



# Supporting the NHS 10 Year Plan: 10 Strategies from UKDHC

**Angus Wallace, Executive Director, UKDHC [Angus.Wallace@UKDHC.org](mailto:Angus.Wallace@UKDHC.org)**

## What is UKDHC?

UK Digital Health and Care (UKDHC) was launched as a Community Interest Company (CIC) in April 2024 by a group of volunteer health and care professionals dedicated to improving the NHS and social care. To date, it has received no government funding from either NHS England or from the Department of Health and Social Care (DHSC) and is grateful to its like-minded sponsors for supporting its mission. UKDHC believes that both the NHS and social care can be dramatically improved by using agile methods, smart technology and artificial intelligence without necessarily incurring large costs. As the saying goes, “If it can be done, we will do it.”

So far, UKDHC, in partnership with the University of Central Lancashire, has run webinars, podcasts and scientific conferences. It has launched a digital skills assessment tool and two digital educational packages, all free of charge for NHS and social care staff. For more information, see [www.UKDHC.org](http://www.UKDHC.org).

## Introduction

UKDHC recommends using the 10 Year Plan as a springboard to revitalise health and social care throughout England and the devolved nations. During the Covid-19 crisis, the UK demonstrated that it can deliver progress and projects far faster and more efficiently than ever before. This is still possible. With the right support, streamlined regulatory processes and a more agile culture, the momentum can continue.

We have reviewed the 10 Year Plan and applaud its aspirations. However, we encourage policymakers to trust the authors of the plan and ensure traction in implementation through sound planning, creating small wins and collaborating closely with all stakeholders. UKDHC is committing 10 of its strategies to the NHS 10-Year Plan.



## The 10 Strategies

**Strategy 1 – Upskill the workforce in digital knowledge and skills.** Front-line health and care staff need help and support in upgrading their skills. This is best achieved by encouraging the use of existing training. UKDHC has already developed an online self-assessment tool and two free educational packages and more will soon be available.

*Leads: Jane Fitzgerald and Angus Wallace.*

**Strategy 2 – Provide personalised digital training pathways.** Every NHS and social care staff member should have a tailored learning plan based on their current knowledge and skills. UKDHC has already developed a pilot version of this, which is being shared and discussed on social media platforms.

*Lead: Ufuoma Okpeahior.*

**Strategy 3 – Address the physical and communication divide between health and social care.** Significant barriers exist between health and social care, including separate facilities, the fragmented systems and differing terminology. UKDHC aims to reduce these barriers and foster better integration across the NHS and social care sectors.

*Lead: David Wright.*

**Strategy 4 – Strengthen patient/user/client representation across health and social care.**

Projects in both health and social care have often lacked true patient representation. UKDHC will use its existing avenues to identify and involve user representatives to help improve this.

*Leads: Tom Smith and Paul Midgley.*

**Strategy 5 – Promoting passports for digital apps and software.** UKDHC supports the use of passports for digital apps and software, while recognising the challenges imposed by the current UK regulatory environment. Regulations in the UK are more demanding than many other countries, which can stifle innovation. UKDHC recommends streamlining these requirements and introducing a passport valid for three years, even if regulations are updated in the interim. This would give developers time to update their products while they are being used and re-evaluated.

*Lead: DJ Hamblin-Brown.*



**Strategy 6 – Improve contracting, procurement and adoption of evidence-based technologies.**

Current methods of contracting, procuring and adopting technologies in the NHS could be improved by drawing on approaches used by the National Institute for Health Research. UKDHC recommends that future contracts:

- a) are designed with at least 30% involvement of the end users
- b) are restricted to one year for most projects, making use of modern technology and AI for faster delivery
- c) use simplified procurement processes
- d) select the best candidate and advise candidates two and three of their status
- e) appoint a project monitor
- f) include a mid-point review (e.g. after six months); if the project is off track, the contract should be cancelled, with only 50% payment made to the original supplier), and the opportunity offered to candidates two and three under the same terms.
- g) close the project on time and reimburse the selected candidate 70% of the contract payment
- h) require the candidate and monitor to deliver a final report, summarising the deliverables or KPIs; this should be published on the DHSC website within 2 months of project completion before the final reimbursement is made.

UKDHC is in discussion with Mentorverse (see Action 7) to take this forward at pace.

*Lead: Ameet Bakhai.*

**Strategy 7 – Collaborating on a proposed national incubator platform.** UKDHC is working with Professor Dhakshana Sivayoganathan, National Health Care Mentor, and others on the development of a national incubator platform. The platform aims to revolutionise procurement by centralising a registry that connects healthcare solution providers and commissioners. A micro-investment feature will enable milestone tracking and help reduce the risks associated with large upfront payments in NHS projects.

*Leads: Angus Wallace and David Wright.*

**Strategy 8 – Support older digitally excluded people.** UKDHC proposes engaging digitally confident young people, such as Duke of Edinburgh Silver and Gold Award students (aged 16 and over), to support older adults in developing essential digital skills. These include keyboard use, smartphone navigation, voice commands (e.g. Siri, Amazon Echo, Gemini), using health and care apps such as the NHS App, and understanding internet safety and search tools. UKDHC has



approached the Duke of Edinburgh Award to explore including this initiative within their programme, with appropriate safeguards in place before launch.

*Lead: Mark Nicholas.*

**Strategy 9 – Ensure safe and usable patient data for direct care.** UKDHC focuses on making patient data usable and safe for direct care, with a strong emphasis on cybersecurity. Dr Phil Koczan, who has served as a Caldicott Guardian for NHS England and supported key London region initiatives such as the One London shared record and Universal Care plan, leads this strategy. His work includes ensuring clinical safety and collaborating with the London CIO, particularly in primary care.

*Lead: Phil Koczan.*

**Strategy 10 – Use routinely collected patient data for more analytical purposes.** UKDHC aims to expertly handle gaps in routinely collected patient data and enhance its use for analytical purposes.

*Leads: Marcela Vizcaychipi and Ameet Bakhai.*