



Getting an Ambient Voice Technology pilot through governance

Eight tips from a Chief Nursing Informatics Officer who's done it

Governance can take time, and rightly so. As a supplier, we don't see it as a hurdle – we see it as our responsibility to support organisations through it as best we can. Sophie Brooks, Chief Nursing Informatics Officer at Homerton Healthcare NHS Foundation Trust, shares her collaborative approach to navigating governance for Accurx Scribe powered by Tandem.

Here's what she'd pass on to anyone starting the same journey:

1. Set up forums for engagement

You need trust-wide involvement from the start – clinical leads, clinical champions, information governance, operations. Setting up a dedicated forum each week to raise concerns, make decisions, and bring people on the journey is hugely important. Without it, pilots become something that happens to people rather than with them, and you feel that later. At Homerton, our AI working group provided structured oversight of the project, aligned key stakeholders, and enabled early identification and mitigation of risks – keeping everyone informed and minimising friction throughout.

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2. Start with the end date, plan backwards and get everyone aligned early

Pick a date for your go-live and your final sign-off meeting. It orients everyone around the same timeline, creates the right kind of urgency, and stops the process from drifting. At Homerton we mapped out our governance meetings early on, and it worked really well.

3. Start information governance as soon as possible

This is the one that catches teams out. Information governance approval processes can take longer than you think. Start it before you think you need to and everything else can move around it. If information governance sign off is stuck, everything is stuck.

4. Map the whole pathway, not just the consultation

Scribe isn't just a documentation change - it affects workflows upstream and downstream. Map these out early and involve the teams affected. People shouldn't be surprised by things at go-live that could have surfaced months earlier.

5. Really prepare for the clinical safety hazard workshop

Knowing the product through watching demonstrations and jumping on calls with the team are key, but more importantly, know how it fits into your specific workflows. Who generates the note, who reviews it, when does it enter the record, who's sending out letters, how are they sending out letters? You need to be able to answer these questions to give teams confidence that workflows and pathways have been mapped out. The hazard workshop is not the place to be working this out for the first time.

Moreover, not everyone will have attended a hazard workshop before, so I recommend beginning by clearly explaining what it is and what it sets out to achieve. A well-structured agenda keeps things on track, while inviting questions early helps address concerns before they become blockers. Plan ahead for potential delays - anticipating them early is far easier than managing them later.

6. Invite the supplier to the hazard workshop

Have them in the room. When technical questions come up, they can answer them and share how other trusts have handled the same issues. Without that you end up with weeks of email back and forth that creates more uncertainty than it resolves.

7. Reframe risk against what's already happening

Creating this right culture is key and when thinking about risk appetite, it can be helpful to compare to the status quo. Help your governance committee make that comparison rather than assessing AI against a zero-risk baseline.

8. Build knowledge and confidence through communication

Governance that happens behind closed doors makes people anxious. Regular updates, even when there's nothing dramatic to report, make a real difference to how staff feel when the technology actually arrives. The teams that adopt fastest after approval are almost always the ones that were kept in the loop throughout. It is equally important to empathise with clinicians – to truly hear their concerns and validate their experiences. Building confidence in AI requires more than just evidence; it requires active listening, clear reasoning, and thoughtful objection handling so that clinicians feel understood, not overlooked.



Governance can feel like the hardest part, but in my experience it's also where you build the trust and confidence that makes adoption really land. Get the foundations right and the rest follows!

Sophie, Chief Nursing Information Officer at Homerton Healthcare NHS Foundation Trust

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