

A Viability Study and Proof of Concept for an Agentic AI System to Support Individuals in Application for Support in Wales Through Relevant Available Forms via a Corpus of Personal Information and Follow-Up Questions.

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Abstract

This project proposes a viability study and proof-of-concept for an agentic AI model designed to streamline and improve access to support services for individuals in Wales. The current system for applying for support is often complex and challenging due to detailed forms, varied formats, and the need for comprehensive personal information, creating significant barriers to entry. Leveraging advancements in AI, particularly agentic models that can autonomously navigate form selection and completion, this research aims to address these inefficiencies. The study will investigate the technical feasibility, ethical considerations, and user acceptance factors, all within the unique cultural and linguistic context of Wales. The project hypothesises that detailed semantic labelling of forms, a guided administrative upload portal, and adherence to Welsh Government guidelines will enhance accuracy, trust, and public acceptance. Expected deliverables include a comprehensive viability report, design guidelines, and an evaluation of user acceptance and trust, aiming to provide a framework for ethical AI deployment in Wales.

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1 Introduction

The landscape of public service is undergoing a transformative shift, driven by the rapid advancements in Artificial Intelligence (AI) and data-driven technologies. In Wales, there is a clear recognition of AI’s potential to enhance personal outcomes and bolster the economy [1]. However, this progression necessitates a foundational commitment to equality, trust, and safety in AI implementation. This project proposes a proof of concept and viability study into an agentic AI model aimed at simplifying the complex and often arduous process of applying for support services in Wales. The current system frequently presents significant challenges, including detailed forms, varied formats, difficulty in understanding what support is available, and the need for comprehensive personal information. These challenges can act as a major barrier to entry during a potentially trying and sensitive time in people’s lives.

An agentic AI model offers a novel approach to these challenges by autonomously navigating form selection and completion, leveraging existing data, and engaging in dynamic follow-up questions to ensure accuracy and completeness. This research will look at the technical feasibility, ethical considerations, and user acceptance factors crucial for the successful deployment of systems within the unique cultural and linguistic context of Wales. By keeping the focus on Welsh guidelines, data protection laws, and human-AI interaction, this study seeks to provide a robust framework for an AI solution that aligns with the values of the Welsh and serves the public good [1].

2 Background and Literature Review

2.1 Agentic AI

Agentic AI represents a significant and powerful evolution of standard conversational large language models (LLMs) [2]. Where LLMs were limited to a single context and sandboxed scope, AI agents are provided the autonomy and capability to complete real tasks in a dynamic environment. This enhanced capability is typically obtained through a combination of natural language understanding and generation from LLMs, some level of fine-tuning for specific tasks, and access to programmatic tools that can be used by the model [3]. Models such as hierarchical language agents are able to manage multiple levels of decision-making, from strategic planning to detailed task execution, enabling the effective handling of complex scenarios [4]. Pre-trained large language models typically serve as the underlying engine for planning, interpreting instructions, synthesising knowledge, and supporting iterative reasoning to refine responses [3]. Few-shot learning combined with prompt engineering,

in which a model is trained or fine-tuned on a very small number of labelled examples, can significantly improve outcomes [5]. In real terms, many models have the potential to be trained for specific tasks without much upfront investment, provided the training data is of a high quality.

The concept of agency in AI has generally been described as the capacity of an agent to achieve a goal autonomously. Unlike traditional rigid automation, agentic systems emphasise proactive and intelligent machine behaviour. This enables them to navigate complexity and unpredictability with or without human intervention [6]. Organisations are increasingly adopting and integrating agentic systems into their workflows and offerings. They are already automating tasks, improving decision-making, and facilitating collaboration between human workers and digital agents. However, it is crucial to define the appropriate level of agency to ensure that users have full awareness of the capabilities of the agent and supply informed consent at every stage. [2]

2.2 AI Use in Medical and Form Filling Contexts

The medical field has historically been cautious in adopting deep neural networks due to their inherent lack of explainability and black box nature [7]. Despite this, AI holds significant promise for transforming paperwork in healthcare and other industries. Optical character recognition (OCR) technology allows paper documents to be scanned and digitised, creating searchable and editable versions. This can reduce manual data entry and simplify record management. For instance, systems like MEDLEE have been used to process radiographic reports and organise clinical data for easier access and analysis. NLP systems have also demonstrated effectiveness in extracting data from nursing notes and analysing breast pathology reports with high sensitivity and specificity [8].

Challenges do still exist, however, with the few studies in the domain of form selecting and completion facing similar barriers. Agents have been shown to struggle with understanding and editing PDF documents, especially those with deeply nested tabular structures. When attempting to convert the PDF documents to other formats, much of the necessary formatting is lost, causing even greater difficulty in understanding for the agents [8]. Another relevant study where they attempt to complete paperwork with agents also faced major hurdles. They made use of Visual Language Agents (VLAs) with access to photo editing software through a graphical user interface (GUI). Current VLA and GUI agents have shown limited accuracy in form-filling tasks, primarily struggling with text placement and multi-step actions. Results saw a maximum completion rate of only 3.9% when the agent was tasked with identifying field locations and overlaying text [9]. The results fall short of necessary success rates but identify key findings that will support the implementation of this project. As text placement was a challenge, it may also be possible to provide a portal in which admin users supplying

form documents can identify field input areas and label documents.

One promising agentic approach involved a structured workflow where a custom application guides users through a series of prompts to gather essential detail. This system was for the generation of simulation scenarios in a medical context, which, although not directly applicable, may support the implementation of an agentic admin portal. The system made use of multiple specialised agents, each tasked with a portion of the simulation generation, seeing promising results [10]. Applying such a framework to an admin portal would allow for document scanning, transformation, and labelling steps to be clearly presented to the user. We hypothesise that such a portal would improve acceptance over a standalone document upload and decrease the barrier to entry for professionals.

Another important aspect of this research will be around the generation of follow-up questions. One study made use of a competitive model comprising a question generator and a second model that would attempt to answer the generated question from the information already available. This allowed only relevant and pertinent follow-up questions to be passed through to the user. The model showed promising results, and making use of such a system may alleviate frustration, avoiding generation of questions the user feels have already been answered within their documents [11].

2.3 Data Collection, Concerns, and Methods

Ethical data collection, while not a new concern, is intensified by AI’s capabilities. The 5Ps of ethical data collection are becoming increasingly challenging due to the black box nature of many AI models. These 5Ps include [12]:

- Tracing data origins (provenance)
- Establishing effective security (protection)
- Preventing unintended data use (purpose)
- Creating accurate datasets (preparation)
- Safeguarding individuals from re-identification (privacy)

These difficulties arise because AI-driven data collection often falls outside current legal regulations, despite ethical principles like autonomy, justice, and trust being embedded into existing frameworks. For example, healthcare agents accessing patient data for medical recommendations must ensure data protection against unauthorised access and breaches and legal availability as defined by regional regulations [2].

Under EU law, data privacy is a fundamental right, with GDPR recognised as a leading data protection framework. The GDPR operates on an opt-in basis, requiring explicit informed consent for personal data processing, which must be for a specific, legitimate, and necessary purpose. The law also mandates explainable AI (XAI) systems, with the expectations being that users should understand the high-level logical processing and have the ability to request human intervention or review of automated decisions if dissatisfied [13]. Importantly, public posting of data does not imply consent for use, and profiling of sensitive attributes such as mental health or disability can be incredibly harmful. In many cases anonymisation alone simply isn't sufficient due to modern re-identification techniques [14].

Implementation of AI in medical contexts requires not only initial training data but also a continuous supply for ongoing training, validation, and improvement [15]. Consequently, cybersecurity measures will become increasingly vital to counter the risks of improper data use, inaccurate disclosures, and limitations in anonymisation techniques [16, 4]. Distributed machine learning (DML) offers a solution by enabling localised model training where only trained parameters, not raw data, are shared. Federated Learning (FL), considered highly promising, trains on local datasets on end devices, sending only the weights back to the server, allowing many users and data sources to contribute to training [12]. In the case that transmission of sensitive data that is required for processing needs to be avoided, this is a worthwhile technology to understand and test.

The European Union Agency for Fundamental Rights has raised concerns about the quality of medical data and the risk of errors in AI applications. AI systems are often trained on ideal lab data rather than real-world medical practice data, which can introduce faults and bias when the shift is made to working with real data. Deploying AI systems for medical use based on faulty data generally violates the law, as most medical AI devices qualify as medical devices under the Medical Device Regulation (MDR). This is unlikely to apply in the case of this project; however, considering the legal implications of deploying such a system for real-world use is vitally important.

Data cleaning, while usually improving quality, can also sometimes introduce discrimination and bias into machine learning algorithms [17]. Therefore, high-quality data and effective data management at all levels are essential for machine learning in healthcare and related industries [18]. For our use case, when ingesting data that is not already in digital format, providing OCR capabilities may help to reduce errors and ensure that data is kept accurate and representative. Informed consent should be acquired at every stage of the interaction, and users should have access to all of their data that is being processed and the decisions that are being made. The produced model should provide explanations for where in their data certain information was derived to enhance explainability.

2.4 Psychological Aspects

User trust in AI is an incredibly complex topic, encompassing cognitive, affective, and behavioural components. Cognitive trust relates to the rational assessment of an AI's performance and predictability, with consistent high performance fostering faith and willingness to rely on the AI. However, users tend to inherently trust AI less than humans and may even be averse to algorithmic decisions even when they outperform their human counterparts [19]. The affective aspect considers users' intellectual background and feelings towards AI, which can be less rational and influenced by their background even if users are unfamiliar with AI. Behavioural trust develops over time from repeated direct interactions. Perceived usefulness and ease of use are key drivers in user trust, especially crucial in medical systems [20]. Combining utilitarian and hedonistic, that being goal-oriented and joy-producing, behaviours can positively impact user trust [3].

Positive past experiences make users more likely to trust AI; however, negative experiences can just as easily destroy a user's trust in future interactions. A mismatch between user expectations and the reality of a system can also negatively impact trust. It has been found that those with a higher educational background generally trust AI systems more than those with fewer educational qualifications [20, 21]. This will be an important point to consider when designing a system for the Welsh context. One key concern among many appears to be confidentiality, with some also raising worries around increasing costs that AI systems may incur [21]. Some studies have shown that providing users control over their data and explaining AI systems and how data is used can increase confidence [22].

Especially for an AI system around support for individuals, the emotionality and human likeness will be important considerations. Users of the system may be in sensitive situations, and the system failing to meet their emotional needs may lead to a decrease in trust. Balancing the psychological and emotional language provided by the agent will be important to ensure that there is not a mismatch in the user's expectations [3]. Studies have shown that younger people are generally more accepting of AI technologies, especially in a medical context [23]. Allowing the user to choose from a selection of agent personalities may provide the user a level of control in their interaction in this respect.

When designing emotional interactions into the system, however, there are risks that must be considered. AI systems by their very nature are not empathetic and cannot truly understand the emotional situation that they are responding to. Strict guidelines must be put in place if conversational responses are allowed in an attempt to prevent escalation and misunderstandings. This is especially true when the system has access to a large corpus of the user's personal and medical data, which could be used in a response. Some researchers argue that emotional AI technologies should be regulated strictly due to their ability to influence decision-making and

their potential for use in deception [24].

Another important aspect for consideration will be the design of the user interface and front end of the application. User-friendly interfaces are crucial for digital interactions, with system efficiency being directly related to the efficiency of the interface. Anthropomorphic elements, such as avatars and pop-ups, have shown potential for positive perception gains in user acceptance [25, 26]. Ultimately, the success of these systems depends on their ability to benefit the user at minimal cost, be that financial or mental [27].

3 Rationale for the Study

This study is justified by the pressing need to streamline and improve access to support services for individuals in Wales. The current landscape of support applications is often characterised by complexity, varying formats, and the necessity for detailed personal information, which can create significant barriers for individuals seeking assistance. The literature review has identified several critical gaps in existing solutions for automated form completion and intelligent assistance within sensitive data environments. While advancements in OCR and NLP offer promising avenues for digitising and interpreting documents, the limited accuracy of current visual and GUI agents in complex form-filling tasks highlights a clear need for more robust and nuanced approaches [8, 9].

The ethical considerations surrounding privacy, security, and the potential for bias in AI systems are of the utmost importance. This is particularly true within the sensitive context of this study. Applying the existing research around ethical data processing, such as informed consent and explainable AI, as well as trustworthiness and user acceptance of AI systems [20, 3] will be interesting to apply to the Welsh context.

The Welsh Government’s commitment to leveraging AI for public service transformation, coupled with its emphasis on user-centred design, digital inclusion, and bilingual services, provides a unique and timely context for this research [28, 29, 1]. This study aims to bridge the identified gaps by proposing an agentic AI model that not only addresses the technical challenges of automated form completion but also integrates ethical principles and psychological considerations from its inception. By applying agentic AI in a novel way to the specific context of support applications in Wales, this research offers the potential for significant societal impact, improving accessibility to vital services and fostering greater trust in AI-driven public sector initiatives. The topicality of AI in public services and the potential for this model to serve as a blueprint for future ethical AI deployments make this viability study highly relevant and worthwhile.

4 Aims and Objectives

The ultimate goal of this research will be to provide a viability study and proof of concept implementation of the system described in the working title. Viability will encompass investigation into costs, user acceptance, expectations, and accessibility. The proof of concept will include an implementation of an agentic model and user interface that will provide recommendations of available support and fill in support applications based on a comprehensive personal and medical corpus of information provided by the user. If the information provided by the user is not sufficient, or the system determines more detail is necessary, subsequent follow-up questions should be generated and presented to the user. The system should work with many form formats, from document forms such as PDFs and Word docs to online formats such as web forms.

The above literature review has identified several key areas of research and helped form the following hypothesis.

- Hypothesis 1. Detailed semantic labelling of digital forms, including descriptions of the form and its fields with example data, will lead to greater outcomes in accuracy and form selection.
- Hypothesis 2. Providing a GUI upload portal, in which admin users are guided through the upload and labelling of forms, will increase trust and industry acceptance over web crawling and document scraping.
- Hypothesis 3. Following Welsh Government guidelines, such as user interface style and bilingual capabilities, will lead to increased user acceptance from the Welsh public.

4.1 Hypothesis 1

Detailed semantic labelling of digital forms, including descriptions of the form and its fields with example data, will lead to greater outcomes in accuracy and form selection.

The following objectives will support in the research of this aim:

- To evaluate existing agentic AI technologies and their potential applicability to automated form completion in a sensitive data environment.
- To design and develop a framework for an agentic AI model that can securely process personal information and interactively gather additional data for form completion.
- To assess the ethical implications, data privacy concerns, and psychological considerations associated with the deployment of such an AI model in a Welsh context.

4.2 Hypothesis 2

Providing a GUI upload portal, in which admin users are guided through the upload and labelling of forms, will increase trust and industry acceptance over web crawling and document scraping.

The following objectives will support in the research of this aim:

- To analyse the current landscape of trust in AI platforms from professionals providing support forms to users.
- To evaluate the viability of an all-in-one platform that professionals would upload their support application forms to.
- To evaluate the impact a guided upload process would have on the acceptance and ease of use of such a platform.

4.3 Hypothesis 3

Following Welsh Government guidelines, such as user interface style and bilingual capabilities, will lead to increased user acceptance from the Welsh public.

The following objectives will support in the research of this aim:

- To analyse the current landscape of support applications among the Welsh public and the inefficiencies that exist.
- To evaluate the acceptance and impact that an AI platform could have in facilitating the public in applying for support.
- To evaluate the impact of using government styling and guidelines in designing the user experience on user acceptance and trust in the system.

5 Expected Outcomes and Deliverables

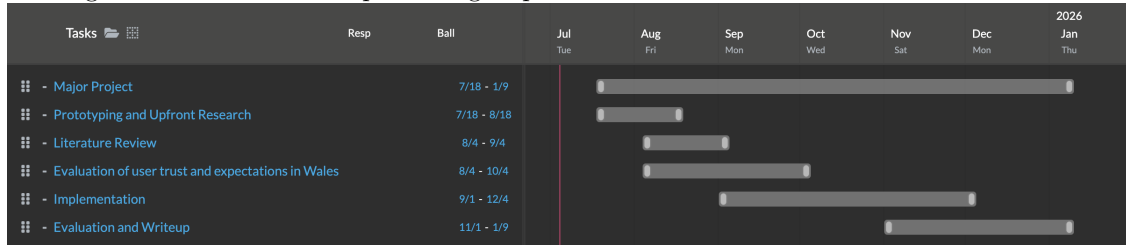
The project is expected to yield the following outcomes and deliverables:

- A comprehensive viability report on the proposed agentic AI model, including a detailed analysis of its potential benefits and challenges.

- A set of recommendations for the development and responsible deployment of an agentic AI system for support applications in Wales.
- A proof of concept and design guidelines for the agentic AI model.
- An evaluation of acceptance and trust based on different design principles from both professionals and the wider public in Wales.

6 Time Plan: Gantt Chart

Figure 1: Gantt Chart Representing Expected Timescales to Achieve the Above Aims and Objectives



7 Requirements for Implementation

For the completion of this major project, access to anonymised personal data will be important for use in functional testing. The data should model realistic, unstructured user data, especially in a medical context. Access to such data would improve the evaluation of the proposed system in difficult real-world scenarios.

To minimise costs, it is possible that access to hardware processing will be required for fine-tuning of an agentic system. There will also be a small financial undertaking to support the ongoing development and usage of AI systems.

8 Conclusion

This viability study proposes to explore the potential of an agentic AI model to revolutionise access to support services in Wales. By addressing the complexities of current application processes, the research aims to demonstrate how AI can enhance efficiency and accessibility while upholding paramount ethical and psychological considerations. The findings and recommendations from this study are anticipated to provide a crucial foundation for the future development and responsible deployment of AI solutions within the Welsh public sector,

ultimately contributing to improved citizen outcomes and a more digitally inclusive society.

References

- [1] Welsh Government. (2025, Jun.) Written statement: Strategic artificial intelligence advisory group and welsh government office for ai. [Online]. Available: <https://www.gov.wales/written-statement-strategic-artificial-intelligence-advisory-group-and-welsh-government-office-ai>
- [2] M. Al Jnainati, J. A. Jnainati, S. Rath, S. Aujla, E. Nasir, A. Govindarajan, Y. Samantaray, and M. Semy, “Transforming paperwork with ai: applications across healthcare and other industries,” *AI amp; SOCIETY*, May 2025.
- [3] M. Yanit, M. Yanit, and F. Wan, “Right agent, wrong level of hedonism: How high (vs low) hedonic values in ai-performed tasks lead to decreased perceptions of humanlikeness, warmth, and less consumer support,” *Computers in Human Behavior*, vol. 147, p. 107870, Oct. 2023.
- [4] L. Hughes, Y. K. Dwivedi, T. Malik, M. Shawosh, M. A. Albashrawi, I. Jeon, V. Dutot, M. Appanderanda, T. Crick, R. De’, M. Fenwick, S. M. Gunaratnege, P. Jurcys, A. K. Kar, N. Kshetri, K. Li, S. Mutasa, S. Samothrakis, M. Wade, and P. Walton, “Ai agents and agentic systems: A multi-expert analysis,” *Journal of Computer Information Systems*, pp. 1–29, Apr. 2025.
- [5] S. Chen, X. Liang, Y. Liu, X. Li, X. Jin, and Z. Du, “Customized large-scale model for human-ai collaborative operation and maintenance management of building energy systems,” *Applied Energy*, vol. 393, p. 126169, Sep. 2025.
- [6] J. Yu, “Preparing for an agentic era of human-machine transportation systems: Opportunities, challenges, and policy recommendations,” *Transport Policy*, vol. 171, pp. 78–97, Sep. 2025.
- [7] M. I. Hossain, G. Zamzmi, P. R. Mouton, M. S. Salekin, Y. Sun, and D. Goldgof, “Explainable ai for medical data: Current methods, limitations, and future directions,” *ACM Computing Surveys*, vol. 57, no. 6, pp. 1–46, Feb. 2025.
- [8] H. Wu, T. French, W. Liu, and M. Hodkiewicz, “Automatic semantic knowledge extraction from electronic forms,” *Proceedings of the Institution of Mechanical Engineers, Part O: Journal of Risk and Reliability*, vol. 238, no. 5, pp. 933–944, May 2022.
- [9] M. Toles, R. Singh, and I. S. Z. Yu, “Formgym: Doing paperwork with agents,” 2025.

- [10] F. L. Barra, G. Rodella, A. Costa, A. Scalogna, L. Carenzo, A. Monzani, and F. D. Corte, “From prompt to platform: an agentic ai workflow for healthcare simulation scenario design,” *Advances in Simulation*, vol. 10, no. 1, May 2025.
- [11] P. Rao S B, M. Agnihotri, and D. Babu Jayagopi, “Improving asynchronous interview interaction with follow-up question generation,” *International Journal of Interactive Multimedia and Artificial Intelligence*, vol. 6, no. 5, p. 79, 2021.
- [12] M. Hähnel, “Ethical challenges and solutions in ai-driven medical data management: a focus on distributed machine learning,” *Discover Artificial Intelligence*, vol. 5, no. 1, May 2025.
- [13] A. Holzinger, A. Saranti, C. Molnar, P. Biecek, and W. Samek, *Explainable AI Methods - A Brief Overview*. Springer International Publishing, 2022, pp. 13–38.
- [14] A. Rohatgi and T. J. Park, “Privacy in the public: Analysing the eu framework to outline approaches for regulating ai personal data scraping,” *Computer Law amp; Security Review*, vol. 57, p. 106150, Jul. 2025.
- [15] R. P. S. M. D. P. S. Lokesh, Sudeshna Chakraborty and R. Muruganantham, “Ai based big data analytics model for medical applications ai-based big data analytics model for medical applications,” *Measurement. Sensors*, vol. 24, p. 100534, 2022. [Online]. Available: https://librarysearch.uwtsd.ac.uk/permalink/44WHELF_UWTSD/igoone/cdi_doaj_primary_oai_doaj_org_article_b45a12b8e271415c896120dabc759151
- [16] S. Autexier, C. Lüth, and R. Drechsler, *Das Bremen Ambient Assisted Living Lab und darüber hinaus – Intelligente Umgebungen, smarte Services und Künstliche Intelligenz in der Medizin für den Menschen*. Springer Fachmedien Wiesbaden, 2022, pp. 835–850.
- [17] K. Stoeger, D. Schneeberger, P. Kieseberg, and A. Holzinger, “Legal aspects of data cleansing in medical ai,” *Computer Law amp; Security Review*, vol. 42, p. 105587, Sep. 2021.
- [18] A. Alanazi, “Using machine learning for healthcare challenges and opportunities,” *Informatics in Medicine Unlocked*, vol. 30, p. 100924, 2022.
- [19] R. E. Dunning, B. Fischhoff, and A. L. Davis, “When do humans heed ai agents’ advice? when should they?” *Human Factors: The Journal of the Human Factors and Ergonomics Society*, vol. 66, no. 7, pp. 1914–1927, Aug. 2023.

- [20] R. Yang and S. Wibowo, “User trust in artificial intelligence: A comprehensive conceptual framework,” *Electronic Markets*, vol. 32, no. 4, pp. 2053–2077, Nov. 2022.
- [21] E. Erul, Y. Aktekin, F. B. Danisman, S. A. Gumustas, B. S. Aktekin, E. Yekeduz, and Y. Urun, “Perceptions, attitudes, and concerns on artificial intelligence applications in patients with cancer,” *Cancer Control*, vol. 32, May 2025.
- [22] I. Querci, C. Barbarossa, S. Romani, and F. Ricotta, “Explaining how algorithms work reduces consumers’ concerns regarding the collection of personal data and promotes ai technology adoption,” *Psychology amp; Marketing*, vol. 39, no. 10, pp. 1888–1901, Jun. 2022.
- [23] I. Paccoud, M. M. Valero, L. C. Marín, N. Bontridder, A. Ibrahim, J. Winkler, M. Fomo, S. Sapienza, F. Khoury, J.-C. Corvol, H. Fröhlich, and J. Klucken, “Patient perspectives on the use of digital medical devices and health data for ai-driven personalised medicine in parkinson’s disease,” *Frontiers in Neurology*, vol. 15, Dec. 2024.
- [24] J. Wu, “Social and ethical impact of emotional ai advancement: the rise of pseudo-intimacy relationships and challenges in human interactions,” *Frontiers in Psychology*, vol. 15, Nov. 2024.
- [25] R. Kehat, R. S. Hirschprung, and S. Alkoby, “Enhancing user acceptance of an ai agent’s recommendation in information-sharing environments,” *Applied Sciences*, vol. 14, no. 17, p. 7874, Sep. 2024.
- [26] T. H. Baek, H. J. Kim, and J. Kim, “Ai-generated recommendations: Roles of language style, perceived ai human-likeness, and recommendation agent,” *International Journal of Hospitality Management*, vol. 126, p. 104106, Apr. 2025.
- [27] S. S. Sundar, “Rise of machine agency: A framework for studying the psychology of human–ai interaction (haii),” *Journal of Computer-Mediated Communication*, vol. 25, no. 1, pp. 74–88, Jan. 2020.
- [28] Welsh Government. (2021, Mar.) Digital strategy for wales. [Online]. Available: <https://www.gov.wales/digital-strategy-wales-html>
- [29] ——. (2023, Jul.) Digital and data strategy for health and social care in wales. [Online]. Available: <https://www.gov.wales/digital-and-data-strategy-health-and-social-care-wales-html>