

AG	END	A I	TEM

3.2.4

QUALITY & SAFETY COMMITTEE

ONCE FOR WALES (DATIXCYMRU) IMPLEMENTATION

Date of meeting	22/03/2022	
FOI Status	Open/Public	
If closed please indicate reason	Not Applicable - Public Report	
Prepared by	Kellie Jenkins-Forrester, Once for Wales Project Manager	
Presented by	Greg Dix, Executive Director of Nursing, Midwifery and Patient Services	
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
RLDatix Management Group	14.03.22	NOTED

ACRONYMS		
СТМИНВ	Cwm Taf Morgannwg University Health Board	
PALS	Patient Advocacy Liaison Service	
ILG's	ILG's Integrated Locality Groups	
DCIQ	Datix Cloud IQ	



1. SITUATION/BACKGROUND

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

Aimed at bringing consistency across NHS Wales with regards to the use of electronic tools, the programme commenced development and implementation of DatixCymru (DatixCloudIQ). The new system has many of the features that people will be familiar with from our existing RLDatix system, with the added benefit of being a bespoke cloud-based tool that meets the needs of Putting Things Right, through the development of specific functionality such as the Redress Module and Mortality Review process.

The system will support the Health Board 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.

Phase 1 of the project was scheduled to be delivered by the 31.03.21, however slippage in the transfer of systems across Wales has resulted in revised implementation dates and ongoing development of Phase 1 functionalities, along with delays to the release of Phase 2 functionalities.

The implementation dates within CTMUHB of released functionalities is outlined in the table below.

Functionality	Implementation Date	
Claims	07.06.21	
Redress	07.06.21	
Feedback	05.07.21	
Inquests	01.04.22	
Incident Management	01.04.22	
Mortality Review	01.04.22	

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

2.1 Functionalities Implemented



2.1.1 Claims and Redress

Logging of all new claims and redress cases on DatixCymru commenced within CTMUHB on the 07.06.21. An extensive data cleansing exercise has been undertaken by the Health Board's Datix Team, with support from the Claims Team, to complete the transition process and ensure that all active cases can be effectively managed within the DatixCymru. This also enables accurate data to be extracted from the system, for example, in relation to open cases and outstanding learning from events reports.

2.1.2 Feedback

Since the 05.07.21, all new complaints (formal and early resolution) and compliments have been logged on the new system. Mapping work continues to be undertaken in relation to the logging of new cases, specifically in relation to PALS, enquiries and early resolution, to ensure consistency both internally and across Wales.

2.2 Functionalities scheduled for implementation on 01.04.22

The Health Board will implement the remaining Phase 1 functionalities, from the 01.04.22:

- Inquest
 - Training to commence from 21.03.22
 - Migration of cases to be fully completed by 14.04.22
- Mortality Review
 - Demonstration of new system provided to leads
 - o Training programme to commence from 28.03.22
 - Review of mortality process in progress
 - User guide being finalised
- Incident Management
 - System administration actions and testing undertaken, i.e. setting up of permissions, access and notifications
 - Training strategy developed, which identifies levels of training required and priority areas based on high risk, high volume incidents
 - Training support materials available from 28.03.22
 - Communication plan developed to commence from 14.03.22
 - Contingency plan in place

2.3 Legacy System Plan

The Health Board is required to have in place a plan for transitioning the Legacy system (Datixweb) to a position of read only i.e. no cases are actively updated. A deadline of the 01.08.22, for this process to be completed has been set by the Welsh Risk Pool (WRP). Any functionalities which remain active following this time, are potentially subject to additional costs.

A summary of the position is highlighted below:

 Through completion of the migration of active cases, the Health Board's Claims and Redress modules within the legacy system are



now in a position to be moved to status of read only, therefore reducing the risk of anomalies in information and additional costs being incurred.

 All formal complaints received before the 05.07.21 are being managed to conclusion on the legacy system. There are currently 18 formal complaints open. Monitoring of these cases is undertaken on a weekly basis, along with engagement with ILG colleagues to determine any contingency plans should cases remain open beyond the deadline.

The Complaints module on Datixweb was also used within CTMUHB to capture specific maternity related information arising from the IMSOP review process. As this option, is not available within the new system, the Health Board project lead and local system lead are working with the National Project lead to identify solutions to ensure that this information can be maintained.

- All open inquests along with any received and closed in 2021/2022 will be migrated across to DatixCymru (DCIQ) during the latter part of March 2022 in readiness for the Go Live date of 01.04.22. No cases within the legacy system will be updated following this date.
- The Health Board will commence reporting all new incidents on DCIQ from the 01.04.21. No new incidents will be reported on the legacy system following this date. It is planned that all incidents reported prior to this date will be managed to conclusion on the existing system.

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

A risk and issues log for the project has been developed, which includes the associated mitigation and contingency plans. Within the log, significant risks have been identified, which are summarised below:

- Delivery of training to all responsible managers within a timely manner to support successful implementation of the incident management functionality. The latest version of the incident functionality is due for release to the Health Board from the 21.03.22, therefore training is unable to commence prior to this date.
- Ability to close all outstanding incidents within the Legacy System by the deadline, increasing the financial and reputational risk for the Health Board.
- Maintenance of high quality data and reports during the transition period and early stages of implementation of the new system.
 - o Information will span two systems adding challenges to providing trend data.
 - The Health Board has undertaken developments within the existing system to reflect internal processes that will not be available on initial implementation as this forms part of the system enhancement programme. A gap analysis is being undertaken, with alternative options to support the processes being identified. These options will potentially be more resource



- intensive, due to the increased manual intervention required in presenting information.
- The effective and efficient extraction of data from DatixCymru at a locality, service group and speciality level continues to be challenging. This ongoing risk has been highlighted via several of the project's national groups and associated networks, with an aim to improving reporting mechanisms with the system.

It should also be noted that requests for amendments or updates to the individual functionality from the within the Health Board, will be subject to the Once for Wales Governance process which will impact on timescales for implementing changes that are not possible within the Local Administrator permissions.

4. IMPACT ASSESSMENT

Quality/Safety/Patient	Yes (Please see detail below)	
Experience implications	The RLDatix system provides data to enable opportunities for improvement in safety and experience to be identified.	
Related Health and Care	Governance, Leadership and Accountability	
standard(s)	If more than one Healthcare Standard applies please list below:	
Equality Impact Assessment (EIA) completed - Please note EIAs are required for all new, changed or withdrawn policies and services.	No (Include further detail below) If no, please provide reasons why an EIA was not considered to be required in the box below. Relates to the implementation of an All Wales System.	
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. Fixed term funding was agreed and recruitment completed. Assessment required to determine ongoing resources required.	
Link to Strategic Goals	Improving Care	

5. RECOMMENDATION

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