

Technology and innovation in the NHS

Audit Scotland

1. Audit Scotland welcomes the opportunity to provide evidence to the Health & Sport Committee to help inform its inquiry into whether technology and innovation can transform the NHS. You set a number of specific questions for consideration and while our work is not directly relevant to all of those questions, we believe there would be merit in reminding the Committee of the findings of our 2013 report [A Review of Telehealth in Scotland](#).
2. In our 2013 report, we highlighted a number of factors which remain relevant and are important to consider in the context of the Committee's inquiry. In 2013, we highlighted that the NHS in Scotland was facing growing demand for its services, due to an ageing population and the increasing prevalence of long-term conditions. We identified that NHS boards needed to consider new models of care such as telehealth to help manage current and future demand. Targeted appropriately, telehealth offers the potential to help NHS boards deliver a range of clinical services more efficiently and effectively. To achieve this, we recommended that NHS boards should consider the use of telehealth when introducing or redesigning clinical services.
3. Telehealth offers a range of potential benefits for patients such as reducing travel, receiving a quicker diagnosis and avoiding hospital admissions. We found at the time of our work in this area that patient experience of telehealth was broadly positive with patients reporting high levels of satisfaction. The experience of NHS staff involved in telehealth initiatives was also positive. However, opportunities for them to gain experience remained limited and more training and education was needed.
4. We also identified the need for evaluation to provide reliable evidence on the overall effectiveness of telehealth and whether it offers better value for money than traditional patient care. We undertook some economic modelling as part of that audit which suggested that using telehealth to monitor patients with COPD at home had the potential to help NHS boards avoid costs of around £1,000 per patient per year.
5. It is important that the new Digital Health and Social Care Strategy 2017-2022 contains specific and measurable objectives for developing telehealth, and is supported by a delivery plan which sets out a clear timetable for implementation.
6. The Scottish Government, NHS boards and Integration Authorities will need to work together to identify how the implementation of new technology in health and social care will be funded. To drive the development of innovative, digital and technological solutions, the Scottish Government, in partnership with NHS boards and Integration Authorities, should evaluate the cost effectiveness and impact on the public of new initiatives and promote good practice.

7. Our 2013 [report](#) included an appendix to help boards assess the potential opportunities for using telehealth when services are either introduced or redesigned.
8. We would also direct the Committee to our recent [digital briefing](#) that sets out lessons learned from the public sector to support public bodies embarking on ICT projects.
9. The Committee may also be interested to note that we plan to look at digital progress in central government and health in our 2018/19 audit programme.