REPORT PREPARED FOR QUALITY & SAFETY COMMITTEE 18.11.20

ONCE FOR WALES IMPLEMENTATION

Date of meeting	18.11.2020

FOI Status	Open/Public

If closed please indicate reason	Not Applicable - Public Report

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Presented by	Greg Dix, Executive Director of Nursing
Approving Executive Sponsor	Executive Director of Nursing

Report purpose	FOR NOTING

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)		
Committee/Group/Individuals	**Date**	**Outcome**
Datix Management Group	28.09.20	SUPPORTED
Health, Safety & Fire Committee	29.10.20	NOTED

ACRONYMS	
ILG	Integrated Locality Group

1.   SITUATION/BACKGROUND

The Once for Wales programme was established 2017 by Welsh Government as part of the response to address the recommendations set out in Keith Evans "The Gift of Complaints" Report.

The programme is aimed at bringing consistency across NHS Wales with regards to the use of electronic tools. Following a successful competitive tender, RLDatix Ltd were awarded the contract. The solution being implemented is known as DatixCloudIQ. Whilst the system will have features that people will be familiar with from our existing system, it will not be Datix as we know it. The new system is a bespoke cloud-based tool which meets the needs of NHS Wales and the implementation of Putting Things Right, through the development of specific functionality such as the Redress Module and Mortality Review process.

Bringing a new approach to how NHS Wales Health Bodies record, monitor and learn, the system will allow Organisations to benchmark across Wales which will enable the identification of best practice as well as areas for improvement.

The system will support the Organisation in providing real time data and information that can facilitate ward to board assurance leading to improvements in quality, safety and experience for patients and staff. Through successful embedding of the system, we can take proactive steps to demonstrate that we are a listening and learning Organisation.

The project is proposed to be implemented in 2 phases:

Phase	By When	Included
PHASE 1	31.03.21	• Redress Case Management • Learning from Mortality • Complaints, PALS and Compliments • Incident Reporting & Management • Safeguarding
PHASE 2	31.03.22	• Claims Management • Inquest Case Management • Risk Management • Alerts & Notices • Business Intelligence, Dashboards & Data Analysis

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

2.1 Implementation Plan – Phase 1

To support the implementation of the new RLDatix system within the Health Board a Project Manager was appointed in June 2020. Further resources to support the project were identified in October 2020 and recruitment processes are currently being undertaken in line with this.

An action plan (Appendix 1) has been developed which includes the actions required to support successful implementation of the Once for Wales System.

The key overview actions include:
- Development of an implementation plan
- Identification of risks and issues
- Completion of core functionality related tasks
- Transition and data migration to the new system
- Progression of a communication plan
- Representation at, and feedback from All Wales Workstream Groups
- System related governance processes
- Streamlining and alignment of Health Board processes in relation to complaints, redress and incident management
- Production and dissemination of standard operating procedures and guidance
- Establishment of an audit programme

It should be noted that the timescales identified within the Health Board's implementation plan are dependent on the All Wales milestones being achieved. Further actions may be included as the project progresses on an All Wales level and additional requirements are identified.

2.2 Communication

Successful implementation of the project is linked to continued engagement with key stakeholders and staff awareness. In order to facilitate widespread communication across the Health Board in relation to developments and implementation of the new system a variety of mechanisms are being explored. This includes the production of dedicated RLDatix SharePoint Pages and the establishment of Twitter account @CTMSafetyrisk.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

An initial assessment of the project has highlighted the risk and issues summarised below. Further assessment is being undertaken to determine the

impact and identify the mitigating action required. Future reports to the Committee will update the position in relation to the risks identified.

Implementation RISKS & ISSUES LOG		Status
R1	Change to the Organisation's operating model	RED
R2	Access to the new CTM System in a timely manner	AMBER
R3	Transition between 2 systems and loss of the integrated approach currently in place within the Health Board	RED
R4	Increased cost to the Health Board of the new system compared to the current system	AMBER
R5	Link to other systems (i.e. ESR, Patient Information Records, Qlik) to ensure robust implementation of processes	RED
R6	Resources to support training of staff in relation to use of the new system	RED
R7	Failure to fully implement the Incident Management Functionality within the new system by the 31.03.21	AMBER
R8	Lack of engagement of responsible managers to effectively utilise the new system	AMBER
R9	Maintaining good quality data and reports during the transition period and early stages of the implementation of the new system. Due to the significant development undertaken on the Health Board's current system in recent years, there is a significant risk that the information that is currently able to be drawn out of the system will not be available from the new system on the 1st April 2020. There may be continued delays in relation to data quality following implementation as dashboard functionality is not available until April 22.	RED

4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	Yes (Please see detail below)
	The RLDatix system provides data to enable opportunities for improvement in safety and experience to be identified.

Related Health and Care standard(s)	Governance, Leadership and Accountability
	If more than one Healthcare Standard applies please list below:
Equality impact assessment completed	Not required
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	Yes (Include further detail below)
	Resources to support the implementation of the project are being applied for in accordance with the Health Board processes. Funding has been agreed and recruitment processes are currently being progressed.
Link to Main Strategic Objective	To Improve Quality, Safety & Patient Experience
Link to Main WBFG Act Objective	Provide high quality care as locally as possible wherever it is safe and sustainable

5. RECOMMENDATION

5.1 The Committee is asked to **NOTE** the contents of the report.