoperability, local health systems often face difficulties in aligning data governance strategies, further complicating integration efforts.

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Despite these hurdles, there are promising developments. Crean highlighted a successful multi-trust EPR purchase that improved system-wide implementation by standardising workflows across organisations: "Because everyone was on the same system, it led to a better overall implementation which would then have a virtuous circle effect." This approach, he argued, could serve as a model for future convergence initiatives.

## THE PATIENT PERSPECTIVE

In the drive towards digital transformation, it's crucial to keep the patient at the centre. The roundtable discussion highlighted several key considerations from the patient perspective.

One major concern is the lack of a single, unified patient data platform. "There is no single front door for them," Cooper pointed out, emphasising the challenge for patients, especially those who are elderly, confused, or not digitally literate, to navigate the fragmented system. This fragmentation also leads to misconceptions among patients about the level of convergence within the NHS. "Patients and citizens believe that we're converged, and they're very surprised when we start talking about bringing systems together, merging platforms, and so on," she added.

Another challenge is ensuring patients have access to the right information and support to effectively engage with digital health tools. "We're not thinking of the person as the central focus at all with that approach," Cooper noted, highlighting the need for more patient-centric design and implementation of digital solutions.

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> Health Innovation Manchester

These insights underscore the need for a patient-centric approach to digitisation, one that prioritises ease of access, clear communication, and a seamless experience for all patients, regardless of their digital literacy.

## LEVERAGING EXTERNAL PARTNERS FOR DIGITAL SUCCESS

The discussion also underscored the valuable role that external consultants and technology partners can play in accelerating NHS' digital transformation. These partners bring specialised expertise in system integration, service design, and supplier management — areas where internal NHS resources may be stretched thin.

Crean noted there's a gap in knowledge when it comes to service design and structuring digital implementations correctly, and external partners can help NHS trusts avoid common pitfalls and focus on delivering the best outcomes for clinicians and patients.

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"It's about bringing that independent knowledge of service design — really thinking about your clinicians and end-users, trying to make it as efficient and easy for them to do their jobs as you possibly can, and making that as clinically safe as it should be," he emphasised. "That's the perfect combination."

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To achieve this, Meredith highlighted several key elements that contribute to physician satisfaction with EHR systems, including a master system with adequate training, a sense of ownership over the system via governance, and personalization capabilities. "If you deliver those three things, you end up with happier physicians," he promised.

However, successful partnerships require clear governance and strategic alignment. Sood suggested external providers could serve as "trusted single partners" for integrated care systems, helping to bundle solutions rather than adding to the complexity of disparate digital point-of-care tools.

"It's a case of finding those experts and then disseminating their expertise across the UK," reasoned Hanbridge.

Effective collaboration with external partners also requires careful consideration of supplier relationships. Crean highlighted the potential for "NHS collectives" to drive improved EPR convergence and digitisation support, with a larger group of trusts benefiting from the same supplier leaning in to provide greater interoperability. He also warned against the tendency of some suppliers to "slicing and dicing," selling the same thing repeatedly, emphasising the need for external consultants and partners to assist and guide health trusts through the supplier journey with their collective experience.

Prescott further pointed out that suppliers often have stronger legal support than trusts, a factor that can create an uneven playing field in negotiations.

Cooper added a warning on the risks of poor governance. "Ahead of go-live, we spend time building, designing, and developing the EPR with engagement and agreement from end-users," she explained. But upon implementation, "we are too reactive and responsive to change requests with no evidence to support why."

## THE ROAD AHEAD: CHALLENGES AND OPPORTUNITIES IN 2025

2025 is a pivotal year for NHS digitisation. Ambitious targets, such as the mandate for 85% of acute trusts to adopt the Federated Data Platform by March 2026, underscore the urgency of aligning technology investments with long-term strategic goals.

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Yet, the path forward will not be without obstacles. Loke cautioned that the current funding model still prioritises rapid deployments over sustainable innovation, leading to rushed EPR implementations that could create more problems than they solve. "We're going to be stuck in this EPR piece for another couple of years as people try to take the FD money that's available," she predicted. "But there are unrealistic plans to deliver based on the money that's available. That's going to be a challenge."

Workforce engagement is another key challenge that surfaced in the roundtable discussion. "Junior doctors rotate across different organisations, and having a converged system would be hugely beneficial," Loke said, noting they can rotate across the region using the same digital device, access the same information, and reduce inefficiencies in care delivery. "We're looking at how we can scale up our own resources across the region for other parts of the workforce."

Despite these concerns, there was optimism in the room. "Digital is the best it's ever been," Cooper said. "We need to shift the mindset of a nervous workforce and work more collaboratively with commercial partners — the NHS is not sustainable without those relationships."

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Hanbridge added another dimension to this optimism by suggesting there's potential for optimising digital capabilities already in an organisation, stating, "Are we putting our energy and our attention on the right things? I'm not really sure. I think it's going back to your strategy, really looking at it and saying: Can we work differently? Can we be more innovative? What have we got that we're not using?"

## CHARTING A COURSE FOR DIGITISATION AND DATA CONVERGENCE

The NHS stands at a crossroads in its digital transformation journey. While the potential benefits of data convergence and digitisation are immense, achieving them will require a shift away from fragmented, short-term thinking towards sustained, system-wide collaboration.

By fostering stronger partnerships, standardising care processes, and committing to long-term digital investments, the NHS can lay the foundation for a truly integrated healthcare future.

"The transformation journey we're on is digital," Crean aptly summarised. "It's about using technology to transform the NHS — a huge opportunity to do something very important."

The path forward will require strong leadership, a willingness to embrace innovation, and a commitment to putting patients at the center of the digital transformation. By learning from past challenges and embracing a collaborative, long-term approach, the NHS can unlock the full potential of digitisation and build a healthcare system that's fit for the future.

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