



Creating clinical capacity through digital pathways. **Ireland edition.**

Supporting Sláintecare, digital-first transformation,
and integrated care delivery across Ireland.



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Foreword

Every day, across Ireland, nurses, doctors, and care teams stretch themselves to give patients the best possible care. They stay late. They take extra calls. They find workarounds for systems that don't work as hard as they do.

But even the most dedicated teams can't outrun the bottlenecks. More than 850,000 people are now waiting for hospital care, with over 600,000 of them in outpatient queues (Surgery Now, 2025). Hours disappear into forms, phone calls, and duplicated records, hours that should be spent with patients. For Ireland's 105,000-strong healthcare workforce, rising demand without the right tools has become an unsustainable burden.

This isn't a question of will or skill. It's about processes that haven't kept up. Despite €437 million being committed in 2024 to reduce waiting lists (Gov.i.e., 2024), many services still rely on face-to-face appointments, manual follow-ups, and disconnected systems. The result? Delays grow, decisions get harder, and the human cost mounts – for patients waiting in uncertainty, and for clinicians fighting burnout.

Sláintecare 2025 offers a vision: universal, high-quality care, delivered closer to home. But vision alone won't clear the backlog. Change isn't just important, it's urgent. Without it, waiting lists will swell, and the strain on frontline teams will deepen.

That's where digital pathways can make the difference. By gathering structured information remotely, enabling secure asynchronous communication, and automating often predictable and routine steps like triage or monitoring, they give teams more time for what matters most: care that is safe, connected, and human.

Isla's Digital Pathway Platform (DPP) was built for exactly this. Co-designed with frontline teams and aligned with Ireland's Digital for Care Framework (2024–2030), it's the first platform purpose-built for complete, end-to-end digital care. Already used in over 200 pathways across more than 30 healthcare organisations, including the Rotunda Hospital in Dublin, DPP is helping services cut delays, free up capacity, and give time back to care. This is how we can make Sláintecare's vision real.

Peter Hansell

CEO and Co-founder of Isla Health

James Jurkiewicz

CTO and Co-founder of Isla Health





01

Why now for Ireland?



Ireland's health system is evolving, but it can't afford to wait

Healthcare delivery in Ireland is being reimagined. But that change is up against serious pressures:



911,500 people on waiting lists

with over 600,000 waiting for outpatient care

(Surgery Now, 2025)



80,000+ awaiting inpatient

or day-case procedures



€437 million allocated

to address waiting lists in 2024 alone



€36.6 billion in healthcare spending

in 2024: a 9% year-on-year rise, the largest yet

(CSO, 2025)



40% increase

in Ireland's over-65 population in just 10 years

(CSO, 2024)



At the same time, Ireland has never been more ready to act:

“ Digital will enable care that is faster, more efficient, more equitable and more sustainable. ”

Former Minister for Health, Stephen Donnelly (2024)

Ireland's digital roadmap calls for a connected ecosystem of virtual wards, patient-owned records, and modernised care. Digital pathways deliver that, safely and at scale.

911k+
waiting list

€36.6B
spend

40%
over-65s growth

2:1
workforce ratio
by 2050



Digital for Care: Ireland's National Digital Health Framework

Ireland's Digital for Care strategy (2024–2030) marks a turning point for healthcare delivery, setting out a bold plan to modernise services, reduce pressure on frontline teams, and deliver care that is safer, faster, and more connected. It recognises what those on the ground already know: that effort alone isn't enough. Clinicians need systems that support them, not slow them down.

A Framework Built for Change

Backed by national investment and legal reform, Digital for Care outlines a clear vision:

- **Empowered Patients** – with access to their own health information
- **Connected Teams** – through shared records and integrated pathways
- **Smarter Processes** – using digital tools to streamline triage, follow-up and monitoring
- **Data-Driven Care** – to inform better decisions and improve outcomes
- **A Supported Workforce** – with training, tools, and systems that reduce admin and burnout

From Strategy to Action

The framework is already taking shape through real-world initiatives:

- Launch of the HSE Health App for patient access to records, medications, and appointments
- Expansion of virtual wards, digital therapies, and remote monitoring
- Roll-out of shared care records across services
- Progress of the Health Information Bill to enable secure data sharing

Digital pathways support the kind of joined-up, patient-centred care envisioned in Digital for Care. By enabling structured information capture, streamlined communication, and automation of routine steps like triage and monitoring, these pathways help reduce duplication and free up time for patients who need it most. This model offers a practical way to translate national strategy into meaningful, everyday improvements in care delivery.



This Digital Health Framework for Ireland (2024 - 2030) sets out a clear ambition for the future. A future that harnesses the power of data, digital technology, and innovation, to widen access to health and social care services, provide improved affordable and equitable care, better patient safety and greater productivity.

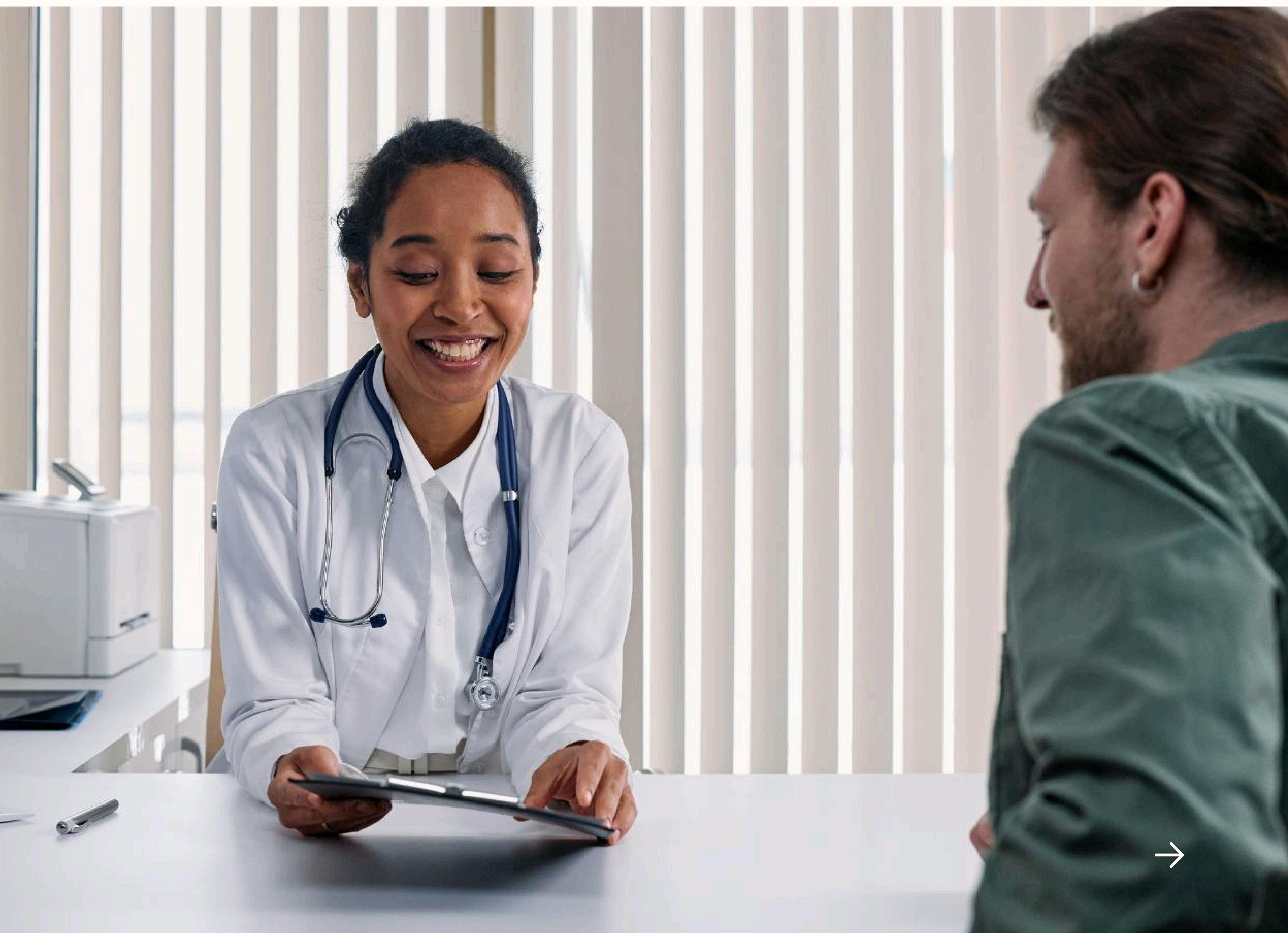
Stephen Donnelly
Former Minister for Health, Ireland



“

Digitising services across health and social care is a priority for myself and my department. Through successive budgets, Government has consistently increased both capital and revenue funding for digital health. The health service now has an ambitious forward-looking digital pipeline to deliver on the vision of this strategic framework.”

Stephen Donnelly,
Former Minister for Health, Ireland





02

Healthcare bottlenecks: what's holding us back?



Why does care feel harder than it should?

“13.5 hours per week are spent by clinicians just updating documentation”

(Nuance, 2024)

Clinical pathways are the backbone of safe, effective care. But over time, many of these pathways have become harder to follow, not because they were poorly designed, but because the surrounding systems haven't kept up. Across Ireland, delays build up through a series of manual steps, disconnected systems, and duplicated effort. Each one seems small, but together they add up, leading to longer waits, unnecessary appointments, and fragmented care.

The impact is felt everywhere. Patients are left waiting for follow-ups or making repeated trips for updates that could be shared remotely. Clinicians spend valuable time chasing paperwork or switching between systems, instead of focusing on complex clinical care. And across services, teams are working harder than ever just to keep up, often without the digital tools or visibility they need.

This isn't a failure of effort or expertise. It's the consequence of working in models that still rely heavily on face-to-face delivery, manual admin, and siloed data. With more than 850,000 people on hospital waiting lists and a health service under increasing strain (IHCA, 2024), it's clear that the current way of working is no longer sustainable.

Digital pathways offer a way to change that by simplifying manual processes that slow care down. By making data easier to collect, tasks simpler to manage, and systems easier to navigate, digital pathways help restore the flow of care and free up clinical time. It's not about removing clinical touch-points, it's about making sure every one of them counts.



Bottlenecks in Irish healthcare: delays across the patient journey

Delays and inefficiencies can crop up at any point in a clinical pathway, and they often pile up, making things harder than they need to be. Below, we highlight some of the common bottlenecks that overlap and add pressure throughout the patient journey. By pinpointing exactly where delays lie, we can start to ease the load and create a more joined-up, responsive system for everyone.

1

Triage: When information gathering slows everything down

Triage should move patients onto the right pathway quickly, but too often, it turns into a waiting game. Clinicians spend valuable time chasing information because the process is so manual. From waiting list validation to initial assessments and referral handling, each step adds delays and duplication.

Ireland's Digital Health Strategic Implementation Roadmap calls for tools that support rapid, accurate triage, without compromising clinical safety. Digital pathways meet that need by capturing structured data early and enabling faster decisions, safely and at scale.

2

Treatment: When care delivery is weighed down by routine

Treatment is where patients expect to see progress, but it's also where resources are stretched to their limits. Many services still rely on face-to-face appointments, even for tasks that could be managed remotely or asynchronously. Pre-op assessments, routine follow-ups and MDT (Multi-disciplinary-team) coordination all take time that could be redirected with the right digital tools.

Digital pathways help teams deliver care more efficiently, without compromising safety. By enabling remote input, clear documentation and shared visibility, they free up capacity while supporting better outcomes. This aligns directly with Sláintecare's goal of keeping people healthier in their own homes and communities by strengthening care outside hospitals.

3

Monitoring: When follow-up limits how many patients we can reach

After treatment, patients need oversight to stay well, but traditional monitoring is hard to scale. Across Ireland, face-to-face reviews and manual symptom tracking still dominate, taking time from already stretched teams. Even PIFU models often require clinical teams to triage responses manually.

The HSE's Virtual Ward Programme and Telehealth Roadmap 2024–2027 signal a shift toward scalable, remote monitoring that keeps patients well at home. Digital pathways make this possible, capturing structured data like symptom updates, wound images and PROMs, so clinicians get timely insights without the admin burden.



What's slowing Irish healthcare down

Let's break down the things that create delays and make it harder for you to deliver the best care.



Outdated healthcare models are inefficient



Admin takes time away from patient care



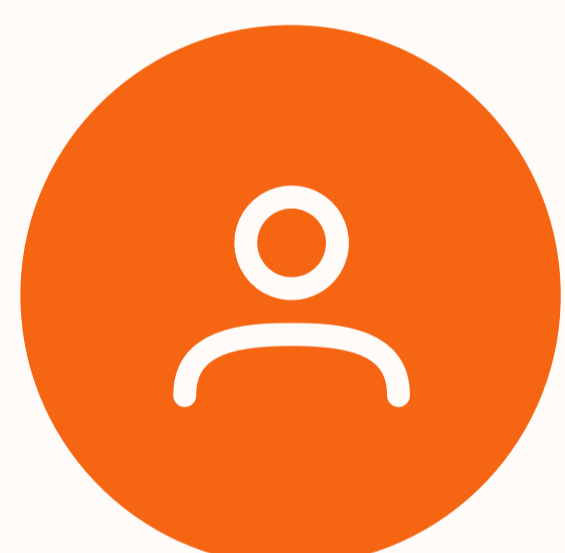
Care isn't standardised or personalised



Lack of real-time, longitudinal patient data



Patients attend multiple appointments due to gaps in information



Clinicians are burnt out. 40% of doctors & 50% of nurses are foreign-trained



Disconnected systems waste clinical time and cause duplication



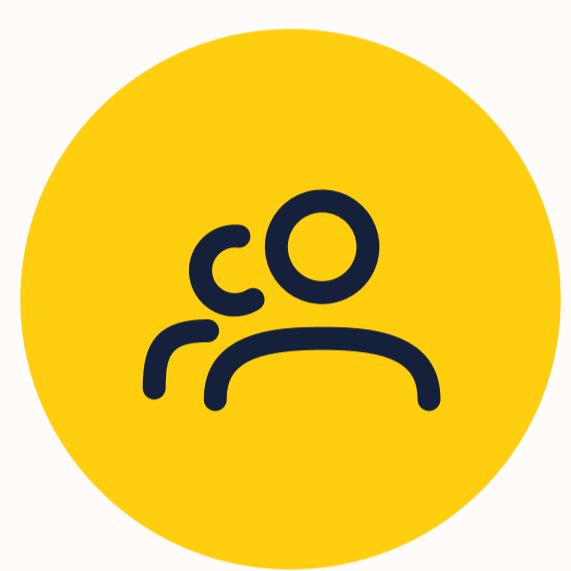
Tech barriers delay real change

Care can't continue as it is. Change is urgent. With 478,898 patients waiting beyond Sláintecare's 10-12 week targets.



Ireland's unique geographic and demographic challenges

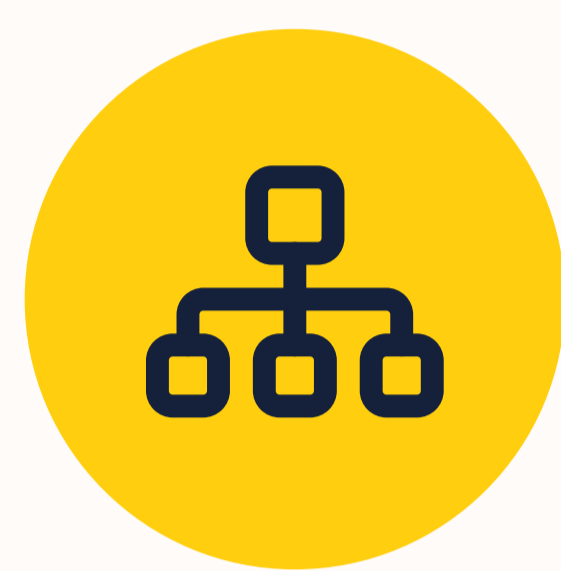
Geographic disparities:



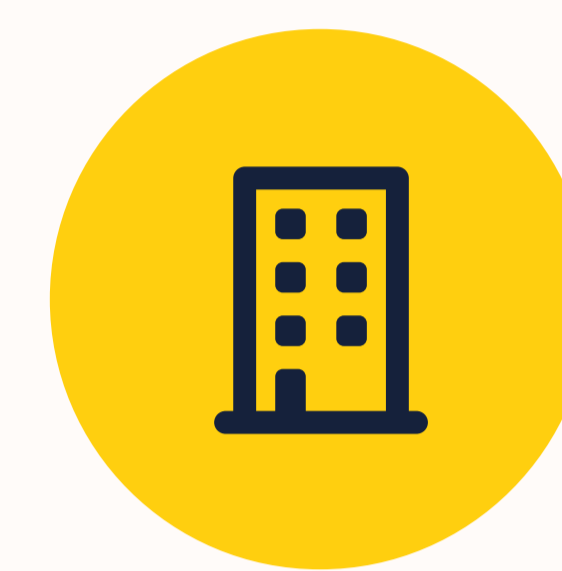
Rural communities face significant challenges accessing specialist care



Border counties require coordination across different health systems



Island communities need innovative care delivery solutions



Urban centres experience high demand concentration

Cultural and language considerations:



Need for solutions that respect Ireland's bilingual heritage



Community-based care preferences align with traditional Irish values



Family-centred care approaches that work across generations



Digital solutions must be accessible to varying levels of tech literacy





03

**The solution:
Technology that
amplifies human care**





“

While Ireland has made significant technological strides in healthcare to date, we are not where we would want to be, the publication of the Department of Health’s Digital Health Framework and the imminent approval of the HSE’s Strategic Implementation Digital Health Roadmap promises to foster innovation and strategic investment towards the provision of effective and safe delivery of the Health Service.

Damien McCallion
Chief Operations Officer & the Deputy CEO, HSE



What if we can make Irish healthcare simpler, faster, and connected?

What if the three stages (triage, treatment, and monitoring) were simpler, faster, and connected? That's what the Digital Pathway Platform (DPP) helps unlock. Aligned with the HSE's Digital for Care 2030 vision, by supporting asynchronous care, structured data capture, and smart triage, teams can free up time and focus where it matters most: clinical decision-making and patient outcomes.

Clinical pathways aren't the problem, they're essential. The challenge is delivering them efficiently, hindered by the fact that many steps still rely on manual effort. **We don't need to simplify care. We need to make it more efficient.**

The goal isn't to remove clinical touch-points or lower standards. It's to automate the routine, predictable processes, so clinicians can focus where their skills are irreplaceable: on the cases that truly need them. There's a huge opportunity to make care more consistent, efficient, and equitable across Ireland's health service.

Despite Ireland ranking 2nd globally in the 2024 World Index of Healthcare Innovation and spending €30.9 billion on current healthcare costs (equivalent to 6.1% of GDP), systemic inefficiencies persist. The way to address this is by building digital pathways that scale, supporting Sláintecare's vision of universal, accessible healthcare.



Patient-submitted images and videos



Structured assessment forms and PROMs



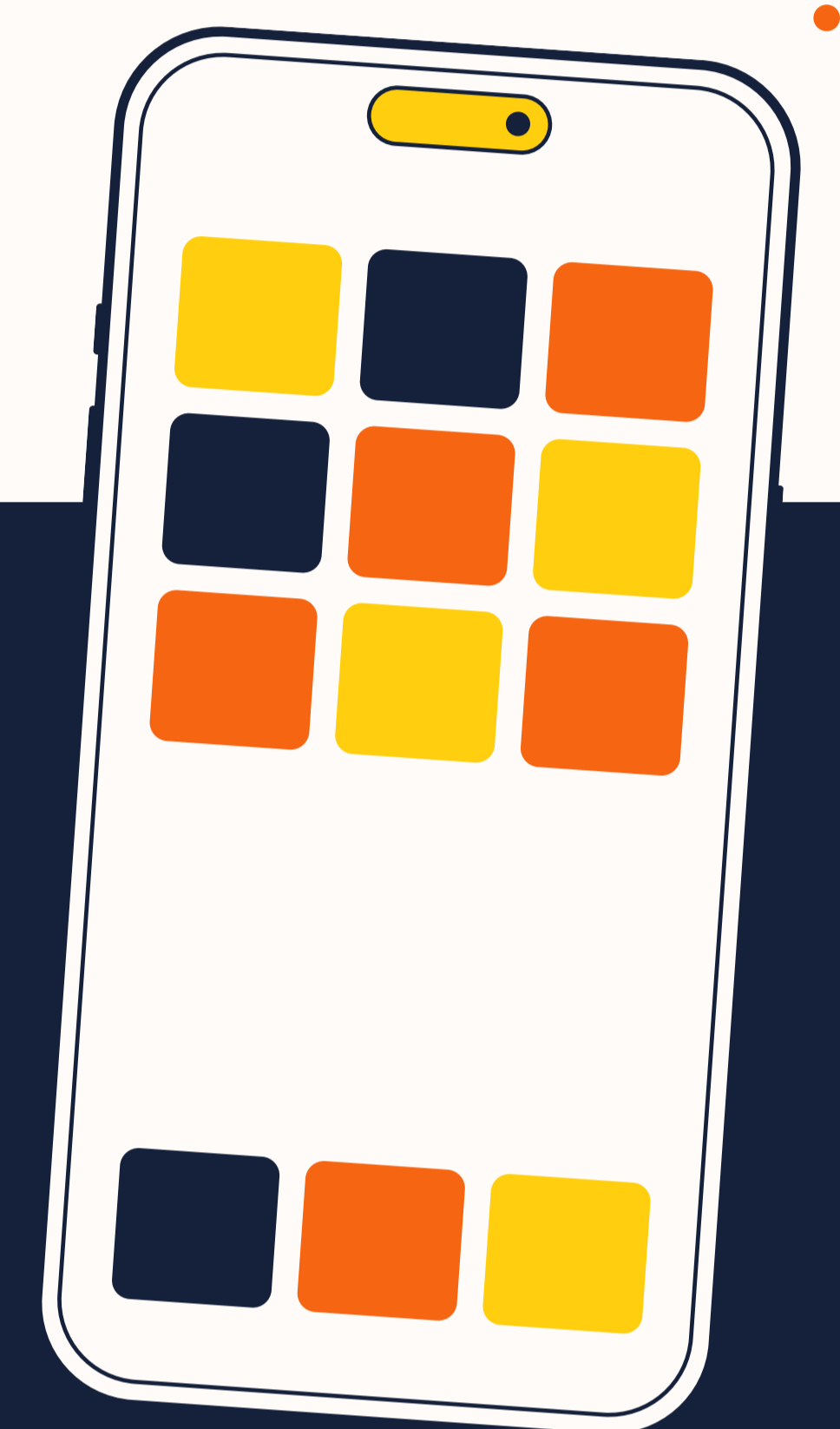
Audio recordings and symptom updates

This gives clinicians a longitudinal view of how a patient's condition is changing, not just a snapshot tied to clinic availability. Combined with automation, this approach allows teams to make faster, safer decisions and move towards proactive, preventative care.



DPP isn't a replacement, it's a platform that helps everything and everyone work better together

Imagine moving from disjointed pathways, manual duplication, and staff under pressure, especially in stretched regional or rural Irish services, to joined-up care, where information flows easily, routine tasks happen automatically, and clinical time is protected. From patients frustrated by long waits and unnecessary appointments to faster answers, fewer delays, and care that fits around real lives. That's the difference the Digital Pathway Platform makes.



DPP supports the HSE's goal of improving health services for both patients and staff, making it **more modern and accessible.**





04

Meet Isla,
the first Digital
Pathway Platform



Meet Isla

The first purpose-built Digital Pathway Platform (DPP) for healthcare providers that turns repetitive clinical tasks into intelligent, scalable workflows, proven to boost productivity, capacity, and patient flow.



Isla's is a proven solution, used in hundreds of clinical pathways across the UK and globally, connecting clinicians and patients in real time. Clinicians securely send resources and forms to patients' mobile devices in their language; patients share images, videos, and updates remotely, cutting unnecessary visits. Automated workflows and audit trails speed up triage, improve safety, and integrate seamlessly with existing systems, supporting the HSE's Digital for Care framework by bringing services closer to home, expanding community care, and reducing inequalities. Isla turns disjointed, paper-heavy processes into joined-up care where information flows, routine tasks run automatically, and clinical time is protected. For patients, that means faster answers, fewer delays, and care that fits around real life.



Powering more than **40 clinical specialties** and 200 pathways across Acute & Community settings



Over **2 million submissions** have been made through Isla, that's one every three minutes



Certified **B Corp** and aligned with sustainable healthcare delivery



Co-developed with patients, clinicians, and trust leaders

36%

of face-to-face visits avoided

75%

Same-day descalations

85%

faster referral to treatment time

3.8x

More clinic capacity

See the impact



The engine behind effective digital care

Isla allows clinical teams to configure and deliver digital pathways that work alongside existing systems and processes.

1

Build pathways that work

Refine and improve the way care is delivered with configurable digital pathways tailored to your service.

- Design pathways around real patient journeys
- Remove what doesn't work, and tailor the rest
- Adapt easily to changing needs over time

2

Capture meaningful clinical data

Collect the information that matters, safely and at scale.

- Data from structured forms, media (photos, video, audio), and wearable integrations
- Secure, timestamped submissions
- Available in real time for clinical review and action

4

Connect and integrate

Bring together data from forms, media, and diagnostics, plus external systems such as Electronic Patient Records (EPRs), in one place.

- A clearer view for clinical and admin teams
- Fewer systems to switch between
- Designed to fit into your existing ecosystem

3

Automate what slows you down

Reduce admin and free up time for care by automating repeatable tasks.

- Patient data is automatically tagged for quick and easy review
- Trigger next steps in a pathway based on patient updates
- Reduce delays and cut through the noise

5

Make better decisions, together

Support collaboration across your teams with timely data and insights.

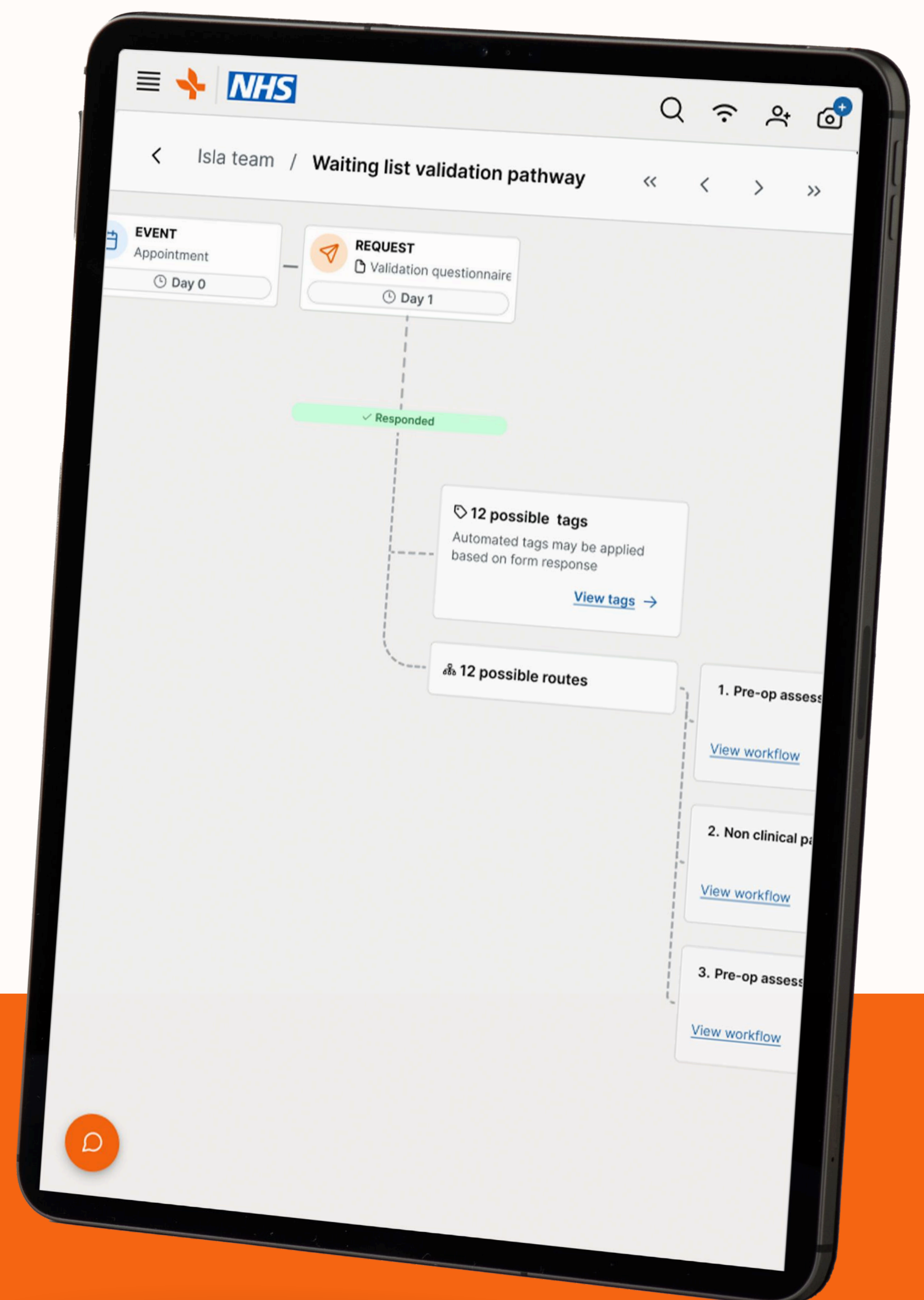
- Real-time oversight of caseloads and risks
- Shared view across multidisciplinary (MDT) teams
- Intelligent reporting and alerts to inform care planning



From bottlenecks to breakthroughs

The Digital Pathway Platform (DPP) is built around care pathways, not just clinical records or appointments. It brings together structured data, messaging and workflow tools to support the full patient journey. DPP moves care from disconnected, one-off interactions to a continuous and scalable model.

Patients can share information and clinical media diagnostics at any point, from anywhere. Teams can triage, assess, and collaborate remotely. And all of it is captured in structured, real-time formats such as PROMs/PREMs, photos, videos, forms, and audio recordings that connect with existing systems.



This supports key Sláintecare and HSE strategic priorities:



Improve patient safety through clearer documentation and faster decision-making



Increase productivity by reducing admin and duplication



Connect teams across acute and community care



Reduce waiting lists by enabling earlier triage and remote monitoring



The solution chosen by teams improving care

Isla is the first purpose-built Digital Pathway Platform (DPP) for healthcare providers.



Trusted by 30+ global partners, with growing relevance to Irish health systems, across 40+ clinical specialties and 200+ pathways



Over 2 million submissions have been made through Isla, that's one every three minutes.



Certified B Corp and aligned with sustainable healthcare delivery



Co-developed with patients, clinicians, and trust leaders

See the impact



We ended up with so much enthusiasm for Isla that it almost became difficult for us to manage internally as a digital team because everybody wanted it. Which is fantastic, and sometimes the opposite of what we have with digital solutions.

Leila Brown
Associate Director,
Digital Transformation



From the frontline, for the frontline: designed by clinicians who get it

Isla's Digital Pathway Platform (DPP) has been built to be configurable at the service level. That means clinical teams can decide what information they need and how it's presented, helping care feel consistent and easy.



Triage: From data gaps to clarity

Automate routine data capture and collect complete patient information in advance of appointments. This reduces admin and gives clinicians what they need to decide quickly and confidently.



Treatment: From chaos to control

Streamline pre-op and follow-up care. Tools like PIFU (Patient-Initiated-Follow-Up) keep patients engaged and help teams focus on cases that need direct intervention.



Monitoring: From oversight to insight

Enable remote check-ins and routine surveillance. Automatically flag risks while supporting patient self-management, so more people can be safely cared for, at scale.



Connect everything. Simplify everything.



We integrate with existing systems or operate stand-alone where no digital infrastructure exists









No downloads or logins for patients, patients receive secure links via SMS or email, and the platform is APIs and FHIR ready



Meets healthcare standards for accessibility, information governance, and clinical safety

Built to scale across HSE Health Regions

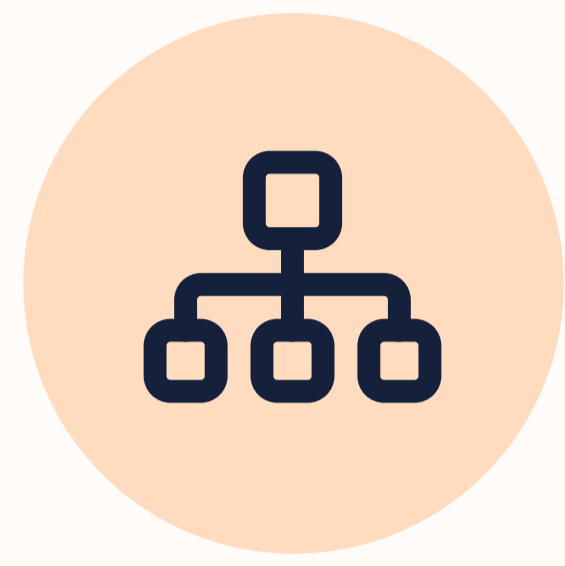
Isla's DPP connects with your EPR and systems commonly used in Ireland, including Meditech, Oracle, TrakCare, Access, Cerner, and Epic. It uses existing data to start pathways and writes back outcomes for visibility and reporting. That keeps things consistent and fits with how you already work. Using one platform across services helps the Health Regions adopt new tools faster, whether it's a wearable, AI model or diagnostic kit, without rebuilding the workflow each time. Isla can operate as a standalone platform where there are no existing digital systems. If other systems (such as an EPR) are introduced at a later date, Isla can integrate with them after implementation.



Our impact in healthcare



30+ NHS Trusts



200+ pathways across acute and community



2M+ submissions per year



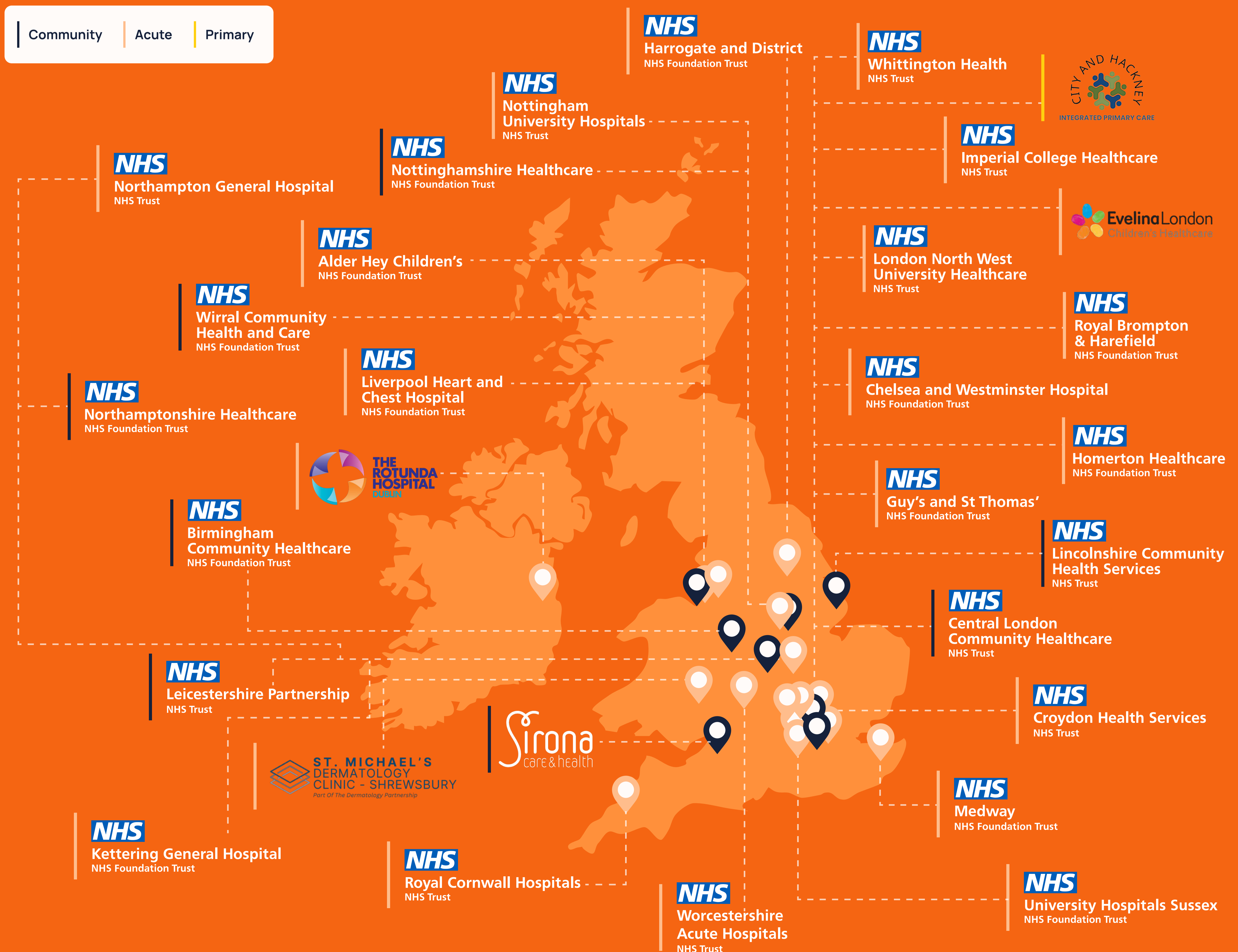
42-strong team based in London



Global hospital partnerships



B Corp certified





05

Real results for patients, clinicians, and organisations



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Digital technology now extends throughout most aspects of our daily lives. We use it at work, at home, in our social lives, when we look for information, book flights or pay for goods or services. The public demand no less in healthcare.

Stephen Donnelly
Former Minister for Health, Ireland



The Rotunda Hospital



About

Founded in 1745, The Rotunda Hospital in Dublin is the world's oldest continuously operating maternity hospital, delivering over 8,400 babies each year and caring for some of Ireland's most vulnerable patients. Alongside maternity services, it provides specialist neonatal, gynaecology, sexual health, and infectious disease care to a diverse population.

Like many hospitals across Ireland, The Rotunda faces growing demand, workforce pressures, and fragmented systems that slow down care. In line with Sláintecare's vision for integrated, person-centred services, the hospital adopted Isla Health's digital pathway platform to streamline communication, reduce paper-based processes, and speed up clinical decisions, without replacing existing systems that already work well.



The Rotunda impact



The challenge

Like many Irish healthcare providers, The Rotunda faces rising patient numbers, limited diagnostic capacity, and treatment delays. These issues reflect broader national pressures, with 850,000+ people on public waiting lists (incl. 713,000+ awaiting scheduled care). Clinicians lose significant time to manual administration, duplicate processes, and disconnected digital systems.

- **Rising demand:** c. 10,000 pregnancies managed annually, along complex care for vulnerable patients
- **System strain:** National waiting lists topping 850,000, with staffing shortages and high bed occupancy
- **Digital fragmentation:** Multiple legacy systems, manual follow-ups, and inconsistent data
- **Capacity limits:** Staff stretched between direct care and administration, leaving little time for innovation

The solution

The Rotunda deployed Isla Health's clinically proven digital pathway platform, already in use across 200+ clinical pathways in the UK and globally, to connect clinicians and patients in real time.

- Clinicians send secure resources and forms directly to patients' mobile devices, in their native language.
- Patients submit images, videos, and updates remotely, reducing in-person visits.
- Automated workflows and audit trails support faster triage and safer decision-making.

Isla easily integrates with existing processes & systems, aligning with the HSE's Digital for Care framework by bringing services closer to home, expanding community care, and reducing inequalities.

Early impact

The Isla platform is helping The Rotunda deliver more efficient, effective, and sustainable care:

- **Wound management:** capturing and comparing images to track healing and guide treatment
- **Newborn monitoring:** recording videos to assess infants' mobility and recovery
- **Remote patient care:** enabling patients to upload photos for review, reducing unnecessary visits
- **Digital leaflets:** securely sharing information in multiple languages, cutting printing costs and environmental impact

The Rotunda is now triaging faster, avoiding delays, strengthening care plan adherence, and increasing throughput, all while maintaining safety. By freeing staff for hands-on care and reducing its carbon footprint, the hospital is advancing Sláintecare's vision of high-quality, integrated care, closer to patients.

Future opportunities

The Rotunda is extending Isla's use to:

- **Surgical Site Infection prevention:** enabling remote wound monitoring to prevent readmissions and reduce costs
- **Waiting list validation:** aiming to safely reduce Ireland's backlog, drawing on UK experience where Isla helped remove over 17,000 patients from a single trust's list

By connecting the right systems rather than adding new complexity, The Rotunda is creating a scalable, clinician-led model for digital transformation across Ireland's healthcare system.

[Read the Rotunda press release](#)



Award-winning case study

Transforming dermatology pathways: a model with clear relevance for Irish dermatology services

With Isla, RCHT transformed how care is delivered across Community Lesion Imaging Clinics (CLICs), improving access, streamlining workflows, and driving real results. The work earned them Health Tech Case Study of the Year at the HTN 2024/25 Awards.



[See the impact](#)



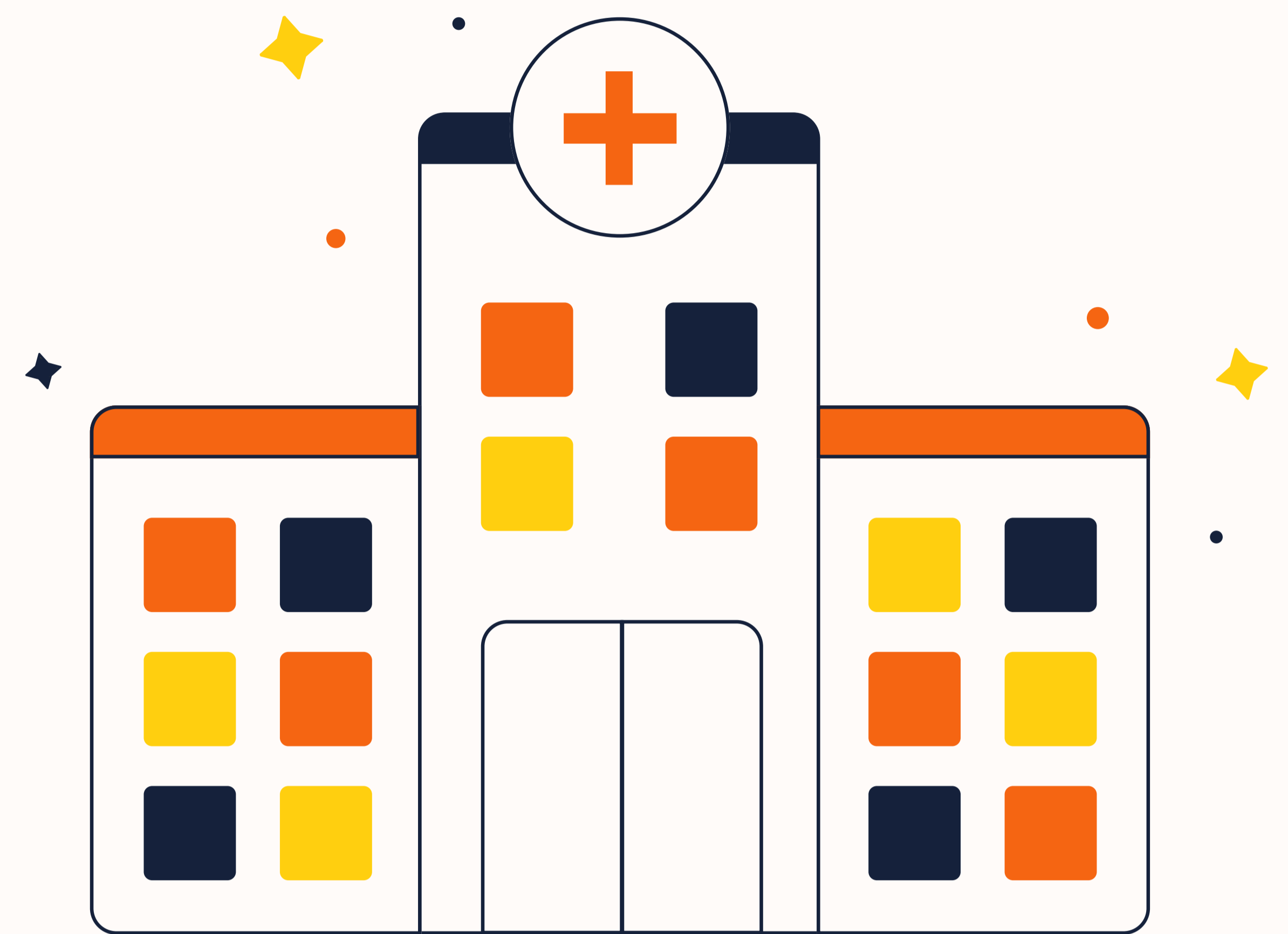
These community-based clinics are virtually filtering for cancer, speeding up the process, reducing waiting lists, and allowing patients to get a faster diagnosis without having to travel for a specialist appointment.

Dr Sandy Anderson
Consultant Dermatologist at RCHT



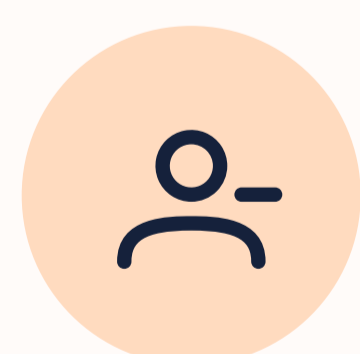
Designed to fit any pathway, in any clinical specialty

More than 40 clinical specialties are currently using Isla. We're yet to find one that we can't support. Here's a sample:



Acute

Allergy and Immunology	Audiology	Cardiac Surgery	Colorectal	Craniofacial
C-section	Burns	Dermatology	Endocrinology	ENT
Epilepsy	Gender affirmation	Genetics	MSK	Neurology
Occupational Therapy	Ophthalmology	Oral and Maxillofacial Surgery	Pain Management	Plastics
Rheumatology	Sexual Health	Surgery	Surgical Site Surveillance	Urology



17,000+

patients safely removed from the waiting list within 10 months in one Trust



8x

less likely for patients to need surgical re-operation of a wound



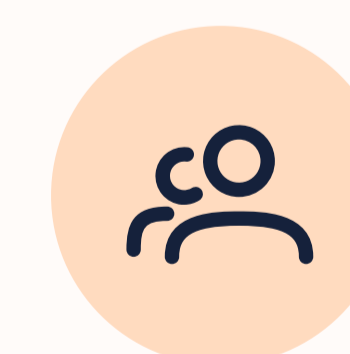
43%

reduction in SSIs (surgical site infections)



87%

reduction in waiting lists for urgent skin cancer referrals



50%

reduction in primary care visits for SSI post-operative monitoring



Community



3.8x

faster for TVNs to complete wound reviews, releasing 5.4% of their hours



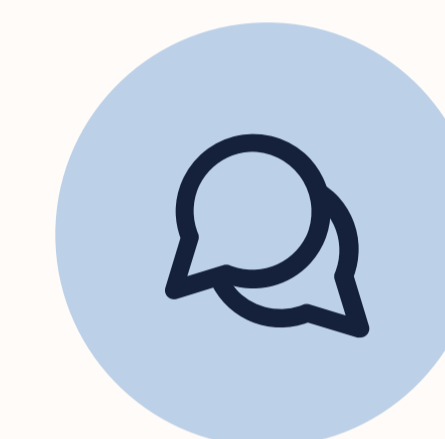
86,000+

hours saved per year in community care



75%

de-escalation of demand from SOS to planned intervention



100%

shift to paperless communications

Don't see your specialty listed?

This is just a sample. Isla can be configured to support any pathway or specialty.

We work closely with you to understand your needs and co-design the right approach. Find out more [here](#), or [get in touch](#).



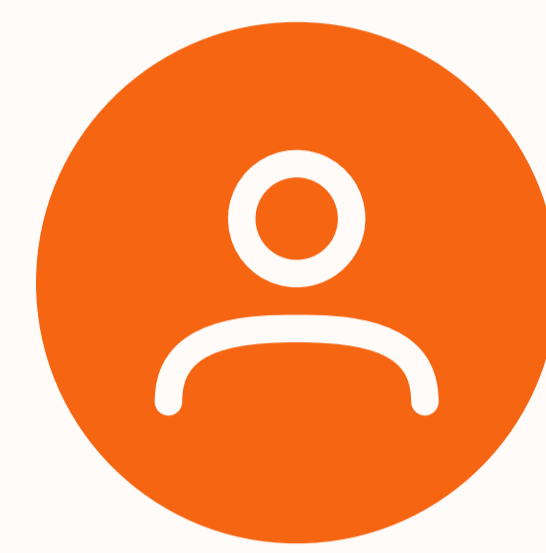
What teams and patients are saying

Patients



I'm 67 and a bit of a technophobe, but I found the submission easy to use!

Patient feedback



It's so reassuring to have someone check in on your progress after you have been discharged from the hospital. I wish I had these check-ins with regards to other aspects of my recovery.

Patient feedback

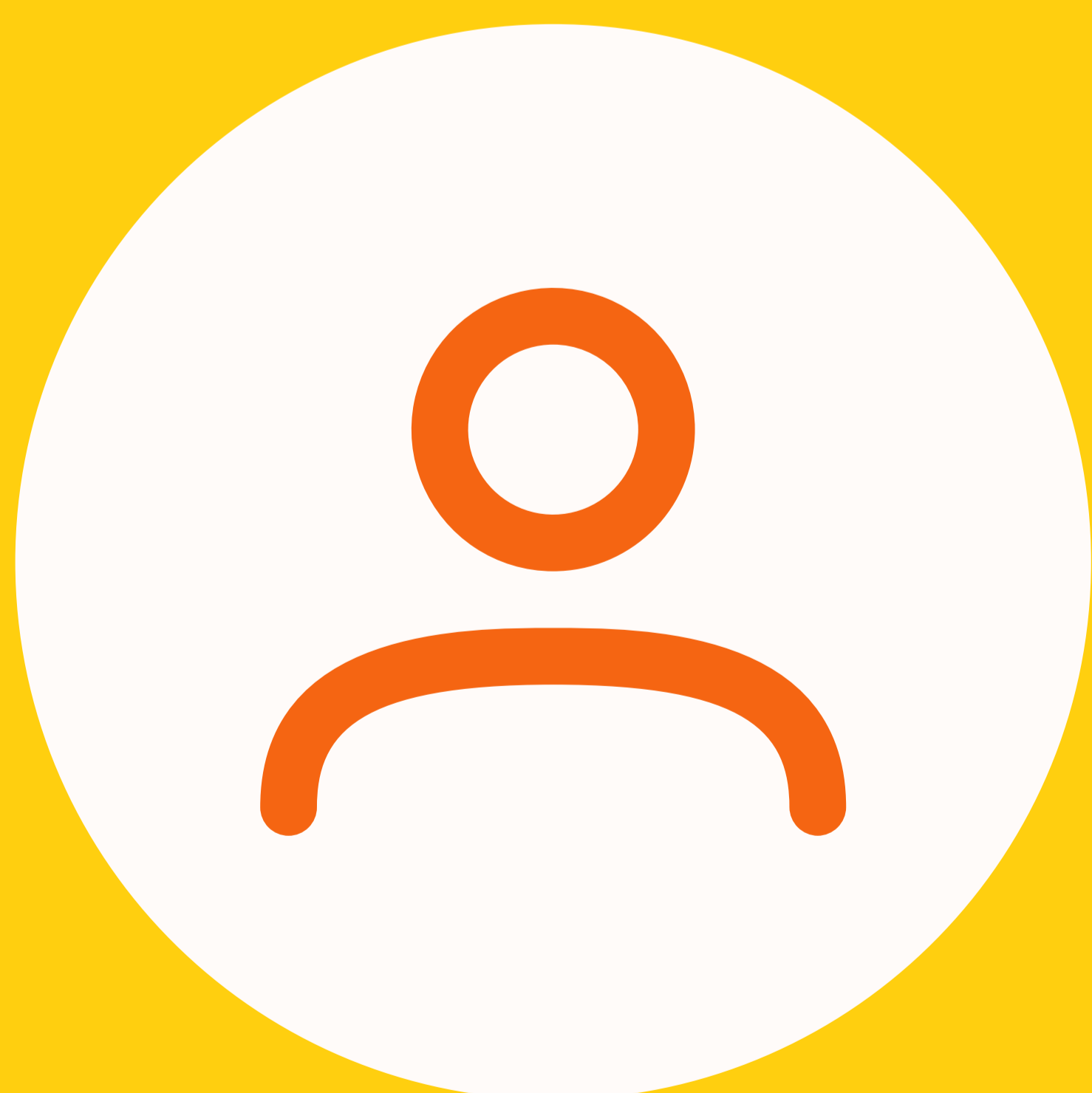


It gives me a chance to answer without feeling judged or panicking about the answers and going blank.

Patient feedback



Case study:
see what's possible



Brilliant, much better than sitting in a hospital waiting area and using up valuable NHS resources/staff when it's so much more convenient to complete the forms this way.

Patient feedback



Clinical teams



“

It's wonderful to work with a company invested in what you require and want to achieve. I'm telling my senior leaders how amazing Isla is to collaborate with.

Shonna Spreadbury
Digital Clinical Systems Lead



“

It just makes my life so much easier.

Dr Rachael Robinson
Consultant Dermatologist



“



Isla has really helped my clinical practice, reducing unnecessary visits to the hospital and feeling much more connected to patients. Parents have really engaged with the process.

Wendy Blumenow

Senior Specialist Speech & Language Therapist
and Senior Clinical Innovation Consultant



Healthcare leaders

“



Using technology to help our families lead more normal lives is one of our key goals; the partnership with Isla Health has been fantastic in exploring the future of remote care.

Iain Hennessey
Clinical Director & Co-founder



“



We ended up with so much enthusiasm for Isla that it almost became difficult for us to manage internally as a digital team because everybody wanted it. Which is fantastic, and sometimes the opposite of what we have with digital solutions.

Leila Brown
Associate Director,
Digital Transformation



“



We have implemented Isla as our remote monitoring solution across a huge range of specialties, delivering benefits for our patients, as well as saving time and money, all with excellent feedback from clinicians.

Bruno Botelho
Deputy COO and
Director of Digital Operations





06

Joining Ireland's digital healthcare transformation



To deliver the best outcomes for patients and protect clinical time, services need a different foundation



13%

of a clinician's working day, equal to one hour, is spent looking for missing information
(Nuance)



13.5 hours

per week is spent on creating and updating clinical documentation, equal to a third of working hours
(Nuance)



30%

of re-admissions are estimated to be preventable
(Nuffield Trust)



Up to 31%

of referrals to secondary care are deemed inappropriate
(NIH)





Staff fatigue

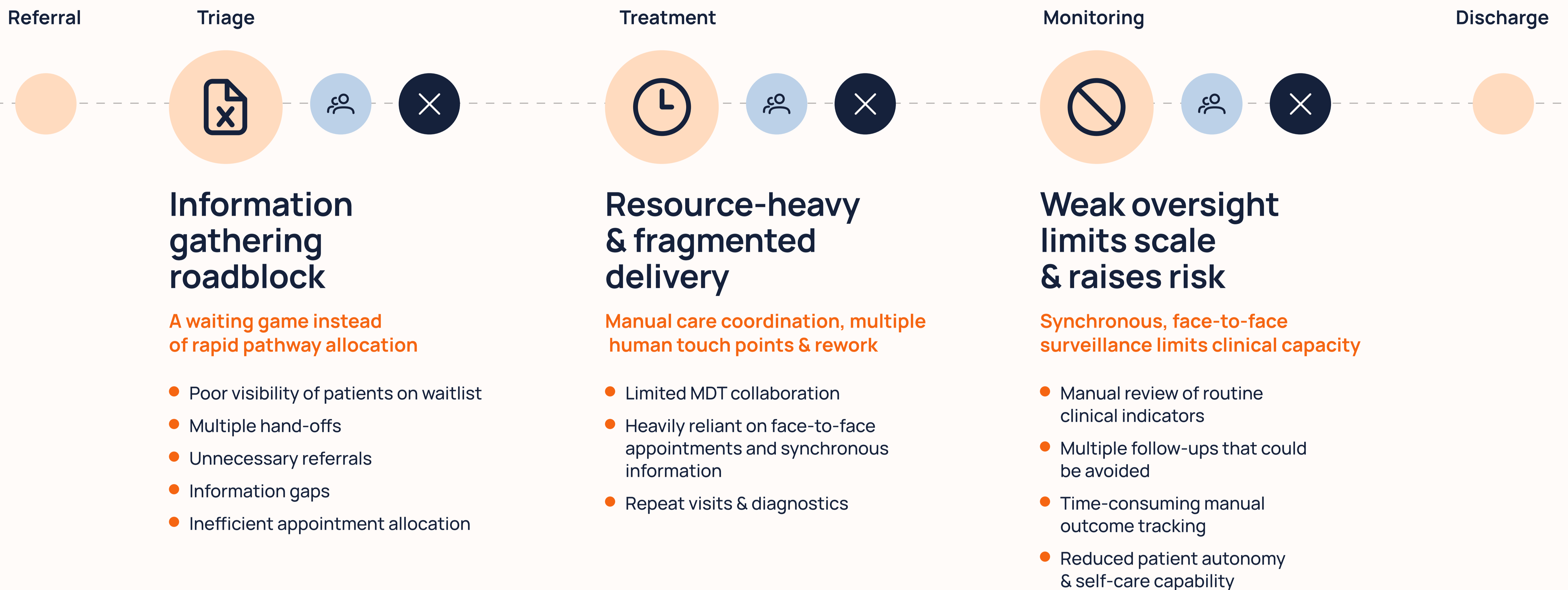
poses a risk to patient safety
(HSSIB)



Traditional pathways no longer suffice

Manual processes and excessive human touch points cause delays, affecting capacity and throughput.



 Multiple human touch points & manual processes



More face-to-face touch-point, with less capacity and increased risk



Patients:

Extended waiting times & delayed care



Clinicians:

Staff burnout, reduced capacity for urgent cases



Trusts:

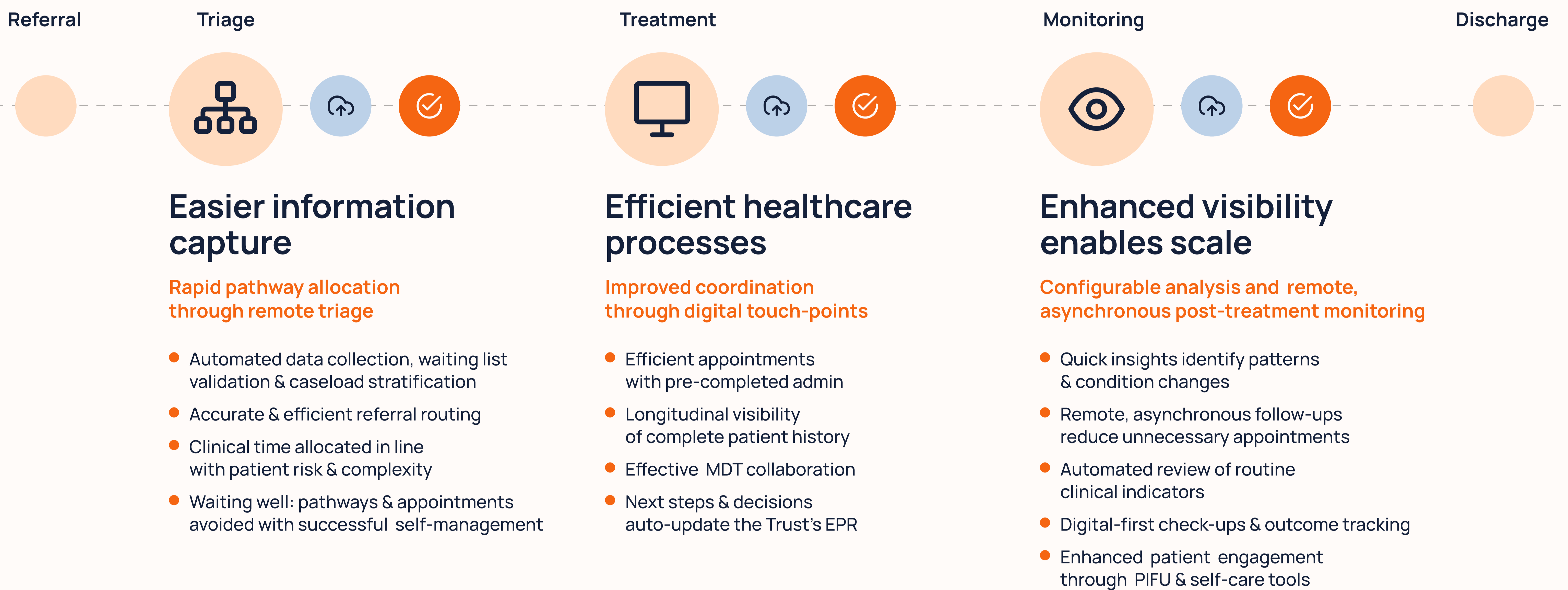
Inefficiencies that increase time, cost & risk



Increased throughput, improved care

By automating routine tasks, we increase throughput and free up clinical expertise for more complex care, enabling proactive, scalable delivery without adding extra resources.

Asynchronous media diagnostics (PROMs, photos, forms, videos, voice notes)

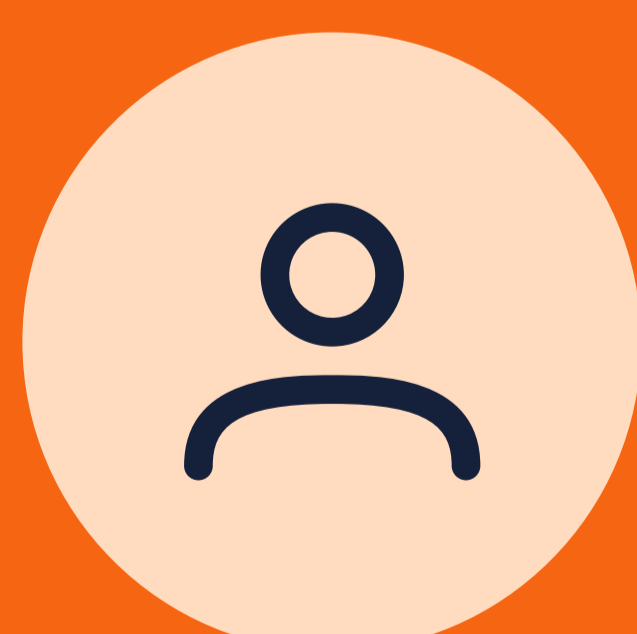


Less back and forth. More time for care.



Patients:

Faster access, less travel, better experience & outcomes



Clinicians

Increased capacity to focus on complex cases & delivering excellent care



Trusts:

Real-time insights drive scalable, efficient, and preventative care with optimal resource use.



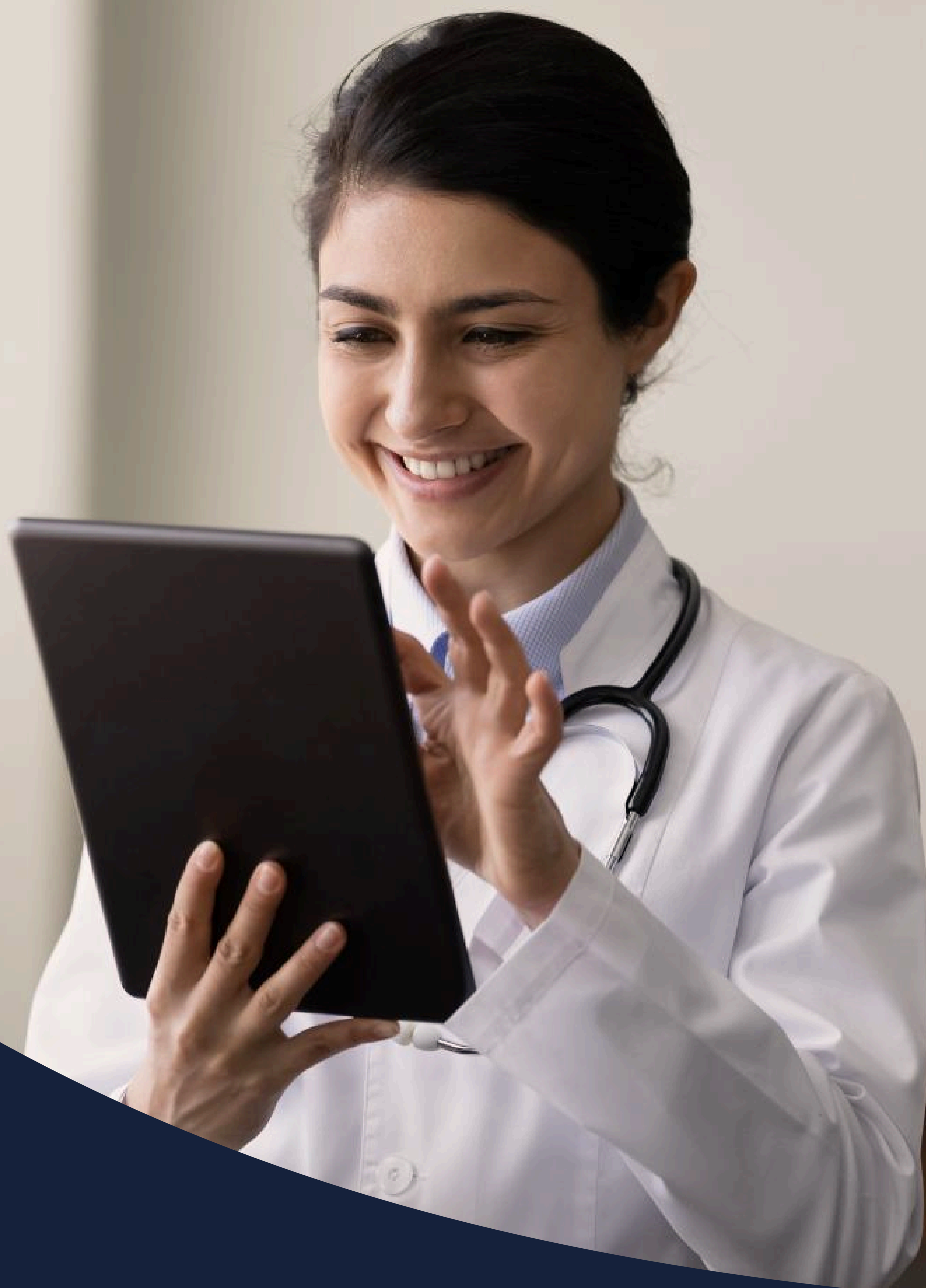
When we automate complexity instead of eliminating it, something powerful happens: Care moves faster, patients stay better connected, and clinicians gain time to focus where it counts.



The path forward is digital and deeply human

- **Digital pathways aren't just about better technology. They're about better care.**
By automating routine steps and capturing information remotely, we can free up what's most valuable in healthcare: the time, expertise, and focus of clinical teams. This isn't about cutting corners or replacing human care. It's about removing the barriers that slow things down so the right care reaches the right people, at the right time.
- **Let clinicians focus where it matters.**
Much of what slows care today isn't complexity, it's repetition. From admin-heavy triage to routine follow-up, valuable time is lost to manual tasks. Digital pathways change that. They support asynchronous care, automate predictable steps, and give clinicians real-time insight into how a patient's condition is developing. That leads to faster decisions, safer outcomes, and more time for complex care that needs a human touch.
- **A better experience for everyone.**
Patients move through care more easily, without unnecessary appointments or long waits. Clinicians work with clearer information and fewer delays. Health systems gain visibility, efficiency, and room to scale. This is how we bring care closer to home for patients across Ireland, without compromise.
- **One platform, built to scale.**
Isla isn't a single-purpose solution. It's a configurable platform that supports digital pathways across multiple specialties, all from one place. Isla integrates with systems like your EPR and e-RS, enabling you to start, manage and track pathways consistently and safely, without adding complexity to your workflow.
- **Time to back what works.**
Digital transformation isn't new. In Ireland, as in the NHS, it's often been limited to isolated pilots. The challenge is scaling what works across HSE Health Regions. But it's often scattered, small pilots that don't scale, or tools that don't connect. Now's the time to change that. We need to invest in what works and do it safely, consistently, and at scale. Digital pathways are already delivering real value across the NHS. The opportunity now is to go further and bring that value to more people, in more services.





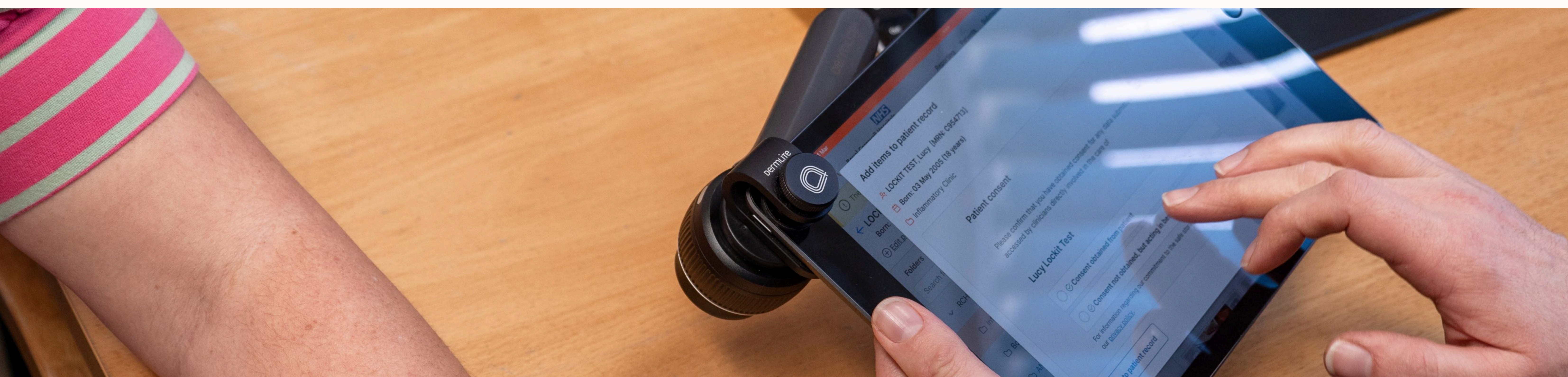
07

Learn more



How is DPP different from other digital solutions?

Unlike tools designed for one task, like messaging or appointment booking, the Digital Pathway Platform (DPP) supports the full clinical pathway, from referral to treatment and monitoring.



The Digital Pathway Platform captures what's missing:



Designed for whole care pathways – not just point solutions



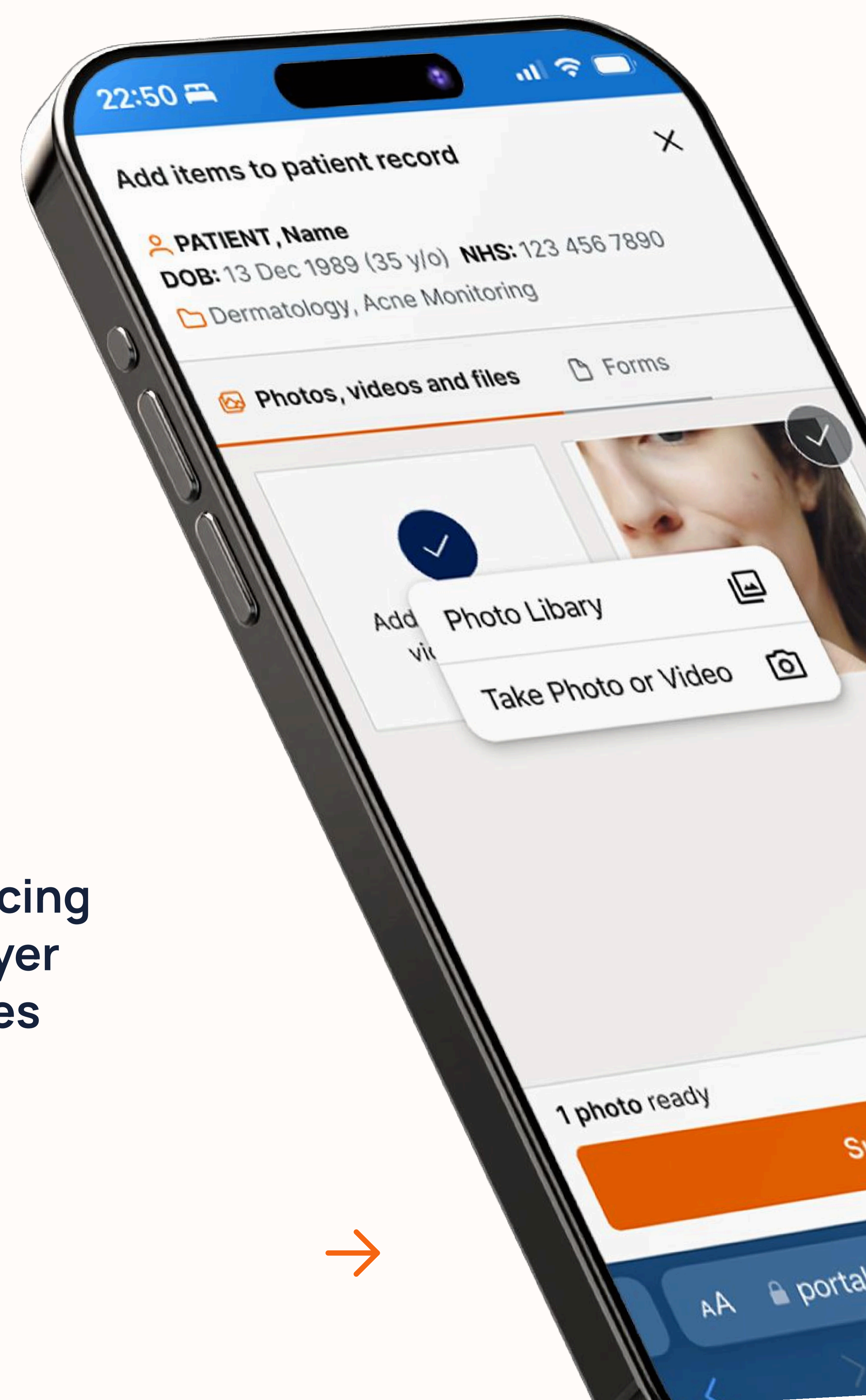
Surfaces structured, actionable patient data



Works across MDT (multi-disciplinary) teams, not in silos



Frees up clinical time by reducing admin, not adding a digital layer on top of ineffective processes



For clinicians



Save time, improve workflows

with remote patient data review and fewer unnecessary in-person visits



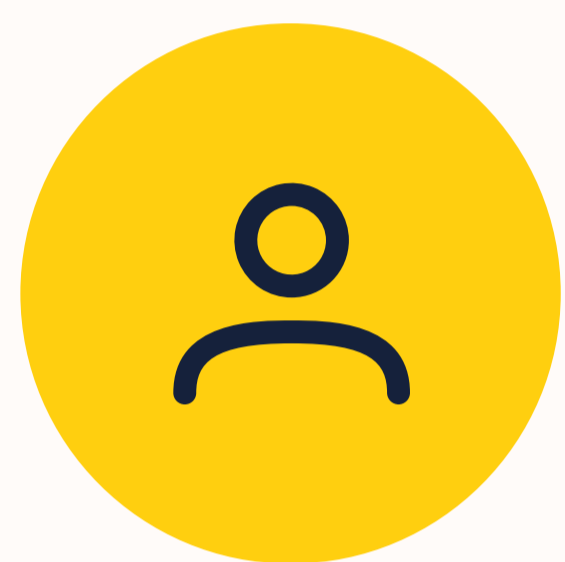
Prioritise smarter

with timely access to patient data



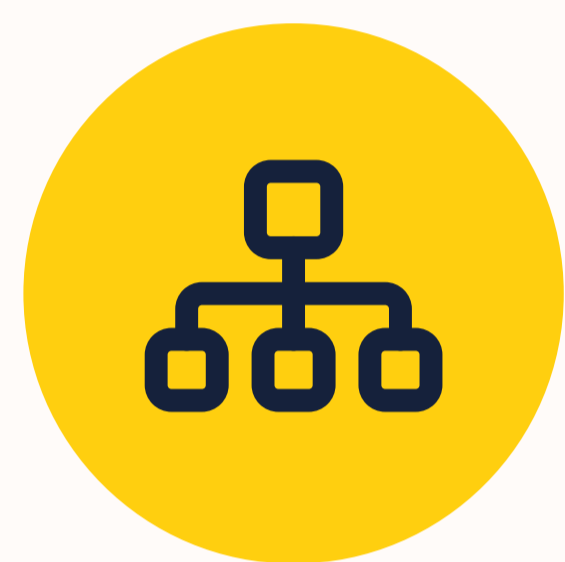
Spot issues early

through regular, standardised monitoring



Cut admin

with automated submissions and better MDT coordination and collaboration



Stay connected

as patient updates feed straight into your EPR



Configure with ease

to suit different teams and patient needs



Smooth data flow

notes added in Isla are automatically pushed into the EPR



Up to 3.8x quicker

to get specialist input



Up to 400%

increase in patient throughput



For patients



Easy to use

User-friendly and designed for convenience, patients can update from home



Fewer appointments

less travel and more flexibility



Faster care

with early detection, preventative care, timely intervention, and speedier recovery



Better engagement

with tailored support for long-term conditions



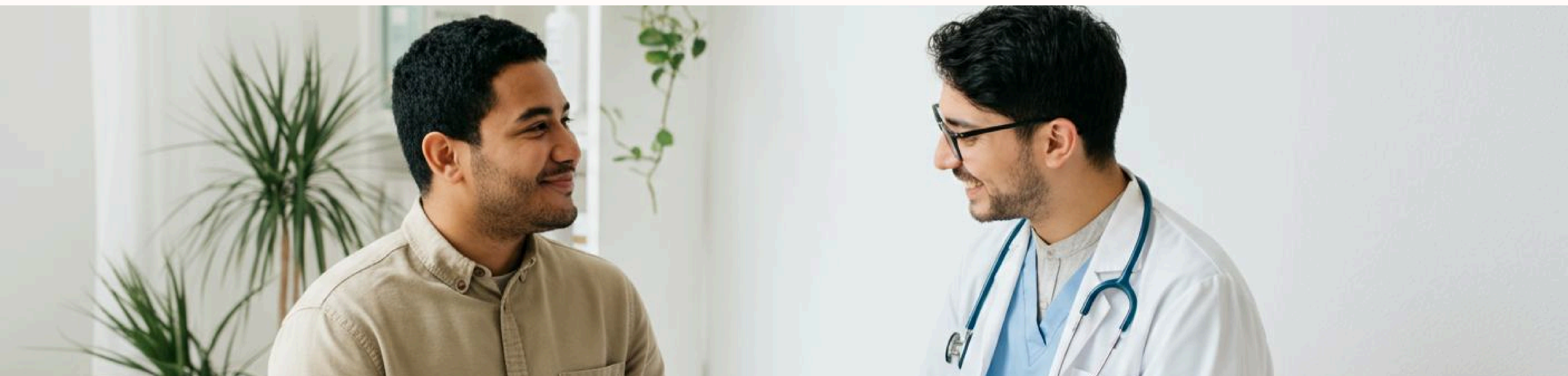
Empowered and involved

with active participation, better outcomes, and peace of mind



Safe and secure

with privacy built-in



92%

of patients would recommend Isla



4.2/5

patient satisfaction score



116,000+

hours of patient time saved through avoided face-to-face appointments



43% SSIs

reduction and 6x less likely to be readmitted

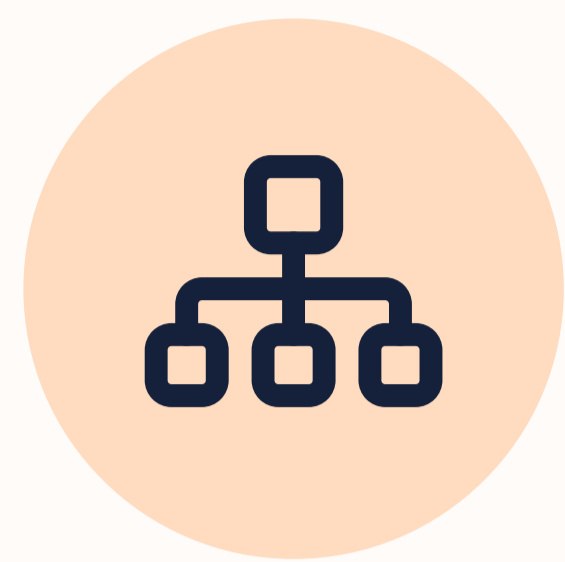


For healthcare leaders



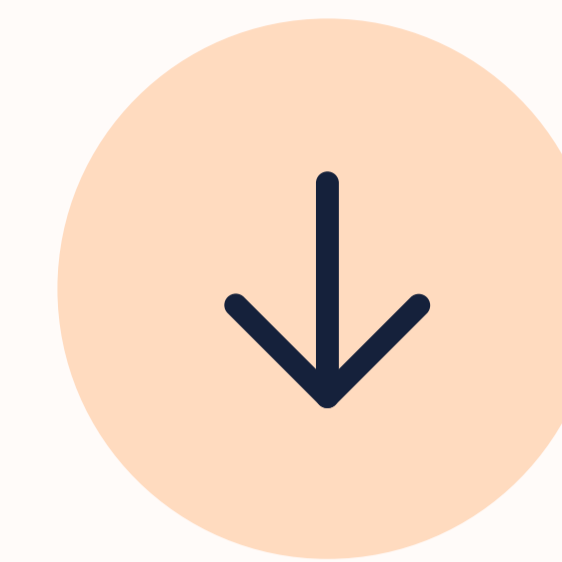
Save money

with unlimited users and no cloud storage charges



Scale with ease

as the DPP can be used across any specialty, in any pathway



Reduce risk

and improve patient safety



Hit key targets

and align with national healthcare delivery goals



Supports net-zero targets

by reducing unnecessary patient and clinician travel and replacing paper-based processes



Set up quickly

with dedicated Isla teams providing full support and resources, ensuring smooth roll-out



Up to 400%

ROI on average, with cash-positive implementations in 100% of roll-outs



£2.3m

potential savings per Trust, per year



672 tonnes

of CO2 emissions reduced by saving over 3.6 million patient travel miles

(Equivalent of going around the world 147 times or to the moon and back 7.6 times)



87%

reduction in time from referral to treatment



75%

de-escalation of demand from SOS to planned intervention



Let's make care simpler, together

Whether you're exploring options or ready to act, we'll meet you where you are. There's no sales pressure, just a chance to see how digital pathways are already making a difference across the NHS.



Talk to a clinician or digital lead already using DPP. Learn what's worked, and what they'd do differently.



Join a live demo tailored to your setting. See how digital pathways could work in your service.



Test Isla in one part of your service. We'll support you with setup, training, and governance from day one.

[See how Isla works](#)



Our impact guarantee: If it's not working, we won't charge

If you don't see a return within 12 months of go-live, we pause billing until you do.

We know digital transformation often promises more than it delivers, and the stakes are high. That's why we've designed Isla to drive measurable impact, quickly and sustainably. Our ROI guarantee reflects the confidence we have in our platform and in the clinical teams we partner with.

92%

patient recommendation rate

0%

customer churn

100%

cash-positive roll-outs

300-400% ROI

per project

No charge

per for cloud storage

Unlimited users

no charges per license



FAQs

● Is Isla an app?

Not quite. Isla works like an app, but you don't need to download anything. It runs in your browser on any device and can be saved to your home screen for easy access.

● Is this virtual care?

Partly, but it's more than that. Digital Pathway Platforms (DPPs) support remote-first, asynchronous care across the full patient journey. That includes triage, referral, point of care, and ongoing monitoring.

● Is this just another thing to add to my existing tool stack?

No. The DPP fits alongside your current systems to make them work better together. Many steps are automated, so you don't need to open new windows or switch platforms. It's designed to cut admin, not add to it.

● We already have an EPR. Why do we need this?

EPRs are great for booking appointments and linking referral data, but they often stop there. Isla helps you go further. The DPP works with your EPR to build full digital care pathways, defined by your service. This improves productivity, standardises best practice, and helps teams deliver better outcomes. After the referral, Isla supports everything from triage to monitoring to follow-up, all in one place. You get a joined-up pathway that keeps care moving and reduces delays.

● We don't have any other digital systems, can we still use Isla?

Yes, Isla can operate as a standalone platform where there are no existing digital systems. If other systems (such as an EPR) are introduced at a later date, Isla can integrate with them after implementation.

● What's the difference between Isla and an EPR?

An EPR helps digitise referrals from primary to secondary care, making it easier to book appointments and link referral data. However, it's mainly focused on the referral process and appointment management, without extending into broader care management. Isla takes it further by managing the entire care pathway, from referral to follow-up. It supports your clinical teams after the referral, handling tasks like triage, monitoring, and follow-ups. Isla brings together referral data and clinical insights to create a seamless, connected pathway that optimises care at every stage of the patient journey.

● How quickly can we start?

Quickly. Most teams begin mobilisation within two weeks. We help you map your processes and co-design the pathway to fit your needs. Our dedicated delivery function supports clinical mobilisation and training. Technical integration and governance setup depend on your trust's timelines and existing systems, but we work with your teams to make this quick and smooth. We would need to enable the technical integration with your IT team and complete our information governance and clinical safety documentation with your trust's approval team. Many native EPR integrations take just a couple of hours to configure (front-end).

● How secure is Isla?

Very. Isla is **Cyber Essentials Plus certified** and built with end-to-end security in mind. Nothing is stored locally, and everything is fully encrypted. It's worth mentioning that many trusts have adopted Isla to resolve the data security risks. Isla is a secure alternative to tools like email or WhatsApp, which many teams still rely on for patient updates. Data stays safe, and everything connects to your EPR, no silos, no risk. The platform meets the highest standards for data protection, so you can be confident that clinical and patient information is safe.

● Will this integrate with our existing tools?

Yes, Isla is designed to fit in with your existing workflow and bring your systems together. The platform integrates with e-RS and all major EPRs. To name a few: Epic, Cerner/Oracle, Nervecentre, EMIS (part of Optum), SystemOne, and Rio. For integrated trusts with both acute and community services or neighbouring trusts where patients frequently move between clinical settings, Isla offers an integrated shared record to join up patient care and avoid duplication of effort.

● What clinical specialties has Isla been proven in?

Isla supports over 40 specialties: from Dermatology, Ophthalmology, and Pre-op to Community Wound Care, SSI, SaLT, and more. You can find a comprehensive list [here](#). The platform is fully configurable, so we can work with any clinical area. We'll co-design the pathway with your team to meet your needs.



- **How do patients use it?**

Patients receive a one-time secure link, no app, no login needed. They can submit structured forms, including PROMs & PREMS, photos, videos, or voice recordings straight from their phone, all from their device. It's simple and accessible, so patients can contribute to their care from home/remotely. Family or carers can submit on their behalf too. This means fewer unnecessary appointments and quicker updates for your clinical teams, and a more responsive experience overall.

- **What support do you provide during roll-out?**

You'll have full support from our delivery team, from setup and clinical mobilisation through to benefits evaluation and ongoing support. This would include technical setup to integrate with your existing systems, helping you define your pathways, and both process mapping with and training of staff who require access to the platform.

In terms of evaluations, we would provide quarterly impact assessments, led by our in-house team of data scientists and health economists. This ensures we deliver value for money and allows our delivery team to continually iterate throughout the implementation process. Every project will be assigned a dedicated programme manager who oversees successful delivery. They are often the first point of contact with mobile contact details provided alongside online support from our tech team.

- **What's the ROI and evidence base?**

Yes. Every trust using Isla has seen financial gains, both through productivity and cash savings. Most see impact within 3 months and a 3-4x return on investment each year. For example, Nottingham University Hospitals saved over £150,000 in just four specialties. See the NUH independent Edge Health evaluation here. The full trust-wide roll-out saved significantly more. Recognising the financial pressures the NHS is under, and our confidence in Isla's impact, we offer an impact guarantee. If you don't see a positive ROI within 12 months, we pause billing until you do.

- **How do we know patients will respond?**

Isla sees an average patient response rate of over 78% across all use cases; one of the highest in the sector. Not everyone will respond digitally, and that's okay. The platform highlights non-respondents so you can follow-up in other ways. We're also working with an independent audit centre to achieve level AA accessibility, making Isla as usable as possible for everyone.

Have more questions?

[Ask for a call back](#)



Partner case studies

- [Royal Cornwall](#)
- [Harrogate and District](#) (NHS Blueprint)
- [Chelsea and Westminster](#)
- [NHS Lothian](#)
- [Nottingham University Hospitals](#)

Use cases

- [Chronic wound care](#)
- [Improving clinical workflows](#)
- [Reducing waiting times](#)

Other resources

- [Isla's automations: Q&A with our CTO and Director of Product](#)
- Article: [Why moving away from outdated models of care is urgent](#)
- Article: [Why healthcare systems must implement digital pathway platforms](#)



Speak to a clinician who's already using Isla

Curious how Isla works day to day?

There's no substitute for hearing it from someone who's been in your shoes. We'll connect you with a clinician or digital lead currently using Isla in their service, whether that's dermatology, community wound care, pre-op, or another pathway relevant to your work. You'll get a candid, firsthand perspective on:

- What changed in their clinical workflow
- What surprised them about implementation
- How it impacted their patients and team
- What they'd recommend for teams getting started

No scripts. Just honest insights from someone facing the same pressures you are, and who's already made digital pathways part of their normal practice. Interested? Let us introduce you.

[Connect with a clinician](#)



References

Waiting lists & system pressure

850,000+ people on waiting lists for hospital care

(Source: Surgery Now)

911,500 people on waiting lists - the highest level ever recorded.

(Source: Irish Hospital Consultants Association (IHCA))

600,000+ waiting for outpatient consultations

(Source: Surgery Now)

80,000+ awaiting inpatient or day-case procedures

(Source: Surgery Now)

€437 million allocated to address waiting lists in 2024

(Source: Government of Ireland)

Healthcare expenditure

€36.6 billion preliminary healthcare expenditure in 2024 (9% increase)

(Source: CSO System of Health Accounts)

€33.5 billion spent on healthcare in 2023 (6.9% increase)

(Source: CSO System of Health Accounts)

Healthcare spending: 6.6% of GDP in 2023 (vs 9.1% OECD average)

(Source: CSO System of Health Accounts)

77% government spending, 12% voluntary, 11% household direct payments

(Source: CSO System of Health Accounts)

40% of spending goes to hospitals

(Source: CSO System of Health Accounts 2023)

Workforce & demographics

21,000 doctors

(Source: Government of Ireland)

84,000 practicing nurses

(Source: NMBI)

40% increase in people aged 65+ between 2013-2023

(Source: CSO - Older Persons Information Hub 2024)

4:1 working age to 65+ ratio currently, falling to 2:1 by 2050

(Source: Department of Finance)

Digital Health frameworks & policies

Digital for Care 2024-2030' Framework launched

(Source: Department of Health)

HSE telehealth roadmap 2024-2027

(Source: HSE)





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