# openGPSoC

*Fixing a broken market*

opengpsoc.org
@opengpsoc

Marcus Baw, Ewan Davis, Rob Dyke
openGPSoC, a Community Interest Company

# Who are we?

A Community Interest Company formed of all users, clinicians, developers and health informaticians.

Based on successful Foundation model for open source - Wikimedia, Apache, Mozilla, W3C, VistA.

Bringing together the energy of doctors who code with successful open source innovators and seasoned experts.

# How is it broken?

Oligopoly of now just 3 major suppliers.

High barriers to market entry for new systems.

Changing systems causes massive business continuity problem to practices, hence reluctance to change systems.

Valuable data locked in proprietary 'silo' systems.

Slow or absent response to requests for new functionality and support of new technology platforms

# How do we fix it?

Create an open ecosystem where vendors can innovate and compete but prevent "lock-in". SMEs will be able to compete alongside larger players in this new marketplace

Separate data from applications

Build on existing open-standards and open APIs

Ensure at least one instance of any component that could create lock-in is open source

# What does our vision look like?

- Open API allowing third-party mobile apps, web apps, and other platforms to integrate system features
- Built-in Information Governance models for the C21st
- Patient-focused security and permissions management built into design - 'data donation'
- Interoperable data storage - removing system lock-in
- Avoid 'per-license' model of software procurement
- All progress made is immediately in the public domain for all to develop and benefit from.

# What will we do?

- 'Modular' approach rather than 'Monolithic'
- Agile and open development process
- Professional software development of core components supporting community input
- 'Teach and do' Hack weeks/weekends to prototype, test and build components
- Early and regular end-user testing
- Focused development sprints
- No Reinvention Of The Wheel! - utilise existing open source projects as base where possible

# Our business model

- The Project will build or procure open implementations of core components and open reference implementations of other components
- All will be free to adapt and deploy these components but the project will develop a network of accredited partners able to deliver and support "turn-key" implementations and accredited components to practices
- We need pump-priming funding but in the medium term we expect contributions (in cash and kind) from accredited partners to fund ongoing open-source development of core components and the Projects central functions

# Who will be our accredited partners?

- Accredited partners can be commercial of social enterprises drawn from:
  - Existing suppliers of products and services to the GP IT market (there are ~100 such suppliers)
  - Existing NHS Informatics Services, CSU, CCGs
  - Existing suppliers of IT services to the NHS
  - New entrants to NHS IT market (particularly experienced open-source providers)
  - New start-ups
  - Others we have yet to imagine
- They will need to demonstrate they have the knowledge and resources to deliver their proposed services and sign up to a code-of-practice

# How can you help?

- Ensure that 'GPSoC II' would not exclude our business model and an open-ecosystem - the "level playing field for open source and proprietary" systems the Cabinet Office PPN advocates
- Allow users to procure tested & approved apps/components through a catalogue "NHS App Store" - as Tim Kelsey / NHS CB propose
- Remove any unnecessarily onerous accreditation requirements (a major barrier to entry)
- Help us secure pump-priming funding

# Next Steps

- Building the OpenGPSoC community
- Discussion with potential partners
- "Town Hall Meeting" Sat 1st December

# More Information

www.opengpsoc.org

 /openGPSoC

info@opengpsoc.org