



**PWYLLGOR DIGIDOL, DATA AC ARLOESI
DIGITAL, DATA AND INNOVATION COMMITTEE**

DYDDIAD Y CYFARFOD: DATE OF MEETING:	22 July 2025
TEITL YR ADRODDIAD: TITLE OF REPORT:	Update on the implementation of Patient Flow and eObservations
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Huw Thomas, Executive Director of Finance
SWYDDOG ADRODD: REPORTING OFFICER:	Anthony Tracey, Digital Director Carolyn Williams, Head of Digital Innovation & Transformation

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Er Sicrwydd/For Assurance

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

The purpose of this report is to provide an update to the Committee on the implementation of the Electronic Patient Flow and Electronic Observation (e-Flow & e-Obs) project. The Full Business Case (FBC) was approved by Board in September 2024, and the contract with the successful supplier, Alcidion, was signed in February 2025.

Cefndir / Background

Patient flow is the movement of patients through a healthcare facility, which involves the medical care, physical resources and internal systems needed from admission to discharge. Poorly managed patient flow in hospitals is associated with long wait times, overcrowding in A&E, and inefficient scheduling in surgical departments. Poorly managed patient flow can lead to adverse health outcomes, including increased re-admissions and mortality rates. Optimising patient flow management can help best utilise limited resources, ensure patients move through care pathways efficiently, and reduce the length of hospital stays.

E-Observations technologies can automatically capture and analyse patients' vital signs and notify clinicians when required. This automation of routine tasks can free up time to enable better patient care, increase accuracy in capture and transmission of information and improve decision-making.

The deployment of new technologies to support patient observations and patient flow aligns with the strategic goals of the Health Board, both locally and nationally. It focuses on improvements towards a more digitally mature healthcare system in Wales, with the aim of enhancing patient safety.

The e-Flow & e-Obs Full Business Case was presented to Board in September 2024 and was approved. A contract was awarded following a competitive procurement process to the successful supplier, Alcidion.

Asesiad / Assessment

Project Progress

The Digital Team, alongside the Health Board's strategic partner CGI, have been ensuring all stakeholders are familiar and supportive of the deployment plan and associated timeline for the project. The deployment plan (Appendix 1) has been ratified by the E-Flow & E-observations Steering Group. As it stands the project is still **on track** to commence Go Live by November 2025. A summary of recent activity and key risks that are being carefully managed are provided below:

The Digital Team have been working collaboratively with the project teams in CGI and Alcidion and regularly meet to discuss outstanding actions, identified risks and any dependencies to ensure the project continues to progress accordingly.

The teams have delivered a number of workshops with key stakeholders to produce the local configuration requirements for the patient journey boards which display key information to enable the safe tracking and monitoring of tasks to improve patient flow and outcomes. To date these have covered:

- Adult Acute Journey boards
- Paediatrics Journey boards
- Community/Integrated care Journey Boards
- Internal referrals therapies

Further workshops are planned during July 2025 focusing on the key priority areas and validating that the feedback collated to date correctly reflects both clinical and operational requirements:

- Surgical / Day case / Endoscopy Journey boards
- Critical Care
- Mental health
- Virtual Ward mapping

The installation of Digital Whiteboards across the acute sites is in the later stages of preparation, prior to installation over the summer period. The interactive whiteboards will assist with ward huddles and the Multi-disciplinary team approach to progressing the tasks associated with patient flow across the organisation.

The Digital Team is actively collaborating with the Informatics Nursing and Senior Nursing teams to define a clear and clinically safe approach for capturing electronic observations using the Miya solution. This includes agreeing on which observations and assessments will be recorded within Miya and which will continue to be documented in Welsh Nursing Care Record (WNCR), ensuring streamlined workflows and avoiding duplication. As part of this process, the Health Board is also reviewing and agreeing on the National Early Warning Score (NEWS2) policy to support consistent and safe escalation across all clinical areas. This work is currently under review, with input from key stakeholders and the final approach into the wider implementation and rollout plan.

In terms of the technical developments this is **on track** and the test environment is now fully operational and access to HDdUHB staff has been provided. This has facilitated demonstrations to colleagues and provided reassurance that the project is progressing at pace.

Risks and Issues

The implementation of the e-Flow & e-Obs project is a significant step towards enhancing patient care and operational efficiency within the Health Board. However, as with any large-

scale digital transformation initiative, there are several risks and challenges that need to be carefully managed to ensure the project's success. This section outlines the key risks and challenges identified to date, along with the mitigation strategies to address them. These include challenges related to digital inclusion, business change and communication, bed configuration maps, integration, the role of ward clerks, and benefits realisation. By proactively addressing these risks and challenges, the project team aims to ensure a smooth transition to the new systems and maximise the benefits for both staff and patients.

- **Digital Inclusion**

To ensure all staff feel confident, supported, and included in the transition to digital systems, a range of targeted initiatives have been implemented to build digital readiness and inclusion across the organisation.

All managers are being asked to complete the Managers' Digital Skills and Confidence Readiness Checklist to assess their teams' digital preparedness. The results are scored using a matrix and shared with the Digital Inclusion Team to identify early support needs. This data is also captured in a Power BI dashboard, allowing Project Managers to monitor team readiness and highlight where further Digital Inclusion support or intervention may be required.

The Digital Skills and Confidence Self-Assessment Tool is available for managers to use with their team members to identify individual digital skill gaps and tailor development plans accordingly. Where additional support is needed, a Digital Inclusion Referral Process provides a clear pathway for managers to refer individuals for targeted assistance. The Digital Inclusion Team offers a personalised, targeted approach to support both individuals and teams based on their specific needs.

A variety of resources and support aligned with the Digital Inclusion Framework (0–5 Essential Digital Skills) has been developed to ensure staff have the foundational capabilities needed to confidently use digital systems. A Managers' Toolkit is also available to assist leaders guide and support their teams through their digital journey.

To ensure all clinical managers have assessed their teams' digital readiness ahead of rollout, proactive walkarounds are being scheduled across all sites. These will be targeted specifically at managers who do not engage with the initial request to complete the Digital Readiness Checklist. The walkarounds will provide an opportunity to understand barriers, support completion of the checklist, offer hands-on assistance, and identify potential Digital Inclusion Champions. This targeted engagement is part of the wider plan to ensure all teams are prepared by September 2025.

- **Business change & communication**

As part of the business change and communications strategy, a comprehensive engagement approach has been developed to align stakeholders and set clear objectives for implementation. A detailed communications plan has been developed and shared with key groups which includes the Communications Team, Digital Inclusion and Senior Digital Team for review and approval. Communication channels such as SharePoint pages, Medical/Nursing newsletters and staff social media pages including other resources will be finalised in collaboration with the Communications Team to ensure consistent and accessible messaging across the Health Board.

A strong emphasis has been placed on Digital Inclusion, ensuring all staff can engage with the change, regardless of digital literacy levels. To support adoption and feedback, identification of super users and champions with the support of the Informatics Nurses and

Clinical Site Leads who will act as advocates will be required, providing insights and assisting with the coordination of training with users.

- **Bed configuration maps**

A critical requirement for configuring the patient flow functionality within the Miya Flow system is the availability of accurate bed location maps for each ward. Previously, the lack of up-to-date ward maps including details such as isolation and gender specific beds posed a risk to the project timeline due to frequent ward reconfigurations. However, the supplier is now able to work directly with the Health Board's existing Computer-Aided Design (CAD) designs incorporating input from ward managers and site leads to accurately configure the bed maps required for Miya. This collaborative approach significantly reduces the need for manual mapping and will be integrated into the project rollout plan, with prioritisation of wards and timelines being coordinated between the Digital Team and Alcidion project team.

- **Integration**

There is a potential for delays if integration challenges arise, particularly with systems such as the Welsh Patient Administration System (WPAS), which require coordinated support. To mitigate these risks, the Digital Team, in collaboration with CGI, is holding regular meetings with representatives from Digital Health and Care Wales (DHCW) to monitor progress, address challenges proactively, and ensure successful system connectivity. Testing is scheduled over the summer months to validate that connectivity and data feeds are functioning as required.

- **Supporting Roles**

As part of the configuration discovery phase for the solution, meetings were held with other Trusts that have implemented the E-flow system to explore various deployment approaches. These discussions identified the Ward Clerk role as a key factor in ensuring timely updates to local PAS systems, particularly regarding ward admissions and discharges that feed into E-flow. It was noted that this role is not consistently covered on a 24/7 basis across the Health Board. This matter has been escalated to the programme's Senior Responsible Owner (SRO) for discussion as an operational team, to explore options for maintaining real-time data updates in WPAS and ensuring the E-flow system operates efficiently to support patient flow.

Benefits Realisation

Benefits realisation activities have been underway to collect baseline data and current state process maps across the Health Board. Approximately 60% of baseline data has been gathered and documented, with the remaining to take place in July and August. This will provide the Health Board with a structured approach to measure the impact of the project moving forward.

The current state process maps have been used to visualise and identify inefficiencies, streamline workflows, identify ways to improve communication, and establish a foundation for future improvements and innovation. Workshops were held in June and July for operational staff to review future state process maps including Therapy Referrals, Internal Referrals, Virtual Wards, Transfers, Repatriations, Site Flow Meetings, Discharges, and Recording and Monitoring Observations.

Governance

The e-Flow & e-Obs programme delivery group commenced on 24 of April and has continued to meet on a monthly basis to ensure the programme is on track. Membership includes representation from all Clinical Group areas and operational colleagues along with Subject

Matter Experts (SME's) to ensure all aspects of delivery have the appropriate oversight. Updates and risks are provided to Integrated Quality, Financial Performance and Delivery Group on a regular basis along with the attendance at various other Health Board Acute and Urgent Emergency care workstream meetings. The project is also regularly reviewed by the Digital Programme Governance Group ensure any risks or issues are appropriately managed and escalated where required.

In conclusion, the implementation of the Electronic Patient Flow and Electronic Observation (e-Flow & e-Obs) project represents a significant advancement in enhancing patient care and operational efficiency within the Health Board. The collaborative efforts of the Digital Team, strategic partners, and key stakeholders have ensured that the project remains **on track for its Go Live date in November 2025**. By addressing the identified risks and issues proactively, the project team is committed to ensuring a smooth transition to the new systems.

Argymhelliad / Recommendation

The committee is asked to

- **NOTE** the content and progress to date
- **TAKE ASSURANCE** that the project is **on track** to deliver to its timescales.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	2.1.2 That the organisation is discharging its responsibilities with regard to the quality and integrity; safety, security and appropriate access and use of information and data, to support health improvement and the provision of high-quality healthcare. 3.1.11 Seek assurance on the development, procurement and implementation of national and local digital systems.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Not available
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	7. All apply 1. Safe 2. Timely 5. Equitable
Galluogwyr Ansawdd: Enablers of Quality: Quality and Engagement Act (sharepoint.com)	3. Data to knowledge 4. Learning, improvement and research 5. Whole systems perspective
Amcanion Strategol y BIP: UHB Strategic Objectives:	3. Striving to deliver and develop excellent services 5. Safe sustainable, accessible and kind care 6. Sustainable use of resources
Amcanion Cynllunio Planning Objectives	6 Clinical services plan

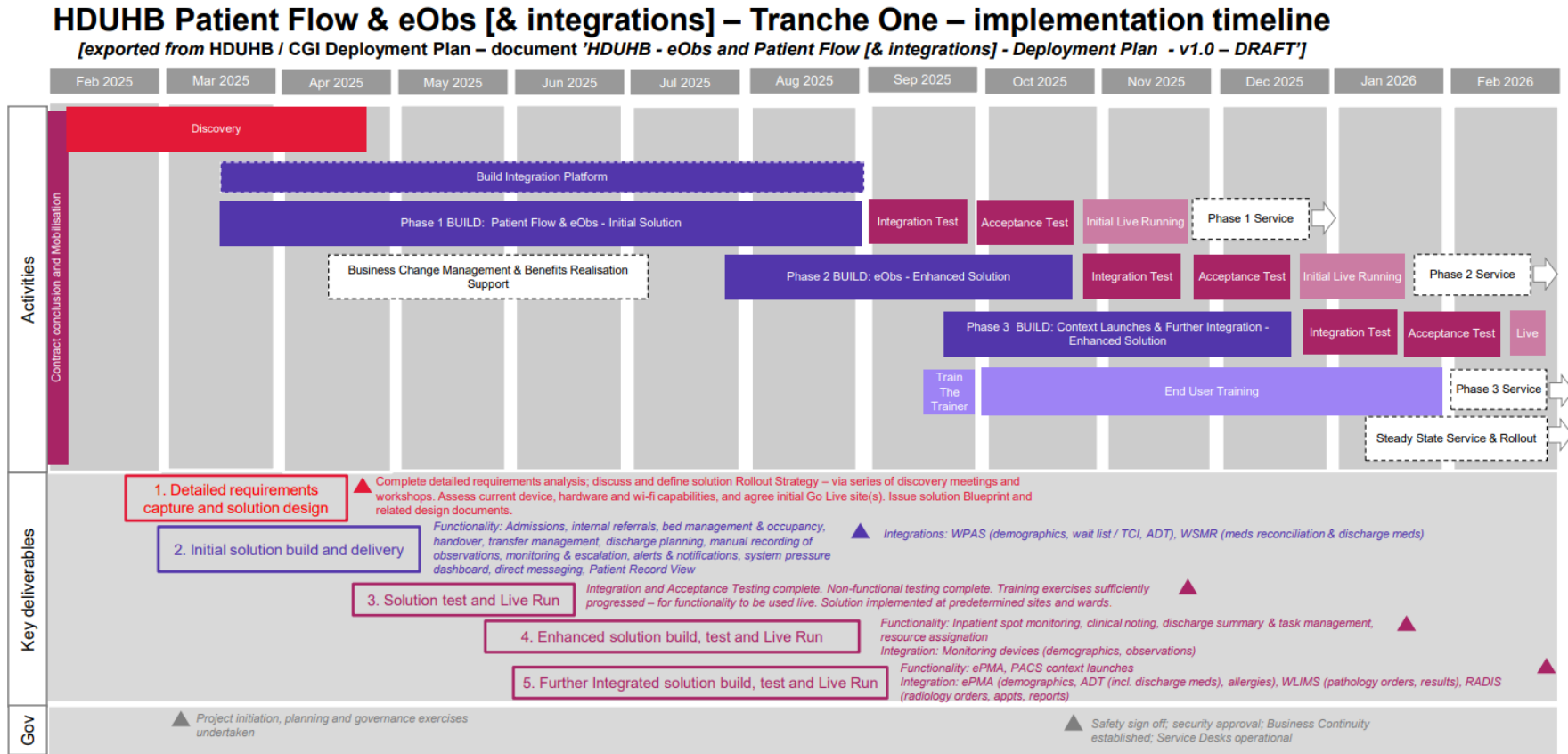
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	10. Not Applicable

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	N/A
Rhestr Termiau: Glossary of Terms:	e-Flow – electronic flow e-Obs – electronic observations SRO – Senior Reporting Officer
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Digidol, Data ac Arloesi Parties / Committees consulted prior to Digital, Data and Innovation Committee:	Executive Board E-Flow & E-obs Steering Group IQFPD Group

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	The introduction of the patient flow system will have benefits not only the staff, patients, but will improve efficiencies of the wards and staff. Releasing more time for staff to treat patients. A full business case has been assessed and approved by the Board.
Ansawdd / Gofal Claf: Quality / Patient Care:	The lack of a patient flow system presents a significant risk to patient safety and negatively impacts staff, who are working under extreme pressures. There is a clear need to improve efficiencies, particularly with regards to managing patient flow, and introducing technologies to support staff are a first important step in this journey
Gweithlu: Workforce:	The improvement in digital solutions will provide efficiencies for staff, who will be able to see the right information at the right time when treating the patient. The combination of approaches and system will also reduce the effort required to transcribe as system will be fully integrated.
Risg: Risk:	A risk log is in place with mitigating actions . Risk are reviewed monthly as a minimum but weekly project meetings consider and add or remove risks as appropriate
Cyfreithiol: Legal:	The introduction of these systems could lead to a reduction in legal claims due to the reduction errors.

Enw Da: Reputational:	Having resilient and robust systems for the treatment of patients will enhance the reputation of the Health Board and will also improve opportunities to recruit.
Gyfrinachedd: Privacy:	A DPIA has been completed and is currently with the Information Governance team for review
Cydraddoldeb: Equality:	An equality impact assessment has been completed. There were no negative effects identified. Positive points included that icons are used on Electronic Whiteboards that can be customised to include icons for disabilities and other conditions that will provide alerts to clinicians to any additional needs required within the patient's treatment or stay. Information is consistent across systems and the digital boards will have the ability to discreetly manage information.

Appendix 1: HDUHB – eObs and Patient Flow [& integrations] – Tranche One Timeline, Milestones & Dependencies –



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