

From: [REDACTED]

Sent: 22 August 2023 11:03

To: [REDACTED]

Cc: [REDACTED]

Subject: The Dreamers Partnership Agreement Draft

Hi [REDACTED]

Thanks for meeting with me. I've attached the most recent draft of the agreement.

I've just seen I've been put on there as full time so will get that amended.

The areas highlighted are just the most recent changes made by another member of staff.

Thanks very much,

[REDACTED]

[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: 29 November 2023 09:57
To: [REDACTED]
Subject: Re: Dedalus

Hi [REDACTED]

Is there still a risk to STA approval on this please?

If so, I need to escalate the risk to SMT urgently as the electronic pt record system in DOSH, holding 30,000 pts records is a risk

thanks

From: [REDACTED]
Sent: 22 November 2023 10:03
To: [REDACTED]
Cc: [REDACTED]

Subject: Re: Dedalus

The issue we have is that when Millcare when into liquidation, the staff who have expertise [REDACTED] in the system were employed by Dedalus. It is access to these staff which is critical in our ability to sustain the current system.

We are hoping to move to an alternative EPR system in the future and so, we just need to retain Millcare as best we can until this transition occurs.

To loose access to staff trained in Millcare poses a huge clinical risk to the service- tha'ts the rationale re STA

thanks

From: [REDACTED]
Sent: 22 November 2023 09:55
To: [REDACTED]
Subject: RE: Dedalus

Hi [REDACTED]

Are we 100% confident that there is no one else in the Market that could provide the work that Dedalus do. I have been copied into a FOI on this contract so obviously we need to ensure that we are following due care and process when we undertake the renewal. Is it just a 1 year contract that you want to put in or is it a longer term contract?

[REDACTED] has found a framework that we can utilise that Dedalus are on so it could be that if you have a Spec we contact the other suppliers to double check. This will then make it easier to get through sign off with the DoF.

Thanks

From: [REDACTED]
Sent: Tuesday, November 21, 2023 3:24 PM
To: [REDACTED]
Subject: RE: Dedalus

We are ;likely to need to extend this cover further and there will be no other providers-

I have revised costs from Dedalus- should I do another STA for an extension?

From: [REDACTED]
Sent: 21 November 2023 13:22
To: [REDACTED]
Subject: Dedalus

Hi [REDACTED]

DETAILS OF FINANCIAL IMPLICATIONS OF SECURING ALTERNATIVE SYSTEM TO LABLINK IN DOSH

Situation: Millcare who provided the Electronic Patient Record in DOSH went into liquidation in March of this year. Since this time, the department has suffered wide ranging failures within the patient record system and the system by which results are managed and processed (Lablink). The Locality has escalated this clinical risk up to Executive Level.

Although, there are plans for the Welsh Governance to lead on the procurement of a national EPR system, the timelines for this potentially span 2-3 years and so, in the interim, the DOSH needs to identify ways in which to either:

- a) Sure up and sustain the Millcare System with ongoing support from Dedalus
- b) Find an internal patient management system that can be adapted for use in DOSH eg Paris
- c) Tender for a completely new service specification

Whilst the Locality is working through these options with DOSH and the IM+T department, the Clinical Team have requested that an alternative to Lablink is sought as a priority given recent system failures, which pose significant risks to the safe management of patient results. This SBAR details the costs associated with an alternative to Lablink

Background:

Lab link is a system currently embedded within Millcare. It interfaces with WLIMS in the Labs. It provides a mechanism for requesting test analysis, provides automated feedback on results, disaggregates positive and negative results and can send texts to patients with negative results. The system is used by the clinicians to efficiently and safely manage patients with positive test results. An average of 60 results a day are managed through this system, 5 days a week.

In July and following an issue with the UHB firewall, DOSH experienced a number of system failures, one of which affected the Lablink. This led to a huge backlog in clinical results, which required manual sorting by the nursing staff and posed significant clinical risks. The service also experienced a failure within the texting system, which again added to service pressures.

Following a meeting across DCHW, Dedalus and UHB IM+T departments, work was eventually undertaken to resolve problems with Lablink, however the root cause of the problems still does not appear to be clear and the senior clinicians in DOSH remain very anxious about the long terms reliability of this aspect of the system.

Assessment:

Public Health Wales have offered a solution to the vulnerability that exists within Lablink. They have a contract with a company called Signum, who can provide a web-based results management system, which can operate independent of Millcare/Dedalus. This is a tried and tested system, which potentially and in the future, could be further developed to provide a full EPR system. Alternatively, it could link with other EPR systems chosen by the UHB.

WH have offered to fund DOSH to have access to this system from now until the end of March 2024. It could be put in place and operation for the beginning of December 2023.

The ongoing cost of Signum for 12 months will be [REDACTED] however if paid for in full, there is the potential for a further [REDACTED]. There will also be a continued cost of texts, which is averaging [REDACTED] per annum as part of the contract agreement. **Total cost of Signum Solution = [REDACTED] per annum**

Signum links to normal printers and not zebra printers (which are required currently for Lablink) and so, there will be a requirement to rent printers (so that we can access support services)- **estimated annual cost of 10 printers plus cost of print outs= [REDACTED] per annum**

Other Considerations:

- The Locality currently pays an annual charge for the link between Labs and Lablink system [REDACTED] it is likely that this cost will need to continue
- Until an alternative to Millcare and Dedalus support is identified, DOSH will also need to continue to pay an annual support cost change of circa [REDACTED] a year- the contract is due for renewal in Feb 2024

Recommendation

Given the significant clinical risk associated with potential failure in the Lablink aspect of Millcare, **the Department is seeking agreement to transfer to use of Signum for management of lab testing.** There will no financial implications in year, but there will be a cost associated with continuation past April 2024- **Additional costs of Signum Solution = [REDACTED] per annum, plus printers=[REDACTED] per annum**

The potential to offset these additional costs will be dependent upon:

- a) being able to transfer to use of existing alternative EPR system within the UHB, thus releasing cost of Dedalus support- **feedback received as of 27 November 2023 is that there is no capacity within the IM+T to scope this as an option**
- b) tendering for a new service which can provide for the full needs of the service- cost unknown as yet
- c) potentially reduce costs associated with WLIMS/Millcare linkage- needs scoping

In light of the above position, the cost of investment in Signum, will **be a new cost for the Locality/PCIC** until work on the new EPR system is completed (ie cost of printers for 2023/24 and then ongoing cost of printer rental and Signum costs from 1 April 2024 onwards).

NB: [REDACTED]
[REDACTED] which is a further risk being managed by the Locality.

An urgent decision from PCIC SMT on this request would be appreciated given level of current risk.

[REDACTED]
28 November 2023 (updated report from 14 November)

From: [REDACTED]

Sent: 24 November 2023 16:17

To: [REDACTED]

Cc: [REDACTED]

Subject: FW: Concerns re risk to Milcare

Hi [REDACTED]

Previous email from [REDACTED]

If the level of concerns is escalating, I suggest that the only option is to agree to printing off a level of medical records, being cognisant of the requirements for storage and the fact that they will be out of date as soon as printed- so would have to agree a programme of update printing.

[REDACTED] please can you comment on the reality of setting up the alternative to paper printed system please.

Thanks

[REDACTED]

From: [REDACTED]

Sent: 23 August 2023 21:59

To: [REDACTED]

Cc: [REDACTED]

[REDACTED]

Subject: RE: Concerns re risk to Milcare

Hiya [REDACTED] All, It's a balance of risks isn't it...

Not doing it:

Sorry, that was supposed to be brief!.... Hopefully makes some sense, and allows you to consider options.

[Redacted]

From: [Redacted]

Sent: 23 August 2023 16:19

To: [Redacted]

Cc: [Redacted]

Subject: Concerns re risk to Milcare

Hi [Redacted]

The team remain concerned re ongoing risk to loss of patient records should Milcare fail completely.

We are wondering whether we should make an attempt to print off pt records to ensure we have some level of backup should we lose the system?

What do you think

[Redacted]

From: [REDACTED]
Sent: Tuesday, November 21, 2023 3:24 PM
To: [REDACTED]
Subject: RE: Dedalus

We are ;likely to need to extend this cover further and there will be no other providers-

I have revised costs from Dedalus- should I do another STA for an extension?

[REDACTED]

From: [REDACTED]
Sent: 21 November 2023 13:22
To: [REDACTED]
Subject: Dedalus

Hi [REDACTED]

I have just been passed all the paperwork for Dedalus (millcare replacement) and the expiry date is 31st January 24 with no options to extend. Do you know if this is still a requirement and what options you want to take going forward?

Thanks

[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: 06 November 2023 08:25
To: [REDACTED]

Subject: RE: MillCare text messages

Thanks [REDACTED]

I have escalated my concerns to [REDACTED] and [REDACTED] last week.

We have a meeting at lunchtime today, but unfortunately, [REDACTED] [REDACTED] Is it possible to move this EPR meeting back by an hour?

PS- [REDACTED] was going to convene an update meeting across all depts- ? when will this be as it seems we need to have all parties in the room again to confirm 'who is holding the baby'!

From: [REDACTED]
Sent: 03 November 2023 21:37
To: [REDACTED]

Subject: Fw: MillCare text messages

Hi all,

Not much of an update I'm afraid. This mail from [REDACTED] is the last comms that I am aware of. I have reached out to [REDACTED] again as the last comms from UHB Digital (again, as far as I can see) is from [REDACTED] at 14:25 yesterday.

There is no evidence from the emails that anyone is doing anything.... ??!

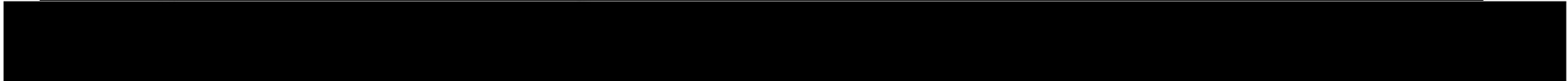
Thanks,



From: [Redacted]

Sent: Thursday, November 2, 2023 12:55 PM

To: [Redacted]

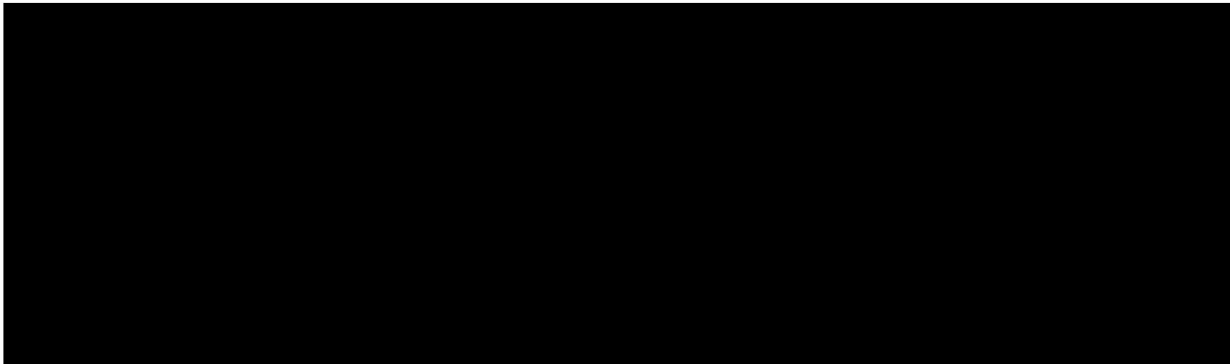


Subject: RE: MillCare text messages



That suggests to me that the connection attempt isn't leaving the server, which would explain why it's not working.

I've attached a tracert from the server to [Redacted] to this email to see if this gives any clues.



[Redacted]

From: [Redacted]

Sent: Thursday, November 2, 2023 12:48 PM

To: [Redacted]

[Redacted]

Subject: RE: MillCare text messages

[Redacted]

Only [Redacted]

Thanks

[Redacted]

From: [REDACTED]

Sent: Thursday, November 2, 2023 12:08 PM

To: [REDACTED]

Subject: RE: MillCare text messages

[REDACTED]

Thank you,

Have you see any hits on that rule in the last 10 – 15 minutes?

[REDACTED]

From: [REDACTED]

Sent: Thursday, November 2, 2023 12:05 PM

To: [REDACTED]

[REDACTED]

Subject: RE: MillCare text messages

[REDACTED]

This is the firewall rule

[REDACTED]

Thanks

[REDACTED]

From: [REDACTED]

Sent: Thursday, November 2, 2023 11:55 AM

To: [REDACTED]

[REDACTED]

Subject: MillCare text messages

[REDACTED]

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Hysbysiad preifatrwydd: Gellir gweld hysbysiad preifatrwydd Bwrdd Iechyd Prifysgol Caerdydd a'r Fro ar ein gwefan: (<http://www.cardiffandvaleuhb.wales.nhs.uk/opendoc/325392>)

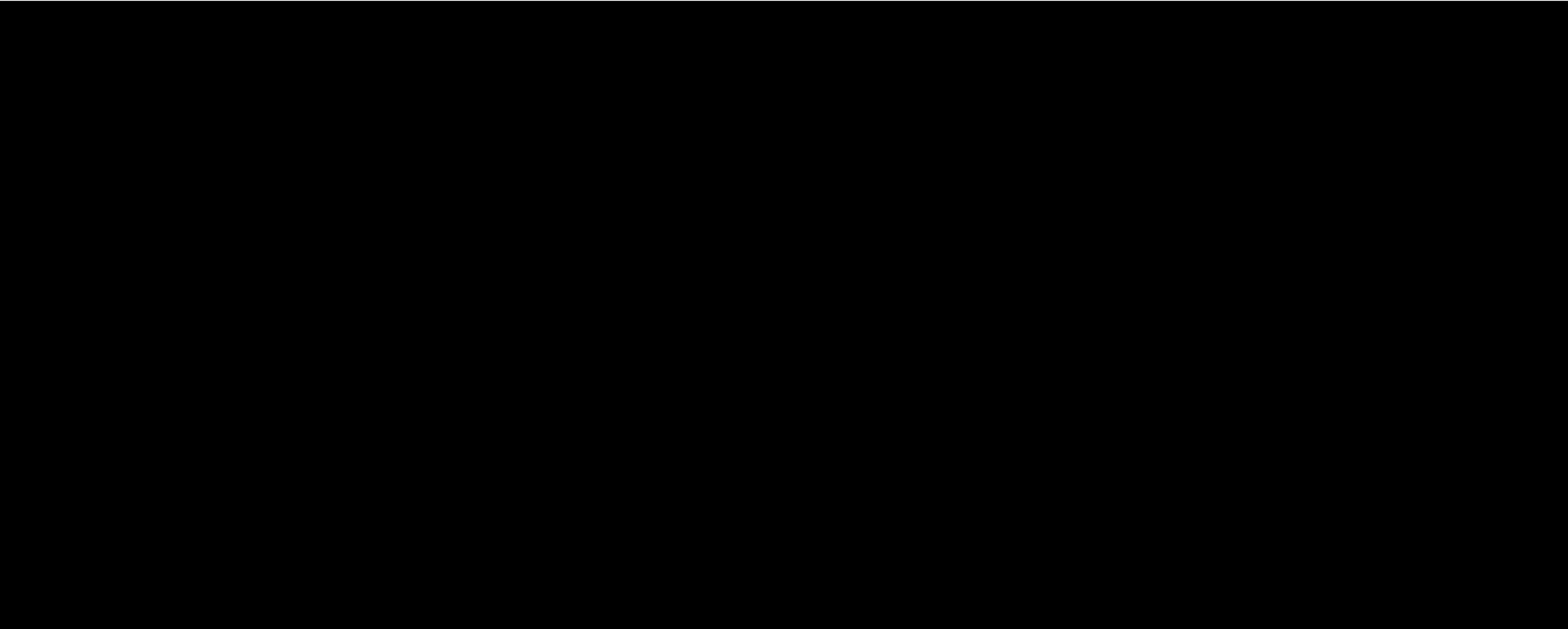
Morning all,

I realise we didn't quite get around to discussing the text message issue and possible action plan yesterday. I've been on to check and unfortunately the text messages are still failing.

Would it be possible to check that the firewall is allowing the following:

Source	Destination	Port	Direction
[Redacted]			

Our test connection utility is failing to connect from the server saying it's timed out, so thought the best place to start troubleshooting is the firewall.



[Redacted]

From: [Redacted]
Sent: 02 November 2023 14:53
To: [Redacted]
Cc: [Redacted]
Subject: Fw: Examples of results

Hi Both

Just to advise that [Redacted] convened a meeting of all IM+T depts, dedalus , Locality and members of the DOSH team on Weds.

To be honest, I still feel that we are being passed from pillar to post, with no one person taking a lead to work through the mire of complexities- although I have asked [Redacted] to get us back together again for an update next week.

The level of clinical risk in terms of potential to loose, delay actioning of results remains significant and the impact of manual results processing is both hugely time consuming and risky in itself.

We are trying to progress the option of using Signum for results reporting is being pursued as quick as possible.

I just want to make you aware of continued concerns

thanks

[Redacted]

From: [Redacted]
Sent: 02 November 2023 14:02
To: [Redacted]
Cc: [Redacted]

[REDACTED]

Subject: Re: Examples of results

Hi

Can I just ask why is this logged a priority 3 please?
This is a massive clinical risk

[REDACTED]

From: [REDACTED]
Sent: 02 November 2023 13:42
To: [REDACTED]
Cc: [REDACTED]

[REDACTED]

Subject: RE: Examples of results

Hi,

Has there been any progress on this please?

Regards

[REDACTED]

From: [REDACTED]

Sent: 01 November 2023 12:21

To: [REDACTED]

Cc: [REDACTED]

[REDACTED]

Subject: RE: Examples of results

Hi All

I understand that this has been raised as a ServicePoint Call [REDACTED] logged with DHCW as P3 and escalated.

[REDACTED]

From: [REDACTED]

Sent: 01 November 2023 11:40

To: [REDACTED]

Cc: [REDACTED]

[REDACTED]

Subject: RE: Examples of results



Hi [redacted]

Can I please ask about this again? Your help would be much appreciated. If you are not the person I need to talk to then can you point me to someone else that can help?

This is about the HL7 feed into the lablink for Cardiff and Vale UHB - DEPARTMENT OF SEXUAL HEALTH.

The location used on the request forms is GU MED CRI.

The results should be being sent to port [redacted]

This is a recent request form example of what the lab receives:

Vir/Ser/NAATS NAAT Requests	Cardiff and Vale UHB	
Patient Details	Loc: GU MED CRI	Tel: [redacted]
[redacted]	Clinical Details: [redacted]	
Date of Birth	Tests Requested	
[redacted]	[redacted]	
Patient Sex Female		
Date/Time sample taken:		
[redacted]		
Consultant		
[redacted]		
Requested By:	Phlebotomist Signature	
[redacted]		

There is a significant decrease in result messages received from the lab starting on or after 20/09/2023. No messages were received between then and 15/10/2023 and only a small number since.

Do you know whether it is the connection to the server/port that is failing and whether this is a constant failure or intermittent?

[Redacted]

From: [Redacted]

Sent: Tuesday, October 24, 2023 9:50 AM

To: [Redacted]

Cc: [Redacted]

Subject: RE: Examples of results

[Redacted]

Apologies I thought I had passed on [Redacted] details (copied in)

Regards
[Redacted]

From: [Redacted]

Sent: 24 October 2023 09:45

To:

Cc:

Subject: RE: Examples of results

Hi

Can you help with identifying the issues the lablink is having or be able to suggest someone else who may be able to please?
Do you know whether it is the connection to the server/port that is failing and whether this is a constant failure or intermittent?
Any information would be gratefully received.

[REDACTED]

From: [REDACTED]

Sent: Thursday, October 19, 2023 1:10 PM

To: [REDACTED]

Cc: [REDACTED]

Subject: Fw: Examples of results

[REDACTED]

Good Afternoon [REDACTED]

Thanks for taking the time to catch up earlier today. I have spoken with the team we have decided to escalate via email the most urgent of the issues we have been experiencing. All other issues we are happy to log tickets regarding as these are less urgent and either patient or staff member specific.

As you are aware none of our text messaging have been sending either automatic or manual. I know the hope is that the reboot will fix this issue I know there will be contact tomorrow regarding this.

Lablink functionality is therefore the biggest concern. As mentioned, all results now remain in the CRI awaiting result queue, no results are being pulled automatically from Welsh Clinical Portal.

Cc:

Subject: FW: [REDACTED] has been updated - Priority: 2 - High - Subject: MILLCARE - (CARDIFF) Zebra printer update

Hi all ,

See latest response from Dedalus below , I am unavailable to follow this up tomorrow , [REDACTED] I have sent you the link if necessary to respond .

Many thanks

From: [REDACTED]

Sent: 26 October 2023 16:23

To: [REDACTED]

Subject: [REDACTED] has been updated - Priority: 2 - High - Subject: MILLCARE - (CARDIFF) Zebra printer update

Number: [REDACTED]

Priority: 2 - High

Category: Product

Company & Location: Cardiff and Vale University Health Board, Cardiff and Vale University Health Board

Product: MillCare

Product Line: Millcare

External Reference: N/A

Created on: 26/10/2023 15:31:50 (UTC) by [REDACTED]

State: In Progress

Subject: MILLCARE - (CARDIFF) Zebra printer update

Dear Customer,

[REDACTED] has added the following note to the Customer Ticket [REDACTED]

Good afternoon,

Following further investigation it would appear that the PCs sharing the Zebra printers cannot be accessed from the MillCare server (see screenshot attached) Due to the way the printers are shared the host PC must be accessible from the server in order to print from MillCare.
Could you ask your IT to take a look at this and establish why the network link has become an issue to these PCs.
Regards,

[Redacted]

Description:

see response form our IT regarding zebra printers

Our IT have checked and responded , the printers still aren't working

See reply from our IT ...

I've cleared down all the print queues. Could you try printing again and if it still doesn't work then please go back to Dedalus and tell them that they need to stop and restart the background jobs, reporting and printing on the server – that usually gets the Zebras going again.

Could you please check

Thanks

[Redacted]

Ref: [Redacted]

[REDACTED]

From: [REDACTED]
Sent: 24 October 2023 16:22
To: [REDACTED]
Subject: Re: Millcare concerns

Thanks [REDACTED]

As you will appreciate, we do not know the names of the people mentioned in this email and so, I am keen to understand who is 'holding the baby' on managing this matter as of today. [REDACTED] do you know who these people are please?

I need to provide an update to my Senior Manager tomorrow so an update again tomorrow would be appreciated.

thanks

From: [REDACTED]
Sent: 24 October 2023 16:17
To: [REDACTED]
Subject: RE: Millcare concerns

[REDACTED]

Hi [REDACTED] has been liaising with [REDACTED] and [REDACTED] about this today, and we're waiting on further information back from them to help with the investigation

Regards,

[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: Tuesday, October 24, 2023 4:00 PM
To: [REDACTED]

Subject: Re: Millcare concerns

[REDACTED]

Hi [REDACTED]

Confirmed yesterday that the issue is now with Dedalus to resolve. All issues resolved on our side.

Thanks
[REDACTED]

Thanks,
[REDACTED]

From: [REDACTED]
Sent: Tuesday, October 24, 2023 3:57:36 PM
To: [REDACTED]

Subject: Millcare concerns

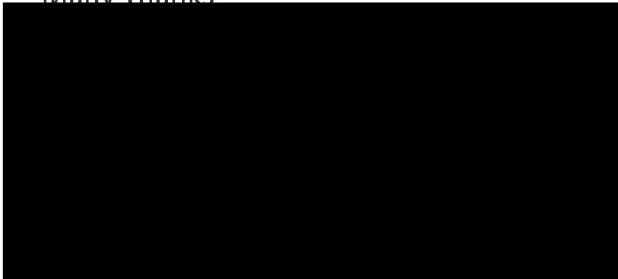
Hi All

High risk clinical Concern RE ongoing Text and Lablink failure.

Following conversations earlier today with [REDACTED] I am escalating the concerns below as continued risks in for the department. Please can we confirm who is looking into these issues. Following Dedalus being able to reconnect to the server we requested that priority be given to getting the text messaging service

back online and the return of functionable LabLink queues. Unfortunately, neither of these have been able to be fixed, please can we have an update as to who is managing these issues.

Many Thanks



From: [Redacted]

Sent: Tuesday, October 24, 2023 9:37 AM

To: [Redacted]

Cc: [Redacted]

[Redacted]

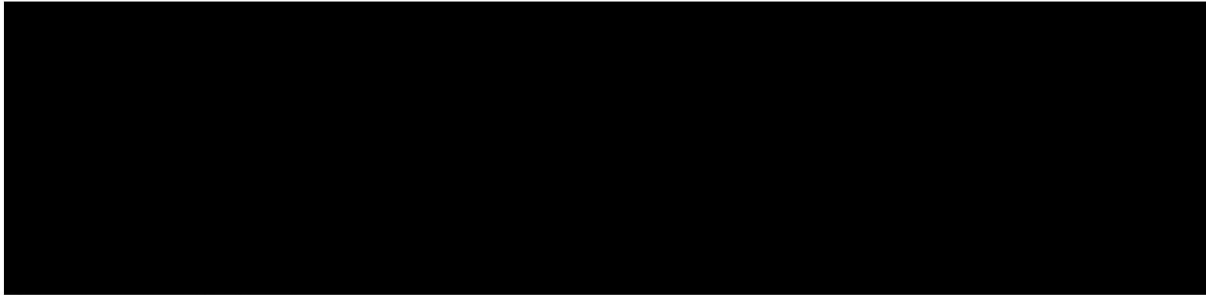
Subject: RE: Examples of results

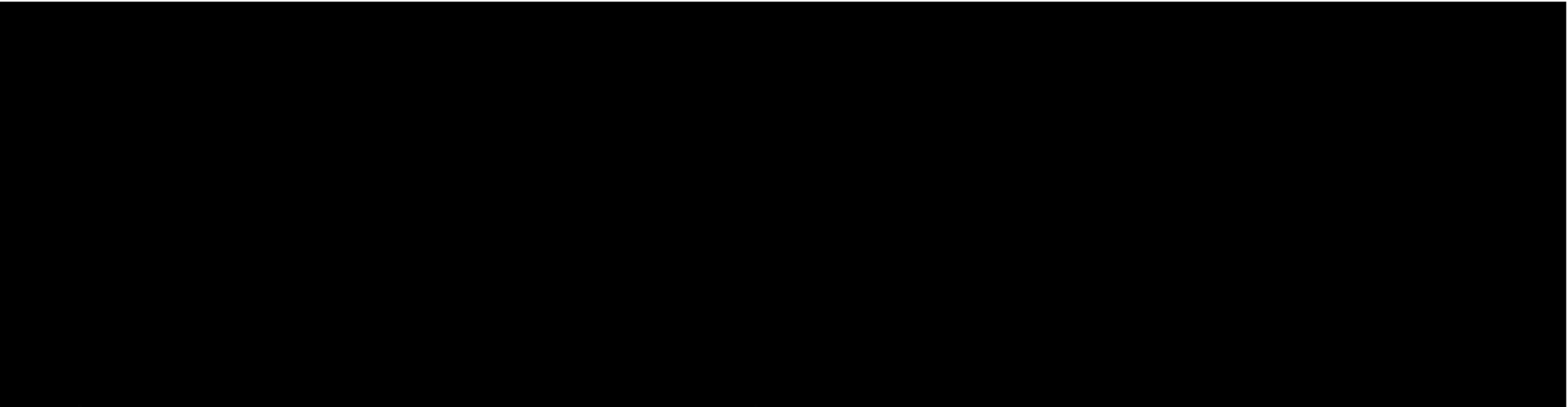
[Redacted]

Hi [Redacted]

I haven't heard anything from the lab but given the continuing problems with the texting there still seems to be a problem with the server. We are continuing to look at this.

I'll email the lab contacts today too.





From: [Redacted]

Sent: Tuesday, October 24, 2023 9:33 AM

To: [Redacted]

Cc: [Redacted]

Subject: Fw: Examples of results



Good morning [Redacted]

Do you have any update regarding the functionality of our lablink?

Many Thanks



From: [REDACTED]

Sent: Thursday, October 19, 2023 1:58 PM

To: [REDACTED]

Cc: [REDACTED]

Subject: Re: Examples of results

Hi [REDACTED]

I've copied in [REDACTED] and [REDACTED] who may be able to support. For awareness both, our Lablink into Millcare has stopped working so we are no longer receiving results into Millcare we have asked Dedalus to look into this. Appreciate any support you may be able to provide [REDACTED] with fixing these issues.

Many Thanks

[REDACTED]

From: [REDACTED]

Sent: Thursday, October 19, 2023 1:35 PM

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: Examples of results

[REDACTED]

Hi [REDACTED]

Thank you.

It does look like there is a significant decrease in result messages received from the lab starting on or after 20/09/2023. No messages were received between then and 15/10/2023 and only a small number since.

Is there someone at the lab end that can help work out what may have happened here please?
20/09/2023 also looks like when the text message problems started.

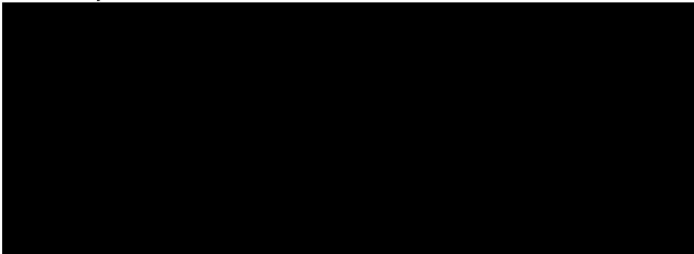
These are times/dates of the lablink result messages received:

Usual automatic process would be once results are back on Welsh Clinical Portal they get pulled into Millcare and send to the appropriate list the 4 lists we utilize being

- CRI Nurse Action
- CRI Health Advisor Admin
- CRI other results non positive
- CRI waiting for results

Attached below is a sample of the results we have looked into today which have not come back to Millcare and are not going to the correct list.

Many Thanks



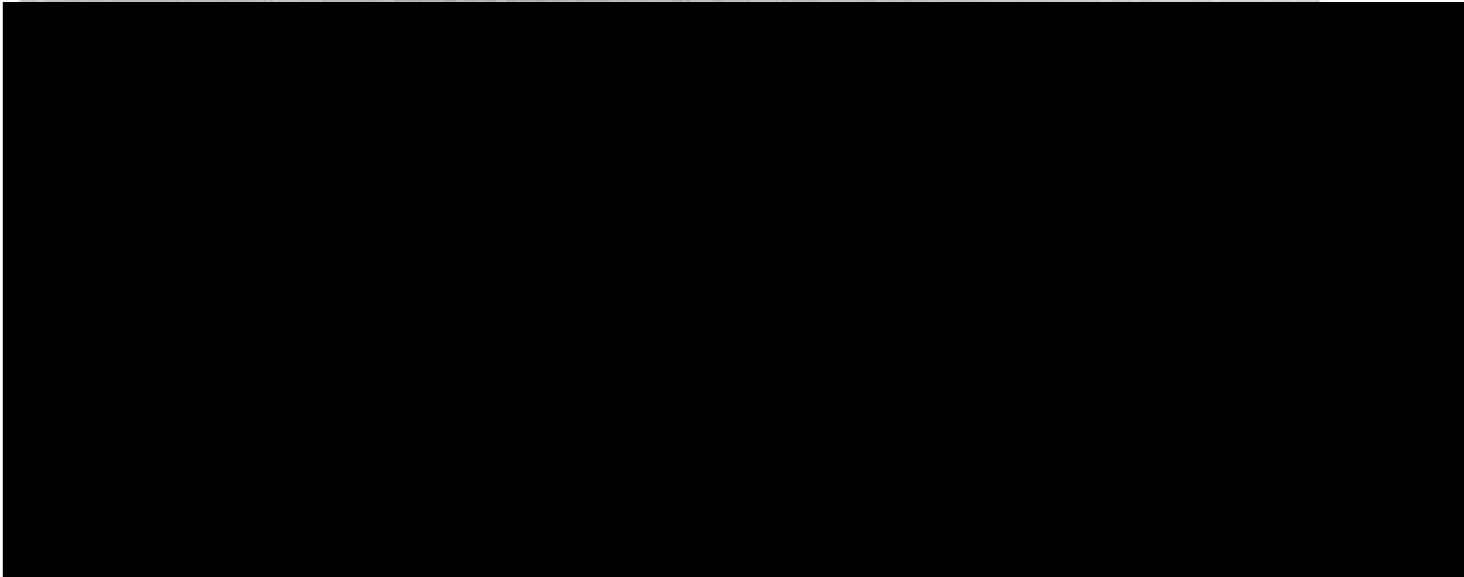
From: [Redacted]

Sent: Thursday, October 19, 2023 11:56 AM

To: [Redacted]

Subject: Examples of results

Patient	Info
---------	------



[REDACTED]

Subject: [REDACTED] has been updated - Priority: 2 - High - Subject: MILLCARE - (CARDIFF) Zebra printer update

Hi all.

Dedalus have agreed to have daily meetings until these live issues are resolved.

You will have seen the latest update from Dedalus, in that they have queried what happened to the server on separate dates. Unfortunately [REDACTED] has not yet responded to these questions, so, it sits with [REDACTED] to respond to Dedalus.

[REDACTED] but will be checking emails where I can and will commence the daily meetings with Dedalus on Monday.

[REDACTED] for info (see attached response from [REDACTED])

Thanks,

[REDACTED]

From: [REDACTED]
Sent: 26 October 2023 16:42
To: [REDACTED]

[Redacted]

From: [Redacted]
Sent: 27 October 2023 08:47
To: [Redacted]
Cc: [Redacted]
Subject: FW: [Redacted] has been updated - Priority: 2 - High - Subject: MILLCARE - (CARDIFF) Zebra printer update

Fyi

The technical challenges with IT system in DOSH is all consuming at the moment from a clinical and managerial perspective- just want SMT to be aware.

Will update again on Monday

[Redacted]

From: [Redacted]
Sent: 27 October 2023 08:45
To: [Redacted]
Cc: [Redacted]
Subject: RE: [Redacted] has been updated - Priority: 2 - High - Subject: MILLCARE - (CARDIFF) Zebra printer update

Hi [Redacted]

Can we escalate the delays in getting a response from [Redacted] if we don't hear anything by end of play today

thanks

From: [Redacted]
Sent: 26 October 2023 22:46
To: [Redacted]
Cc: [Redacted]

[REDACTED]

From: [REDACTED]
Sent: 23 October 2023 08:27
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: short term EPR alternatives

Hi [REDACTED]

The advert of the PM is now live.

Shall we arrange a catch-up to discuss as we are between a 'rock and a hard place' on this matter.

Clearly the easiest option is to 'limp along' with Milcare with Dedalus backup until National System is sorted, but given the strength of concern expressed by the Consultants at your meeting a couple of weeks back- is this a risk that can be tolerated? Perhaps it is if the lablink aspect is resolved.

Happy to have a call to discuss

[REDACTED]

From: [REDACTED]
Sent: 20 October 2023 17:05
To: [REDACTED]
Cc: [REDACTED]
Subject: Re: short term EPR alternatives

Hi [REDACTED]

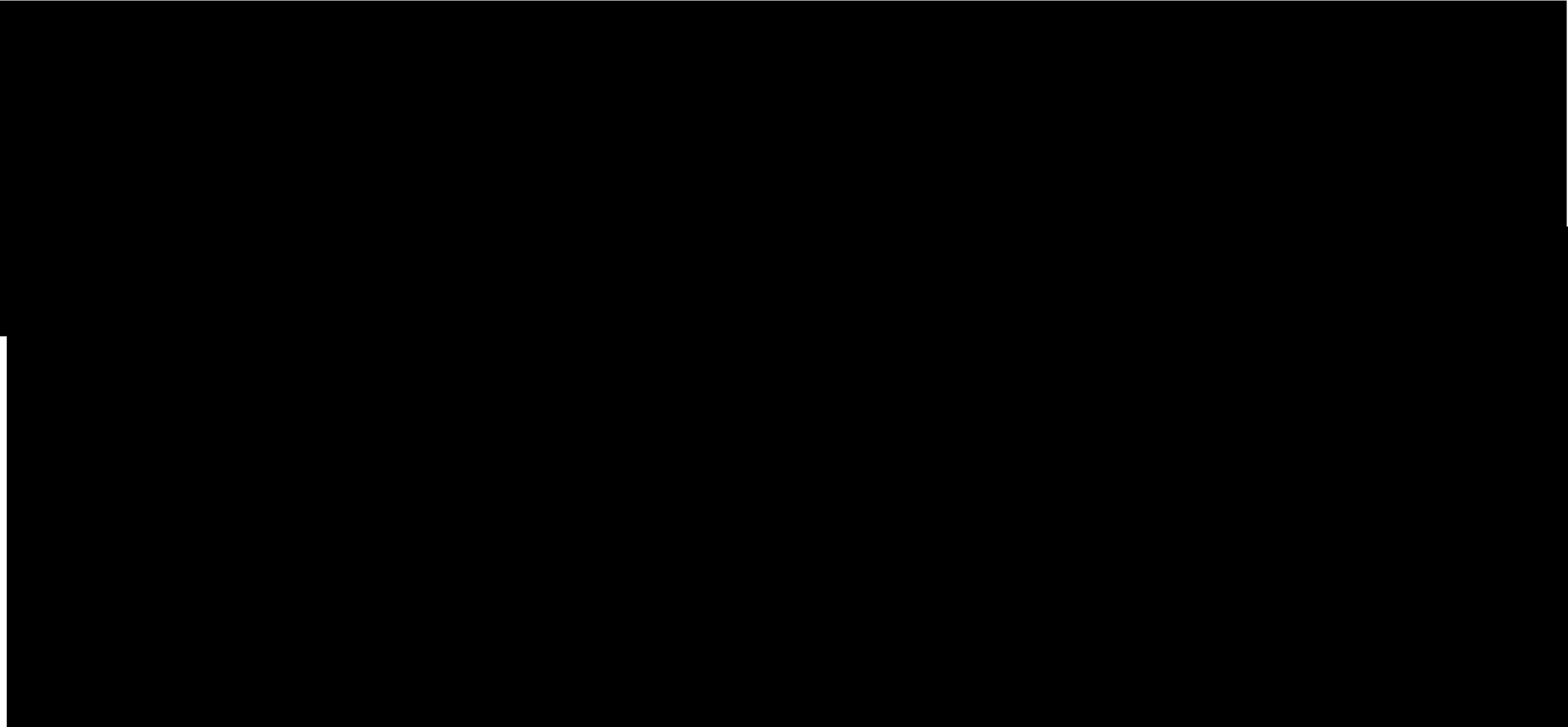
I've chatted to [REDACTED] about trying to get a meeting for us to look at this. [REDACTED] and [REDACTED]
[REDACTED] Potentially I could do the morning of Wednesday 8th November [REDACTED]

[REDACTED] has raised some valid questions about whether we are in the right place to look at these systems as alternative options atm. Currently we don't have a project manager in place, no one in IT has taken any responsibility for this and there isn't anyone in the department who has the time or skills to take this forward. There are lots of problems with introducing an interim system with regards to staff training, and migration of previous notes and then new notes to

a future system. The biggest risk was the pathology system interface, and we are addressing this risk by going over to Sigmun. If we are going to be paying for Dedalus support regardless as to ensure that we are able to access previous notes, are we better just lurching on with Millcare with Dedalus support as an EPR and booking system until the Wales system is in place?

Perhaps we need to resolve these issues and ensure we have adequate support in place before we look at moving over to any other option? Without a project manager, the responsibility for any of the problems we are facing doesn't seem to sit squarely on anyone's shoulders which risks things not being done correctly. Personally, I feel like do not have the skills to make these sorts of decisions without adequate IT support which to be frank, hasn't been forthcoming

██████████ I'm not sure whether you want to add anything here



Vision

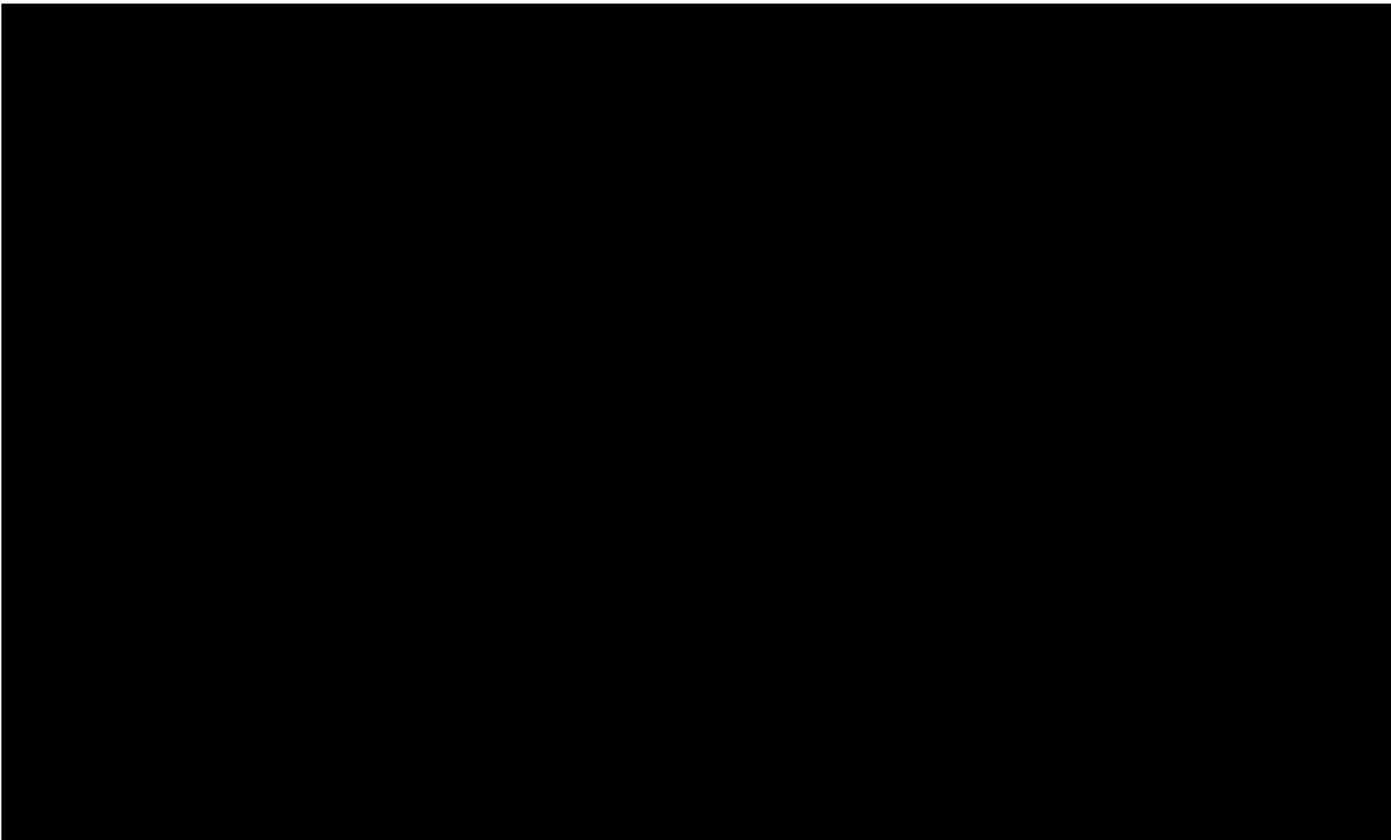
Diary and casenote functionality. Has template-like proformas that you can change. Vision supported by DHCW – issue with using UHB PCs but possible. Possible to “protect” notes so only DOSH staff can only see notes. ? possibility to piggyback off CAVHIS like LGS have. Resource in the Locality to help in set up and training ([REDACTED] in CAVHIS can help [REDACTED] with reporting!)

Clinical Workflow Manager

[REDACTED] helped develop bespoke system in Gastro, provided by Fujifilm – functions as a diary system that is similar to Millcare (in that you can assign clinician skillset to certain procedures). I think they also use it now in Radiology. It provides reader access in Clinical Portal. Doesn't have a casenote function in Gastro but has inbuilt proformas so could be a possibility of adding a freetext box within the proformas to act as a casenote – the team were very flexible in development. It can also pull reports.

? System One

Many thanks,



From: [REDACTED]
Sent: Wednesday, October 18, 2023 3:41 PM
To: [REDACTED]
Cc: [REDACTED]
Subject: Fw: short term EPR alternatives

Hi [REDACTED]

can we discuss when you have a minute

thanks

From: [REDACTED]
Sent: 11 October 2023 14:10
To: [REDACTED]
Cc: [REDACTED]
Subject: short term EPR alternatives

[REDACTED] Darren Cousins

Hi,

Here is a list of the UHB systems I have experience of.

PARIS

Casenote and diary system. I've not used it at length. I *think* you can manipulate access on PARIS to allow set teams to protect governance around our notes.

PMS

Not suitable, doesn't hold casenotes. Functions as diary system and visible to the wider UHB.

- The main concern is that we will be unable to log-on to Millcare Monday morning, in order to prepare for this – [REDACTED] is to Liaise with IT and Millcare to look at exporting current patient records – [REDACTED]
This will have to be done on a routine basis to ensure that should this functionality break we have up to date patient records.
- We have a very limited Text capacity – [REDACTED] to try and purchase more texts, but it may not be possible therefore it was agreed:
 1. Stop all reminder texts
 2. Stop negative test result texts
 3. Stop pre- implant & coil texts – Web site will be updated to alert patient to changes and Patient information.
- URGENT UHB COMMS
- Diary system – we will download on Friday 13th the next 6 weeks clinic lists and bookings – IF we have access Monday we will continue to use the patient booking system but we can revert to paper booking should we need to and will have the up to date bookings.
- RESULTS in case LABLINK fails– We will request a back up of paper results from tomorrow, similarly we will print off the results Queue.
- Hand written lab request will be accepted should we need to.
- ALL Paper pro-formas will be reviewed/up[dated by clinical staff and can be used for paper notes SHOULD we need to revert to this.
- [REDACTED] will try to maximise our licences to make sure we have new accounts for any staff who may commence in the department between now and May 31st.

Thanks everyone

[REDACTED]

From: [REDACTED]
Sent: 11 January 2023 17:20
To: [REDACTED]

Subject: RE: Millcare

OMG.... I can't believe it!

Don't forget urgent comms – to include [REDACTED] in the CHC offices as they like to be told before the patients (if you've not already phoned him).

[REDACTED] – and please let me know if there's anything I can do to help [REDACTED]

Best wishes, [REDACTED]

From: [REDACTED]
Sent: 11 January 2023 17:04
To: [REDACTED]

Cc: [REDACTED]
Subject: Millcare

Contingency plans following the news that Millcare is going into Liquidation on Friday 13th.

[REDACTED] to contact Millcare for update on what service is likely to remain following Fridays cease of business, there will be NO Support from this date from Millcare.

Urgent Priorities:

[Redacted]

From: [Redacted]
Sent: 16 January 2023 15:45
To: [Redacted]
Subject: FW: Millcare liquidation

Hi [Redacted] – to see the Swansea Bay [Redacted] now appears to be linked in.
Cheers

[Redacted]

From: [Redacted]
Sent: 16 January 2023 08:47
To: [Redacted]
Subject: RE: Millcare liquidation

Thanks [Redacted]

[Redacted]

From: [Redacted]
Sent: 16 January 2023 08:29
To: [Redacted]
Subject: RE: Millcare liquidation

Hi
Like Cardiff Sexual Health, Millsystem is our main IT system with all our data.

We were informed on Wednesday afternoon and have been working very closely with Cardiff and other HB's. IT are on board and IG.

We have a meeting this afternoon with PHW and are waiting for a meeting to be set up with Welsh Government.

The system is working at present and we are looking at how we move forward

Thanks [REDACTED]

From: [REDACTED]

Sent: 16 January 2023 08:19

To: [REDACTED]

[REDACTED]

Cc: [REDACTED]

Subject: RE: Millcare liquidation

Thanks [REDACTED] copied in [REDACTED] who is the [REDACTED] in Sexual Health

[REDACTED]

From: [REDACTED]

Sent: 13 January 2023 15:32

To: [REDACTED]

Cc: [REDACTED]

Subject: Re: Millcare liquidation

Great thanks [REDACTED]

[REDACTED] if you use this system then would be good to link you in with my Ops [REDACTED] to discuss approach and contingencies.

Cheers

[REDACTED]

[Redacted]

From: [Redacted]
Sent: Friday, January 13, 2023 3:30:37 PM
To: [Redacted]
Cc: [Redacted]
Subject: RE: Millcare liquidation

Hi [Redacted] has Sexual Health in her portfolio and will be closer to this.

[Redacted] – please see email thread, can you liaise with [Redacted] and please keep be appraised, thanks

[Redacted]

From: [Redacted]
Sent: 13 January 2023 15:29
To: [Redacted]
Subject: Re: Millcare liquidation

Hi [Redacted] it's the IT system for us which holds the patient record, booking system, results etc. If there is an Ops lead in your team we can link in but maybe you use a different system.

[Redacted]

From: [Redacted]
Sent: Friday, January 13, 2023 3:05:47 PM
To: [Redacted]
Subject: RE: Millcare liquidation

Hi yes, sexual health comes into my service but unaware of using an external providers
Thanks

[Redacted]

From: [REDACTED]

Sent: 13 January 2023 13:56

To: [REDACTED]

Subject: Re: Millcare liquidation

Hi [REDACTED] they provide the system for sexual health services and I can see I didn't reference sexual health in my original email!! Do you have responsibility for sexual health - if not could you let me know who does.

[REDACTED]

From: [REDACTED]

Sent: Friday, January 13, 2023 11:56:49 AM

To: [REDACTED]

Subject: FW: Millcare liquidation

Hi [REDACTED]

Thanks for the 'heads up' it looks like we don't use them as a provider locally. Hope it's not causing you too much hassle

[REDACTED]

From: [REDACTED]

Sent: 13 January 2023 10:07

To: [REDACTED]

[REDACTED]

Cc: [REDACTED]

Subject: RE: Millcare liquidation

Hi [REDACTED]

We do not have any commissioned cases with this provider, they are not known to us.

Regards

[REDACTED]

[REDACTED]

Subject: Millcare liquidation

Hi all – we were notified last night that Millcare will be going in to liquidation from tomorrow. Just wondering who the ops lead is in your teams (if this sits within your remit) as would be helpful to discuss plans. We have just had a meeting to go through our contingency plan but would be good to share and work together where we can on this.

[REDACTED]

[REDACTED]

From: [REDACTED]
Sent: 11 January 2023 20:47
To: [REDACTED]
Cc: [REDACTED]
Subject: Re: Millcare- Liquidation

Hi [REDACTED] thanks for letting us know and sharing the actions you are taking. Let's discuss support tomorrow at OPM and we will of course do what we can to support.
Cheers

From: [REDACTED]
Sent: Wednesday, January 11, 2023 6:54:48 PM
To: [REDACTED]
Cc: [REDACTED]
Subject: Fw: Millcare- Liquidation

FTY

we have been notified today of the fact that Milcare is going into liquidation on Friday.

Contingency plan detailed below

We would appreciate support on managing this urgent clinical risk

Thanks

[REDACTED]

Clinical Care/Quality	Communication/PR	Compliance with Standards	Corporate Governance	Estates
Financial	Health & Safety	Information Governance	Infection Control	Legal
Safeguarding	Security	Social Care	Strategic	Workforce
Service				

Signature of Assessor	
Date of Assessment	26/01/2023 updated
Risk Owner	DoSH
Signature of Service Unit Director	
Signature of Director of Nursing Clinical Board	
Date	

Signature of Assessor	[REDACTED]
Date of Assessment	26/01/2023 updated
Risk Owner	DoSH
Signature of Service Unit Director	
Signature of Director of Nursing Clinical Board	
Date	



Consequence	Likelihood				
	1 Rare	2 Unlikely	3 Possible	4 Likely	5 Almost certain
5 Catastrophic	5	10	15	20	25
4 Major	4	8	12	16	20
3 Moderate	3	6	9	12	15
2 Minor	2	4	6	8	10
1 Negligible	1	2	3	4	5

1-3	Low risk
4-6	Moderate risk
8-12	High risk
15-25	Extreme risk

Gaps in Controls:	
1.	There are risks associated with extracting data. Potential risk to the system / over-arching audit process of extraction of data
2.	No FAQ's / SOP's provided by Millcare to support Local IT services to pull data
3.	We have been unable to secure emergency support from previous Millcare employees to date
4.	If Millcare develops functionality issues which require functionality processes to be removed (ie: lablink / use of electronic documentation) clinical records could need to be separated requiring manual processes / paper recording which hold an associated risk
5.	Identification that the server Millcare runs upon is outside of usually lifetime and unsuitable for business critical EPR

Gaps in Assurance:	
1.	Time line of procurement of new EPR
2.	Stability of Millcare system to support transfer of data once new EPR in place
3.	

Actions Required to reduce risk rating:	Action Lead	Target Completion Date
1. Develop SOP for the extraction and saving of records		
2. IT to continue to work towards identifying how that pull critical data from system		
3. Procurement of new EPR- ensure there is a plan set to remove the department from Millcare and safely transfer data into new system		
4. Continued discussions required to ensure PHW and C&V labs reports function as required – discussions around use of Signum risks and benefits as both short- and long-term solution to be considered		
5. Lessons learnt log to be kept		

Notepad:

Considering all of the information you have on the controls and assurances how would you rate the risk when the actions are completed (Target Risk Score):

Consequence	4	X	Likelihood	3	=	Target Risk Rating	12
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Main Risk Type: <i>please tick one only</i>				
Clinical Care/Quality	Communication/PR	Compliance with Standards	Corporate Governance	Estates
Financial	Health & Safety	Information Governance	Infection Control	Legal
Safeguarding	Security	Social Care	Strategic	Workforce
Service				

RISK ASSESSMENT FORM

Clinical Board:	PCIC	Location of Risk:	Department of Sexual Health
Directorate:	South and East Cardiff Locality	Date Form Completed:	16/01/2023

Risk Title
DOSH 35 – Millcare Liquidation and withdrawal of technical support for the system

Description of Risk:
<p>Explain risk The Electronic Patient Record system Millcare which is used across the department of Sexual Health in Cardiff Royal Infirmary when into liquidation on Friday 13th January 2023. There is a risk that Millcare will slowly lose functionality or suddenly lose all functionality resulting in a total loss of the system.</p> <p>Cause / Source / Event Due to the liquidation of the Millcare company all technical support that the company previously provided to the Department to resolve any functionality or total loss of the system has been withdrawn.</p> <p>Impact / Consequence The result of any functionality loss of the Millcare system will severely disrupt service provision within the department, impact on continuity of care provision, potential risk delay or unactioned positive results as Millcare provides the interface between lab authorised results and appropriate care / treatment being able to instigated. The risk of total loss of Millcare includes the risk of losing clinic data, information including patient data, appointments, clinical records and the interfacing between results reporting and the department.</p>

Score Risk without Current Controls (Initial Risk Score)							
Consequence	5	X	Likelihood	5	=	Risk Rating	25

Controls in Place:
1. C&V IT team have managed to secure Database login and password and started to look into database to pull essential information
2. CD & SMT looking at essential data to pull off system in advance of potential total loss
3. SMT are engaging with external companies RE support packages that may be available as interim cover
4. Support from PHW lab and Local C&V lab to instigate excel spreadsheet of authorised tests should the department experience any functionality concerns
5. SOP in process for functionality loss in Millcare
6. SOP in place for return to paper records within the department
7. Previous paper proforma in place if required to instigate
8. Admin team are pulling clinic lists, results ques, summary reports as interim measures to ensure data is not lost

Assurances:
1. Regular local SMT meetings being held to monitor
2. National meeting group has been established to feedback concerns and share knowledge around maintaining Millcare system
3. SMT have commenced process of procurement of new system – medium term assurance

Score Risk with Current Controls (Current Risk Score)							
Consequence	5	X	Likelihood	4	=	Initial Risk Rating	20

From: [REDACTED]

Sent: 20 January 2023 14:20

To: [REDACTED]

Cc: [REDACTED]

Subject: FW: RE: Cardiff and Vale UHB - Department of Sexual Health - Milcare Liquidation (IG.23.007)

Signed DPA attached. All sorted re: Firetext now.

Regards,

From: [REDACTED]

Sent: 20 January 2023 14:12

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: RE: Cardiff and Vale UHB - Department of Sexual Health - Milcare Liquidation (IG.23.007)

Hi [REDACTED]

Signed DPA attached. Nothing else required.

Thanks

From: [REDACTED]

Sent: 20 January 2023 12:08

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: RE: Cardiff and Vale UHB - Department of Sexual Health - Milcare Liquidation (IG.23.007)

Thanks [REDACTED] and thanks [REDACTED]

Are we sorted now on DPA and IT security front?

Regards,

From: [REDACTED]

Sent: 12 June 2023 11:45

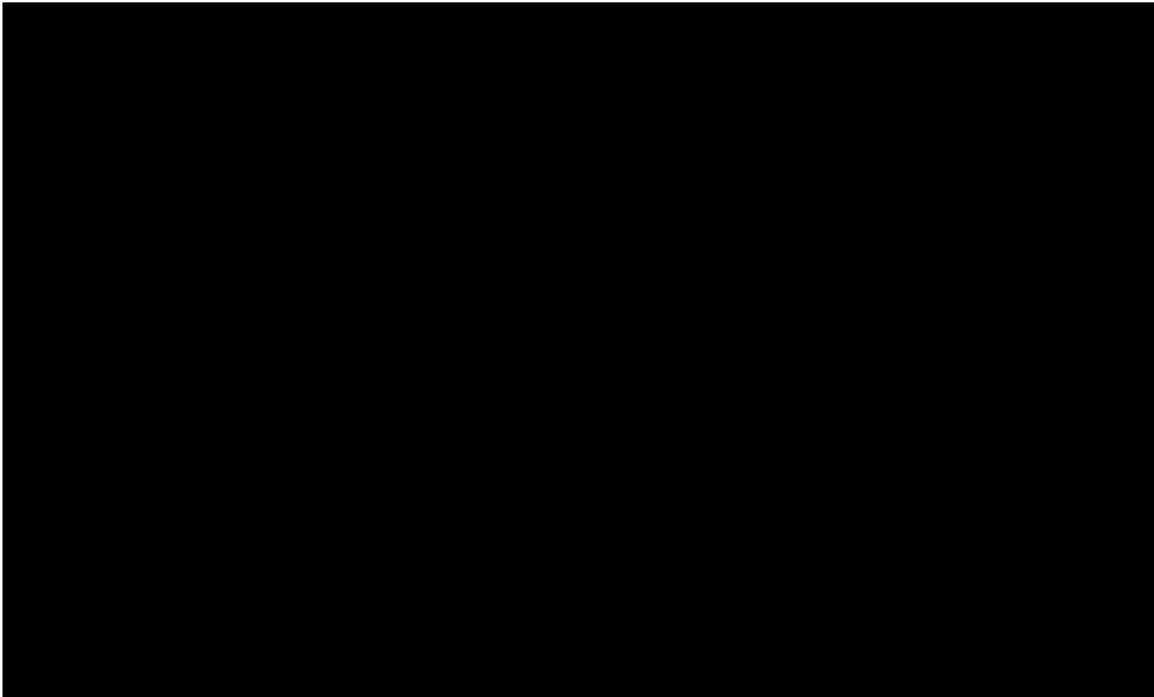
To: [REDACTED]

Subject: Millcare

Hi [REDACTED]

Please can you advise me of the situation with Millcare, as we have been receiving request to have the software install and a request stating they having issues using Millcare. We was under the impression that Millcare is no longer used because they gone bankrupt?

Cheers



We was not aware that a company had taken over Milcare support when Millcare went in to administration. The helpdesk was only ever involved with in installation of Millcare software to clients, any issues with the operation of the software was handled by Millcare support who had access to the Millcare server. Do we have contact detail for the new support company? This software was temperamental to install on the clients and when it failed we used to contact [REDACTED] at Millcare for diagnostic and support, so is this the same level of support from the new company?

Cheers

[REDACTED]
From: [REDACTED]

Sent: 12 June 2023 12:36

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: Millcare

Hi [REDACTED] – The MILL system is in use, and LIVE, there has been only a *change of ownership* of the software, which has meant that the MILL product/software is now supported by a company called Dedalus (key Mill staff have moved across to being Dedalus employees).

Others in this mail will want to comment further I suspect, but, from [REDACTED] perspective, then *uHB system support* should not have changed, and [REDACTED] should continue to support as ever was the case.

[REDACTED]
From: [REDACTED]

Sent: 12 June 2023 11:49

To: [REDACTED]

Cc: [REDACTED]

Subject: FW: Millcare

Hi, could one of you please respond to [REDACTED] query below.

Thank you, [REDACTED]

[Redacted]

From: [Redacted]
Sent: 12 June 2023 12:56
To: [Redacted]
Subject: RE: Millcare

Hi,

Do we have contact details, telephone number, names ect and do they provide the same level of support, IE do they have remote access to the Millcare server?

[Redacted]

From: [Redacted]
Sent: 12 June 2023 12:53
To: [Redacted]
Subject: RE: Millcare

Dedalus is the company providing support [Redacted]

From: [Redacted]
Sent: 12 June 2023 12:49
To: [Redacted]
Cc: [Redacted]
Subject: RE: Millcare

Hi All,

We now have a signed coco agreement which is with DHCW I believe for set up. So, still no active connection to allow Dedalus to support, hopefully a week or two away now.

[Redacted]

From: [Redacted]

Sent: 20 July 2023 13:05

To: [Redacted]

Subject: RE: Millcare

Hi [Redacted]

Have we had any more information on the company Dedalus and contact detail for support for Millcare?

Cheers

[Redacted]

From: [Redacted]

[Redacted]

Sent: 12 June 2023 13:34

To: [Redacted]

Subject: RE: Millcare

Hi [Redacted] moved across to *Dedalus* (probably back in Feb now, when MillCare went into liquidation), which will give you some confidence, as [Redacted] is excellent.

The support link (to the server) for Dedalus is yet to be put in place. [Redacted] has been chasing this actively for some weeks (various network forms and firewall requests, which [Redacted] needs to complete from the vendor side). This means support over MILL is more limited and fragile than normal (pre-Feb 'normal') right now...

[Redacted] has the contact details, so I'll let him write back to you.... As he may have other comments also.

Hi [REDACTED]

Eventually, [REDACTED] will be the contact.

Fortunately [REDACTED] has been supporting and hopefully may be able to assist (cc'd).

[REDACTED]

From: [REDACTED]

Sent: 20 July 2023 14:10

To: [REDACTED]

Subject: RE: Millcare

Hi [REDACTED]

I always had contact details for support mainly [REDACTED] so when things was not working [REDACTED] would fault find. At this time we have two PC's which are not working with Millcare. I have followed the process which I usually use to fix issue but this has failed. When this happen [REDACTED] used to check the server and remove the PC's from the session on the server, this normally fixed the issue. As I have no contact details then this has stopped me in my tracks, but as you say they still don't have access to the server. If you have contact detail can you please let me have them so we can support Millcare as we used to.

Cheers

[REDACTED]

From: [REDACTED]

Sent: 20 July 2023 13:57

To: [REDACTED]

Subject: RE: Millcare

Hi [REDACTED]

What would you like to know (see previous mail)?

Who do I need to contact please to take this forward.?

Thanks

[REDACTED]

From: [REDACTED]
Sent: Wednesday, October 11, 2023 1:02:44 PM
To: [REDACTED]

Subject: Alternative lablink details

Hi

Attached is the process mapping and list of lab requests that we would want to help with discussions with [REDACTED] I'll also forward on [REDACTED] from Signums draft rough and ready version that she put together in January prior to the Millcare liquidation
[REDACTED]

We need to sort the info from TDL to achieve this so that takes the conversation to a slightly different place!

We do not have a lablink with the PHW labs and the request for this to be considered has only just gone to DHCW for consideration.

Therefore, it would mean changing the pathology service that you use. I can approach TDL/HSL Pathology but it would be extremely useful to have complete clarity about the tests you are requesting through this – whether self sampling (based on the online kits) or whether you were asking for other tests that you would normally have from PHW.

Please advise – this is doable but need to be very clear about what you require

Thanks

[REDACTED]

From: [REDACTED]

Sent: 12 October 2023 08:35

To: [REDACTED]

Cc: [REDACTED]

Subject: Re: Alternative lablink details

Hi [REDACTED]

Can you get a contact in Signum and arrange a call asap please

[REDACTED] please just progress urgently

Thanks

[REDACTED]

From: [REDACTED]

Sent: Wednesday, October 11, 2023 1:38:03 PM

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: Alternative lablink details

Hi

I think we need to get back to Signum in first instance so that we can sort the link there and then when you are 'happy' with the front end we also work with TDL to sort the testing

[REDACTED]

From: [REDACTED]

Sent: 11 October 2023 13:23

To: [REDACTED]

Cc: [REDACTED]

Subject: Fwd: Alternative lablink details

Hi [REDACTED]

We are keen to progress discussion on use of this alternative to lab link in DOSH.

[REDACTED]

[REDACTED]

[REDACTED]

From: [REDACTED]

Sent: Thursday, October 12, 2023 1:05 PM

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: Alternative lablink details

Hi All

Just to update I spoke with Signum last night. We discussed the requirement and revisited the development that has been in place since the initial discussions in January and looked at what further requirements that are. They have got back to me this am having spoken with the developers, it would be a maximum of two weeks to create a single patient record with access to results from TDL (this is a separate discussion that has to be had), if the links come through more quickly it may be possible to do in one week but it will need to be tested too.

This development will allow the clinic to view the results system, to text negatives and to have one EPR which gets updated but with roles which can be limited in terms of who accesses what.

[REDACTED]
Cc: [REDACTED]

Subject: RE: Alternative lablink details

Thanks will get a cost list from TDL anyway so we have a starting point for that and that they are then aware of a possible service request. (no obligation!)
The tests from PHW are coded and charged to the HB and I have a list from March but will also get this checked
Regards
[REDACTED]

From: [REDACTED]

Sent: 12 October 2023 19:26

To: [REDACTED]

Cc: [REDACTED]

Subject: Re: Alternative lablink details

Hi [REDACTED]

Thanks for this.

In an ideal world, we would do the majority of test requests via one system i.e. TDL including:

- BBV serology including RPR for syphilis
- CT/GC NAAT - triple site (inc LGV as required)
- MG NAAT
- TV NAAT
- HSV PCR
- Syphilis PCR
- eGFRs

I think we would need to keep GC culture via PHW as currently direct plate and incubate which wouldn't be an option with TDL. I wouldn't feel strongly about high vaginal swabs, mid stream urines and other swabs for microscopy, culture and sensitivity - would be easier if this was TDL too but it is low volume.

Other non-routine bloods I think we could and should look at doing on WCP under hospital numbers.

I've copied in [REDACTED] too as our GUM [REDACTED] for her thoughts and in case I've forgotten anything. [REDACTED] but can pick up anything required on Monday
Obviously, we would need to have a clear idea of the cost difference between current testing via PHW and the cost via TDL

[REDACTED]

From: [REDACTED]
Sent: 13 October 2023 14:59
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: Alternative lablink details

Hi
Just to update after this morning's discussion
Looks like PHW labs can provide the necessary spreadsheet to link back into the Signum system – they have set up an excel file daily, just needs [REDACTED] to have input and they should be back Monday
[REDACTED]

From: [REDACTED]
Sent: 13 October 2023 09:53
To: [REDACTED]
Cc: [REDACTED]
Subject: Re: Alternative lablink details

Thanks everyone and see you in 13 minutes.

Agree with the list of tests from [REDACTED] Only thing I would change is to refer as U&E/electrolyte profile rather than eGFR (we don't know which algorithm they would use to calculate and would prefer MDRD as per the current lab).

[REDACTED]

The technical feed bits i suspect would be very easy to sort out given Signum already have a feed with TDL. We just need to be tight with our specific requirements (the process mapping charts werer an attempt to start that process).

The other question is what to do about same patient known on two systems i.e. do they merge and if so which way?

[REDACTED]

From: [REDACTED]
Sent: 12 October 2023 19:36
To: [REDACTED]

Licenses – DoSH Operations ████████ to active any available licenses so that new starters can log in after Fri 13th IF the system remains usable.

Recommendation

Local and National meetings are being scheduled daily to review and share any progress/developments.
Management support required to manage communication/actions across UHBs



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Situation

The Department of Sexual Health received notification that Millcare System LTD will go into voluntary liquidation as of Friday the 13th Jan – Giving the Department 48 hours' notice.

Background

Millcare is a comprehensive program that provides an electronic record of all patient activity, both in the central DoSH clinic based in Cardiff Royal Infirmary and community sites throughout Cardiff and the Vale. Millcare is central to the functionality of DoSH by providing a booking platform, sending texts to patients, storing electronic patient records, electronically link blood results, coding and prescribing medications. Due to the specialist nature of DoSH, Millcare provides flexibility to be used by all staff within DoSH including Health Advisors, Clinical Nurse Specialists, medical teams and all aspects of nursing and consultant care in an outpatient setting.

Millcare is a bespoke and well-established platform that has the ability to be tailored to the specialist services provided by DoSH. Millcare has absorbed the HIV patient data and is therefore supporting the full patient cohort of DoSH.

Assessment

Immediate Risks:

Inability to log on Monday 16th to Millcare System- Our patient records are stored on a C&V server not the cloud which is preferable, IT to investigate how these can be accessed, potentially we will need to download patient records in the form of a PDF – other Departments are prioritising HIV patients and those with safeguarding risks in the form of a “Clinical Summary” – Awaiting IT's advice- today.

Limited access to patient Texts – we have 8,600 texts available which would normally last @ 1 week.

Clinical decision has been made to: Stop all reminder texts, stop negative test results, Stop pre- implant / coil texts.

Mitigations: Website will/has been updated to provide all the relevant patient information contained in these videos.

Today we have been informed that we can purchase additional text capacity from “FireText” – as it is out sourced – Actioned Today

Diary and Clinic Bookings – Friday 13th the next 6 weeks clinic bookings will be downloaded so we have the most up to date version and paper bookings can commence straight away on Monday if required though this will be more time consuming and there is an element of risk due to human error.

Results – All requests can be made via paper forms.

The results queue has been printed off and will act as a reference point for what the department has requested.

Paper results have been requested from today as back up.

Prescriptions: These can be hand written so no disruption anticipated.

Clinic proformas are all being reviewed and updated and will be available if we have to resort to hand written notes.



2.5

Risks Register

DOSH – [redacted] Millcare and
Millcare liquidation is biggest challenge and ongoing high risk. Text message failure
linked to Millcare but separate issue in itself and results management failures.

