



Submitted By: Anthony Tracey

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Planning Objective: Planning Objective PO9

Executive Lead: Huw Thomas, Executive Director of Finance

Reporting Period: Quarter 3

Overall status: On-track

Rationale for overall status (please provide a brief summary of current progress indicating any key highlights or potential barriers to delivery)

Whilst the HDdUHB continues to make significant progress in its digital transformation journey, the deployment of national and local foundational digital systems remains a complex and evolving challenge. These programmes are critical to supporting clinical care, operational efficiency, and the delivery of strategic objectives aligned with national digital health priorities. Whilst some programmes are noting delays, they are within project tolerances.

Progress against planned outcomes / trajectories / milestones (please provide SPC/data charts and an explanation of any variances):

Please see table below

Activities completed in previous reporting period

- Readiness for ePMA
- Readiness for Digital Maternity and Open Eyes
- Phase 1 rollout of Patient Flow and eObservations
- Radiology (RISP) rollout
- First draft of proposal for Patient Services Centre
- Capital Projects (Picton Terrace, Pentre Awel, Sexual Assault Referral Centre (SARC), Bronglais Hospital (BGH) Chemotherapy Day Unit (CDU)
- Decommission of Biztalk
- Operational Improvements (Introduction of Nutanix, Office 2016 decommission, Citrix software upgrades)

Activities planned for next milestone and reporting period

- Further adoption of Laboratory Information System (LIMS)
- Continue with the implementation of patient flow/eObservations
- Development of a proposal for a centre of excellence for Data

Any other Comments

Matters for information:

Risks to delivery: Capacity with the operational teams, and the business change required. We are now looking at additional support

Any other comments:

Programme	Risk of Delivery Level:	
Radiology Deployment	Risk of Delivery Level: Low This risk has been assessed as <i>Low</i> . The programme has been delivered; however, a small number of residual issues remain to be addressed. These matters are minor in nature and do not impact operational functionality.	
Laboratory Information Management System (LIMS) Deployment	Risk of Delivery Level: High The risk has been assessed as <i>High</i> due to the ongoing fluidity of the deployment plan. Every effort is being made, both nationally and locally, to ensure the programme is delivered within the required timescales and that further delays are avoided.	
Electronic Prescribing and Medicines Administration (ePMA)	Risk of Delivery Level: Low / Medium The risk is assessed as <i>low to medium</i> due to the current progress in deployment and the presence of an agreed implementation plan. However, operational concerns remain around user adoption, system configuration, and assurance of clinical safety, which require ongoing monitoring and support.	
Patient Flow / eObservations	Risk of Delivery Level: Low / Medium Phase 1 has been delivered, and the programme is now looking to complete Phase 2 of patient flow and begin the readiness work for eObservations	
Hybrid Print and Post	Risk of Delivery Level: Low / Medium The risk is assessed as <i>low to medium</i> based on data quality issues, incomplete patient contact information, postal delays for short-notice appointments, inconsistent process adherence and potential resistance to change. Mitigation requires improved data governance, staff training, and maintaining alternative communication channels for patients.	
Maternity System (BadgerNet)	Risk of Delivery Level: Medium The risk is assessed as <i>medium</i> but contingent on closing supplier documentation items, securing integration timelines, protecting training and clinical engagement capacity, and tightening programme-level governance with national partners.	
Eye Care System (OpenEyes)	Risk of Delivery Level: Medium The risk is assessed as <i>medium</i> based on the timescales of implementation by 31 March 2026 . Progress at Swansea Bay UHB provides a workable blueprint, but HDdUHB's delivery still hinges on near-term design choices (notably prescribing), recruitment, and national dependencies (hosting, interfaces, and electronic referral systems).	



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Programme	Risk of Delivery Level:	
Switchboard Modernisation	<p>Risk of Delivery Level: Medium</p> <p>The risk is assessed as <i>medium</i> based delivery is exposed to near-term risks around rota standardisation and training, infrastructure resilience (power / rooms / Reinforced Autoclaved Aerated Concrete (RAAC) interfaces and maintaining 24/7 operational continuity during phased cutover across sites.</p>	
Paging Replacement	<p>Risk of Delivery Level: Medium</p> <p>The risk is assessed as <i>medium</i> as successful delivery hinges on tight sequencing with switchboard and alarms modernisation, estates readiness (power/rooms), supplier lead-times, and a zero-harm cutover plan that preserves emergency cascades throughout.</p>	
Telecomms Modernisation	<p>Risk of Delivery Level: Low</p> <p>The risk is assessed as <i>Low</i> as all sites have been migrated onto the new telephony system. Work is continuing on rolling out the softphone approach.</p>	