SHSCT MAJOR INCIDENT – IT OUTAGE 17th SEPTEMBER 2025

INCIDENT REVIEW GROUP

STATUS UPDATE REPORT

1. BACKGROUND

This report relates to the IT outage incident experienced by the Southern HSC Trust ('the Trust') at 08:05 hrs on Wednesday 17th September 2025. This full network outage resulted in a loss of connectivity for Trust staff to key clinical information systems including encompass (patient record), NIPACS (radiology & digital pathology system) and LIMS (laboratory information system). These systems remained accessible to all other HSC Trusts in Northern Ireland.

As a result of the outage, a major incident was declared at 09:15 hrs and business continuity arrangements were put in place to maintain essential clinical services and to protect patient safety. This involved the following:

- Time critical procedures were maintained and the emergency departments continued to care for existing patients and new attendances.
- An Ambulance divert was put in place away from the two acute hospital sites (Craigavon Area and Daisy Hill Hospitals) with only Category 1 (excluding major trauma) being accepted by both Emergency Departments.
- To ensure patient safety, most planned surgery and out-patient hospital appointments on 17th September were cancelled and as the impact of the incident evolved a decision was made to also cancel appointments booked for the 18th September.
- Whilst network access was restored by 16:15 hrs on Wednesday 17th September, paper records were retained overnight to ensure safe services were provided to all patients during this period.

As a result of the IT outage, it is estimated that approximately 1,600 patients had appointments cancelled and the Trust has worked at pace to rebook all postponed appointments in line with clinical priorities.

The Trust wishes to convey its sincere apologies to all of those impacted by the outage and to assure our patients, service users and staff that the Trust is prioritising its efforts to ensure that all findings and learnings from the incident are captured for the Trust and shared with the wider HSC.

2. PURPOSE OF REPORT

The purpose of this Trust Board Update Report is to provide an overview of the structures put in place and the work underway to undertake a detailed review of the IT outage incident. It is important to note that this report is not intended to set out the outcomes of the detailed review work but is being presented to Trust Board at this time to give assurance regarding the scope of the review work underway and to summarise the status of the work at this time.

The report commences by providing an overview of the structures established to identify the facts, findings and learnings relating to the IT outage incident, namely the independently chaired Incident Review Group, along with its four sub-groups. It then proceeds to provide an overview of the scope of work being undertaken by each of the sub-groups, any initial findings to date, and the steps required to complete the review.

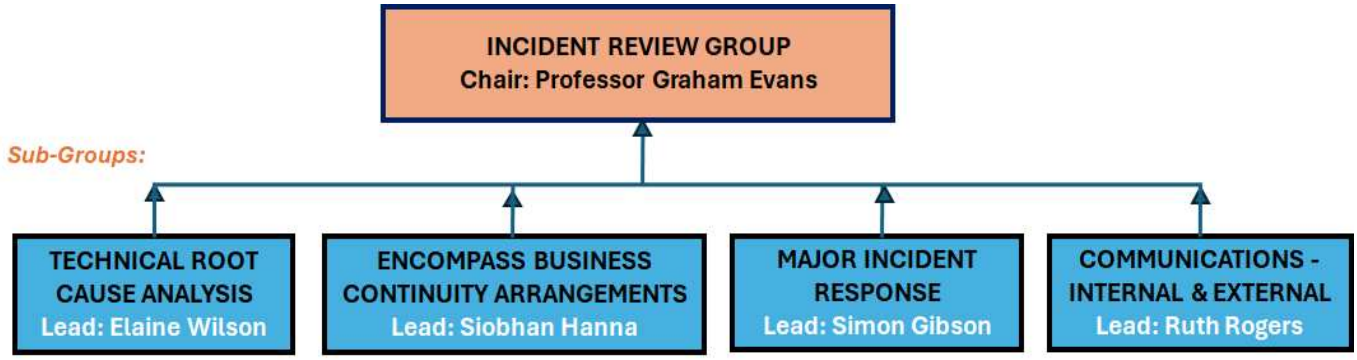
3. OVERVIEW OF INCIDENT REVIEW GROUP

3.1. Structure

While a number of working groups were established at the time of the IT outage to manage and monitor the immediate technical and business continuity response, the Trust has subsequently established a governance structure to undertake a thorough review of the incident and to identify lessons learned.

As outlined in the diagram below, this structure comprises an overarching Incident Review Group, which is chaired by an independent industry expert, along with a number of sub-groups.

Figure 1.0 – Overview of Incident Review Group Structure



3.2. Membership

The Incident Review Group is independently chaired by Professor Graham Evans, who is a specialist in the area of health and care digital leadership and transformation, having held a number Director level digital services roles across his 20+ year in the health and care sector in England. Most recently this included being the Executive Chief Digital and Infrastructure Officer (CDIO) and Senior Information Risk Office (SIRO) for NHS North-East and North Cumbria Integrated Care Board, having recently retired in July 2025.

The other members of the Incident Review Group include the Trust's Executive Director of Nursing and the Trust's Medical Director. Each of the identified Sub-Group Leads also attend the meetings of the Incident Review Group to provide updates on their respective areas.

The Incident Review Group has met fortnightly since 14th October 2025.

3.3. Scope

The role of the Incident Review Group is to establish the facts relating to the IT outage incident, including to identify any findings which caused the incident, factors which contributed to these findings, and to make recommendations which when implemented would serve to reduce the risk and / or impact of a similar incident occurring in the future.

The group will also consider the actions taken by the Trust in response to the incident, with a particular focus on learnings and improvements that can be made in respect to enactment of business continuity arrangements and communications both during and following the incident.

The Trust is extremely conscious of the regrettable impact on patients and service users during and following the incident. As part of the review work the Incident Review Group will therefore also seek to understand the wider impact of the outage, in terms of both the impact on patients and the financial costs associated with the re-scheduling of patient appointments.

3.4. Reporting Arrangements

The work of the Incident Review Group shall culminate in an Incident Outcome Report which shall be shared with Trust Board on completion. This shall be developed following receipt of a Findings Report from each of the four sub-groups which shall include the findings of the relevant area of sub-group review, along with learnings and recommendations for improvement. It is currently anticipated that the Incident Outcome Report shall be presented to Trust Board at their next meeting on 29th January 2026.

An overview of the scope of work being undertaken by each of the sub-groups and their current status is set out in the sections that follow.

4. TECHNICAL ROOT CAUSE ANALYSIS SUB-GROUP

4.1. Background

A Technical Route Cause Analysis (RCA) Sub-group was convened with membership from across the HSC (namely, WHSCT, NHSCT, BSO, DHCNI), representatives from the Trust's network infrastructure support provider, and internal Trust IT leads. This sub-group is chaired by the Trust's Director of Planning, Performance and Informatics.

By way of background, the Trust has a contract with an external network infrastructure support provider for the provision of technical support to the Trust IT Communications Team for all aspects of the Data Centres and wider Comms infrastructure. In providing this support they hold a sub-contract for hardware support, replacement of faulty kit, and provision of Technical Assistance Centre (TAC) support.

4.2. Scope

The overall approach to the RCA workstream involves the following:

- Review of the Change Control Process associated with the upgrade undertaken prior to the IT outage;
- Review of the upgrade activity undertaken prior to the outage;
- Establish the technical root cause & analysis; and
- Propose any recommendations & shared HSC Learning.

4.3. Findings to Date

The review of the Change Control Process through the internal Trust Change Advisory Board (CAB) was followed correctly - assurance from other Trusts and DHCNI confirmed the submission and process.

Upgrade activity undertaken prior to the hardware failures and subsequent replacements in the second Data Centre delayed the software upgrade to the second Data Centre but did not cause the IT outage.

In regard to the technical root cause & analysis work, the Trust's network infrastructure support provider has worked closely with its sub-contractor to undertake a technical review and analysis of over 120GB of log data. After significant detailed analysis, the network infrastructure support provider has recently shared an initial technical report with the RCA sub-group for review. The final technical report is due to be submitted to the RCA sub-group on the 20th November 2025.

It is anticipated that the Technical RCA sub-group shall complete their review of the technical report and submit a wider Findings Report to the Incident Review Group by the 28th November 2025. This Findings Report shall cover the outcome and learnings from all aspects of the scope outlined in section 4.2 above.

5. ENCOMPASS BUSINESS CONTINUITY ARRANGEMENTS SUB-GROUP

5.1. Scope

The purpose of the Encompass Business Continuity Arrangements Sub-group is to specifically consider the enactment of the business continuity arrangements in respect to the encompass system in the Trust at the time of the IT outage, with a particular focus on learnings and improvements that can be made in implementing encompass business continuity arrangements going forward.

5.2. Overview of Encompass Business Continuity

Encompass Business Continuity was a key workstream during the Trust's implementation planning and activities for go-live on 8th May 2025. There was a workplan led by the Assistant Director with responsibility for Emergency Planning which included Epic, Regional encompass team and Trust wide representation. This Business Continuity Group ensured the following:

- Business Continuity Access (BCA) devices and printers are available to all teams;

- BCA 'Red folders' with clear instructions on how to use BCA devices were provided to each department; and
- The instructions printed in the Red Folders are available on the encompass Hub on Trust sharepoint.

Since 2 weeks after 'go live' of encompass, there have been monthly planned downtimes of encompass and staff have operated BCA devices successfully on all 4 occasions. However, given that BCA devices and printers were installed before the Trust went live it was acknowledged that there was a need to review the location and functionality after go live, to ensure that the assumptions made met each Department's operational requirements. Therefore, as part of encompass stabilisation governance structure (refer Appendix 1) there was a Business Continuity workstream established which continues to meet and take forward actions and resolve any issues.

There are various levels of business continuity defined in Epic - in the case of the Trust's IT outage incident on 17th September 2025, business continuity was at highest Level IV, as staff did not have access to the internet (Trust network). This was the first time that this level of business continuity was required in the Trust since go live on 8th May 2025.

In addition to business continuity access devices, the Trust has 2 further levels of business continuity to access data from encompass when there is no network. These are:

- **Rover Devices** - being iphones which contain the encompass 'App'. Access to Rover devices in community-based settings include SIM cards and allows staff to access encompass whilst they are on the move i.e. outside Trust facilities (e.g. District Nurses caring for patients in their own homes).
- **Haiku App** - approximately one third of the Trust's Medical Staff have access to the Haiku encompass App which can be used by Doctors without access to the Trust network to access medication history, latest observations, allergies and alerts.

5.3. Findings

The Encompass Business Continuity Arrangements sub-group has now completed its review work and prepared a draft Findings Report. This highlights findings in relation to the immediate encompass business continuity response to the outage, as well as the encompass recovery work, summarised as follows:

Immediate Response – This was the first time that Trust staff were required to implement Level IV business continuity arrangements which requires different ways of working from day-to-day operations or planned encompass downtimes. However, there were sufficient BCA devices available and operating as intended during the outage and the information necessary to safely care for patients was available. The use of Rover Devices and the Haiku app both complemented encompass business continuity procedures in the Trust and helped ensure that patients had safe continuity of care at the time of the outage.

Encompass Recovery - Epic provide robust guidance and support on business continuity and recovery and based on these procedures the Trust established a number of workstreams for encompass recovery as follows:

- Medicines Reconciliation and Admin Outage & Recovery Sub-group
- Diagnostics Outage & Recovery Sub-group
- BCA – Outage & Recovery Sub-group

These sub-groups successfully progressed and monitored encompass recovery work in regard to a range of key activities as follows:

- **Back Charting of patient records** - which concluded on 23rd September 2025 for all inpatients across the Trust and by 26th September 2025 for all outpatients.
- **Uploading of Diagnostics** – which was completed and fully tested on 18th September 2025.
- **Re-scheduling of Appointments** – with patients prioritised by clinicians and staff ensuring that highest priority patients were given the earliest available appointments. Rebooking of all urgent and red flag patients was concluded by the end of September 2025.
- **Business Continuity** – this related to the prioritisation of all outstanding actions from the Business Continuity Stabilisation Workstream as noted in section 5.2 above. These were concluded on 23rd September 2025, including virtual training and awareness sessions for staff and processes for checking that reports are correct on each Team's BCA device.

5.4. Lessons Learned

The Trust has gained significant encompass related learning from this IT outage which has already been documented and shared with other Trusts and the Regional encompass team. These lessons learned cover a range of areas such as practical advice to teams in terms of suitable access to manual reporting resources, further encompass business continuity training needs, learnings in regard to encompass business continuity governance structures and processes, practical advice regarding back charting processes following an incident, and arrangements to maximise the effective use of mobile data solutions (i.e. Rover Devices and the Haiku App).

Where applicable the Trust has already implemented actions arising from these learnings, for example, in respect to holding additional encompass business continuity training, ensuring a small stock of pre-encompass paper stock and pens are available at ward and department reception levels, adding software to allow for central monitoring of BCA devices, and developing a new standard operating procedure for weekly checks on BCA devices and printing capability.

Furthermore, the draft Findings Report outlines a number of potential future actions that provide further opportunity to enhance the encompass business continuity resilience going forward which will be considered by the Incident Review Group as part of their Outcomes Report, and also explored further at the Regional encompass Business Continuity Workshop scheduled for 16th January 2026.

6. MAJOR INCIDENT RESPONSE SUB-GROUP

6.1. Scope

The role of the Major Incident Review Sub-group is to review the Trust Major Incident Response, including general emergency planning business continuity arrangements. It will assess the adequacy of the Trust's Major Incident response and co-ordination arrangements, assess the effectiveness of business continuity plans, and identify any improvements for future similar incidents. In taking this work forward the sub-group is undertaking the following actions:

- **SLT Debrief** – This involves a debrief session with the Trust's Senior Leadership Team (SLT) as SLT was acting as the Bronze Commend Centre in responding to this major incident. The review will utilise the Trust's Emergency Planning and Business Continuity Lessons Management Framework to consider the adequacy of the response and lessons learned.

- **Issue of Questionnaire to Key Trust Stakeholders -** the group will seek commentary via questionnaires from Trust SLT, Assistant Directors, Heads of Service and other key stakeholders in relation to this major incident response – specifically what the achievements were, what challenges were faced, and areas for improvement. This is in line with best practice as recommended by the Joint Emergency Services Interoperability Principles (JESIP). In line with JESIP, the themes for the response are as follows:
    - Communication
    - Strategic Direction / Command and Control
    - Co-ordination
    - Resources
    - Planning
    - Training and Exercise.

6.2. Findings to Date

The SLT Debrief was undertaken by Dr Stephen Austin, Medical Director on 2nd October 2025. At this Debrief SLT agreed the content of the questionnaire to be issued to key Trust stakeholders.

The Questionnaire was subsequently issued to all Directorates for dissemination in w/c 10th October 2025 for completion and return by 24th October 2025. The sub-group have compiled the data and information included within questionnaire returns and are in the process of analysing same, with the target of finalising their Findings Report by 14th November 2025.

7. COMMUNICATIONS SUB-GROUP

7.1. Scope

The role of the Communications Sub-group is to consider how effectively the key messages were communicated to both internal and external stakeholders both during and following the

IT outage incident. It will assess the adequacy of the communications response in terms of coverage and timeliness to internal and external stakeholders. It will also identify any improvements in respect to communications for future similar incidents.

In taking this work forward the sub-group is undertaking the following actions:

- **Review initial communications team response –** This will consider how the communications team reacted to the need for an immediate emergency response and how activity was coordinated.
- **Communications strategy and log -** Provision of a log of all internal and external communications undertaken identifying the timing, channels, and a summary of the messaging provided.
- **Assessment of Internal Communication -** questionnaire feedback is being sought by the Major Incident Response subgroup from SLT and internal stakeholders on several areas including 'Communications'. This feedback will be referenced in the communications sub-group report and will be supplemented by feedback from a further staff survey to be distributed via global email, Southern I and Chat with the Chief.
- **Assessment of External Communications -** Some feedback was received at the time from external stakeholders which will be reflected in the communications sub-group findings report. A survey will also be issued to elected representatives, local media, patients and service users.

7.2. Findings to Date

The work of the sub-group is well underway, with all internal and external surveys prepared and released. There has been a very positive response from the internal staff survey with over 450 responses received. Response levels to date on the external surveys have been much lower, however valuable information has been captured and will be incorporated into the Findings Report.

The sub-group is in the process of analysing the survey responses, along with the internal stakeholder feedback on the communications aspects of the major incident response questionnaire, with the target of finalising their Findings Report by the end of November 2025.

8. NEXT STEPS

As outlined above, it is currently the intention to have the Findings Reports from the four sub-groups completed and submitted to the Incident Review Group by the end of November. This will enable the Incident Review Group to prepare their Incident Outcome Report which will be presented to the Trust Board at the next scheduled meeting on 29th January 2026.

APPENDIX 1 - Southern Health & Social Care Trust Encompass Stabilisation Structure