

Meeting Details:	Trust Board – 4 September 2025	
Details.		
Director:	Teresa Molloy, Director of Planning, Performance & Corporate Services	
Issue Title:	Encompass Project – Update Briefing: Western Trust Stabilisation of encompass "post-go-live"	
Indicate the connection with the Trust's Mission and Vision	 X People who need us feel cared for X People who work with us feel proud X People who live in our communities trust us 	
Indicate the	X Quality and Safety	
link to Trust's strategic priorities	□ Workforce Stabilisation	
•	X Performance and Access to Services	
	X Delivering Value	
	X Culture	
Summary:	The encompass system went live as planned for Western and Southern Trust at 4am on 8 May 2025, completing the roll out programme for encompass in NI.	
	Trust has now moved to Stabilisation Phase, and this update to Trust Board reflects the areas of work underway to support stabilisation, and the current status of stabilisation of operational services, within each Service Directorate.	
Governance –	Governance and Oversight	
Stabilisation Phase	A weekly encompass Stabilisation and Programme Board was established immediately post go-live to oversee progress and escalate any concerns or issues that may arise. This is Chaired by the Chief Executive with CMT as members, supported by the encompass PMO, began meeting weekly once the "command and control" structures over go-live were stood down. These are now moving to fortnightly meetings as confidence in stabilisation of services grows.	
	Directorate Operational Readiness Boards (ORBs) have transitioned to become Directorate Stabilisation Boards with each Director as Chair. These meetings review training, reporting, risks, issues, lesson learned and activity stabilisation.	
	A number of stabilisation workstreams have been stood up to monitor and report on areas of concern, progress, risks and issues, which are escalated to the encompass Stabilisation and Programme Board (Appendix 1).	



Post Live Readiness Assessment (PLRA):

The Trust held a PLRA on 1 July 2025, in line with normal practice in other Trusts. This was similar to the previous Go Live Readiness Assessments (GLRAs) and was an opportunity for each Directorate to highlight their top 3 risks and their mitigations, and seek support from the central encompass team and EPIC. This event was also used to share ideas, solutions, and showcase examples of particular achievement which services were proud of. Regional encompass SMT and staff from EPIC and the encompass regional team participated in the PLRA.

It was agreed that escalated issues without a resolution path would transfer to the Trust's Project issues log to assure ongoing monitoring of progress. The Trust PMO and Professional Leads are working closely with the regional team and attend a Joint Issues Forum to have oversight of all issues and ongoing resolution.

7 key areas were highlighted during PLRA, which are being monitored: -

Community and Olde		<u>, </u>			
Intermediate Care	Manual Handling Risk Assessment requires a structured document to be agreed regionally	Sep-2025: Work ongoing regionally to standardise as affecting all Trusts			
	Process for ordering complex drugs needs to be simplified for Hospital at Home	Sep-2025: Short term solution in place and regional meetings taking place as affecting all Trusts			
	Short NISAT should be prepopulated	Sep-2025: Work ongoing regionally as affecting all Trusts			
	AHP staff working across different workflows for Rectory Fields and William Street	Sep-2025: Meetings have taken place to review workflows			
Surgery, Paediatrics and Women's Health					
Maternity and Gynae	Issues with GE ViewPoint causing increased appointment duration and user dissatisfaction	Sep-2025: Meeting being arranged with GE to discuss options			
	Consultant specialist clinics low frequency resulting in service slow to re-build	Sep-2025: At the elbow support requested			
Unscheduled Care, M	edicine, Cancer and Clinical Services	S			
Oncology	Staff feel that they require more at the elbow support	Sep-2025: Further progress has been made within Oncology with support from encompass and Epic			
Professional Nursing	and AHP Services				
AHP Services	AHP provider and department mapping issues	Sep-2025: Working progressing with regional encompass team and Epic			
Human Resources					
People Transition	People Transition Working Group to be established and consider impacted roles	Sep-2025: People Transition Working Group established July 2025			
	e and Corporate Services				
Business Continuity	Preparedness in event of unplanned downtime	Sep-2025: mapping of services and devices completed with vFires sent to regional encompass team for action			
Reporting	Requires continued scrutiny to ensure confidence in data	Sep-2025: regional service specific report training with services during summer 2025, local reporting 'sprints' underway with services to identify & resolve gaps in available reports			



Training

Training to improve beyond the required level of competency and improve familiarisation and efficiency of staff has continued with a recent focus on 'Thrive' training. This is post live efficiency training which is reported to improve system/user efficiency by one hour per week. This was offered to a selection of staff for onward dissemination. Encompass Thrive Training ended on 4 July 2025 with 739 staff attending over the 3 week period. Overall approximately 60% of places were availed of and therefore some classes were recorded to allow staff unable to attend to avail of support at a later date. Medical secretaries, pharmacy, AHPs, Community Nurses and Social Work staff groups all reached above 90% attendance.

The Trust experienced its first Junior Doctor and student Nursing intake, and HR/DSD put measures in place to ensure all received training and appropriate systems access to work in the Trust.

A plan is being developed to revisit the training model over the next 12-18mth period, particularly for "movers", and taking account of the high levels of system competency in teams when a new recruit joins the Trust. A training sub-group of the regional People and Workforce Planning group is now working to design this, with Trust leads working closely with the regional encompass training team. There is agreement that a longer term training strategy is needed, which learns from the developments and feedback from staff since the first go-live in NI. It is anticipated that there will be a regional training strategy in place early next year.

Helpdesk and Technical issues

The Trust receives a weekly Helpdesk Update from the regional team which summarises all of the "tickets" raised by Trust staff grades by severity, and monitors the performance of the local Digital service Team in the Trust and the regional team, in ticket resolution.

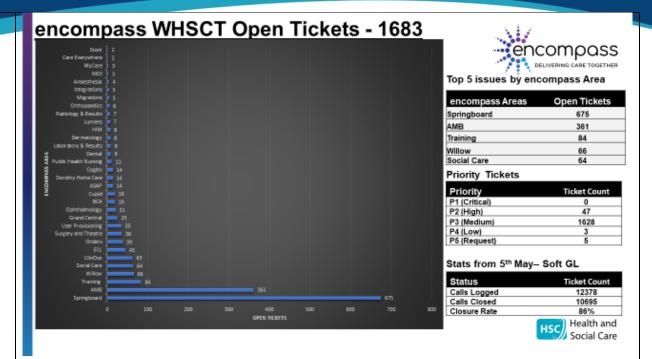
The updated position is reported at encompass Stabilisation and Programme Board and the most recent report is provided below as an example of the reporting approach:

Local Service Desk tickets logged as @ 15 August 2025



Regional Service Desk tickets logged as @ 17 August 2025





The two areas with most open tickets for Western Trust are Springboard and AMB:

- Springboard is the collective term used for Patient Booking and Administration services
- AMB relates to Ambulatory and the requests relate to Outpatient Clinics

Current Activity Stabilisation Position

Data validation post encompass implementation has proven to be a significant task for all Trusts. Western Trust and Southern Trust are still in the post go live Activity Stabilisation phase of encompass (until in November 2025), which prioritises the recording of activity data to the correct area of the encompass system to ensure that future reporting from the system is accurate. Activity Stabilisation is monitored at the meetings of the encompass Stabilisation CMT.

The Trust's Performance and Informatics Team embarked on a significant programme of work to track activity against pre-encompass baseline data which entailed daily/weekly analysing and validating Hospital and Community patient level data. This also included a series of collaborative formal and informal investigatory meetings with encompass, Epic and Trust Services to gain an understanding of why activity data is appearing to be off-track (over or under performing), identify issues and agree recommendations to support recovery. This approach will continue on a regular basis until such time that activity data stabilises and the Trust is reporting a high level of confidence in the epic system data.

The table below lists the Trust Services involved in the collaborative meetings to date, and the current status on key recommendations to support service activity recovery.

Service	Status	
Clinical/Oncology	Completed	
Nephrology	In Progress - work ongoing	
Ophthalmology	Completed	
Gynaecology/Obstetrics	In Progress - work ongoing	
Allied Health Professionals	In Progress - work ongoing	
Paediatric Medicine	In Progress - work ongoing	
Urology	In Progress - work ongoing	
Community Dental	In Progress - work ongoing	



As a result of this collaborative work, a number of key factors and issues impacting on activity levels have been identified, these include:

- System issue e.g. incorrect service mapping, missing service codes/staff etc.
- Data Quality e.g. appointment resolutions, service workflow and adherence.
- Data Standards e.g. change in activity counting day admit vs day admit series, day case moving to outpatients with procedures).

These issues are being addressed through a number of forums and processes, examples of these include Epic/Encompass Service Stabilisation Meetings, Information Standards Group (ISG) Decision Making Group, DHCNI Data Standards Group, Encompass V Fire process, additional training and service tip sheets etc.

Activity Stabilisation is progressing as expected allowing for this significant system change. Based on the activity across Hospital and Community services, there are a number of teams/specialities that are reporting activity over and under when compared to baseline data, this is due to the factors set out above.

A summary of the Western Trust Activity Metrics (Trust wide position) at Week 14 (11th – 15th August 2025) is provided in Table 1 below.

Table 1 : Activity Metrics (Trust Wide) Reporting Date Range: Week 14 : 11th – 15th August 2025

Table 1. Medity medies (Mase Mac) Reporting Bate hange. Tree			
Metric	Actual	Target (Baseline activity)	
Emergency Metrics (DASHBOARD ID – 243864)	RAG Stat	RAG Status: GREEN	
New & Unplanned ED Attendances	2,575 ↑	2,386 ↓	
Planned Review ED Attendances	81 ↑	94 ↑	
12-Hour Breaches	366 ↓	409 ↑	
24-Hour Breaches	208 ↑	200 ↑	
36-Hour Breaches	128 ↑	106 ↑	
Inpatient & Day Case (DASHBOARD ID – 243864)	RAG Statu	RAG Status: AMBER	
Day Case	650	403	
Day Case Series / Regular Attenders	48	533	
Elective Inpatient Admissions	142	122	
Non-Elective Inpatient Admissions	606	542	
Endoscopy (Elective only)	197	126	
Outpatient (DASHBOARD ID – 243864)	RAG Status: GREEN	(Total New & Review)	
Consultant-led & ICATS New	106% (1,354)	100%*(1,282)	
Consultant-led & ICATS Review	88% (2,112)	100%*(2,406)	
Community RAG Status: AMBER		ıs: AMBER	
Adult Mental Health (NIMH) (DASHBOARD ID-215472)	78%	100%	
Child & Adolescent Mental Health Service (DASHBOARD ID-215472)	93%	100%	
Dementia - Data validation ongoing with Trust, Epic and Encompass colleagues to ide	ntify Dementia activity	or±1000000000000000000000000000000000000	
Psychological Therapies (NIPT) (DASHBOARD ID-215472)	96%	100%*	
AHP – New (DASHBOARD ID-105023)	70%	100%	
AHP – Review (DASHBOARD ID-105023)	54%	100%	
Community Dental (DASHBOARD ID-162583)	51%	80%	
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^{*}This refers to services where CMT agreed to exceptions against the Minimum Booking Levels.

Looking ahead:

Governance

A number of workshops have been held to transition governance arrangements and to move operational and corporate services to "Business as Usual". Regionally, Pathway Councils are being stood up, which will be the governing structures for the change and development of the system from a User perspective. The HSC priorities to optimise the system and ensure its capability is maximised are also in discussion.



Benefits

There is an increasing focus coming to bear on benefits realisation, particularly in the current climate where productivity increases are important due to the capacity gaps in services, and where there will be a drive to release cashable benefits. It is critically important to identify and capture the benefits to patient and client care which are also arising in Trusts.

Within the Trust, at this early point, the focus remains on stabilisation, ensuring activity is recovered, and that data validation is a priority in service teams.

The Trust will be participating in regional workshops on the BAU structures which, on an interim basis, Trusts need to adopt to manage the new area of work, once the formal project structures are stood down. The Trust also is understandably keen to identify any early benefits, and take account of the "net new" areas of work arising from the project.

Future 'go-lives'

Further "go-lives" have happened or are in advanced planning including:

- NISTAR, the inter-facility patient transport service for babies, is now live;
- Mortality and Morbidity Pathway is planned to go live in September 2025;
- Healthcare in Prison, which is planned to go live in November 2025; and the
- Child Health system, planned to go live in February 2026.

There remain areas where firm plans are not yet in place to develop further functionality to enable HSC to implement encompass. One of the most important is the implementation of encompass in a large proportion of Family and Child Care Services, through the development of family functionality, and to procure a financials package linked to these services. Moving ahead with this development has proven challenging.

Entirely new areas, which were not in scope at the time of the encompass procurement, will also be considered going into the future. For example EPIC can offer the "Beacon" functionality, for cancer services.

Finally, there is a great deal of interest in the AI capabilities and the testing of the use of AI with encompass in Northern Ireland. This will undoubtedly form part of the development path.

Reporting

Earlier in 2025 the regional encompass team completed a series of Reporting 'sprints' with South Eastern Trust, Belfast Trust and Northern Trust to identify gaps in the central catalogue of reports held in encompass. These 'sprints' have now been extended to Western Trust and Southern Trust to identify remaining gaps in reporting required by the Trusts to facilitate improved reporting for service teams.

In addition, over the summer of 2025 the regional team delivered a series of service specific Reporting training sessions. A new weekly Community Stabilisation meeting was also established for Western Trust and Southern Trust by the regional encompass team to address significant gaps in this area of reporting.

At the same time as the joint Western Trust and Southern Trust go live, HSCNI transitioned to its new regional System Oversight Measures (SOMs) process for



	reporting – replacing the previous SDP process. This transition has and continues to require a high level of additional data validation work to be carried out including numerous ongoing weekly regional meetings.
	The combination of ongoing local data validation & activity stabilisation activities alongside Reporting training & 'sprints' and the move to the new SOMs process has been problematic for the Performance and Information team in terms of workload and in assuring confidence in data and reporting. This has proven to be one of the most challenging aspects of the encompass implementation for all Trusts.
	The work of activity stabilisation and reporting remains a priority for the Performance & Information team alongside service teams.
Response Required	Trust Board is asked to note the update provided.

Appendix 1: Western Trust encompass Governance Structure

