


TRUST BOARD COVER SHEET

Meeting and Date of meeting	<i>Trust Board Meeting Thursday 30th January 2024</i>	
Title of paper	<i>Encompass Programme Update</i>	
Accountable Director	Name	<i>Siobhan Hanna</i>
	Position	<i>Encompass Programme Director (Interim)</i>
Report Author	Name	<i>Siobhan Hanna</i>
	Email	<i>Siobhan.hanna@southerntrust.hscni.net</i>
This paper sits within the Trust Board role of:	Accountability	
This paper is presented for:	Assurance	
Links to Trust Corporate Objectives	<input checked="" type="checkbox"/>	Unscheduled Care Transformation and Reform
	<input checked="" type="checkbox"/>	Improved Access to Services
	<input type="checkbox"/>	Focus on developing services provided in the Community
	<input type="checkbox"/>	Ensure Safe Services while delivering financial recovery
	<input type="checkbox"/>	Strengthen Financial and Governance Systems
	<input checked="" type="checkbox"/>	Digital Readiness
	<input type="checkbox"/>	Sustainability of Our Estate
	<input type="checkbox"/>	Embedding Our Co-production Approach
	<input type="checkbox"/>	Delivery of Year 3 of Our People Framework

	<p><i>The report author will complete this report cover sheet fully. The Accountable Director must satisfy themselves that the cover sheet is accurate and fully reflects the report. The expectation is that the Accountable Director has read and agreed the content (cover sheet and report).</i></p> <p><i>Its purpose is to provide the Trust Board/Committee with a clear summary of the report/paper being presented, how it impacts on the people we serve and the key matters for attention and the ask of the Trust Board/Committee</i></p>
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1. Reason for Presentation of Paper / Report

This paper has been produced to provide a progress update on the Trust's readiness for encompass go-live on 8th May 2025. This paper aims to provide assurance to Trust Board that the Trust is making progress in line with the Programme Plan and is managing risks and issues appropriately.

2. Detailed summary of paper contents:

The Trust is now just over 100 days away from going live with encompass, the Regional Health and Care Record, on 8th May 2025. In line with the Programme Plan, a 120 Go Live Readiness Assessment (GLRA) was held on Wednesday 15th January 2025. All Directors and Assistant Directors attended this event, presented their readiness position compared to the Programme Plan and questions and suggestions were made from a range of external stakeholders in attendance, including:

- Epic (software supplier)
- Regional encompass Team
- Department of Health
- DHCNI

A summary of the RAG status is included in the report, but overall, the Trust is 4% further progressed at this stage than the Northern Health and Social Trust (NHSCT), which had a very successful implementation. Western Health and Social Care Trust (WHST), which will go live with encompass on the same date as the Southern Trust, held their 120 Day GLRA on Thursday 16th January 2025 and their overall RAG status was similar to the Southern Trust's, which is reassuring.

The Regional encompass Team and Epic colleagues provided a debrief following our GLRA and provided advice on 7 critical areas of focus to ensure that we are on track for our 90 Day GLRA. These are outlined in this report.

Overall, the Trust is in a strong position of readiness for encompass go live on 8th May 2025, however, the additional work for Operational Services over the next 4 months is acknowledged and is not underestimated.

3. Areas of improvement/achievement:

Overall, the Trust is on track with encompass implementation and is 4% further progressed at this stage than NHSCT, which had a very successful implementation. A summary of our overall programme RAG status is as follows:

Overall Position



RAG	Divisions	RAG	Preparation & Enablers	RAG	Go-Live Planning
Green	Medicine & Unscheduled Care	Green	Infrastructure & Telecommunications	Green	Super Users & Floor Walkers
Green	Surgery & Clinical Services	Green	Medical Device Integration	Green	Manual Data Migration
Green	Adult Community Services	Green	Electronic Migration and 3rd Party Systems	Yellow	End User Devices, TDR and Help Desk and Support
Green	Mental Health & Disability	Yellow	Reporting & Data Quality	Green	Bedded Cutover
Green	Children & Young People Services	Yellow	Information Governance	Green	Command Centre / Help Hubs
Green	Pharmacy	Yellow	Training & People Readiness	Green	Activity Downturn & Stabilisation
Green	Executive Directorate of Nursing, Midwifery, AHP's, Functional Support Services & IPC	Green	Corporate Communications / Trust Visuals	Yellow	Capacity & Prioritisation
Green	Medical / Digital Clinical & Social Care Safety	Yellow	Admin Assurance		
Green	Finance	Yellow	My Care		
		Yellow	Business Continuity & Emergency Planning		
		Green	Benefits		
		Red	Pathway Review / Change Impact		



In summary, this equates to:

39% of the Programme is on track (GREEN)

57% of the Programme is on track, but is at WATCH status (AMBER)

4% of the Programme is at risk but mitigating factors to bring back on track are in place (RED)

Further detail on the RAG status is included in this report.

4. Areas of concern/risk/challenge:

In summary, the areas that Epic and the Regional encompass Team have recommended we focus on for our 90 day GLRA are:

1. **Technical Dress Rehearsal (TDR).** This is due to commence in February 2025. It is recommended that prior to TDR commencement, 60% of devices are in place across the Trust to commence the device testing regime in preparation for go live. Whilst at 37% device deployment at this stage the Trust is comparable with WHSCT position (40%) and also comparable with the other Trusts that are live at this stage of their implementation, the concern for the Regional team is around supporting 2 Trusts going live at the same time. The Regional Team have suggested a focus on rolling out devices on a site by site basis, to formulate a rolling site plan for TDR. This will be completed and included in our 90 Day GLRA. WHSCT received the same recommendation at their 120 day GLRA.

2. All Directorates rated their **Regulatory Reporting** as Amber and it was acknowledged by Regional colleagues that reporting is one of the biggest challenges with encompass implementation. The work and engagement of the Trust's Assistant Director of Informatics and Team were acknowledged by the Regional Team. It was recommended that Directorates have greater visibility of the Reporting status for assurance of ongoing work. The Assistant Director of Informatics will join Directorate Readiness Groups in order to provide this assurance.
3. **Downturn.** Advice from the Regional Team is to minimise downturn at go live. This advice is based on experience of the 3 encompass live Trusts in the HSCNI. It is very challenging to bring downturned services back to baseline activity. The Trust is working closely with the 3 live Trusts to learn from their experience and an Activity Stabilisation Group has been established, led by the Director of Performance, Planning and Information.
4. **System Build.** The Regional Team are behind schedule with our encompass build, which impacts on Directorate readiness. Weekly progress update meetings will be established for more granular detail on build progress and updates will be provided to the Directorate Readiness Groups.
5. **Training Registration and Uptake Statistics.** A Training App has been established by the Training sub-group and will be made available to Directors and Assistant Directors to monitor uptake. As training before go live is critical to success, it was recommended that this is an area of focus and any staff who do not register or avail of training are contacted by their Manager to progress this. This will be monitored at Directorate Readiness Groups to ensure maximum, timely uptake of training.
6. **User Labs.** If staff avail of User Labs (assimilation training) after their training on navigation of the encompass system, this leads to improved readiness and ability to use encompass from day 1 of go live. It was therefore recommended that we monitor uptake of user labs very closely and feedback to Directorates on staff attendance and gaps. The Training Sub Group will put in place mechanisms to do this.
7. **Admin Change Impact.** Learning from the 3 Live Trusts implementations is that the change in role of administrative staff after go-live is disruptive, as clinicians do more data entry and this leads to confusion for administrative staff. Feedback from the Regional Team is that we are further progressed than the other live Trusts were at this stage, however,

as it is such a critical area to success, there are areas that we should focus on before our 90 day GLRA. This will be progressed by the Admin Assurance Group as a priority.

5. Impact on Statutory Duties: Provide details on the impact of the following and how.

<i>Financial Impact</i>	<i>Safety and Quality Impact</i>
Yes, there are Financial Impacts	Yes, there are Quality, Safety or Experience Impacts

6. Risk Assessment (Risk level and state if a risk assessment be completed)

A Programme Risk Register is held by the Programme Management Office (PMO) and is reviewed at monthly encompass Programme Board meetings. A Programme of this magnitude carries significant risk but these are being appropriately managed.

7. Other Business Intelligence/data (If appropriate)

N/A

8. Impact: Provide details on the impact of the following and how. If this is N/A you should explain why this is an appropriate response.

Corporate Risk Register	Encompass will go live on 8 th May 2025 across all of the Southern Health and Social Care Trust and simultaneously with the Western Health and Social Care Trust. As such, our go live is being planned as a Major Incident and Command and Control Centres will be established to mitigate risk. Continued delivery of safe care is of paramount important and cannot be compromised.
Board Assurance Framework	n/a
Equality and Human Rights	n/a



Encompass Programme Update

Trust Board
30th January 2025

Siobhan Hanna, *encompass* Programme Director (Interim)

#encompassNI



1.0 Introduction

This paper has been produced to provide a progress update on the Trust's readiness for encompass go-live on 8th May 2025. This paper aims to provide assurance to Trust Board that the Trust is making progress in line with the Programme Plan and is managing risks and issues appropriately.

The Trust is now just over 100 days away from going live with encompass, the Regional Health and Care Record, on 8th May 2025. In line with the Programme Plan, a 120 Go Live Readiness Assessment (GLRA) was held on Wednesday 15th January 2025. All Directors and Assistant Directors attended this event, presented their readiness position compared to the Programme Plan and questions and suggestions were made from a range of external stakeholders in attendance, including:

- Epic (software supplier)
- Regional encompass Team
- Department of Health
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A summary of the RAG status is included in the report, but overall, the Trust is 4% further progressed at this stage than the Northern Health and Social Trust (NHSCT), which had a very successful implementation. Western Health and Social Care Trust (WHSCT), which will go live with encompass on the same date as the Southern Trust, held their 120 Day GLRA on Thursday 16th January 2025 and their overall RAG status was similar to the Southern Trust's, which is reassuring.

The Regional encompass Team and Epic colleagues provided a debrief following our GLRA and provided advice on 7 critical areas of focus to ensure that we are on track for our 90 Day GLRA. These are outlined in this report.

Overall, the Trust is in a strong position of readiness for encompass go live on 8th May 2025, however, the additional work for Operational Services over the next 4 months is acknowledged and not underestimated.

2.0 Summary of Current Position

Overall, the Trust is on track with encompass implementation and is 4% further progressed at this stage than NHSCT, which had a very successful implementation. A summary of our overall programme RAG status is as follows:

Overall Position



RAG	Divisions	RAG	Preparation & Enablers	RAG	Go-Live Planning
	Medicine & Unscheduled Care		Infrastructure & Telecommunications		Super Users & Floor Walkers
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	Pharmacy		Training & People Readiness		Activity Downturn & Stabilisation
	Executive Directorate of Nursing, Midwifery, AHP's, Functional Support Services & IPC		Corporate Communications / Trust Visuals		Capacity & Prioritisation
	Medical / Digital Clinical & Social Care Safety		Admin Assurance		
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3.0 Factors Contributing to RAG Status

Each Readiness Owner outlined in detail their risks and challenges, at the 120 Day GLRA. Some were specific to the workstream, however, there are 4 common factors that significantly contribute to the Trust's RAG status at this stage of the encompass Implementation Programme:

3.1 System Build

Whilst the encompass system has been built as a Regional Electronic Care Record, designed collaboratively by the 5 HSCNI Trusts, each Trust has its own unique 'build' to customise Trust specific activities and workflows. This includes theatre templates and clinic templates as an example. This requires engagement with each Team in the Trust by a Regional encompass Workflow Analyst. Whilst some teams have commenced their 'build' workshops, Regionally, the Workflow Analysts are behind schedule. This has contributed to an amber rating for most Directorates and Divisions. Weekly meetings have commenced to ensue that this gets back on track by our 90 day GLRA.

3.2 Regulatory Reports

Reports and Dashboards are being built 'once for Northern Ireland' on encompass and as such, there is already a huge range available. However, despite 3 implementations across the HSCNI, there remain reporting gaps. The Southern Trust's Informatics Division are engaged in report development, however, Directorates remain concerned about going live with reporting gaps. The Informatics Division will join Directorate Readiness Meetings to provide regular, detailed progress updates for assurance. The gap in availability of Regulatory reports at this stage has contributed to an amber rating for most Directorates and Divisions.

3.3 Data Migration

A 'Data Migration Charter' was agreed Regionally which has helped the Trust to focus on data quality activities to ensure optimum electronic migration from legacy systems. The Trust's data quality is very strong and we are 'GREEN' in terms of electronic data migration to encompass. However, not all data fields are suitable for migration, therefore there are decisions that need to be made regarding data to be manually migrated to encompass in advance of go live. Whilst this workstream is on track, Directorates are concerned about having the staffing capacity to undertake manual data migration activities. This has contributed to an amber rating for most Directorates and Divisions. Manual Data Migration sub-groups continue to work through issues and decisions.

3.4 Simultaneous IT Implementations and Integrations

The new/upgraded Laboratory and Radiology Regional Systems are being implemented simultaneous to our encompass go-live and require integration. This is presenting some risks and challenges in terms of resources and timescales. HR and Finance colleagues also acknowledged the risk in their teams as the Equip programme has now commenced design and build phase. It is acknowledged that there are competing demands for resources across both operational and support services and this is extremely challenging.

4.0 Recommendations from Regional encompass Team and Epic

Following our 120 Day GLRA, the areas that Epic and the Regional encompass Team have recommended we focus on for our 90 day GLRA are as follows:

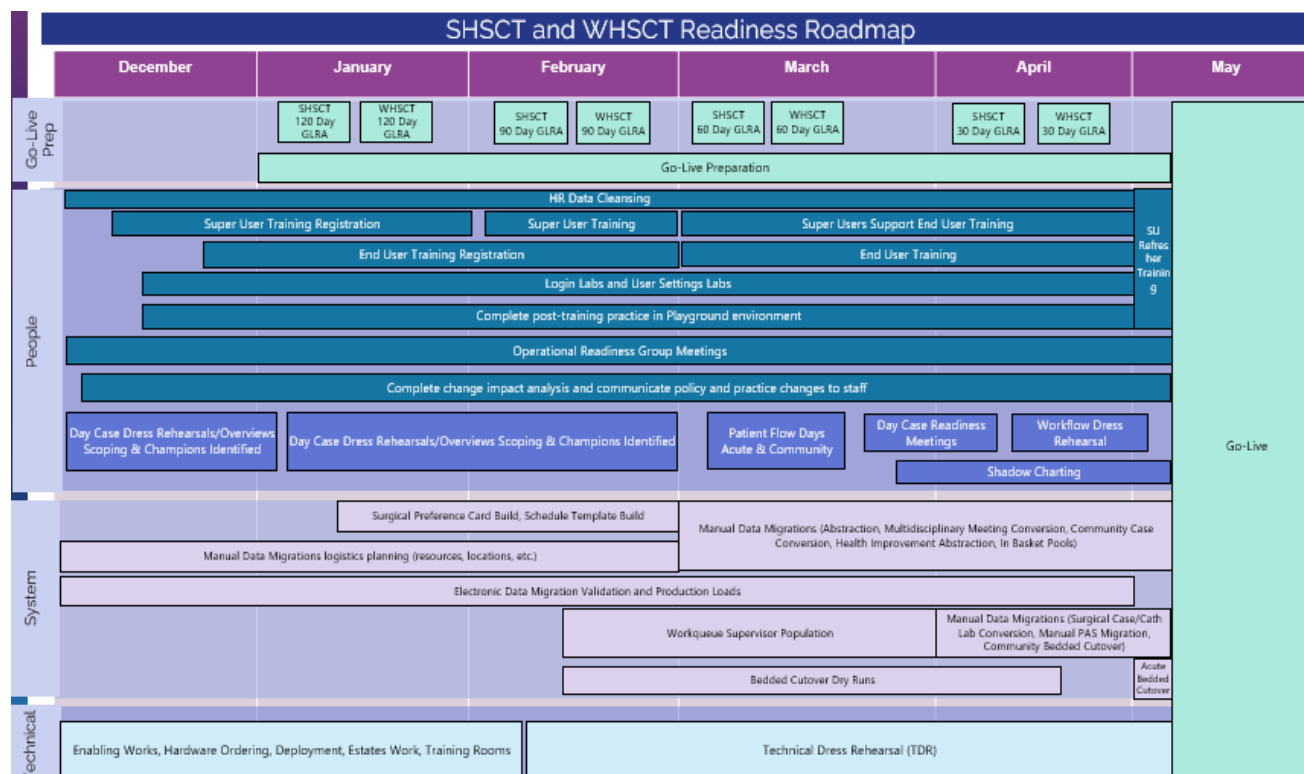
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4.2 All Directorates rated their **Regulatory Reporting** as Amber and it was by acknowledged by Regional colleagues that reporting is one of the biggest challenges with encompass implementation. The work and engagement of the Trust's Assistant Director of Informatics and Team was acknowledged by the Regional Team. It was recommended that Directorates have greater visibility of the Reporting status for assurance of ongoing work. The Assistant Director of Informatics will join Directorate Readiness Groups in order to provide this assurance.

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- 4.5 Training Registration and Uptake Statistics.** A Training App has been established by the Training sub-group and will be made available to Directors and Assistant Directors to monitor uptake. As training before go live is critical to success, it was recommended that this is an area of focus and any staff who do not register or avail of training are contacted by their Manager to progress this. This will be monitored at Directorate Readiness Groups to ensure maximum, timely uptake of training.
- 4.6 User Labs.** If staff avail of User Labs (assimilation training) after their training on navigation of the encompass training, this leads to improved readiness and ability to use encompass at go live. It was therefore recommended that we monitor uptake of user labs very closely and feedback to Directorates on staff attendance and gaps. The Training Sub Group will put in place mechanisms to do this.
- 4.7 Admin Change Impact.** Learning from the 3 Live Trusts implementations is that the change in role of administrative staff after go-live is disruptive, as clinicians do more data entry and this leads to confusion for administrative staff. Feedback from the Regional Team is that we are further progressed than the other live Trusts were at this stage, however, as it is such a critical area to success, there are areas that we should focus on before our 90 day GLRA. This will be progressed by the Admin Assurance Group as a priority.

5.0 Next Steps

The Trust is currently concluding its 'enablement' phase and moving into its 'readiness' activities. These are extensive and timebound and are summarised as follows:



All 'Readiness' workstreams are now in place with 'Readiness Owners'. However, it is acknowledged that encompass now brings significant additional work for staff right across the Trust. In recognition of this, the Senior Leadership Team has created space for staff through agreement to reduce meeting frequency, duration, attendance, or take a paper light approach to meetings from February 2025 onwards.

Our Go Live Planning Committee activities commence from January 2025, when we start to plan rotas for our command centres, plan our 'soft go live' when we start to use encompass from 25th April for future patient and client encounters, get our patients into beds, both in acute and community and also our virtual beds in Acute Care at Home and Home Treatment Crisis Response. It is acknowledged that this will be an extremely challenging time for staff. To this end, we are exploring a range of additional wellbeing interventions to specifically support employees during the roll out of encompass – this includes pre-go live, establishment of help hubs to support employees who have queries or concerns and wellbeing hubs at go-live for staff to speak to someone about any concerns they may have. There will be a range of help hubs across our sites and they will be manned 24/7 and will include Health

and Well-being support representatives, as well as technical support and 'Super Users'.

6.0 Budget Position

The budget allocation for the Trust for encompass to date is as follows:

Revenue Funding circa £2.5m

Capital Funding circa £10.3m

At this stage, the forecasted underspend for this year is circa £20,000 and is therefore on track.

7.0 Conclusion

Whilst the encompass programme is extremely challenging, our 120 Day Go Live Readiness Assessment held on 15th January 2025 has provided assurances that the Trust is currently on track and in a similar position to the Northern Health and Social Care Trust at this stage. Whilst there are risks, these are acknowledged and managed and mitigations are in place.