

Whole Systems Integrated Care Information Sharing Agreement (WSIC ISA)
Governance Group: Tuesday 7th July 2015

Attendees

- Sonia Patel (SP)
- Aumran Tahir (AT)
- Mohammad Al-Ubaydli (MAU)
- Sheri Ekladios (SE)
- Caroline Law (CL)
- Graham Trainer (GT)
- Kate Glass (KG)
- Janice Boucher (JB)
- Ritu Sharma (RS)
- David Knight (DK)
- Allan Meakin (AM)
- Philip Robinson (PR)
- Simon Howarth (SH)
- Kuldhir Johal (KJ)
- Stephen Elgar (SE)
- John Norton (JN)
- Raj Seedhar (RS)
- Katrina Smith (KS)
- Angeleca Silverside (AS)
- David Stone (DS)
- Selin Barnett (SB)

Updated Actions

Action No.	Date	Action	Assigned to	Status/Update	Status
1	03.03.2015	AT to write to West London CCG, Brent CCG, Central London CCG about commitment to the group	AT	<p>Caroline Kerby now attends on behalf of Brent CCG.</p> <p>Confirm West London representation</p> <p>Central London still open</p>	Open



31	14.04.2015	DS and AR define assets that are being shared across partners and which sit with SIRO	ADS/AR	To be taken up as part of final PIA review	Open
36	14.04.2015	send out Confidentiality agreement to group once updated	SB	Circultated to GG, no movement	Closed
42	14.04.2015	SH to link SB in with person in London NW Healthcare to collect A&E data	SH	SB connected with data lead	Closed
43	14.04.2015	DK to link SB into person in THH to collect A& E data	DK	SB connected with data lead	Closed
51	04.05.2015	Draw up specified data request forms	SB	Closed on agenda 7th July	Closed
52	04.05.2015	Process and procedures documents need to be updated and signed off by governance group	SB	Ongoing, more work needed by Data Processors	Open
55	04.05.2015	ISA updated stating that data controllers we will respond to subject access requests as part of the information that they have access to.	AR	On next version of ISA	Open
60	04.06.2015	Need clarification with data controllers on voting rights of members	AR	To Be added to the updated Terms of Reference	Open
61	04.06.2015	Post updated terms of reference on Governance Group area on WSIC website	SB	to be added to August Agenda	Open

62	04.06.2015	SE and Ben to call to discuss risk stratification	SE	SE providing feedback at meeting July	Closed
63	04.06.2015	SE to bring back national definition on Risk Stratification	SE	SE providing feedback at meeting July	Closed
64	04.06.2015	AR to define risk stratification in the PIA	AR	To be brought back to August meeting	Open
65	04.06.2015	SB to share link on PIA website and minutes for all new members.	SB	Circulated	Closed
66	04.06.2015	SP SB starting draft and CNWL, time with ben, SH	SP/SB	SE providing feedback at meeting July	Closed
67	04.06.2015	Invite PIA author to next working group to discuss direct care and sharing datasets	SB		Open
68	04.06.2015	ISA Governance Group to send letters to the CCGs to ask for them to encourage the GPs that have no passed the IGT in March but have signed the ISA letters, to ask them to be compliant and confirm.	JC	Paused	Paused
69	04.06.2015	Governance Group members review and feed into the Communication & Engagement Strategy by July Governance Group.	All	Working Group set up and will bring back to group in September	Open
70	04.06.2015	Explore Tier, for an independent review of security arrangements and provide feedback to the governance group.	SP		Open

71	04.06.2015	task and finish group to help with designing the verification process for the wider partners.	SP	Part of the Risk Stratification discussions	Closed
72	04.06.2015	JN and AS to ask their LPAG colleagues to support a Joint letter to LMC from LPAG group promoting sharing	JN/AS	Update at meeting in July	Closed
73	04.06.2015	JN and AS to ask their LPAG colleagues to support a joint letter to Simon Stevens to improve TPP system for the benefit of the patients	JN/AS	Update at meeting in July	Paused
74	04.06.2015	Organise WSIC ISA Governance Group workshop with PKB to show the capability of the system.	SB	Took place on 1st July	Closed
75	04.06.2015	SG to bring back formal briefing in July to group on CIE and how the Information Governance would fit together	SG		Open
76	04.06.2015	SP to brief Governance Group on Brent Executive Committee response to accepting Imperial as a Data Processor	SP		Open
77	04.06.2015	AR to update to reflect date review of ISA after 3 years in next update of WSIC ISA	All	on agenda to be discussed further	Open

PART ONE: National Pioneer IG Task force Review of ISA

1. IGA review of Risk Stratification for CNWL – Stephen Elgar

- SP-As part of the national Pioneer support, we have asked for support in reviewing stratification and case finding purposes for WSIC on behalf of a the prospective query that was brought back , as part of this Stephen Elgar (SE) from Information Governance Alliance (IGA) has been working closely with us locally to define.
- SE- We met with CNWL recently who expressed that they were concerned with WSIC definition of case funding and the new national guidelines for risk stratification and there

might be cross purposes. As there are a lot of elements of Risk Stratification we would urge pioneers to define locally as best as they can for their purposes, as not all options have been explored and defined.

- SH- supports the partners working together to define for North west London, waiting for the central bodies to define will take too long and might not fit what we are currently doing.
- SP- We got to a place where CNWL were confident of the need to share for integration and use watch lists benefit of integrated care. When we talked through principles of risk stratification, and the WSIC Case finding approach. CNWL have asked for wording around case finding arrangements, we have offered for a small focus group be established and chaired by Ben Lucas to come up with a local North West London Pioneer view to define of case finding and risk stratification.
- AS- how are we discriminating between the two, is there a commissioning purpose?
- DS- Risk Stratification centrally is defined for a commissioning purpose, this means that data used for the modelling is de-identified first however in WSIC lists are used for direct care therefore will use patient identifiable information.
- AS-WSIC isn't about prioritising patients, the patients identified will get more care than others, however its more about identification than managing the risks of patients or resources for commissioning.
- SE- Ben Lucas seemed to be happy with the outlines process by SP
- DS- there has some work done around defining Risk Stratification by outside the centre that we can use as a backbone to build on at the task and finish group, Nuffield Trust have said that there were clear benefits for the population, there was also mandate from Geraint Lewis (NHS E) saying that it was national policy that we peruse using data for the purposes of improving care.

Action- Set up task and finish focus group to define Risk stratification and case finding for North West London partners, chaired by Dr Ben Lucas.

PART TWO: Governance & Updates

2. ISA Requests from North West London Partners: Hillingdon Council- Sonia Patel

- SP- Keen to be part of the WSIC partners and share data for the greater good of Hillingdon population, whoever there is a caveat that their data will not be used for secondary care
- RS- will de-identified be subject to the FOI act?
- SP- no we would filter any data going in for de-identified purposes and delete, no data is passed on further than the for the direct care dashboards, so therefore it wouldn't be subject to the FOI
- SH- is their reluctance about using the data for secondary purposes?
- DS- the standard of de-identification we use for the secondary uses in the ISA , is the highest standard that you can possibly use, there is an extremely slim chance that anyone can re-identify the person again.
- AT- No but there are some political sensitivities in Hillingdon Council however we should work together as nest we can for the good of the population, I would urge the group to accept their partnership.

- Group Agreement that they would allow Hillingdon Council to become part of the WSIC ISA Governance Group but their data would only be part agreement passed

Action- Send Letter to Gary Collier from Hillingdon council to inform them of the acceptance of the WSIC ISA Governance Group

Action- Once confirmed by Hillingdon Council, amend in next version of WSIC ISA

3. Update from Brent Governing Body- Adoption of Care Information Exchange (CIE) – Sonia Patel

- SP- As Host of the WSIC ISA, we took the proposed Data Processing Agreement (DPA) to both the Brent CCG Executive and the Brent Governing Body with the view to adopting the Care Information Exchange (CIE) as a data processor and align both the WSIC and CIE Programmes as proposed by the ISA Governance Group at the end of June.
- Unfortunately they have not endorsed the DPA and adoption of CIE yet, and have asked for further assurances at the next Executive and Governing Board in August:
 - I. *The DPA should be between Patient Knows Best (PKB) and not Imperial*
 - II. *They would like further clarification on certain areas in the agreement and escalation from the host to sub-Data Processors*
- SP- any adoption will need to be brought back to this group with a formal paper to be adopted by yourselves.
- John Norton- Update
- SB- aligning with the PMCF and the BCF
- SP-Update there is no baseline or minimum set standard to what we develop and what we set up at patients public and citizens, linking in with some of the outcomes framework in the wider programme.

Action- SP to report back about the Brent Governing Body decision to Provider Partners in September meeting

4. Update on WSIC ISA Working Groups ; Data Warehouse Operational Set Up & Communication & Engagement Working Group – Sonia Patel & John Norton

Operational Set Up- Sonia Patel

- SP- we are still in the development of the WSIC Data Warehouse and timelines have significantly slipped which is disappointing, Over the past few weeks there have been significant issues that have faced, mostly centred around the capability of processing data on SE CSU side, however as we move forward we are trying to put as many of the mitigating actions in as possible.
- AT- personally disappointed that this situation has not been resolved and we are not operational
- SP- acknowledge that things have not run as smoothly as had hoped with SE CSU, there has been flux of personnel with SE CSU which we are trying to mitigate against by setting up various management arrangements via daily phone calls, weekly meetings and also the micro-managing their current staff. A new Project Manager dedicated to the Operational set up has been brought in to move things forward.

- SP- Dr Ian Goodman, sits on joint (NWL CCGs & SE CSU) WHYSE programme board has been made aware and will be escalating these issues to all to get resolved. We might also need explore whether we ask another CSU or another supplier to continue, if we cannot sort our issues out.
- AT- When?
- SP- we will be looking into this week, McKinsey have also had to pause on their work on the dashboards,
- DS- You need to be aware that Accredited Safe Haven (ASH) aren't long term solutions, so there is a national future state model, but you won't have the national data unless a DSCRO from national data feeds. If use another provider then there will be a data deficit.
- RS- would a joint letter to SE CSU be of help?
- SP- Yes, this would speak volumes on behalf of the partners
- KJ- puts everyone at risk in NWL, with commissioning intentions happening in September, we can look at the gaps and get it partially right. We are always 2 steps ahead of the national programmes and it means that we end up being pushed back one step back but it is not ready or the answer hasn't been defined centrally. The data in the warehouse will need to align with annual cycle of planning.
- SP- we will try and get the warehouse ready for commissioning intentions to support our partners as best as we can, we have offered to parachute technical bodies into the data management team in SE CSU to support.
- KJ- MDT have gone live without the dashboards so needs to happen asap, goal posts keep moving but we joined to be active not proactive.
- SP- by Friday we have a better idea of the way forward and if needed, we would welcome a letter, as it could be powerful.
- AT- we will draft and then circulate
- KJ- we would also ask for a letter to be sent from the collaboration board
- RS- we could impose a contractor that we trust to send in to prop up the data management team in SE CSU as a sub-data processor. Have a managed service for data management
- SP- it's an arrangement we've had previously, it's a balance between cost and risk
- KJ- Plan B could be using the Care Information Exchange to pull data, we can them to capture episodes

Action- Report back to group on letter to SE CSU from WSIC Partners

Communication & Engagement – John Norton

- JN, work is progressing with the communication and support materials for public and care staff, timeline have slipped slightly as we have recognised the amount of information that is needed and the detail that is needed to be reviewed.
- SB we are making sure that we are aligning with as many sharing indicatives from across care settings as possible to make sure that the message is as simple as possible for the patients
- DS, need to make sure we do an Equality and Diversity analysis as part of the programme of work, communicating to the public it is critical to sharing information.

5. Update on National Pioneer IG Task force IG Taskforce – Sonia Patel

- SP- The national Pioneer IG Task Force have extended their work and will be continuing to the end of July, helpful deep dive between the technical IG team and the national team on Friday 1st July.
- SE- assured that what you are doing is excellence, it's amazing the different approaches on around the country, have had interest from others on your communications and Terms of Reference which I have shared, people are already learning from your work already. We won't be making negative statements about the pioneer's approaches. Will be preparing documents to help others on a similar journey and we will be able to prepare a support pack for other end of July

6. Update on Sub Data Processing Agreements – Sonia Patel

- Sub-data processor agreements are being updated and being strengthened, we are in the process of renewing them with South East Commissioning Support Unit, Concentra, EMIS and TPP
- There was group consensus that they would like the programme team to bring a newly updated version to the next governance group in August

Action- Bring Data Processing Agreement back to Governance Group in August

7. Update from Lay Partner Advisory Group (LPAG) – John Norton, Angeleca Silverside

- JN- Tony Grewal Medical Director of the Londonwide Local Medical Committee (LLMC) was invited to attend by the lay partners, to discuss sharing patient's records for their benefit, with a view to taking us a little further forward with information sharing with North West London GPs.
- AS, noted that Tony said that GPs are overwhelmed to share information, the right info to the right people is important but if the wrong information to the wrong people then it is very damaging.
- SB, Tony noted that there were 3 caveats that the LLMC would like to see happen before they are able to support an information sharing agreement

- 1- Confirmation in law that there is a section 251 for the programme that covers the sharing, worried that they seem to believe should cover all non-direct care sharing.
- 2- Confirmation from the Information Commissioners Office (ICO) that the whole process for sharing data is kosher- difficult as the ICO does not perform assurances on sharing agreements
- 3- Data controllers will need to be indemnified against anything that isn't sharing for direct care

- AS, LPAG are more concerned with the GPs and not the patients, concerned that the patients will suffer because care information is not shared
- SP- needs to be some more work on what the LMC are saying, needs to be something

- KG-worth some effort that we respond on the LMC
- AT- LMC are important to get onside
- SP- will take on board, we have asked for a follow up meeting and will update the group of progress
- KJ- GP's are the data controllers and they will go by the letter of the law
- AS- Tony Grewal also felt that they were saying about control, when they talking about Accountable Care Partnerships (ACPs) GPS could be control of that but the acutes are in control and there are some tensions, little bit of a worry.
- AT- had the same reservations but once you start working in integrated care, you realise that you're all in it together.
- JN- the Centre for Information Sharing Excellence also came to the LPAG, their objective is to breakdown cultural barriers about information sharing; they are doing a case study on North West London and held interviews with the lay partners and S&T leaders Caroline Bailey and Matthew Hannant.
- SH- following the ICO guidance on incremental approach 3 tier information to linking information sharing and patient notices. We need to target the people that really want to know.

Action: Update Governance Group on LLMC meeting about data sharing

PART TWO: Assurance & Security

8. Review Dashboard Video & User Guides – Sonia Patel , Selin Barnett

- Video- Issues log to be set up, need to make sure that the data controllers meet and if you aren't comfortable then please raise your issues.
- Group passed user guides and video

Action- Post User Guides on WSIC website

9. Request for Access to Data Form – Selin Barnett

- KJ, would like the name to change to 'Change Management Request Form'
- Group passed request form

Action- Change title of form and post on Governance Group area on WSIC website

10. WSIC Informatics Issue Review – Selin Barnett

- There was a group discussion around the inability to get a filtered extract from TPP and the local level technical provision that is needed to filter at practice, mini test pilot in Ealing practises but it isn't a short term issue, long term investment for NWL however it would be creating another infrastructure to get data out of systemOne, which should just be automated.
- AS- need to get the TPP Waiting for bad press so that this isn't being developed
- SE- development is driven is nationally mandated, but locally driven usage they are reticent to invest in however TPP committed to publish open API's which will benefit WSIC Dashboards
- SH- Recommend to talk to TPP direct, also talk to the technical team as they seemed to have the most traction.

PART THREE: Aligning North West London Partners

11. Aligning the Care Information Exchange (Part 2)– Mohammad Al-Ubaydli

- AS- where is data being stored? Where is being pulled from?
- MAU- UK data centre, with the patient record has a unique public and private key. All use the same software but the data does not leave the UK. Co-location and backup in another centre. Incoming and out-going internet access. N3 connection.
- All data from all records but only get data that the organisations sent to PKB
- SP- Working with a summary is a good place to start
- RS- emphasised controls of patients, there are exemptions, hold a database of controllers have, there will be sensitive data, concerned you can turn it over to them without informing the data controller i.e. section29 from the police, causes other options besides the ownership
- MAU- If we get a request compelled by law to give them to data but won't give them the data key, need to go to the data controller. In NWL we will be data processor so we cannot release data to anyone that the data controller has not approved. if there is data stored in the PKB server from another organisation, as long as the patient consent then the clinician will be able to see the information from others for clinical diagnosis
- SP- what's the possibility of you can play back a de-identified dataset back to the serve the dashboards?
- MAU- yes we can, but there will be technical requirements and things will be worked through but technically available, like the Hillingdon care plans can be adapted

Action- Governance Group would like a youtube video to be circulated to the governance group to show full capabilities of PKB platform

12. AOB

- PR- shorter meeting and more papers before the meeting rather than updates #
- Group agreement to shorten length of meeting
- SB- would like to request further support from Social care partners as have not received anyone else's data yet. Happy to work with others to get this resolved.

- PR- would like to see an interactive Issues log on a sharing platform, something like Dateix- Risk register- which available online on issues
- Group agreement to explore costs at future date

Action- Governance Group to shorten to 2 hour meeting

Action- Social Care Partners to provide agreed minimum dataset for the WSIC Data Warehouse

13. Actions

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89	07.06.2015	Social Care Partners to provide agreed minimum dataset for the WSIC Data Warehouse	All		Open