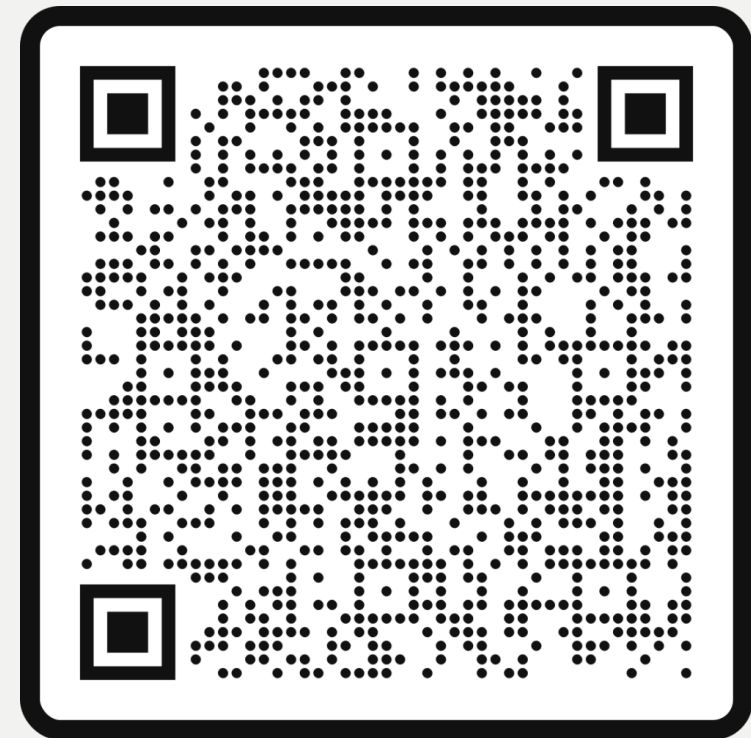




Welcome to the 2<sup>nd</sup> NHS Identity & Access Management Summit!



25<sup>th</sup> September 2025  
Leonardo Hotel, Milton Keynes,  
Midsummer Boulevard, Milton Keynes,  
MK9 2HP



## Chair Opening Address



**Bharat Thakrar**  
CISO  
CyberBTX



## Today's Sponsors







# Keynote Presentation



**Gavin Stone**

Former British intelligence officer/ Ranked 9th in the world  
body language expert/Best-selling author /Co-founder of  
Spy Q /Gusset host of NBC News Radio show - House of  
Mystery



## Panel Discussion



**Dr Michael Watts**

Acute Medicine Doctor and NHS  
England Clinical Entrepreneur  
UHDB NHS Trust



**Prof Joe McDonald**

Founder Great North Care  
Record, Consultant  
Psychiatrist, Peripatetic  
Medical Director  
The Access Group



# Headline Sponsor







# Headline Sponsor



**Jeff R Jones**  
Admin By Request



# Refreshments & Networking





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Register your Interest





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# Join the Healthcare Engagement Society (HES)

- **What it is** – A secure, year-round platform bringing NHS professionals together across six specialist communities.
- **Why it matters** – Stay connected beyond today's event, share challenges, and learn from peers facing the same priorities.
- **Your benefits** – Exclusive access to interviews, insights, best practice, and real-time discussion threads with colleagues nationwide.
- **How to join** – Simply scan the QR code, choose your community, and start connecting today.



**SCAN ME**





## Chair Morning Reflection



**Bharat Thakrar**  
CISO  
CyberBTX





# Case Study





# Case Study



**Daniel Johnston**  
MRes, RN, Director Clinical Ops  
Int., ACNIO, NHS CSO  
Imprivata



**Andy Wilcox**  
Sr. Product Marketing  
Manager  
International



# Unravelling national access

Clinical access considerations as the  
care identity service evolves

**Daniel Johnston**, MRes, RN, Director Clinical Ops Int., ACNIO,  
NHS CSO

**Andy Wilcox**, Sr. Product Marketing Manager  
International







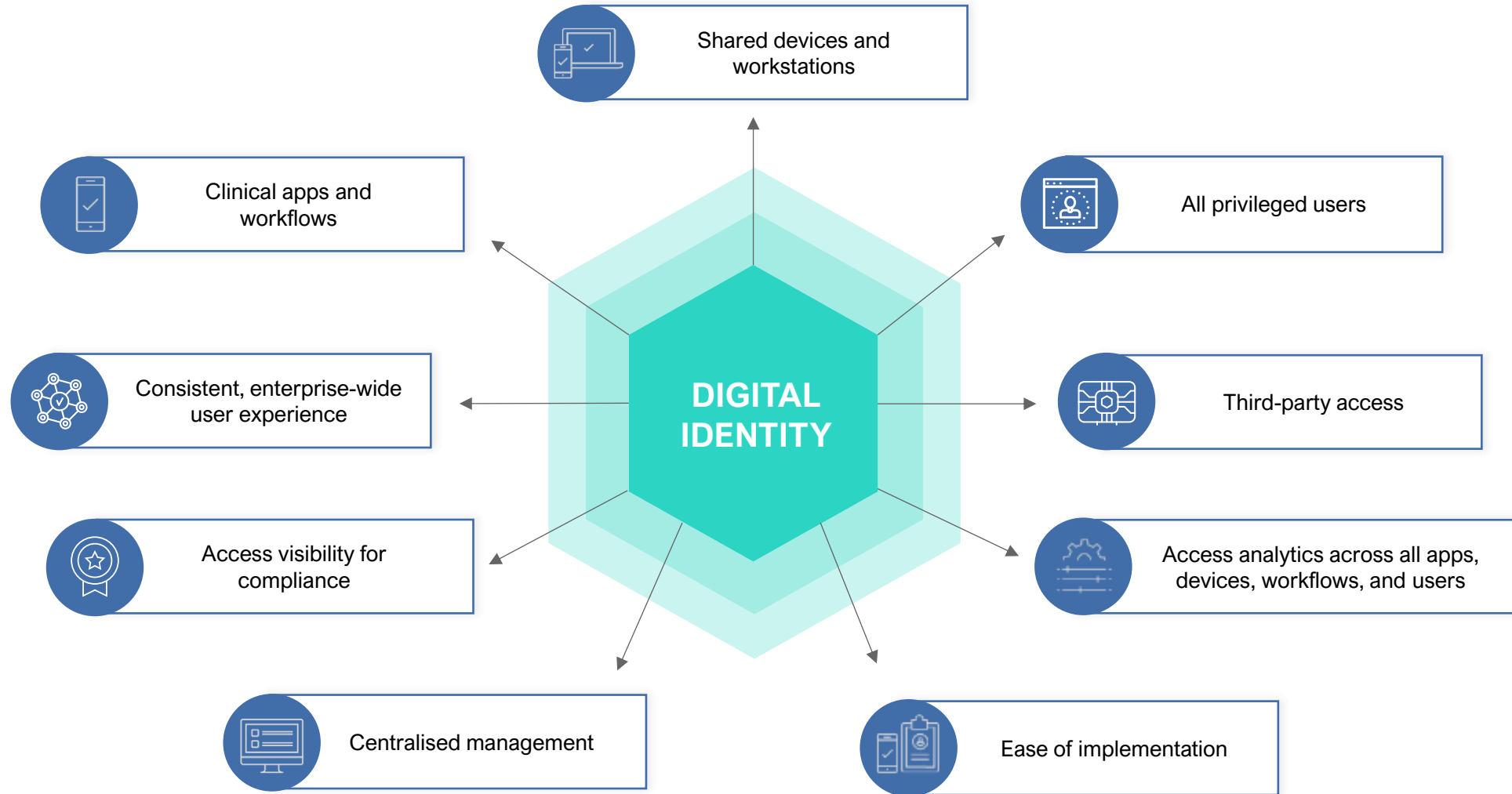
## Local clinical access needs

Clinical workflows require the use of shared workstations and other shared devices.

**Fast access, secure session management, and fast user switching on all shared devices are critical requirements for hospitals.**



# Digital identity is the link between people, devices, and data





# National clinical access needs

## NHS SPINE (CIS1 PKI Platform)

- Spine Combined workflow
- Worked with Smartcards
- **Reduced from 20+ to once per shift**

## NHS SPINE (CIS2 OIDC Platform)

- Smartcard and other authenticators e.g. FIDO2
- Shift to modern, open standards
- **Address core usability issues**

## NHS SPINE (CIS1 PKI Platform)

- Virtual Smartcard Solution
- Works without smartcard readers
- **Enabled Covid WFH workflows**

## National Access Across EU

- **France**
- **Sweden**
- **Denmark**
- **Netherlands**



Security



Compliance



Privacy



Usability



Efficiency



Productivity

## Don't compromise on security or productivity

Every second of critical work should be both frictionless *and* secure.



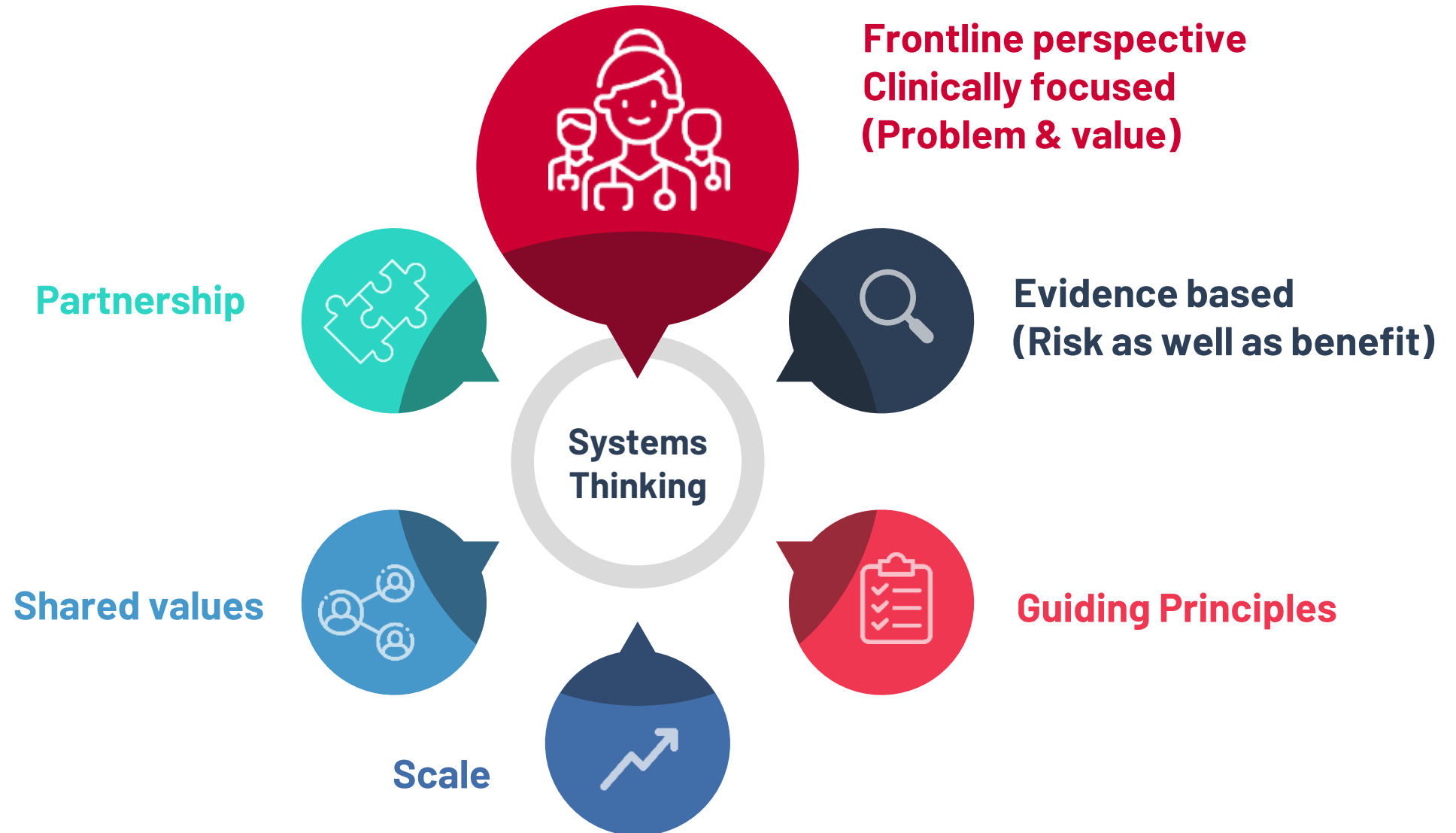
# Frontline perspectives...clinical value wins heart & minds

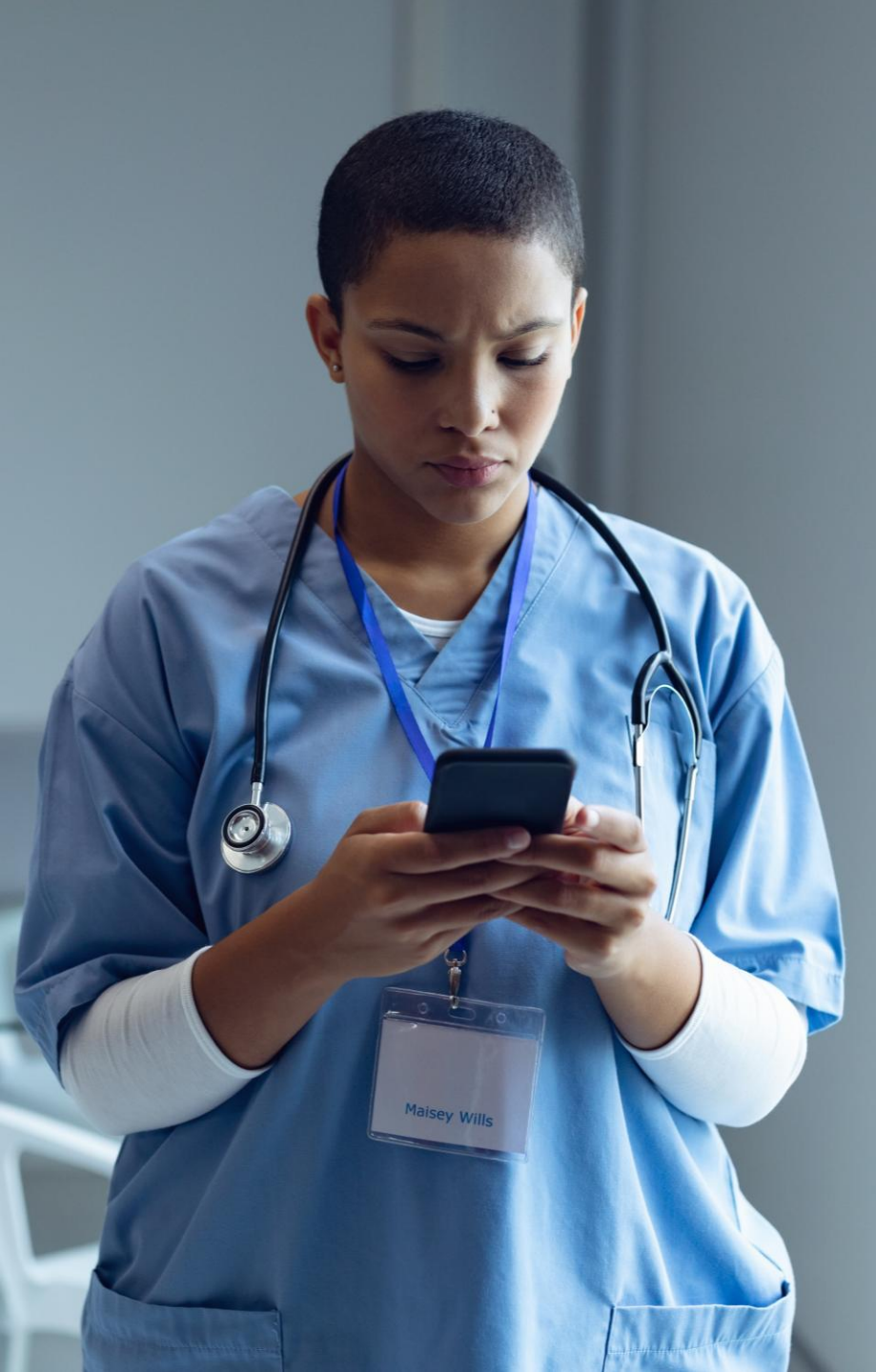


Picture credits: LinkedIn



# Health IT success: Defining and scaling





# Inefficient access challenges adoption and usability

## Security challenges

Balancing security with usability whilst meeting regulatory requirements

## Management & Adoption Challenges

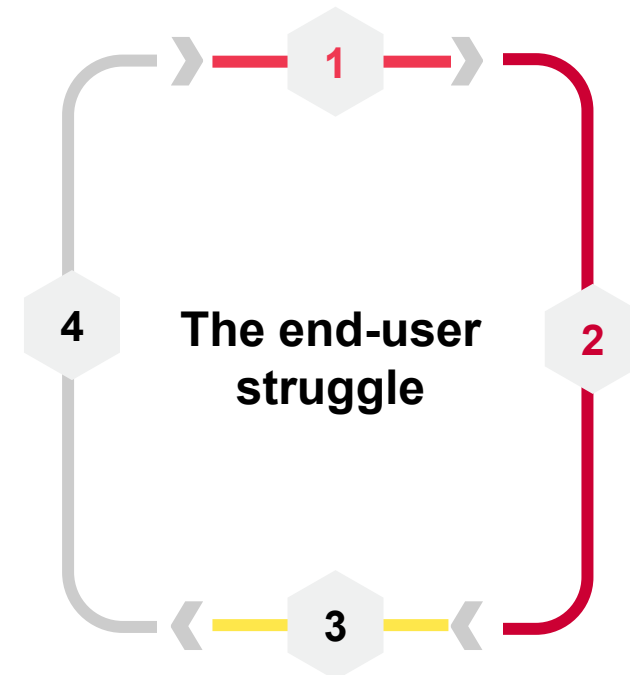
How to deliver a personalised experience on shared devices

## Everyday reality

Fast access to data conflicts with security needs leading to workarounds

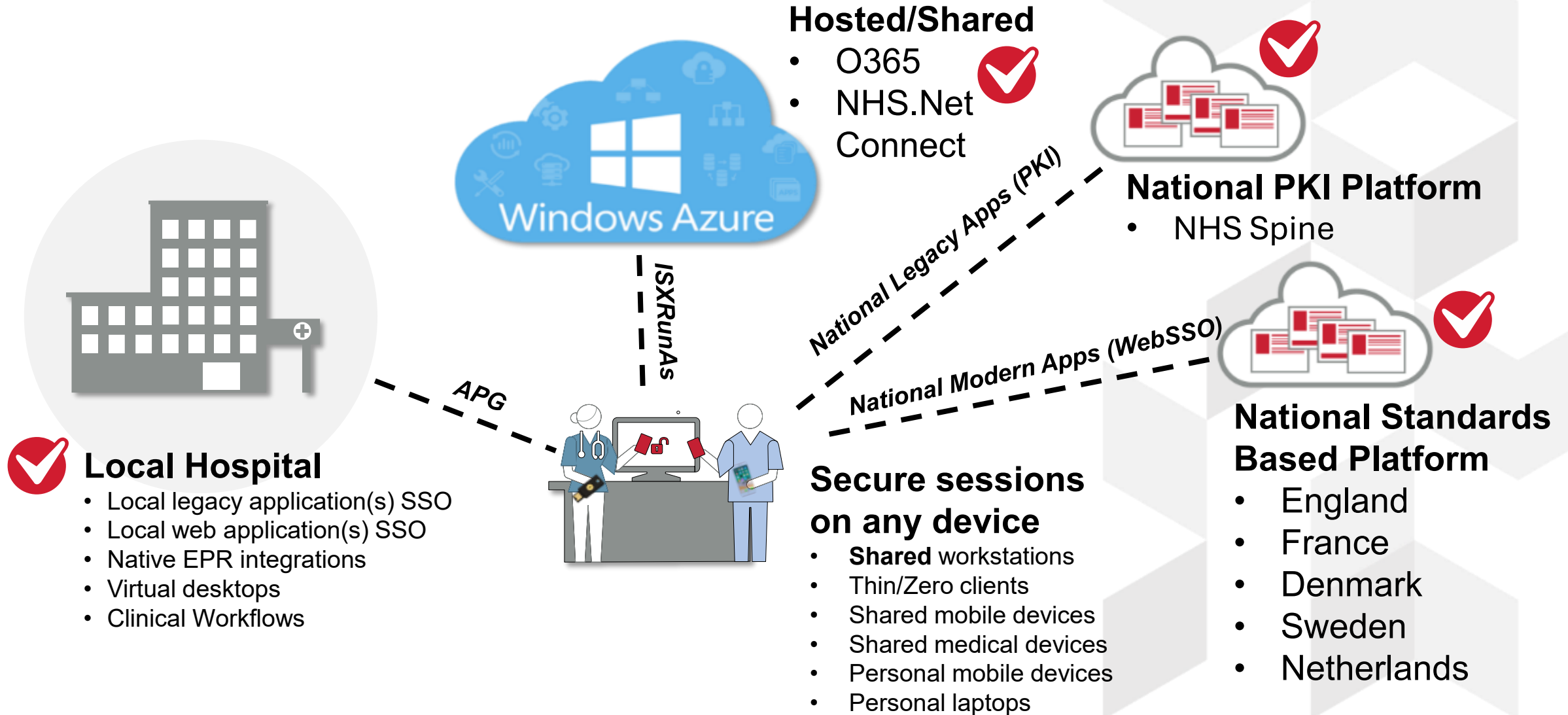
## Human factor

Password sharing, generic logins and user resistance to new technology



# End-to-end access needs of clinicians

A secure and streamlined workflow



# Passwordless Platform for Healthcare

## Clinical MFA and SSO

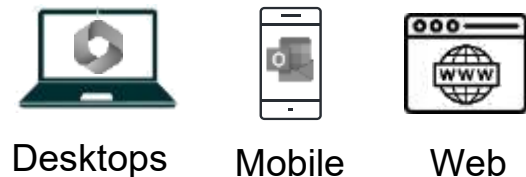
### Shared devices



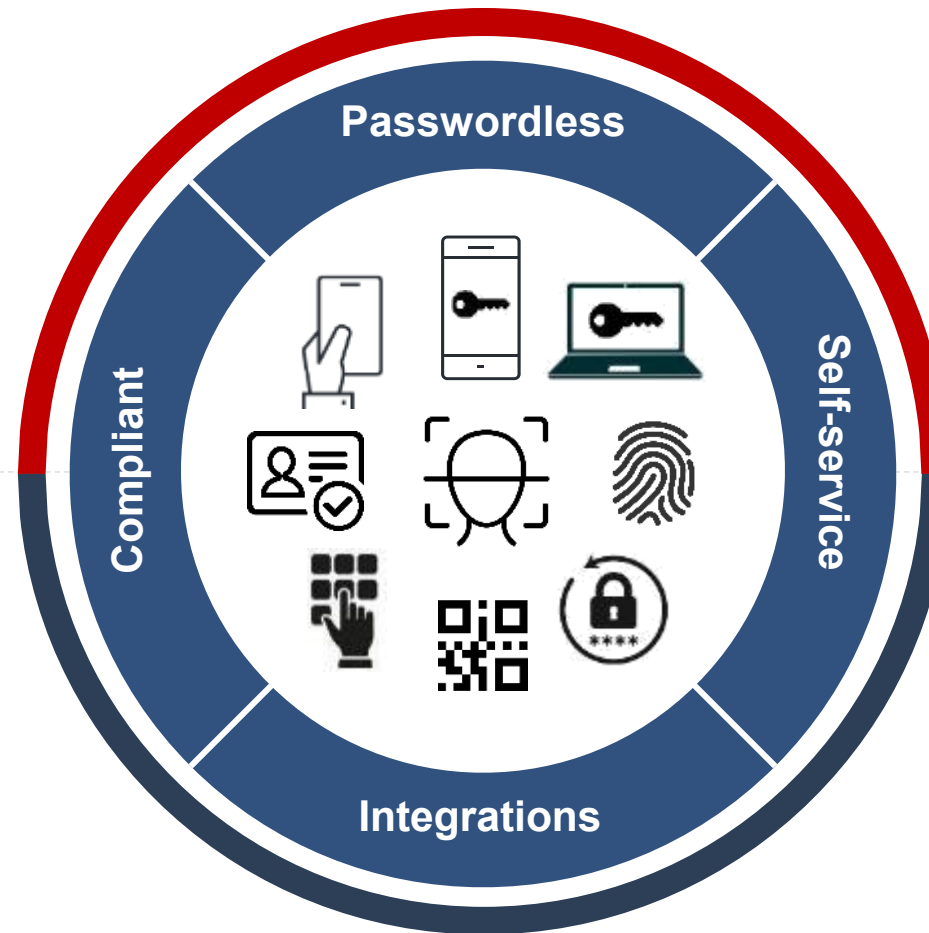
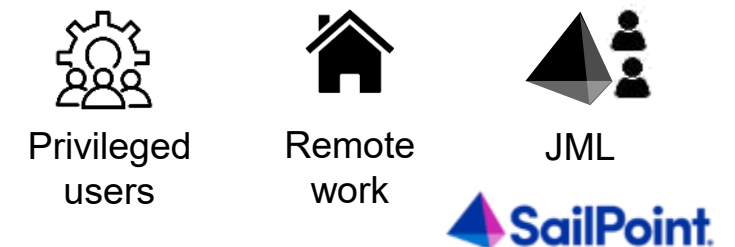
### Clinical workflows



### Personal devices



### Enterprise workflows



## Non-Clinical MFA and SSO



# Takeaways

## Contact our Presenters:



**Andy Wilcox**

Sr. Product Marketing  
Manager  
Imprivata

[awilcox@imprivata.com](mailto:awilcox@imprivata.com)



**Daniel Johnston, MRes, RN**

Director Clinical Ops Int.,  
ACNIO, NHS CSO  
Imprivata

[djohnston@imprivata.com](mailto:djohnston@imprivata.com)

## Download our resources:



**Harrogate and  
District NHS FT  
case study:**



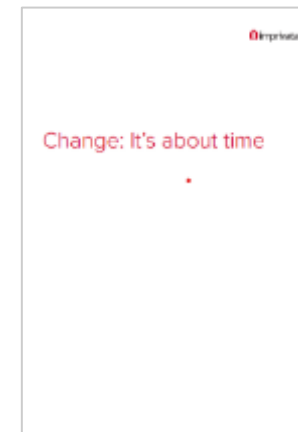
<https://bit.ly/4gCN1jD>



**Journey to  
Passwordless  
Whitepaper:**



<https://bit.ly/4pX4rvV>



**It's about time  
whitepaper:**



<https://bit.ly/4pGqTZN>





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## Case Study





# Case Study



**Peter Batchelor**  
Regional Sales Director  
Silverfort



**Josh Neame**  
Chief Technology Officer  
BlueFort Security Ltd



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## Fireside Chat



**Prof Joe McDonald**

Founder Great North Care Record, Consultant Psychiatrist,  
Peripatetic Medical Director  
The Access Group



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## Case Study







# Case Study



**Drew Maskell**  
Solutions Engineer  
SailPoint



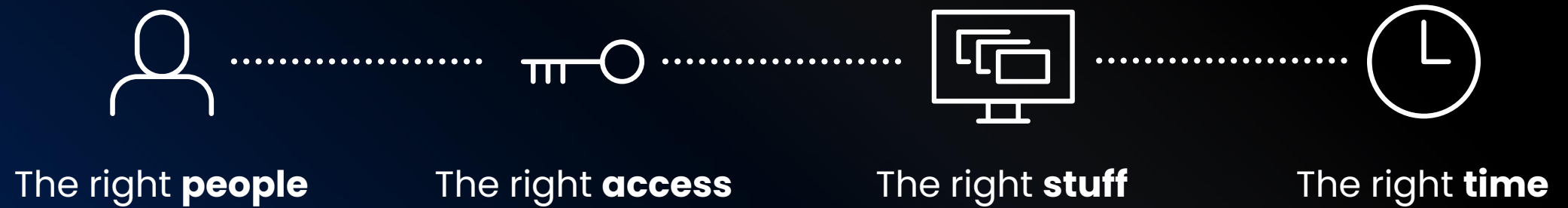
**Jake Maskell**  
Advisory Solutions Consultant  
SailPoint



# Digital Transformation in Healthcare

Drew Maskell  
Solutions Engineer  
SailPoint

Jake Maskell  
Advisory Solutions Consultant  
SailPoint



# Identity Security



# Identity Security



Security and Risk  
Reduction



Regulatory  
Compliance



Operational  
Efficiency

# What are healthcare organisations trying to solve?



Provide day one access while enforcing a least privilege strategy



Manage and secure access to clinical and business applications, systems, and data



Align to regulations such as the DSP Toolkit and CAF requirements.



Prove compliance quickly with automated reporting



Reduce non-employee and machine identity access risk

# How do we address these challenges?



Automated provisioning



Outlier detection & remediation



Access certifications



Insights & reporting



Role discovery & optimisation



100s of connected applications



# SailPoint–Imprivata partnership

Strategic integration for stronger enterprise identity security



*Identity security to manage and  
secure access to critical data and  
applications*



*Streamlined and secure access for  
clinicians and third-party ecosystems*



# Thank you!



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# Lunch & Networking



## Chair Afternoon Reflection



**Bharat Thakrar**  
CISO  
CyberBTX



## Case Study







# Case Study



**Adam Timberley**  
Solutions Architect  
SolarWinds



# Modernising Observability: Building for the future



Jem Campbell & Adam Timberley  
SolarWinds

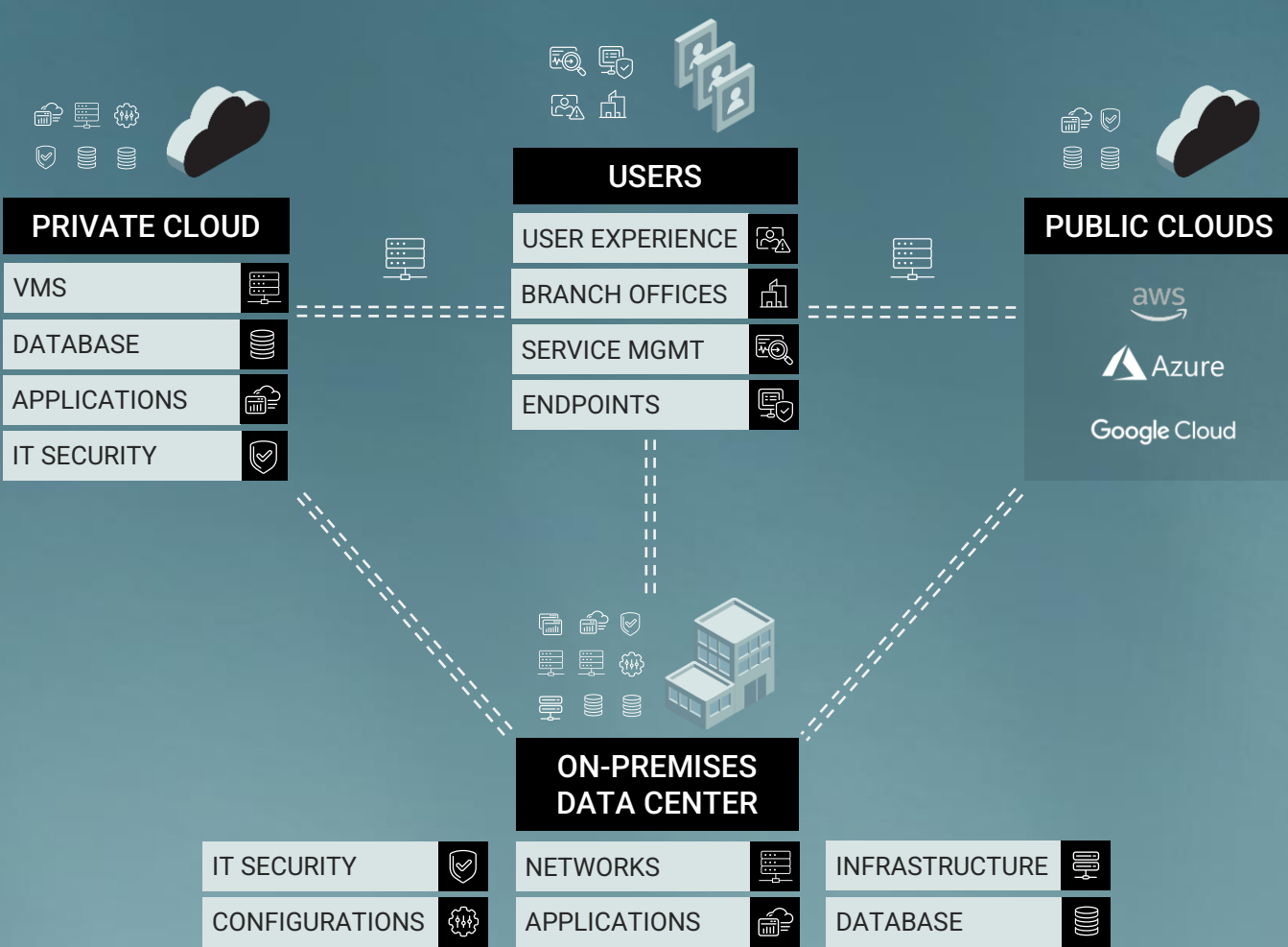



CUSTOMER CHALLENGES

IT COMPLEXITY

SERVICE DELIVERY

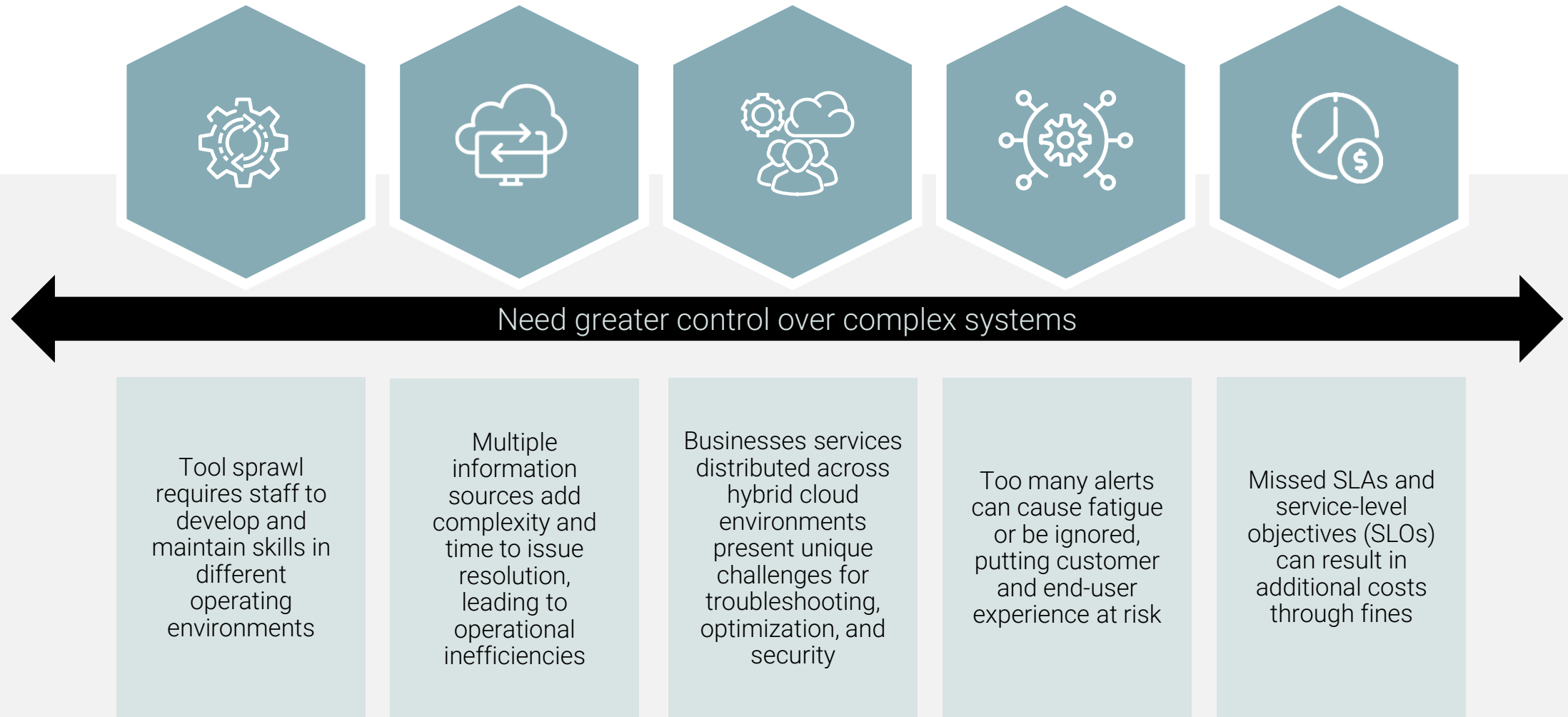
-  Silos and Tool Sprawl
-  End-to-End Visibility Gaps
-  Impacted Service Delivery
-  Cost and Resource Constraints
-  Implications of AI
-  Security and Regulatory Compliance
-  Manual Root Cause Analysis (RCA) and Productivity



-  **PEOPLE**
-  **PROCESS**
-  **TECHNOLOGY**

# Customer Challenges

Limited visibility across the technology stack





# Monitoring is the Foundation for Observability

Observability is the evolution of monitoring



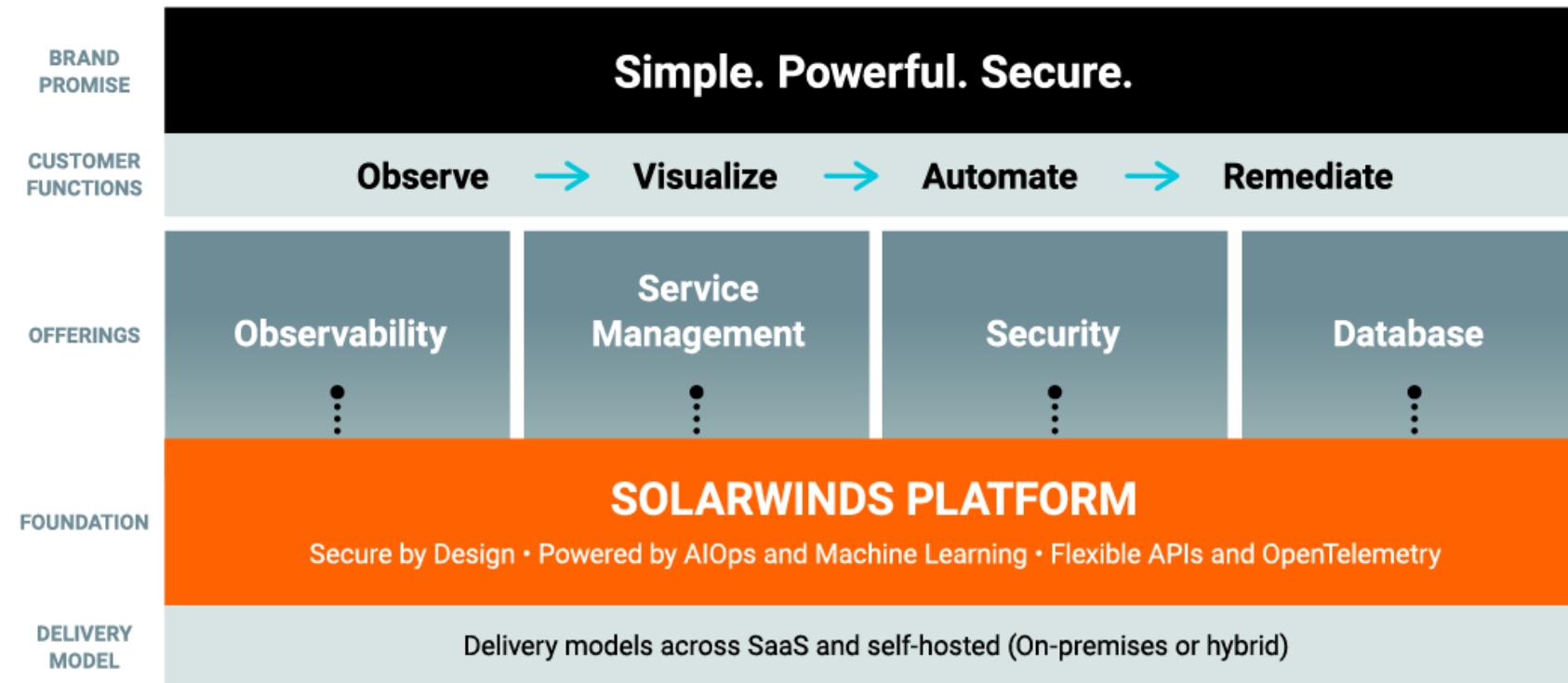
Evolve from **reactive Monitoring**  
of **WHAT** is happening



**proactive Observability**  
into **WHY** something is happening  
and gain **actionable insights**

# The SolarWinds Platform

Designed to meet your needs with ease



A world-class unified monitoring, observability, and service management platform

- Accelerate transformation
- Combat complexity with ease
- Fuel innovation and deliver a superior digital experience
- Maximize agility and operational efficiency
- Minimize cost and risk

# Monitor and Observe Everything From Anywhere

Powerful observability for your entire IT ecosystem



SolarWinds integrates public cloud, private cloud, and traditional data center observability

## Self-Hosted

Deploy on-premises or in private or public cloud  
(Formerly Hybrid Cloud Observability)



Network  
Infrastructure  
Applications  
Database  
Security

Connected  
Visibility  
and AIOps

## SaaS

For modern, cloud-native environments  
(Formerly SolarWinds Observability)



Network  
Infrastructure  
Applications  
Database  
User Experience

Monitor, observe, and manage cloud environments and on-premises infrastructure with the same precision

# Monitor and Observe Everything from Anywhere

Powerful observability for your entire IT ecosystem



## POWER UPs and INTEGRATIONS

- Storage SRM
- Web WPM
- Database Self-Hosted
- Security, SEM, ARM
- Service Desk

## SolarWinds Observability Self-Hosted (Formerly Hybrid Cloud Observability)

- Self-hosted, hybrid monitoring
- Full-stack observability
- AIOps enhanced with ML
- Flexible node-based licensing
- Subscription
- Integration with ITSM, DB, and Security products

Self-hosted insights into SaaS

Connected Visibility



## SolarWinds Observability SaaS (Formerly SolarWinds Observability)

- SaaS, hybrid monitoring
- Full-stack observability
- AIOps enhanced with ML
- Modern cloud-native app stack
- Code-level performance insights across a broad set of languages
- Correlated metrics, traces, and logs

## INTEGRATIONS

- Telegraf
- OpenTelemetry
- API-Based
- Agent-Based
- Service Desk



Network Performance	Network Configuration Management	NetFlow Traffic Analysis	Virtualization Monitoring	Server & Application Monitoring	Network Performance	Network Configuration Management	NetFlow Traffic Analysis	Virtualization Monitoring	Server & Application Monitoring
Log Analysis	Database Monitoring	VoIP & Network Quality	IP Address Management & User Device Tracking	Server Configuration Monitoring	Log Analysis	Database Monitoring	Application Performance Monitoring	DEM Synthetics & Real User Monitoring	Containers & Kubernetes Monitoring





## AI-Powered

Utilize artificial intelligence and machine learning across hybrid environments to enhance IT operations, speed up problem resolution, and improve customer experience.

- True observability via deep data collection and correlated analysis
- Automated workflows and tasks that reduce repetition and errors
- Intelligent analytics and alerts promote proactive decision-making and preventative remediation

- Improved operational efficiency
- Enhanced system performance
- Reduced MTTR, MTTD, MTTV
- Intelligent automation



### CAPABILITIES



Anomaly  
Detection



Forecasting



Root Cause  
Assist



Alert  
Clustering



AI-Guided Solutions and  
AI-Generated Responses



AI-Generated  
Incident Summaries



## Incident Response by Squadcast

AI-powered unified incident response solution for engineering and support teams to bring alerts into one place and manage incidents from consolidation to resolution.

- Alert correlation and enrichment
- Automated on-call management
- Real-time incident collaboration
- Unified service intelligence and SLO management
- AI and intelligent automation
- Executive and stakeholder communication



### Respond Faster

Reduce MTTA and MTTR by accelerating every step of incident response through intelligent alert routing, guided collaboration, and smart escalations.



### Improve Service Reliability

Maintain uptime and deliver consistent performance with real-time SLO tracking, proactive error budgeting, and unified service intelligence to stay ahead of incidents.



### Reduce Operational Load

Help teams focus on what matters by cutting alert noise and manual effort with context-rich alerts, automated workflows, and AI-powered summaries.



### Boost Team Morale

Build healthier, high-performing teams with fair on-call scheduling, fewer disruptions, and seamless handoffs.



## SolarWinds Service Desk

AI-powered SaaS solution built to help IT service management teams resolve issues faster, structure and centralize information, provide high-quality services, and connect the organization.

- Incident and Service Management
- Asset Management and CMDB
- Problem and Change Management
- SolarWinds AI
- Integrated with SolarWinds Observability for centralized Incident Response



### Respond Faster

Delight employees with lightning-fast service management. Service Desk equips agents with essential tools to reduce decision time and resolve faster.



### Structure and Centralize

Disorganized support frustrates customers. A centralized service desk ensures consistent, quality technical support, keeping customers satisfied and services organized.



### High-Quality Services

A good ITSM setup helps optimize workflows, boost efficiency, and scale smarter, improving ROI while maintaining high-quality IT services.



### Connect the Organization

Break barriers to collaboration with ITSM solutions that empower teams to streamline communication, integrate systems, and enable seamless collaboration and operations.

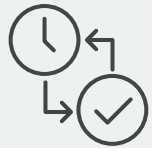
# SolarWinds Observability Designed for you

Take your observability to the next level



## Built-in intelligence with the following:

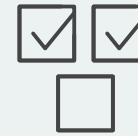
Anomaly detection • Event correlation • Remediation • Auto-instrumented recommendations • Automation



**Helps SLAs** with end-to-end visibility to pinpoint performance issues



**Gain deep understanding** of network paths across the entire delivery chain



**Helps ensure compliance** with automated configuration and change management, and IP address management



**Gain understanding of the application** and the underlying layers upon which it depends



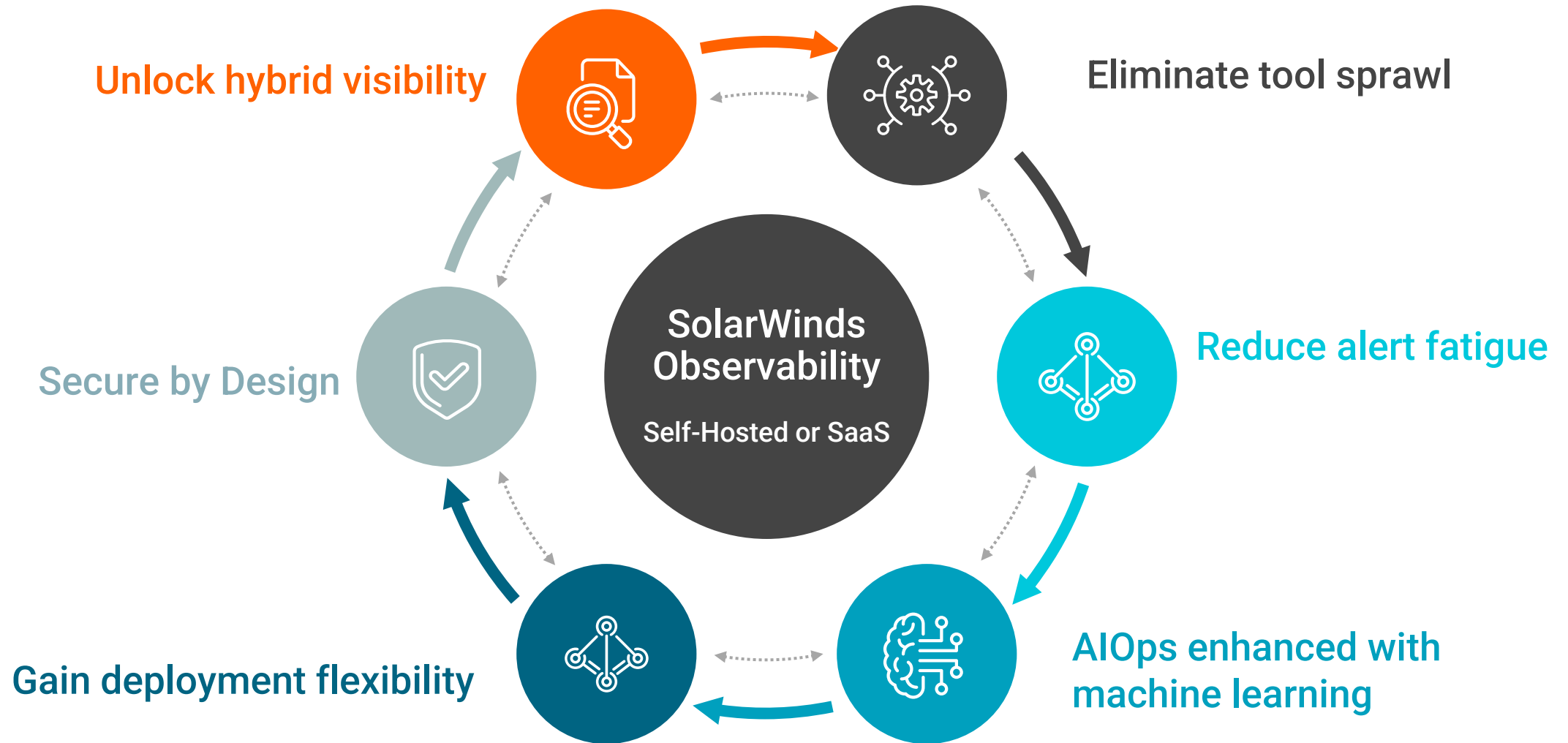
**Get powerful out-of-the-box and custom visualizations** and quickly understand your connected landscape



**Automatically detect** and track devices and manage switch ports



# Achieve Results You Can Only Get With Full-Stack Hybrid IT Observability





# THANK YOU





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# Keynote Presentation



**Dr Michael Watts**

Acute Medicine Doctor and NHS England Clinical Entrepreneur  
UHDB NHS Trust





# Redefining Healthcare Leadership

Dr Michael Watts MBChB MBA BSc (Hons)

## About me

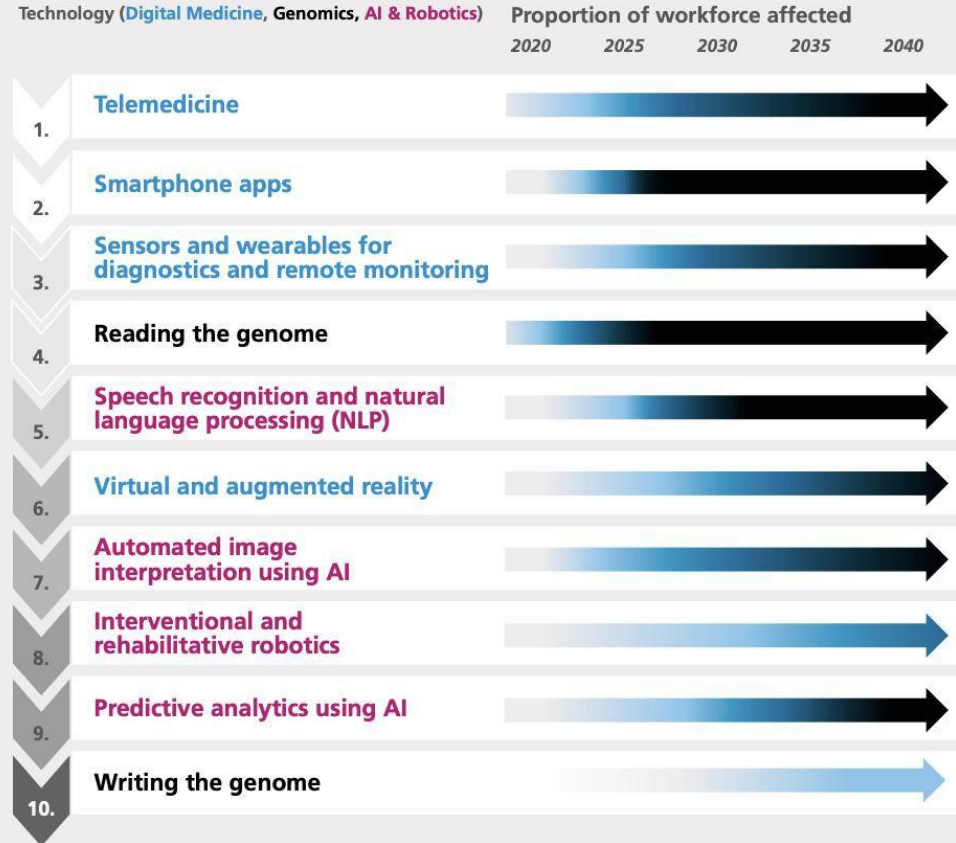
- NHS Doctor and MBA graduate
- Co-founder and Managing Director of Blüm Health Ltd
- NIA Fellow and NHS England Clinical Entrepreneur
- Visiting Professor, Birmingham City University



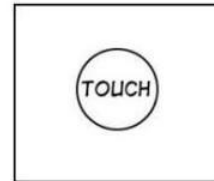




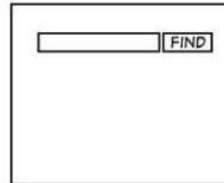
## Technological advances impacting healthcare and the magnitude of disruption.



TYPICAL APPLE PRODUCT...



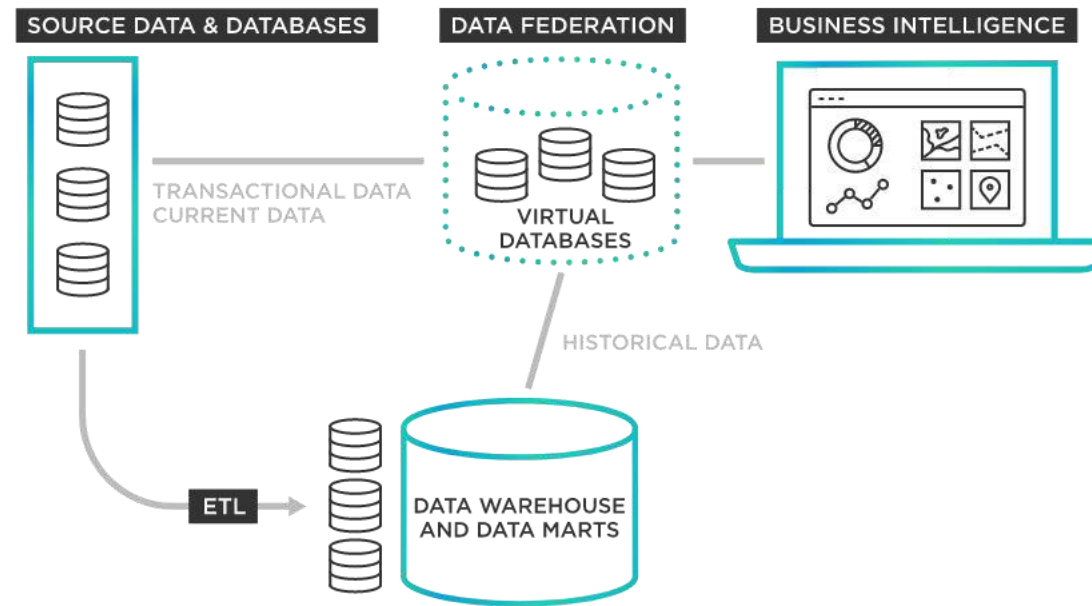
A GOOGLE PRODUCT...



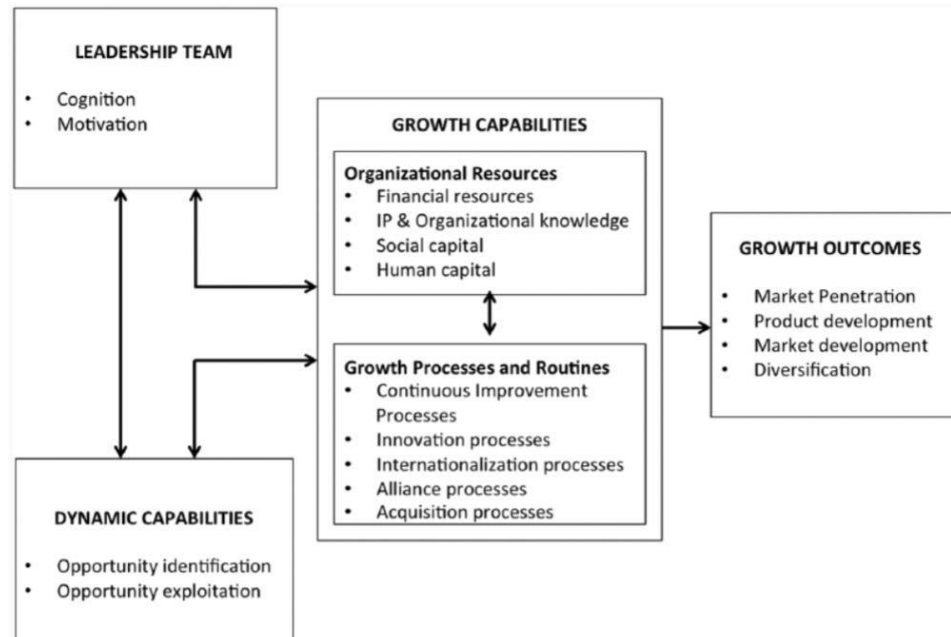
YOUR COMPANY'S APP...

FIRST NAME:	<input type="text"/>	TYPE CD:	<input type="text"/>	<div>4 - K AA2- DK9B KKA? CN3 AA-9 NEW DEL</div>
LAST NAME:	<input type="text"/>	TQP STAT:	<input type="checkbox"/>	
SSN:	<input type="text"/>	FT/PT:	<input checked="" type="checkbox"/>	
ID:	<input type="text"/>	VER:	<input type="text"/>	
PHONE 1:	<input type="text"/>	CAT CD:	<input type="text"/>	
PHONE 2:	<input type="text"/>	CITY:	<input type="text"/>	
ADDR 1:	<input type="text"/>	STATE:	<input type="text"/>	
ACCT #:	<input type="text"/>	ZIP:	<input type="text"/>	
		ORD #:	<input type="text"/>	
<div>OKAY   APPLY   SAVE   UNDO   HELP   DELETE   EDIT</div> <div>SELECT   BROWSE   ERRORS</div>				

STUFFTHATHAPPENS.COM BY ERIC BURKE



# The perfect team







## Four ways to optimize operational efficiency and increase clinical confidence



Automate  
workflows



Standardized  
care pathways

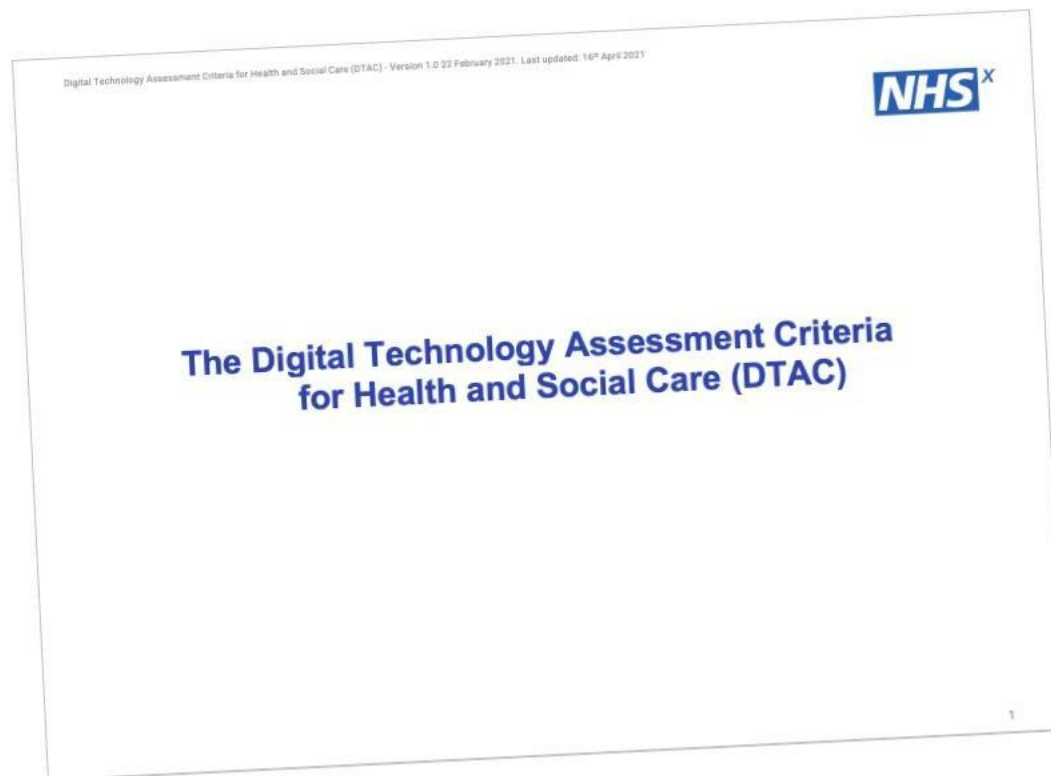


Smart utilization  
of resources



Integrated care

Philips







# Thank you

michael.watts5@nhs.net





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## Case Study

**ManageEngine** 



## Case Study



**Ray Manash**

Head - Business Development (IAM & SIEM)  
ManageEngine





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# Keynote Presentation



**Ugbomeh Williams Ogochukwu**  
Cancer Lead Business Intelligence Analyst  
Royal Papworth Hospital

# Identity, Access & Equity: Rebuilding Trust in NHS Digital Infrastructure

The landscape of Identity and Access Management (IAM) within the NHS continues to grow increasingly complex. But identity systems, when poorly implemented, block access, erode trust, and deepen health inequalities.

Dr. Williams Ugbomeh

Cancer Lead Business Intelligence Analyst

Royal Papworth Hospital





# Why It Matters: The Human Cost of Digital Failure

*"It takes me longer to log in than to assess a patient."*

— NHS Junior Doctor

## IAM at the Frontline

If access breaks, care breaks. Login friction becomes patient risk.

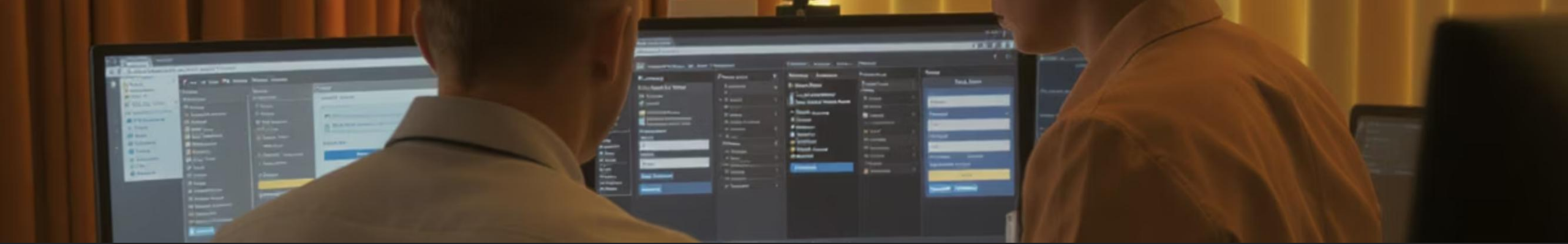
## EDI by Design

Inclusion isn't a bolt-on feature. It's fundamental infrastructure.

## Restoring Trust

Trust doesn't live in the code. It lives in the consequences.

This digital growth introduces new security and privacy challenges. The rise in sophisticated cybersecurity threats has heightened the need for advanced IAM solutions whilst maintaining seamless user experiences.



## Frontline Reality: The Login Crisis

10+

Logins Required

Each NHS staff member needs multiple credentials just to  
credentials just to do their job

30

Minutes Lost

Per shift to login struggles; that's 3.5 hours weekly of lost  
patient care

13.5M

Hours Wasted

Annually across England due to inadequate IT systems;  
systems; equivalent to 8,000 full-time doctors

- ⊗ Staff are forced to game the system: sharing passwords, staying permanently logged in. The Department of Health announced £40 million investment to tackle NHS staff investment to tackle NHS staff logins; freeing up thousands of staffing hours daily.

Password sharing isn't a workaround. It's a safety hazard built by bad design.





# When Access Fails, Patients Pay the Price

## The Safety Crisis

- 58,000+ NHS misidentification events across 166 trusts
- 4,700+ caused direct patient harm
- Wrong patient records, mis-tagged IDs, missed treatments

*"One wrong login. One missed allergy. One delayed scan."*

Frontline staff describe disjointed systems that don't "talk" to each other, forcing clinicians to be system integrators instead of caregivers.

We have clinical governance for everything, except the thing you use 50 times a day: access. When users struggle with technology, they're more likely to make critical mistakes.



# Digital Exclusion: Who Gets Left Behind?

7%

UK homes with no internet access

10M

Adults unable to navigate basic digital tools

22%

Disabled people say digital tech doesn't  
improve daily life

The people who most need care are often the least able to access digital systems easily.

**One-Size-Fits-All = Fits Few:** If an IAM rollout assumes **everyone has a smartphone, high literacy, and English fluency**, it will leave many behind.  
leave many behind.



The NHS has a legal and moral obligation to reduce inequalities in access. EDI isn't moral garnish—it's core infrastructure.



# The Cost of Exclusion

1

## Accessibility Failures

22% of disabled people find digital tech doesn't improve daily life. When screen readers fail, systems fail. One in five NHS staff has a disability exclusion affects our workforce too.

2

## Language Barriers

Assuming "English-only" design results in patients misunderstanding care instructions and staff misusing systems due to language gaps.

3

## Trust Breakdown

In 2021, over 1.3 million patients opted out of NHS data sharing in one month; not because they hated technology, but because no one made them feel safe.

When people don't feel safe, they disappear. And the system doesn't even notice.



# Success Stories: What Good Looks Like

## Alder Hey Hospital

Implemented single sign-on (SSO) system, reducing login time from 1:45 minutes to 10 seconds. Over 130 hours reclaimed daily across 5,000 daily logins.

## Midlands Partnership NHS Trust

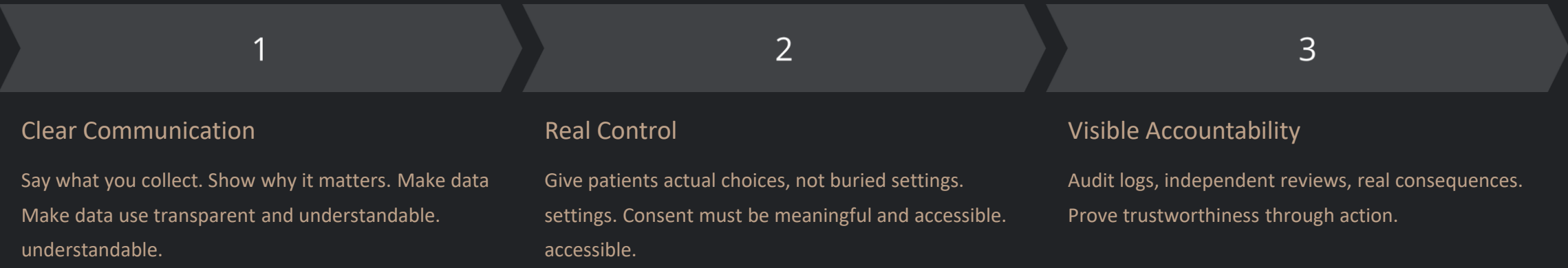
Provided isolated patients with 'KOMP' video devices with built-in 4G. Result: 200+ remote clinical meetings and hundreds of social calls, reducing isolation whilst increasing care access.

Co-design works. When users lead, the system listens. That's how you how you build for the frontline.



# Building Trust Through Transparency

Balancing rigorous IAM protocols with seamless user experience is critical. Effective solutions must protect patient data whilst providing intuitive experiences for healthcare professionals and patients alike.



Transparency without action is theatre. Systems must earn trust, not just ask for it.



# Beyond the Hospital Walls: Community Community Alignment

IAM touches every part of the care ecosystem. With the NHS committed to a digital-first approach, ensuring approach, ensuring secure access without compromising privacy demands innovative, patient-centric solutions. centric solutions.



## Co-Design Approach

Involve people who've been excluded. Design "with, not for" to ensure their insights become the fix. become the fix.



## Community Partnerships

Let libraries, councils, and charities be access partners. Set up digital help desks at community centres. community centres.



## Staff as Co-Designers

Treat healthcare workers like partners, not help desk tickets. Build data champions, not system victims.

The people closest to the problem often hold the solution. Inclusion isn't a one-off consultation—it's it's continuous alignment.





One Login at a Time

# IAM is an agreement

An agreement that says: we see you, we value you, we won't lock you out.

Every login is a moment of trust

Every denied access is a warning

Every confusing screen is a policy failure  
failure

Technology should "just work" and work for everyone. Let's rebuild trust in NHS digital infrastructure, one secure, inclusive, seamless login at a time.

The future of NHS digital services depends on getting IAM right: secure enough to protect, simple enough to trust, inclusive enough to serve all.



## Slido

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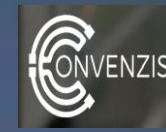




# Keynote Presentation



**Estevao Bagi**  
Clinical Service Manager  
Kings College Hospital



2nd NHS Identity and  
Access Management  
Summit  
Digital Infrastructure &  
Security

# **From Access to Impact:** Embedding Best Practice, Driving Innovation, and Solving Operational Identity Challenges Across NHS Diagnostics

**By: Estevao Bagi**

**Clinical Service Manager, Nuclear Medicine & PET-CT, King's College Hospital**

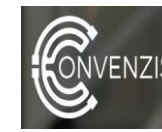
**Date: 25<sup>th</sup> Sept 2025**



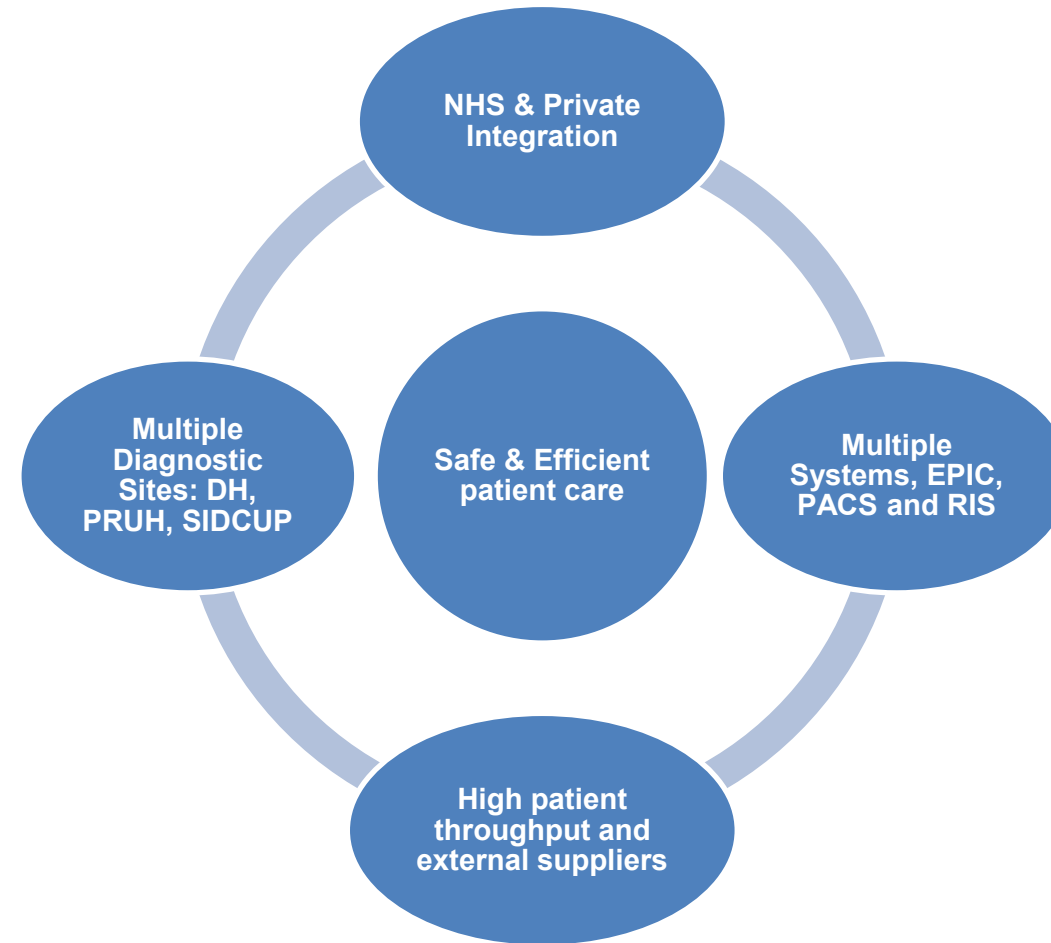
- **Right person, right access, right time** – critical for patient safety and service efficiency.
- **Rapid digitalisation** (EPR, cloud, regional diagnostics networks) raises the stakes.
- **Strategic enabler** – not just IT: IAM underpins clinical excellence.
- **Compliance & assurance** – supports the **Data Security and Protection Toolkit**, the **National Cyber Security Centre's Cyber Assessment Framework**, and aligns with the **What Good Looks Like**.
- **End-user engagement** – bridges technology and patient outcomes; diagnostics leaders must champion IAM as a core element of operational excellence.



# King's College Hospital NM & PET Services Context



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# Operational Identity Challenges We Faced



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## Legacy systems (RIS/PACS/EPIC)

- Context misalignment “American-centric system design”.
- Infrastructure gaps (patchy Wi-Fi, device shortages). Limited number of access.
- The challenge of integrating modern IAM with older, non-modernised components.
- One glove fits all systems approach.

## Joiner-Mover-Leaver delays

- Slow onboarding processes.
- Mostly manual.

## Multiple logins & legacy apps – “password fatigue”

- Poor automation.
- User frustration.
- Poor adoption.

## Risk of delayed imaging / mis-identification

- Poor integration.
- Remote access limitations.
- Glitches between systems.

## Local and Regional Fragmentation

- Silos improvements.
- Duplications.

- **Working with what we have - identify the gaps.**
- **Identification of key stakeholders** and creation of psychologically safe spaces for constructive feedback.
- **Governance process for continuous review and shared ownership**, ensuring improvements spread across local service leadership.
- **EPIC go-live and RIS/PACS integration**, enabling seamless diagnostic data flow.
- **Automated role-based access profiles** to reduce manual account management.
- Continuous promotion of **Intrapreneurial culture**.





- **Streamlined Joiner–Mover–Leaver (JML) process**, co-designed and closely monitored in collaboration with HR and IT—improved and sustained through end-user input.
- **Secure image sharing through mutual-aid SLAs**, supporting regional collaboration and patient-pathway resilience.
- **Internal sponsorships** – enable local and regional improvements e.g., EPR across KCL.
- **Lessons learned:**
  - ❑ Candid evidence of policy–local misalignment, “fait accompli” procurement decisions and post-go-live drop-off in engagement.
  - ❑ Top-down directives without early local input reduced ownership and slowed adoption.
  - ❑ Lack of structured follow-up risked erosion of initial enthusiasm.



- **↓ On-boarding time for clinical staff.**
- **↑ Cancer pathway compliance (CWT, DM01).**
- **↑ Creativity – co-creation towards end-user experience.**
- **↑ Service users experience.**
- **↑ Local and regional shared learning.**



# Insights from my Executive MBA Dissertation

## Case study

- Regional NHS EPR programme (11 interviews) – lessons transferable to IAM.

## Research question

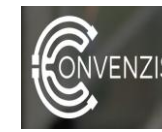
- How end-user engagement drives digital transformation success.

## Key Findings Relevant to IAM

- **Co-creation & early clinician involvement** accelerate adoption.
- **Inclusive, enabling leadership** builds psychological safety for change.
- **Quick wins** create momentum while long-term vision matures.
- **Continuous feedback loops** sustain trust.

## Translating Research to Practice

- Embed “digital champions” in each diagnostic modality.
- Map stakeholders early: include HR/clinical leads in IAM design.
- Align metrics: not just access granted, but *clinical outcomes improved*.
- ***The importance hybrid roles***



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Recommendations: **continuous co-creation, quick wins vs long-term enablers, digital champions, iterative feedback loops.**

## 5 IAM Quick Wins for NHS Leaders:

1. Map stakeholders early & embed *digital champions* in each modality.
2. Protect time for *role-based training* and visible leadership.
3. Automate *Joiner–Mover–Leaver* and service-account controls.
4. Align IAM metrics with *clinical outcomes* (e.g., cancer pathway compliance).
5. Maintain *continuous feedback loops* post-go-live to adapt policies and sustain trust.





**AI-driven end-end access  
monitoring & anomaly detection**  
supports **CAF** continuous-  
assurance goals.



**Cloud-first IAM to  
support regional  
imaging networks.**



**Build an IAM for  
personalised care**





# Thank you

# Any Questions ?

