




COVER SHEET

Meeting and Date of meeting	TRUST BOARD Thursday 5th April 2025	
Title of paper	<i>Encompass Programme Update</i>	
Accountable Director	Name	<i>Siobhan Hanna (presented at Trust Board by Heather Trouton, Associate Director)</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 <i>(Notes on completion at end of document)</i>	
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 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 less than 60 days away from going live with encompass, the Regional Health and Care Record, on 8th May 2025. In line with the Programme Plan, a 60 day Go Live Readiness Assessment (GLRA) was held on Wednesday 5th March 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 further progressed at this stage than the Northern Health and Social Trust (NHSCT), which had a very successful implementation.

The Regional encompass Team and Epic colleagues provided a debrief following our GLRA and provided advice on critical areas of focus to ensure that we are on track for our 30 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 2 months is acknowledged and is not underestimated.

3. Areas of improvement/achievement:

Overall, the Trust is on track with encompass implementation and is further progressed at this stage than the previous 3 implementing Trusts:

GLRA 60	SET	Belfast	Northern	Southern
Green	12%	11%	38%	41%
Red	35%	5%	8%	4%
Amber	53%	84%	54%	55%

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		Command Centre / Help Hubs
	Surgery & Clinical Services		Medical Device Integration		Training & People Readiness
	Adult Community Services		Electronic Migration and 3rd Party Systems		Super Users & Floor Walkers
	Mental Health & Disability		End User Devices, TDR and Help Desk and Support		Bedded Cutover - Acute
	Children & Young People Services		Reporting & Data Quality		Bedded Cutover - Community
	Pharmacy		Benefits		Activity Downturn & Stabilisation
	Executive Directorate of Nursing, Midwifery, AHP's, Functional Support Services & IPC		Admin Assurance		Patient Flow Planning
	Medical / Digital Clinical & Social Care Safety		Business Continuity & Emergency Planning		Manual Data Migration
			Finance		
			Pathway Review / Change Impact		
			My Care		
			NIPACS+		
			Corporate Communications & Trust Visuals		

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 30 day GLRA are:



In 5 of these 6 areas, the Trust is in a strong position and is on track, or at 'watch' status:

- Data Migration – GREEN
- Deployment of End User Devices – GREEN
- Technical Dress Rehearsal - GREEN
- Bedded Cutover – GREEN
- HRPTS role alignment – GREEN

Our area of risk, as outlined in 3.5, is staff training. At this stage, the Trust's position is as follows:

- All Users enrolled and or trained excluding affiliates = 90.1%
- End Users registered for training = 87.3%
(We need to aim for 90%-95% of EUs enrolled/trained).
- Super Users enrolled or trained = 96.9%

- Affiliates (bank staff only at present) enrolled or trained = 40.4% (target is 50% by 27 March)

Epic colleagues have recommended that for GLRA 30, the Trust focus is on risks to go live in the above 6 areas and local operational issues are not included on the GLRA templates. Local operational issues that impact on go-live readiness should be managed through normal Trust governance structures.

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

Siobhan Hanna
Encompass Programme Update
March 2025

#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 that the Trust is making progress in line with the Programme Plan and is managing risks and issues appropriately.

The Trust is now less than 60 days away from going live with encompass, the Regional Health and Care Record, on 8th May 2025. In line with the Programme Plan, a 60 Day Go Live Readiness Assessment (GLRA) was held on Wednesday 5th March 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 further progressed at this stage than the Northern Health and Social Trust (NHSCT), which had a very successful implementation.

The Regional encompass Team and Epic colleagues provided a debrief following our GLRA and provided advice on areas of focus to ensure that we are on track for our 30 Day GLRA, which will be our last 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 and Support Services over the next 2 months is acknowledged and not underestimated.

2.0 Summary of Current Position

Overall, the Trust is on track with encompass implementation and is further progressed at this stage than the other 3 Trusts that have already gone live, as follows:

GLRA 60	SET	Belfast	Northern	Southern
Green	12%	11%	38%	41%
Red	35%	5%	8%	4%
Amber	53%	84%	54%	55%

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		Command Centre / Help Hubs
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	Children & Young People Services		Reporting & Data Quality		Bedded Cutover - Community
	Pharmacy		Benefits		Activity Downturn & Stabilisation
	Executive Directorate of Nursing, Midwifery, AHP's, Functional Support Services & IPC		Admin Assurance		Patient Flow Planning
	Medical / Digital Clinical & Social Care Safety		Business Continuity & Emergency Planning		Manual Data Migration
			Finance		
			Pathway Review / Change Impact		
			My Care		
			NIPACS+		
			Corporate Communications & Trust Visuals		

3.0 Factors Contributing to RAG Status

Each Readiness Owner outlined in detail their risks and challenges, at the 60 Day GLRA. Some were specific to the workstream, however, there are 6 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. All teams have commenced their 'build' workshops, however, some builds remain off track with weekly meetings in place ensure they are complete and tested prior to go-live. This has contributed to an amber rating for most Directorates and Divisions.

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 gap in availability of Regulatory reports at this stage has contributed to an amber rating for most Directorates and Divisions. This is a Regional issue affecting all Trusts and a Regional Task and Finish Group has been established with Epic being held to account to provide more resources to address the gaps in reporting required to fulfil both our statutory duties but also our operational requirements. However, the Trust should expect to have challenges with reporting for a period after go live, based on other live Trusts experience. This is acknowledged by Department of Health and SPPG colleagues.

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 has to be some critical data manually input. Data that migrates electronically also has to be tested for accuracy after it is migrated. Resources are required to undertake manual data migration. These staff need to be identified now and trained in advance of go-live to

ensure that the critical data is in place by 8th May 2025. The majority of staff who will undertake manual data migration have been identified, however, there are a few areas where Directorates are concerned about having the staffing capacity to undertake manual data migration activities. This has contributed to an amber rating for some Directorates and Divisions. Manual Data Migration sub-groups continue to work through issues and the Senior Leadership team have approved overtime in order to address this.

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.

3.5 Training

At this stage, Epic (System Supplier) expect all staff to have enrolled for their training. This is because:

- a) If all staff have been trained, this will lead to a smoother go-live for everyone. Having 1-2 staff in a team who are not trained is disruptive for the entire team, as they have to spend time supporting those who are not familiar with the system.
- b) Early training allows staff time to attend 'user labs' which are hour long, bite sized, training sessions, facilitated by a 'Superuser' who will walk through specific work tasks on encompass, such as ordering bloods, or completing fluid balance sheets, so that staff get practice on doing this before go live. This will significantly help build staff confidence in preparation for go live.
- c) Staff cannot get logins to the system until they have undertaken training. If they do not do this until go-live, there will be delays in staff ability to do their job, as they will be unable to get a login

password until their training has been completed. This may take up to 4 days.

The Trust has made a decision that until we reach 90% of all staff registered for training, we will continue to assess ourselves as RED, as training is so critical to a smooth go-live. Significant progress is being made by Directorates who are holding Line Managers and individual staff accountable for training enrolment. A real time App has been provided to Directors, Assistant Directors and Heads of Service to allow them to track registration and training, which is now done across the Trust on a daily basis. Work is also underway to ensure that all affiliate staff (bank, agency, locum) are trained before go-live, however, just in time training will be available on the 6 Help Hub sites at go-live.

3.6 Operational Pressures

As we get closer to go-live, the encompass programme places increasing pressure on Operational Directorates to engage on encompass readiness and preparedness activities. This is challenging all services. The Senior Leadership Team have been making decisions to attempt to ease burden on Managers and Staff. Decisions have been made on reducing the burden of meetings across the Trust, such as reduced attendance, paper lite meetings, attendance for specific agenda items, temporarily standing down meetings etc. The Senior leadership team has also approved overtime for staff for encompass activities for the period 1st February 2025 – 8th May 2025.

4.0 Recommendations from Regional encompass Team and Epic

Following our 30 Day GLRA, Epic and the Regional encompass Team have recommended that we focus on the risks that require the attention of the entire team, i.e. Trust, Department of Health, DHCNI, SPPG, encompass Regional Team and Epic, for our 30 day GLRA. Epic have defined 6 critical areas to focus on for a successful go live as follows:



In 5 of these 6 areas, the Trust is in a strong position and is on track, or at 'watch' status:

- Data Migration – GREEN
- Deployment of End User Devices – GREEN (*NB – amber at GLRA but now Regionally assessed as green*)
- Technical Dress Rehearsal – GREEN (*NB – amber at GLRA but now Regionally assessed as green*)
- Bedded Cutover – GREEN – our first dry run took place as follows:

Date	Location	Time
Wednesday 19 th March	Daisy Hill Hospital	8am – 2pm
Wednesday 19 th March	Craigavon Area Hospital	2pm – 8pm
Thursday 20 th March	Craigavon Area Hospital	8am – 2pm
Thursday 20 th March	Bluestone	2pm - 8pm
Friday 21 st March	Lurgan and South Tyrone Hospitals	8am - 2pm

- HRPTS role alignment – GREEN

Our area of risk, as outlined in 3.5, is staff training, which is currently as follows:

- All Users enrolled and or trained excluding affiliates = 90.1%
- End Users registered for training = 87.3%
(We need to aim for 90%-95% of EUs enrolled/trained).

- Super Users enrolled or trained = 96.9%
- Affiliates (bank staff only at present) enrolled or trained = 40.4% (target is 50% by 27 March)

Epic have recommended daily monitoring of training registration by all Line Managers until this target is achieved, with those who have not registered for training supported by their line managers to do so without further delay. This approach has been implemented and Directors and Assistant Directors have an App available to see real time data and are monitoring this daily. Improvements are being noted daily and we are confident that this target will be achieved.

Epic colleagues have recommended that for GLRA 30, the Trust focus is on risks to go live in the above 6 areas and local operational issues are not included on the GLRA templates. Local operational issues that impact on go-live readiness should be managed through normal Trust governance structures.

Epic advice is to risk rate as follows:

GREEN – there is an issue, but it is being managed effectively and will be resolved prior to Go live

AMBER – there is an issue which is being managed and monitored very closely and may require escalation if plans go off track

RED – this is a risk to successful go-live on 8th May 2025 and requires the full attention of all stakeholders to resolve to ensure safe go-live

Epic suggest that this approach will allow the Trust's Senior Leadership team to focus on the top risks.

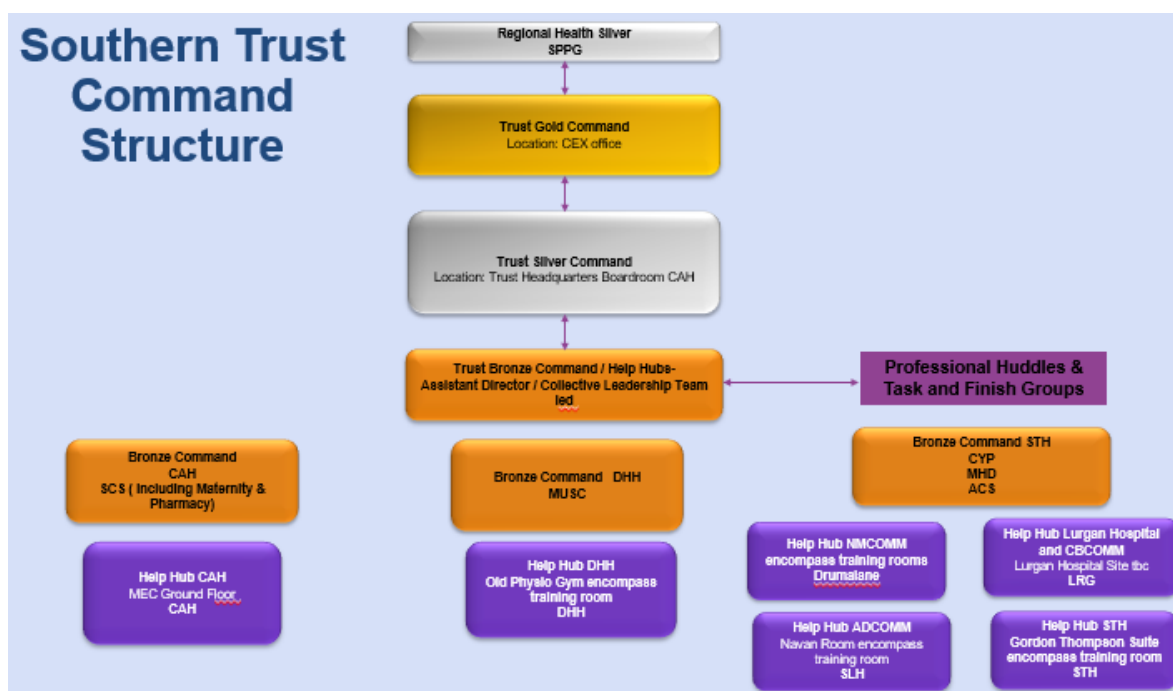
Senior leaders across the Trust have been briefed on this advice.

5.0 Next Steps

The Trust is currently at 'Go-Live Planning' Stage. A go live Planning Committee has been established and is Chaired by Mrs Margaret O'Hagan, Director of Transformation and Improvement. This group meets every fortnight and oversees the following subgroups:

Go-Live Planning Committee		
Sub-Groups	Purpose	Lead
Command Centre & Help Hubs	Set up command & support operating model to oversee Go-Live and following weeks	S Hanna
Superuser & Floor Walker Support	Ensure appropriate number of staff identified, trained and "Super" to actively support / trouble-shoot Go-Live and following weeks	H Trouton
Help Desk & Tech Support	IT / Tech support process during Go-Live and following weeks	M Toal
Bedded Cutover - Acute	Manual data input of clinical information for acute and non-acute inpatients – logistics and planning	H Trouton
Bedded Cutover - Community	Manual data input of clinical information for community bedded patients – logistics and planning	F Fegan
Manual Data Migration	Manually migrating data for Go-Live which cannot be migrated electronically	S Hanna
Activity Stabilisation	Agreeing, overseeing process to ensure downturn of activity during Go-Live and following weeks is minimal and BAU is established ASAP	D Livingstone
Patient Flow Planning	Organise Patient Flow Readiness events to demo patient movement workflows	G Martin
Training & Provisioning	Ensuring all staff are trained and appropriately provisioned to operate the system for Go-Live	M Williamson
Go Live Readiness Assessments (GLRA)	Planning and Organising Go Live Readiness Assessment Events and ensuring accurate assessment of risks	Siobhan Hanna

The Trust is on track with Go Live Planning and the following structure has been agreed:



An overview of the Command Centre Structure is as follows:

- ❖ encompass Go-Live will be managed through a command and control process of issue management and escalation
- ❖ The Help Hubs, Bronze, Silver, and Gold command teams will ensure that issues are reported, escalated and managed effectively
- ❖ The flow of information, up and down, and routes for escalation and resolution of issues will be managed within the established structure and will be applied across the Regional and Local Command structures
- ❖ The majority of senior leadership across the Trust will have a role in a Bronze, Silver, or Gold
- ❖ Gold Command will regularly review progress and make decisions on whether to step down the response by reviewing operational performance, helpdesk metrics and overall issue resolution. Structures may be altered in the course of the 4-week Go-Live period, as required
- ❖ There will also be a Regional Command to monitor, support, and quickly resolve system issues with encompass.

The Command Centre will also be supported at the front line by:

Super Users	Floor Walkers	Technical Floor Walker	encompass Help Desk
<ul style="list-style-type: none">Internal and regional Trust members of staff, released as supernumery to support their colleaguesDiagnosing issues 'at the elbow' and proactively providing workflow support where end users may be struggling.	<ul style="list-style-type: none">Epic trained staff from other live sites (including the UK), Epic and staff from within the regional encompass teamLikely to be experts in specific areas/applicationsApplication support/'At the elbow' support for end users	<ul style="list-style-type: none">Support system & technical issues at the elbow & in HubsProvide feedback to encompass team on common issues, concerns and assistance needed	<ul style="list-style-type: none">Expert staff to run the help deskIn depth knowledge of workflows, who can resolve 'how to' queries that are submitted to the help desk

We have started to plan rotas for our command centres, including engagement with staff on their roles, and also plan communication on our 'soft go live', which is when we start to use encompass for manual data migration, future patient and client encounters, get our patients and clients into beds, both in acute and community and also our virtual beds

in Acute Care at Home and Home Treatment Crisis Response. A summary of 'soft live' milestones is as follows:



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 £43,600 and is therefore on track. Budgets for 2025/26 are currently being formalised by the Regional encompass team and DHCNI.

7.0 Conclusion

Whilst the encompass programme is extremely challenging, our 60 Day Go Live Readiness Assessment held on 5th March 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.