



**Digital North West London
Information Governance Group
Thursday 2nd March 2017
Time: 9.15-12.00**

Venue: 5th Flr Boardroom, British Dental Association, 64 Wimpole Street, W1G 8YS

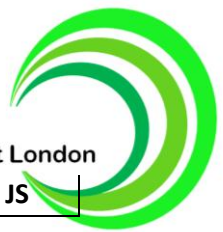
Minutes

NOTE: By agreeing to these minutes, you are providing formal approval of the decisions therein in your capacity as a signatory of the Digital ISA and a Data Controller (please refer to Decision Log).

Where written endorsement or objection is not obtained by 9nd May 2017, the absence of response will be recorded as an approval.

ATTENDEES

Name	Role	Organisation	IN.
Amanda Lucas	WSIC Dashboards Programme Manager	NWL Collaboration of CCGs	AL
Angeleca Silverside	Lay Partner	West London	AS
Ari Garboggini	Dr Ari Garboggini Head of Information Governance	Central and North West London NHS Foundation Trust	AG
Jo Andrews	Dept SIRO	LNWH	AA
Christine Meehan	Development Lead	HLP (Data Controller Console)	CM
Seth Frampong	Implementation Lead	HLP (Data Controller Console)	SF
David Stone	Consultant	Kaleidoscope Consultants	DS
David Granger	IG Manager	Patient Knows Best	DG
Emma Cooper	Digital IG Lead	NWL Collaboration of CCGs	EC
Jane	Lay Partner	Central London	J
Ian Riley	Director of BI	NWL Collaboration of CCGs	
Laurie Slater	GP IT Lead	Hammersmith and Fulham CCG	LS
Raj Seedhar	IG Manager	Brent	RS
Richard Baxter	GP IT Lead (CHAIR)	Hounslow CCG	RB
Ritu Sharma	IG Manager	The Hillingdon Hospital NHS Foundation Trust	RSh
Sanjay Gautama	Clinical Director/ Co-chair	Imperial	SG
Saira Arif	Project Support Officer	Digital NWL Programme	SA
Simon Howarth	Dept SIRO	LNWH	SH
Toby Wheldon	Research Information Governance Manager	Imperial	TW



PART ONE: Governance

1. Welcome and Introductions –

- Welcomed every member to the meeting

2. Minutes and Actions – Richard Baxter

- The minutes of 2nd February meeting were reviewed and agreed.

ACTION UPDATE

PAUSED

#	Date	Action	Who	Update	Status
100	08.09.2015	RACIE of the proposed Programme to be shared with the Governance Group	JH	Paused until 2016.	Paused
259	07.07.2016	SJ to email SP asking what the patient opt out process should be	SJ/SP	Once C3 signed off, bring to December.	Paused
277	01.09.16	joint letter with LLMC to GP's end of October	SJ/SP	Finalising revisions to comments from LLMC on Digital ISA before proceeding	Paused
230	07.07.2016	Adoption and sign off of the ISA needs to be reviewed in relation to Caldicott 3	SB	ISA adopted, to be taken back to legal advisors. Caldicott 3 not signed from DoH yet.	Paused
251	07.07.2016	Align version 2 of WISC communication documents to CWHEE MOU and CIE	AL	As part of sub-group	Paused

OPEN/IN PROGRESS

#	Date	Action	Who	Update	Status
210	05.05.2016	Bring back assurance agreement, privacy policy and user acceptance agreement to this Group, for noting, in June	SJ MA	BKP Agreed to remove liability limit and include statement around backing up of data for users.	In Progress
279	01.09.16	One pager on Digital NWL Programme as standing item on agenda	SP	Still working with comms team to develop what this will look like.	In Progress
291	06.10.16	RS to liaise with SB and provide ideas / methodologies used around PIA	RS	EC and PR due to have further discussion on this. LS keen to be engaged in that work group	In Progress
295	06.10.16	SG and SP to discuss further the question around funding of PIA as there are 2 hosts of 2 systems on the same ISA.	SG/SP	Discussion to be had.	In Progress



298	06.10.16	Set up a Controls Table identifying what the controls are for WSIC Dashboard- RS.	RS	To be picked up in April 2017	In Progress
304	06.10.16	CMC to be invited to Future IG Group to understand the processes and design principles adopted by the IG Group. (LS) Invite to January Meeting.	Digital	EC has been invited to a CMC meeting in Feb, so this can be picked up in March agenda.	Open
327	01.12.16	More information requested on the costings on the DCC to be circulated as well as the user guides.	CM	Presentation on DCC delivered to Group. Costings identified as a pipeline activity and no confirmation can be provided as yet.	In Progress
330	01.12.16	RS to think about TOR for new suggested operational group/ what to call it.	RS	Update to be brought to next meeting.	In Progress
339	12.01.17	Social care data set request by CAG– to be reviewed within 2 week time frame.	AL	Agreed by Group. To be circulated for 2 week approval.	Open
343	02.02.17	EC to look at what Imperial has in place with regards to a programme which captures all risks and allows for sharing with data controllers.	EC / PR	To be set up for April 17.	Open
345	02.02.17	LS to have discussion with the Clinical Group looking at proportionality. EC to form part of that.	LS/EC	Potential to provide group with guidelines or suggest alternative attendee.	Open
346	02.02.17	LMC: EC to draft letter to show Imperial and CCG support for the LMC progression. To include Chair's signatures, Champion SROs and lay partners. Ensure the letter draws out the key bit about patient safety being an issue. Suggested to add a deadline to the letter	EC	Drafted.	Open
347	02.02.17	PR to liaise with LS to see how MOU has been amended.	PR/LS	Feedback received and LMC responded to. Follow up with LMC.	In Progress
350	02.02.17	To add in decision from December meeting regarding the medical exclusions.	SA	Added to Decision log. Completed	Open
351	02.02.17	Suggestion to review who has attended the IG group over last six months.	SA		In Progress
355	02.02.17	Issue letter relating to Easy - Read Children's data – to go through 2 week process.	EC	Objections logged and escalated to GP IT Leads.	In Progress
356	02.02.17	Diagnostic cloud ISA to be brought under the general ISA – discussion point to be brought back to March agenda.	EC		In Progress



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CLOSED

309	03.11.16	SJ to keep Register of Privacy Officers but share with Gov. Group	SJ	Added to the decision log – Digital team to collect this.	Closed
331	01.12.16	IG Group TOR to be reviewed by all, comments to be provided to team.	All	Completed	Closed
333	01.12.16	Invite Dawn from NHSE to future meeting.		Invited. Waiting for confirmation	Closed
335	12.01.17	Incident Management Protocol – agreed by group, to be published.	EC	Complete	Closed
336	12.01.17	DG to produce the Incident protocol letter on letter headed paper, send to EC for records.	DG,EC	Completed	Closed
337	12.01.17	JN to work with DG to go over the revisions of the user agreements.	JN/DG	Discussed on agenda	Closed
338	12.01.17	DG to note that the definitions in agreement need to be pulled out and clear for patients to see and understand.	DG	Complete	Closed
340	12.01.17	Recommendation: Review Fair processing to help align with AL's work. Also FP to include children.	All	Taken up by comms sub group. To be circulated for 2 week approval.	Closed
341	02.02.17	Risk register: Any additional new risks that are identified to be sent to EC.	All		Closed
342	02.02.17	Risk register: EC to include risk mitigation score	EC	Completed	Closed
344	02.02.17	Risk register: to add in, which part of programme the risk relates to, as well as who the risk owner is.	SP/EC	Completed.	Closed
348	02.02.17	Risk register: to add in regarding dependency on central flows/ data flows when ACP comes in.??	EC	Added to risk register.	Closed
349	02.02.17	AS and JN to have meeting – Privacy and user agreement to be finalised for March meeting.	AS/JN	Completed	Closed
352	02.02.17	CIE recommendations from this meeting to go through 2 week process.	All	Approved.	Closed



353	02.02.17	Add to risk register: LMC approval delay, GP Practices currently waiting.	EC	Completed.	Closed
354	02.02.17	Develop the existing Comms Sub Group which JN chaired in past.	EC	Completed.	Closed

MINUTES

- Minutes from February passed
- CMC to be invited to IG Group to discuss what they are doing. SG and RB are going to review.
- Queries around costings for Data Controller Console raised during presentation. Confirmed to be pipeline activity but no confirmation as yet.
- Raj had circulation TOR for Operational Sub Group but no feedback as yet. Agreed to review at next IG Group. Consider splitting Data Access and Security Sub Group into parts 1 & 2 opposed to another sub-group.
- Letter to LMC about delays to process and issues with resigning has been drafted. Once all signatures obtained it will be issued and meeting arranged to discuss.
- Discussed issue with data flows coming from NHS Digital (Central Data Flows). Issue relates to NHSD recognising the data as commissioning data and the potential for flow to be stopped to non CCG recipients. To mitigate direct flows from hospitals are being established. Add to RR. Mitigation now means the risk is small.
- Considered again the attendance of the group and assurance around Data Controller (DC) engagement. Still reviewing last 6 months to see where issues are. Now sending decisions to distribution group with statement that 2 week period indicates approval. RB to meet with LS and EC to look at how we get valid representation. Noting that can't delegate DC responsibility.
- Also, an issue around where federation is providing services and they are DC themselves then they may have a conflict of interest if also representing a group of GPs. EC also looking at Video recording sessions.
- Objections to children's data. Agreed more information and then escalate to GP IT Leads. SG confirmed some DCs just may not wish to participate. As with dashboard – once we start showing value – may see movement on those.
- Exclude their data from flowing. Maintain a list of objectors.
- Some work needs to be done with Easy Read leaflets. Comms. Sub Group and LS will review
- Increase in non-healthcare / commercial requests for data sets / access. In view of the fact that it is high risk, de-identified data – need to create a process to follow for such requests. Questions to be asked;
 - is it personal data?
 - Is it a research purpose?
 - Is it a commercial purpose?
 - Is there a public interest?
 - User case?
 - Direct Care Purpose?
- Noted 8 statements from Caldicott 3 – data subjects cannot opt out if it is anonymised.
- Confirmed LMC statement re Digital ISA has been circulated via locality leads and six signatures returned. AL is focussing on signing up new partners. Resign will be run in parallel.
- EMIS ISA statement also circulated to GPs. MOU next to progress.
- Group agreed COM0657222 incident closed as near miss. More robust incident management process developed to avoid unnecessary reporting to ICO.



- JA introduced as chair of London IG Forum and a source for GDPR information. Agreed that any of the IG Managers can attend the group for information. Overarching London Strategy for implementation required. In the meantime, Art 29 Working Party papers to be presented at IG Group. Not specifically WSIC issue but partners affected so Group good forum for collaboration.
- Healthy London Partnership presented DCC. SG gained agreement from group that EC is superuser and manage admin for Digital ISA.
- ISAs need to be in there and visible before rolling out to GPs to encourage engagement.
- AS queries cost for future licencing. CH confirmed that a costing model is being worked on. Not envisaged to be a huge fee.
- J (deputising for John Norton asked about impact on patients CM: confirmed that it is just an automation of a manual process so patient impact will be further downstream where patients will be able to access.
- JA: raised an issue with the expiry date and notification for when ISAs are reviewed as these will differ from org to org. Agreed that this should be part of user enhancement discussions.
- Transitioning from over 65s to 'all patients'. Hillingdon and WL had over 65s and under 18. Approval to cater to remaining patient groups. Starting to flow.
- Piloting a diabetes flow with all diabetes leads meeting up to review the pilot
- Funding found to develop other dashboards for diab and working on ACP dashboards. Hope to have something to present on that in the coming weeks.
- Release 9 will include getting direct care feed from Hillingdon providers. Would be interested in hearing from other providers to establish the data flows.

PKB User Agreement

- Liability set at £1000. Concerns about patients not having proper recourse.
- Confirmed that courts will decide liability under S 13 (2). so £1000 is arbitrary amount. Agreed to remove.
- Concerns that record will be used a source for diagnostics and could end up being only source for that info and is a medical record.
- DS confirmed that it is NOT a medical record in law. There is a requirement to note in the medical record that decisions were based on something within the CIE so CIE would not be the sole source of truth (record keeping standards).
- There was some confusion that patients are the DC but it was clarified that patients cannot be Data Controllers in law. Potential to develop something in the future.
- A: PKB solely responsible for data you enter and you will need to back it up.
- Agreed to make those two points and move on to publishing.
- Suggestion of independent legal review but consensus of group was that agreement had been reached.

De-identification Review

- Presented review in line with IGA De-ided Code for Publishing in trusted environment. Results indicate high risk de-identified data.
- Intention trying to reduce risk factor to zero.
- Because it is a high-risk data set - warrants managing of onward travel and improvement of the processing around allowing access.
- DS: example – developed a legally binding contract in one example to limit the use of the data.



- Consider whether they need the data under their control or could they have an interface with appropriate controls. This would provide the DCs with control of access.
- Do the CCGs want to start charging for non-healthcare (commercial access to data?)

Pathology ISA / CMC

- NWL Pathology ISA: bringing together the separately path labs into NWL lab. Also CMC as NWL. Can we bring this under the ISA somewhere? Same signatories will be on Path one as WSIC.

INCIDENT LOG

Internal Reference No	Date	Summary	Who	Update	Status
COM06 57222	14.02.2017	PCD not redacted from transferred data between analysts.	AM / JS	Incident briefing presented. Further investigation completed. Graded as 'near miss'. Lessons learned and mitigations implemented.	Closed

DECISION LOG

#	Date	Decision
001	03.11.16	Group agreed that it is a good tool to group together all the ISA's in once place however some concerns raised when HLP stated patients would be able to tweak documents and have access to.
002	03.11.16	Recommendation to switch off those consent/contact options until further discussions had, unless PKB can provide assurances that have been worked through .
003	03.11.16	Continuing with face to face model for on boarding of patients which works well for CIE for patients using the dashboard.
004	03.11.16	Create a standard arrangement for staff verification which is the RA model
005	03.11.16	To disable those options which CIE are currently being used. To switch off those options until further discussions had, unless PKB can provide assurances that have been worked through.
006	03.11.16	Provider Partners are happy to add in NCRAS consent item to CIE record for NWL
007	03.11.16	Agreed by group to have scrambled NHS number, post code plus three. Need to resubmit form to group once changes have taken place



008	01.12.16	Every new provider who wants to sign into the ISA, should present at the IG Group once they have satisfied all requirements.
009	01.12.16	IG group to oversee the fair processing and all related change management.
010	01.12.16	Standing item on IG Group agenda should include Sub Group update.
011	01.12.16	Risk register to be linked to actions.