Chief Executive Update on Emerging Issues and Achievements – for Trust Board (Public) on 28 May 2026

1. Emerging Risks/Updates on Risks

1.1 Equip

At the Trust's equip Programme (replacement of finance, logistics, payroll and HR systems) Board at the beginning of May it was reported that the programme remained under significant delivery pressure, with the regional plan reported as approximately 12 weeks behind schedule due to failed stage gates.

On 22 May 2026, the Regional Programme Board received a detailed update on progress for **Release 1 (Finance and PaLS)** and the current position for **Release 2 (HR and Payroll)**. Based on the positive progress demonstrated against the open stage gates for Release 1, the Board approved the recommendation from the Programme Delivery Management (PDM) group to target 1 June 2026 (or the earliest feasible date thereafter) for entry into user acceptance testing (UAT), subject to the agreed entry criteria with the system integrator being fully met.

The Programme Board also approved the following:

- Release 1: Approval for the re-planning of activities to a November 2026 go-live in order to mitigate further slippage in the plan and to allow effective planning for essential go-live activities; and
- Release 2: Approval of the immediate re-plan of Release 2 activities based on a go-live date at the earliest available point in 2027.

Options for the Release 2 re-plan will be discussed at the next Programme Board meeting on **22 June**.

For Release 1, there will now be an increased focus on go-live readiness. This will commence with the first Go-Live Readiness Assessment (GLRA) session scheduled for 3 June.

BSO are progressing contingency plans to ensure business continuity post September 2026 when the contract for current systems ceases.

2. Key Achievements

2.1 Da Vinci 5 Robot

The Intuitive da Vinci 5 is the world's most advanced robotic surgical platform, and the first operations utilising this robot at BHSCT occurred at Belfast City Hospital in May.

The new da Vinci 5 robot system will be used to treat women with conditions including endometriosis , various gynaecological cancers and GI conditions. This will expand robotic surgery within the Trust from urology into gynaecology and colorectal surgery. Urology has primarily focused on men's health with well-established robotic processes for prostatectomy surgery using the older Xi robotic system.

This is the first time a Da Vinci 5 robot was used to treat gynaecological and Intestinal conditions within the Belfast Trust and Northern Ireland.

On Wednesday 13th May, the robot carried out its first gynaecological operation by Dr Hans Nagar, Consultant Gynaecology Oncology Surgeon.

On Thursday 14th May, Mr CJ Tan, Consultant General and Colorectal Surgeon operated on a patient.

Board members may also have noted the recent media coverage of robotic oesophogectomy.

Robotic surgery is less invasive and offers precise control and 3D vision. This improves outcomes and shortens recovery times. Additional benefits include significantly enhanced surgical training and the recruitment and retention of surgeons in Northern Ireland.

The robotic system cost over £3m and its acquisition was made possible by charitable funds, including donations from patients and their families.

3. Other Updates

3.1 Summary Report on Issues Related to Northern Ireland Cervical Screening Programme (NICSP) Report

Ms Kearney

The Summary Report on Issues Related to Northern Ireland Cervical Screening Programme (NICSP) independent Atherton identified significant governance, management, and quality assurance failures within the cervical screening programme, particularly within SHSCT, alongside wider system weaknesses across the Public Health Agency (PHA) and Department of Health structures.

The report concludes that the principal issues relate to failures of governance and assurance rather than clinical practice, including:

- Lack of formal approval and risk assessment for changes to screening pathways
- Inconsistent and unclear data methodologies affecting performance monitoring
- Inadequate management of workforce performance and service pressures
- Weak internal quality control and insufficient follow-up of quality assurance findings

These deficiencies were compounded by fragmented system oversight, with limited coordination and clarity of roles between SHSCT, PHA, and SPPG.

The report highlighted that SHSCT Trust Board oversight was insufficient, with inadequate processes to identify, escalate, and scrutinise risks, resulting in prolonged periods where issues remained unaddressed. This reflects broader weaknesses in governance frameworks and assurance mechanisms.

The report emphasises the need for strengthened governance and system leadership, including:

- Enhanced Trust Board assurance and scrutiny of clinical programmes
- Clear, standardised data definitions and performance measures
- Robust internal quality control and external quality assurance processes
- Improved collaboration and accountability across organisations
- Formalised, routine reporting arrangements (including programme-level reporting to Trust Board)

Overall, the Atherton review concluded that addressing these systemic governance and assurance issues is essential to restore confidence, ensure patient safety, and support the long-term effectiveness of the cervical screening programme

For BHSCT, cytology actions are about moving to a highly controlled, standardised, and transparent service model, where:

- Practice aligns with national standards
- Performance is clearly measured and managed
- Risks are visible and escalated
- Quality assurance is robust and acted upon

A link to the report is below

https://www.health-ni.gov.uk/sites/default/files/2026-05/SIR%20FRANK%20ATHERTON%20CYTOLOGY%20REPORT%20-%20MAY%202026.pdf

3.2 Lord Carter visit to BHSCT Laboratory Services – Ms Kearney

Lord Patrick Carter of Coles, is currently leading an independent review of UK Pathology Services on behalf of the Institute of Biomedical Science (IBMS). This important review is expected to be published in the coming months and will significantly influence the future direction of pathology services across the UK. To aid his understanding of the landscape, Lord Carter visited Northern Ireland on 21 May 2026. During his visit, he toured BHSCT laboratories, accompanied by Minister Nesbitt, and members of the Pathology Blueprint team. The visit provided an excellent opportunity to discuss both the opportunities and the challenges facing HSC pathology, while also highlighting our vision for the future of these essential services.