



**North West London Digital
Security & Access Information Governance Sub-Group
Thursday 16th May 2017
Time: 12:00 – 14:00
Venue: Ground Floor Board Room, British Dental Association
64 Wimpole Street, W1G 8YS**

Minutes

ATTENDEES

Name	Role	Organisation	IN.
Amanda Lucas	WSIC Dashboards Programme Manager	NWL Collaboration of CCGs	AL
Fred Gregory	IG Manager	CLCH	FG
Rajesh Seedher	Information Governance Manager and Chair	Brent Council	AG
Emma Cooper	Digital IG Lead	NWL CCG's	EC
David Stone	Consultant	Kaleidoscope Consultants	DS
Ian Parry	Project Manager	ICH	IP
David Grange	IG Manager	Patient Knows Best	DG
Toby Wheldon	RIG Manager	ICHT	JB
Jacqui Sinclair	IG Manager	BHH	JS
Sophie Skelton		Imperial	LS
Philip Robinson	IG Manager	Imperial Hospital	PR
Stephen Janering	Project Manager - CIE	Imperial NHS Trust	SJ

PART ONE: Governance

1. Welcome and Introductions –

Welcomed every member to the meeting

**ACTION UPDATE
OPEN/CLOSED**

#	Date	Action	Who	Update	Status
001	16/05/2017	Sub Group to make a recommendation to the IG Group to amend the password prompt timeframe to 6 months to encourage engagement with the dashboard as there is a 5 day SLA to reset. Risks balanced against the Info Sec implications but considered alongside new thinking in this area that suggests password prompts actually weaken security. There is a need to add password issue to the RISK register.	EC		Closed





002	16/05/2017	Sub Group to raise concerns with IG Group about the blurred lines in terms of requests of data for non-care purposes by commercial organisations.	EC	Request from IG Governance Group is to draft a data access briefing	In Progress
003	16/05/2017	Sub Group to recommend the IG Group that new data request form is added to WSIC Dashboard process in line with new standards.	AL / EC	IG Approval received	Closed
004	16/05/2017	Linking data to individuals, new forms should have specific restrictions. Drawing out how the data would support with identified purposes.	All	Contracts to be looked at	Closed
005	16/05/2017	Sub Group recommended that the Data Request form includes clearer restrictions on linkage and onward use of the data including sharing with third parties outside of controlled environment.	EC	EC and AL to develop Data Access Contract	In Progress
006	16/05/2017	Data requests were approved subject to written confirmation around restrictions to linkage and identification of specific individuals	EC	All Data requests and approvals should be published online - AL to organise signatory list to be added to website	Open

CIE Update

Disable Sharing

David presented a new feature that PKB is in the process of deploying. The feature allows patients to request that sharing is disabled for their record. The action to disable must be performed by the Privacy Officer (DPO under GDPR) which is a role defined within the NWL ISA and represents a unique role within PKB, disabling sharing cannot be performed by other roles (Professional, Coordinator, Org Admin) and must be added by PKB. A full overview of the feature can be seen via the circulated slide deck and accompanying detail sheet.

The Group agreed that increased awareness of the PO/DPO role and subsequent responsibilities, particularly regarding the SOP for Disabling Sharing and the need to ensure patients are competent and fully aware of the implications; such as how this impacts BTG, is required. PKB has published advice and supporting documentation on the PKB help wiki at: <http://help.patientsknowbest.com>

Mass Registration

David presented a new feature that PKB is in the process of beta-testing with a number of Customer Organisations (Data Controllers). This feature allows Customer Organisations to mass register patients and makes use of PKB's API to generate a patient-specific token which is subsequently posted to the patients home address (tokens not emailed, Emma!!) utilising current printed comms providers, example; Synatech. The patient then uses this token, along with providing their DOB (which is checked for accuracy) to register with PKB. The feature provides an answer to the repeated question of 'how do we do patient registration at scale', current face-to-face manual IPV (as defined in GPG45) is not seen by many as scalable due to the resource constraints of Customer Organisations.

The Group agreed that there is inherent risk with this approach to patient registration, however a consensus of agreement with regard to the resource constraints encountered by Customer Organisations was also evidenced. The following actions were identified:

- A piece of work needs to be conducted by NWL to complete a PIA focused on this feature, to clearly identify the risks.
- PKB to provide their PIA for this feature as 'starting point'





- If the identified risk is higher than can be accepted, NWL/CIE may choose to take additional actions to identify Organisations utilising this registration mechanism and restrict sharing with these organisations.
- Relative to the outcome of the above PIA, Imperial may choose to take part in a trial of this feature.

Mobile App

David presented a short segment on the release of PKB's mobile app - rather than new features this is a bug-fix release and actually has a reduce feature-set compared with previous PKB mobile apps.

The Group accepted that this does not represented a 'new feature' but concluded that they would like to receive the latest Mobile App Security Report(s) – David Grange to provide by next meeting (sec group or main group, I was a little unclear??)

WSIC DASHBOARDS PROGRAMME

- Access to de-identified WSIC data for S&T Older Peoples DA – approved (for Kay Shaikh).
- Access to de-identified WSIC data for Public Health K&C/Westminster/H&F – approved (for Clare Lyons-Amos and team). Acknowledged that the Group need to develop business rules to enable improved access to the de-identified data for Public Health.
- Access to de-identified WSIC data for evaluation of MCMW programme for WL CCG – approved in principle, however the honorary contract is not sufficient given high risk nature of this data set. A Data Access contract is being drafted by the Digital team and NWL lawyers that New Bucks University will need to sign to enable access to the de-identified data. Target timeline is for a first draft to be available for next Governing Group first week in June.
- Access to de-identified WSIC data for H&F Federation - approved in principle, however the Federation would need to sign the Data Access Contract referred to above that is currently being drafted with lawyers.
- Access to de-identified WSIC data for ICHP - approved in principle, however ICHP would need to sign the Data Access Contract referred to above that is currently being drafted with lawyers.
- Retention of records for patients where direct care purpose has expired in de-identified data set – approved. A question was raised about patients moving in and out of area and whether these could be double counted (Suhaib could you please investigate).
- New data access request for set up of direct Imperial A&E direct data flow – approved.

DISCOVER HEALTH RESEARCH

- Ronke to provide more detail to LMC re Discover
- Fit in to Comms Group, Speak to CAG
- Recommend Small Project Implementation Team
- Recommendation that IG Group approve in principle

INTEGRATED HOSPITAL DISCHARGE MOU

- Due to time constraints, group agreed to circulate virtually for approval prior to IG Group

