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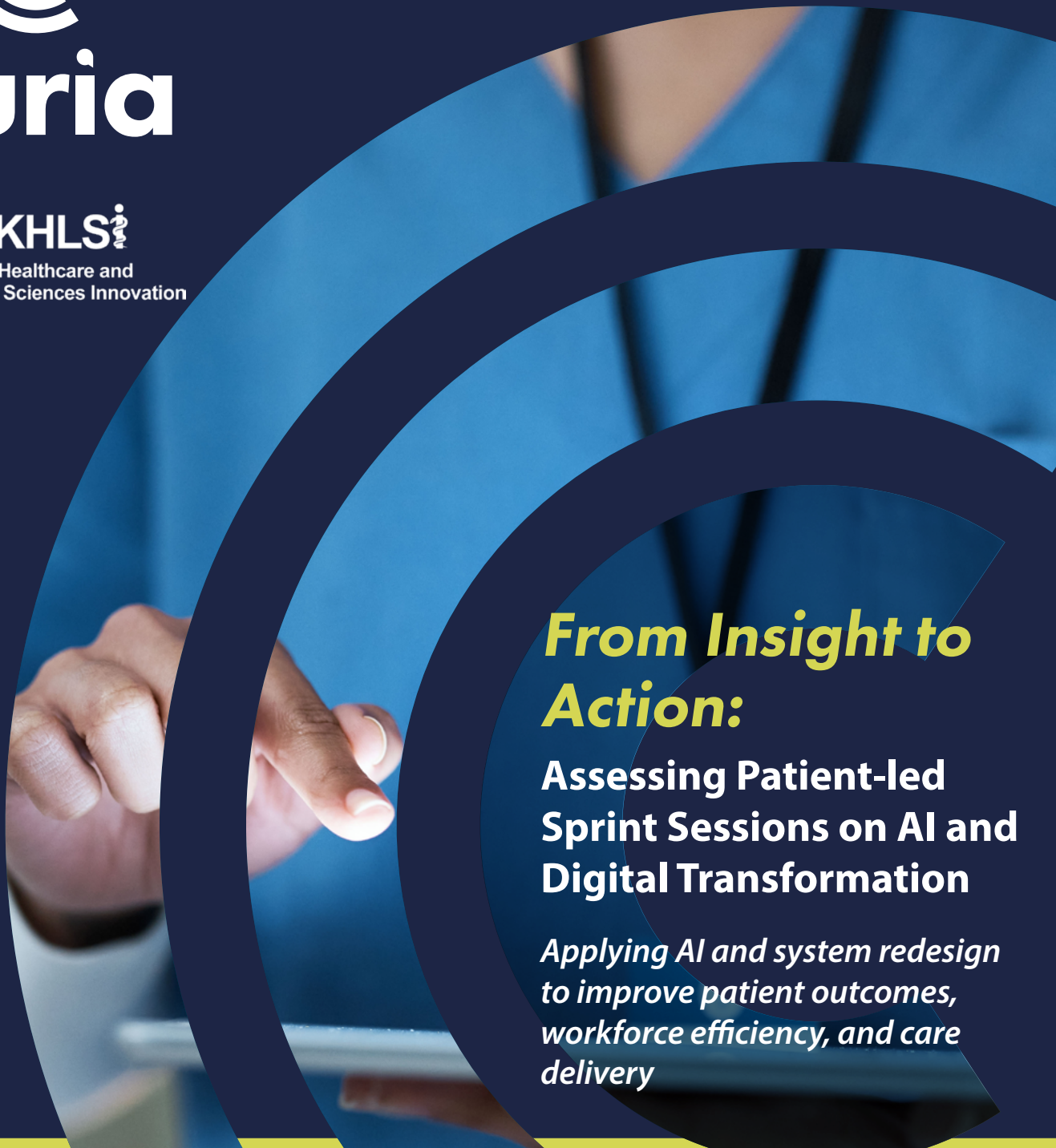

From Insight to Action:

Assessing Patient-led Sprint Sessions on AI and Digital Transformation

Applying AI and system redesign to improve patient outcomes, workforce efficiency, and care delivery

System Partners:

a.r.u. Anglia Ruskin University

NHS
Essex Partnership University
NHS Foundation Trust

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Paul Scott, CEO, Essex Partnership University NHS Foundation Trust, opened the conference.

Foreword

It is a pleasure to introduce this report following our *Digital Conference: AI, Corporate Transformation, and Time to Care*, delivered in partnership with Anglia Ruskin University and policy institute Curia.

This conference was an important moment for our team. Given our ambitious strategy, it demonstrated our intent to move decisively from ambition to delivery.

Across the NHS, we face a set of challenges that are both well understood and increasingly urgent. Demand is continuing to rise, workforce pressures are intensifying, and too often the systems we rely on are creating friction rather than flow. At the same time, the people we serve – our patients, families, and communities – rightly expect care that is more responsive, more personalised, and more joined up.

Digital transformation and artificial intelligence (AI) offer us a significant opportunity to respond to these challenges. But technology alone will not solve them. Real transformation comes from how we redesign services around people, how we support our workforce, and how we work in partnership across organisational boundaries.

That is why the patient-led sprint sessions captured in this report are so important.

By grounding discussions in real lived-experience personas, we were able to move beyond abstract conversations about technology and focus instead on where the system is not working as well as it should – and what we can do, now, to improve it.

What emerged was that many of the barriers faced by patients are not due to a lack of effort or expertise, but to fragmentation, duplication, and processes that have not kept pace with need.

The insights from these sessions reinforce several priorities for EPUT.

First, we must continue to strengthen our core digital infrastructure. A single, integrated patient record and a more coherent data environment are not optional – they are essential foundations for safer, more proactive care.

Second, we must use technology to release time for care. Reducing administrative burden and enabling our staff to focus on what matters most to patients is central to both workforce sustainability and quality of care.

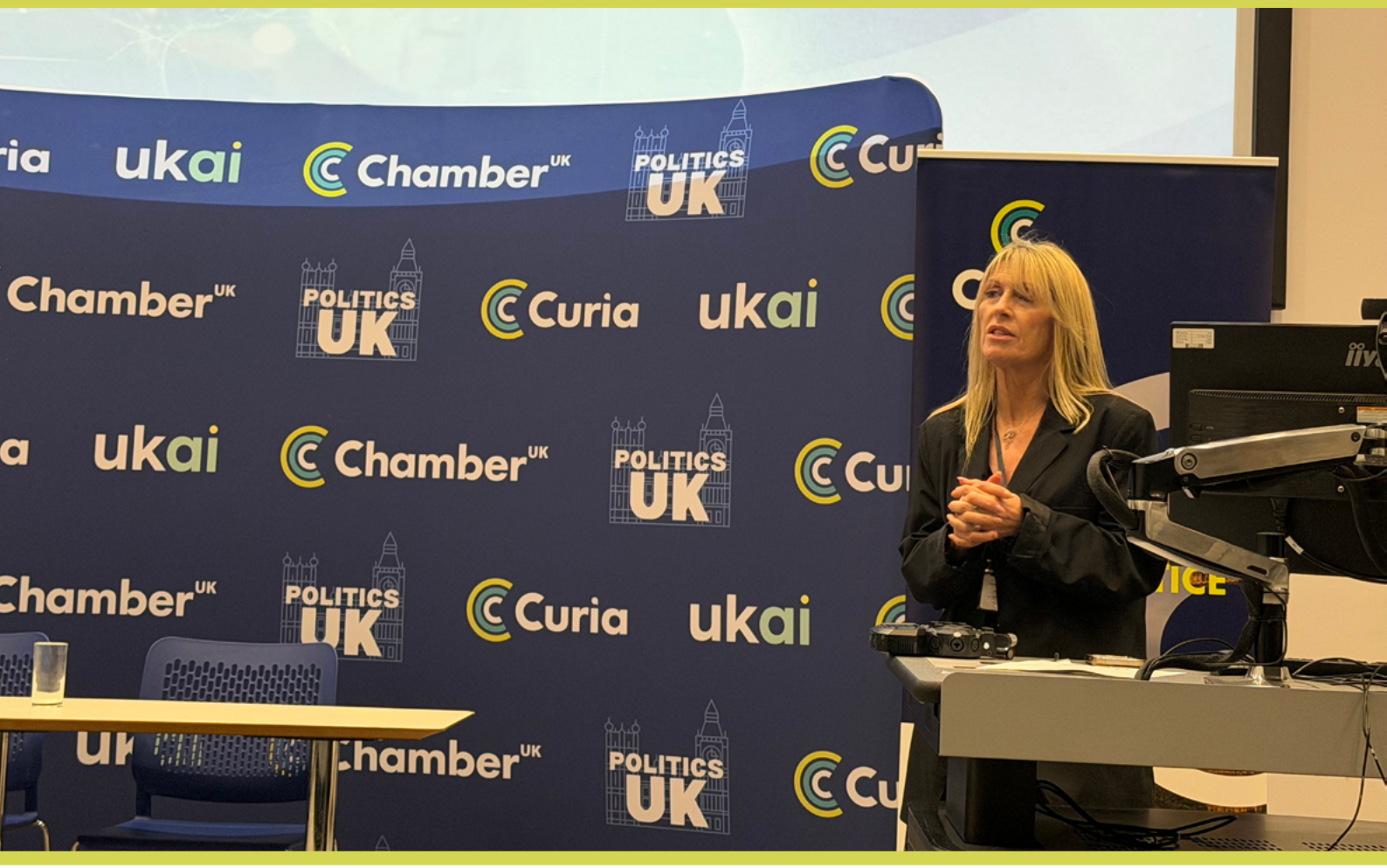
Third, we must place people at the centre of everything we do. That means designing services that are trauma-informed, coordinated, and responsive to individual needs – not defined by organisational silos.

Finally, we must be prepared to act. The conversations captured here are valuable, but they must translate into practical change. The scale of the challenges we face – from long waiting times to health inequalities – requires urgency, collaboration, and a willingness to do things differently.

I would like to thank all those who contributed to the conference, and to the development of this report – colleagues from across EPUT, our partners in academia and industry, and those who brought their expertise and insight to the sprint sessions.

This report is not an endpoint; it is something we hope will remain at the forefront of thinking amongst the team. It is part of an ongoing journey to transform how we deliver care, support our workforce and improve outcomes for the communities we serve.

Paul Scott
Former Chief Executive
Essex Partnership University NHS Foundation Trust
(August 2020-June 2026)



Alex Green former Deputy Chief Executive and now Interim Joint Chief Executive at Essex Partnership University NHS Foundation Trust thanks attendees and sets out a plan for delivering the recommendations from the day

Foreword

We would like to begin by paying tribute to Paul Scott, whose leadership was instrumental in establishing Essex Partnership University NHS Foundation Trust's (EPUT) ambitious programme of AI and digital transformation. Paul recognised that rising demand, workforce pressures, and fragmented systems require a different approach. He championed the Digital Conference and its patient-led sprint sessions as a practical way of moving beyond discussion and identifying how technology, service redesign, and partnership working could improve care.

The Board was clear that technology alone would not transform services. Their vision placed patients, families, and lived experience at the centre, ensuring that innovation began with the realities of navigating care rather than with the capabilities of a particular product. The sprint sessions featured in this report reflect this approach, using patient personas to expose fragmentation, duplication, administrative burden, and missed opportunities for earlier intervention.

The priorities set out in this report provide a strong foundation for the next phase of EPUT's work. They include developing a more integrated patient record and coherent data environment; using AI and digital tools to identify risk and support earlier, leading to more preventative care; reducing avoidable administrative demands on staff; and designing services that are coordinated, responsive, and trauma-informed. Just as importantly, the report recognises the need for strong governance, workforce involvement, and continuous monitoring to ensure that new tools remain safe, effective, and equitable.

As Interim Joint Chief Executives, we are committed to taking this programme forward. This will mean working closely with colleagues across EPUT, patients, carers, system partners, academia, and industry to translate the sprint findings into practical improvements. We will support responsible experimentation, but maintain a clear focus on evidence, measurable outcomes, and the experience of patients and staff.

This report is therefore not an endpoint for the programme. It provides a framework for continued delivery, learning, and accountability. We thank Paul for pioneering this work, and everyone who contributed their insight and expertise. Our responsibility now is to build on that foundation, sustain its momentum and ensure that innovation delivers meaningful improvements for the communities EPUT serves.

Trevor Smith and Alex Green
Interim Joint Chief Executives
Essex Partnership University NHS Foundation Trust

Essex Partnership University NHS Foundation Trust's Digital Conference took place in March 2026, and brought together leaders from across the Trust with experts on digital change.

Executive Summary

The patient-led sprint sessions formed a central component of the *Digital Conference: AI, Corporate Transformation and Time to Care*, convened by Essex Partnership University NHS Foundation Trust (EPUT) in partnership with Anglia Ruskin University and Curia.

The conference was designed to respond to a set of well-established but increasingly urgent pressures across the NHS – rising demand, growing waiting lists, workforce constraints, and fragmented systems that too often create friction rather than flow. Within this context, digital transformation and AI present a significant opportunity to reduce bureaucracy, release staff time and improve organisational performance, while delivering more responsive, personalised, and joined-up care.

EPUT's ambition is to position itself at the forefront of this shift – moving decisively from strategy to delivery and demonstrating how AI can be applied responsibly and at scale as part of whole-system transformation rather than isolated technology deployment.

The sprint sessions were designed as a practical way to support this transition. Using Curia's patient-led methodology, participants worked through real lived-experience personas to redesign care pathways from the perspective of patients and families. This approach placed the patient journey at the centre of system redesign, enabling participants to identify both operational and emotional friction, and to explore how AI-enabled and digital solutions could address these challenges in a way that improves outcomes while increasing efficiency.

Published August 2026.
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