

## WSIC Governance Group

4<sup>th</sup> May 2015

### Attendance

Name	Job Role	Organisation	Initials
Dr Aumran Tahir (chair)	Clinical Director WSIC Programme	NWL Collaboration of CCGs	AT
Kuldhir Johal	CCG GP IT Lead	Hillingdon CCG	KJ
Simon Howarth	Deputy SIRO	London North West Healthcare NHS Trust	SH
David Knight	IT Programme Manager	The Hillingdon Hospital	DK
Raj Seedher	IG Manager	Brent Local Authority	RS
Angeleca Silverside	Lay Partner	West London	AS
John Norton	Lay Partner	Central London	JN
Lawrence C. Wahlund	Lay Partner	Brent	LW
Katrina Smith	IG Manager	WLMHT	KS
Mary Umrigar	IG Manager	Ealing Council	MU
David Stone	IG Consultant	Kalidoscope Consultants	DS
Alistair Robertson	Legal Advisor	DAC Beachcrofts	AR
Caroline Kerby	GP representative	Brent- Harness Network	CK
Stephen Murphy	IT Commissioning and Information Governance Specialist	Tri-borough	SM
Jason Clarke	IG Manager	BHH CCGs	JC
Tracey Whittingham	Communication Lead	WSIC Programme	TW
Selin Barnett	Project Manager	WSIC Programme	SB
Sonia Patel	Informatics Lead	WSIC Programme	SP
Phillip Robinson	IG Manager	Imperial NHS	PR
Mike Davies	IT Lead	BHH CCGs	MD
Jess Henderson		Imperial College Health Partners	JH

### Apologies

Name	Job Role	Organisation	Initials
Meena Thakur	GP representative	Harrow	MT
Chris Greenway	Caldicott Guardian	Harrow council	CG
Riordan Hill	IG	CWHHE CCGs	RH

## Part One- Governance

### 1. Action Update

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>Central London still open</p> <p>Confirm West London representation</p>	Open
4	03.03.2015	share the diagram of sharing to the group for comment	SP	<p>Circulation needed, will be part of IG booklet being put together by central team</p> <p>Sent out with details of 4th May meeting</p>	Closed
10	03.03.2015	log in and how to guide for all the voting members of the GG	SB	<p>Log in were provided for all. Work still needs to be done on other</p> <p>Comms Lead will be creating new area on website for all signed off papers</p>	Closed
13	03.03.2015	AT to bring report of uses of his data via the DPA to governing group next month	AT	No S1 data has moved into Data Warehouse yet.	Open
18	03.03.2015	Paper on log in security to be brought back to next group	SP	Cloud principles discussed at meeting, Operational Set Up group will start work on paper	Open

22	14.04.2015	Look into building area on WSIC website to hold formal Governance Group minutes and signed off papers	TW	Comms Lead confirmed this has been complete	Closed
23	14.04.2015	Report outcome of 16th April workshop/meeting with partners back to Gov Group	SP/SB	On agenda 4th May	Closed
24	14.04.2015	An update will be provided back to the Governance Group in May informing them of any challenges	AR		Open
25	14.04.2015	Report back to group IG compliance of GPs at next meeting in May	JC/JH	On agenda 4th May	Closed
26	14.04.2015	share Data Quality report with Group (Ealing LA)	MU	Proposed Data Quality Working group	Closed
27	14.04.2015	DS to set up meeting between Social care partners, software suppliers and HSCIC	DS	Will be picked up as part of the social care workshop in May/June	Closed
28	14.04.2015	Pull out recommendations in a table and then we can put what are the actions	SP/SB		Open
29	14.04.2015	Add consent model to next agenda to plan for consent workshop for NWL	SB	On agenda 4th May	Closed
30	14.04.2015	Legal review of PIA	AR	On agenda 4th May	Closed
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 PIS review	Open
32	14.04.2015	change branding on PIA and send out to the partners with caveat that this is a living document that will change over time	SB	SB circulated and confirmed now available on website	Closed

33	14.04.2015	change name of THH to foundation trust and not NHS Trust	DS	SB circulated and confirmed now available on website	Closed
34	14.04.2015	Operation Set Up group to start self-assessment of cloud principles and report back to Governance Group	SP/AT	In progress	Open
35	14.04.2015	SB to send to RS for input on Social care	SB	Updated and circulated to GG, awaiting for signatures back	Closed
36	14.04.2015	send out Confidentiality agreement to group once updated	SB	Circulated to GG, awaiting for signatures back	Open
37	14.04.2015	Discussions with SP and JS around work load will be BHH & CWHHE for RA cards verification	SP/JC	JC to take forward on behalf of Brent CCG	Closed
38	14.04.2015	Pass on matching up existing RA groups with ours to Op Group	SP	JC to take forward on behalf of Brent CCG	Closed
39	14.04.2015	Add RBAC to next agenda for update	SB	To be added to a future agenda	Open
40	14.04.2015	Emma to provide feedback to group on what security checks for opt out codes SE CSU do to the group	EH	To be added to a future agenda	Open
41	14.04.2015	Add principles of purging need to be added to the document	EH	Complete and will be posted on website	Closed
42	14.04.2015	SH to link SB in with person in London NW Healthcare to collect A&E data	SH	Email sent awaiting confirmation	Open
43	14.04.2015	DK to link SB into person in THH to collect A& E data	DK	Email sent awaiting confirmation	Open
44	14.04.2015	Arrange NWL Social care Workshop	SP	On agenda 4th May	Open
45	14.04.2015	SB to link in Comms Lead with Partners to start planning communication strategy	SB/All	TW attended meeting 4th May to discuss with partners	Closed

## **2. Update on ISA's and Partner Workshops – Sonia Patel**

- KJ- noted that pharmacy and 3<sup>rd</sup> sector providers will need to be included in the future arrangements, this will include community pharmacy.
- AR- suggested that we could put together an MOU or honorary contract to include these at a later stage
- SP noted that there had been a successful clarification of IG and ISA workshop with NWL partners that have not signed the ISA was held on the 16<sup>th</sup> April. We hope to continue momentum with the signatures from this event.
- PR- noted that the meeting had a positive outcome and imperial had signed on the back of the workshop
- SP- consent workshop and social care workshop came out to the meeting, to align all in all the social care. Details will be shared at the next meeting.

**Action- SP to share details of workshops coming up, Social care and consent at the next meeting**

## **3. Letters of ISA's – Alistair Robertson**

- AR- updated the group, updated version of the ISA signed off by the governing group went to all data controllers, only one amendment that mentioned in the ISA summit on the 16<sup>th</sup> that had chairs action to include; Change the legally binding contract to separate the ISA into what is needed to be legally binding and the other parts will be a MOU, as it doesn't have to be legally binding to be a valid.
- AR- Only one comment came back, CNWL were the only people that came back with a comment is about risk stratification, they would like I added.
- SP- explained to the group about risk stratification, WSIC trying to move way from this and use population segmentation
- It was felt that more clarity was needed on this by the group
- SP- could ask the national team to come in and give more clarification.
- AR-It's an issue that is raised in the PIA, we can sign off the version and then hold out for another version to cover the CNWL request.
- ISA Version 3 passed by the group

**Action- SP to ask the national team to come in and give more clarification on risk stratification and the WSIC ISA**

**Action- SB to post Version 3 ISA on website**

## **4. BHH IG Toolkit scores – Jason Clarke**

- JC- There are some that have signed the agreement that have failed the IGT toolkit. Can provide to the group, action plan as how to help those that have failed and those that haven't submitted.
- PR- supposed that the CCGs aren't there more support for them
- KJ- this is NHS England role
- SP- need to do reconciliation, local decision on how we improve those providers. Do we do it by the line or the discretionary plan, we need to get a process in place.
- KJ- need to put things like GP IT on the performance report back the Governance Boards, it's the assurance place to help.

- JC- a lot more than we expected, especially when there is a case by case basis, Can we get a smaller committee that looks through it and make recommendations.
- SP- agreement from group that no data is moved from that practise unless the IGToolkit is passed.
- It was noted by the group that they would like to see how CWHHE GPs had scored.

***Action- JC to provide action plan as how to help those that have failed and those that haven't submitted.***

***Action- No data is moved from GP practise unless the IGToolkit is passed.***

***Action- SB to add CWHHE on next meeting***

#### **5. Pioneer Working Group- Sonia Patel**

- SP updated group on Norman Lambs Co-chair of the national IG working group. There was a commitment from national leaders that 10 whole time equivalent days across 2 months for people such as Phill walker, Stephen Elgar and Ming Tang.
- SP- NWL is planning to set various things to be set up for show and tell, would like to invite them to this meeting to show them the governing group, data controllers in common. Would also like to see if members would like to be part of a working group, are there any members that are particular interested?
- Phillip Robinson, Stephen Murphy registered an interest as partners
- Anglecea Silverside for lay partners registered an interest

#### **6. Data Request – Selin Barnett & Jess Henderson**

**Concentra update- Selin Barnett**

- Updated the group on a request to add 2 financial fields into the data collected from CDS and MHMDS to build dashboards
- **Group agreed and passed proposed increases in data templates**
- Group noted that they would like to see some specified data request forms

***Action- Draw up specified data request forms***

**Jess Henderson- Imperial College Health Partners**

- JH presented a paper and requested the partners to participate in background data for research purposes by allowing subsection of the Integrated Care Record to be used for NWL disease research
- Group consensus that there was output very little visibility for the all diagrams in paper presented
- AS- asked if this had gone through patient groups in imperial and offered to help link in with health watch PPG on research
- JH confirmed that they had approached the CIE consent work and the WSIC programme on the data you are establishing and they thought it would be a good fit

- PR- some convergent about CIE and the WSIC at the summit on the 16<sup>th</sup>, would hope not to go round this twice, we would only need to record this on a NWL basis once.
- SP- noted that the data wouldn't be used for research but will be used to look at what kind of research could be done, its divisive way of looking at interventions for the population. Could offer a dashboard that noted specific diseases at the moment in NWL, so say number of COPD in NWL, no patient identifiable.
- KJ- with GP hat on the dilemma is the wording, as there will be noise, the principle is good but the timing might be wrong.
- JH- there is piece of working around how we inform the GPs and the population but this will not fit with communications
- There was some challenge from the group on a name register, would like to see a revised version with amendments
- RS- also noted that more needs to be done on how they would like to use social care data as the paper focuses too much on health care data
- AT- noted that there was not enough work done in the paper on ethics and need to look at the ethics beforehand and feasibility before returning the governance group to request data.
- **Governance group on behalf of data controllers did not pass access to the integrated care record.**

### **Part Two- Assurance & Security**

#### **7. Incident reporting – Raj Seedhar**

- RS- updated the group on an incident that happened in South East Commissioning Support Unit which was reported and investigated. He noted he had to make a decision that there was a process failure or a human error. He suggested that SE CSU had assigned a person that wasn't fully trained, so asked for a guarantee that there was a one off and it wouldn't happen again.
- KJ- need to make sure that the Governance Group and also the GB of all data controllers
- SB- confirmed that this was reported to Brent CCG as host organisation
- KJ- would like to revisit the process document and make sure that the security and processes are more structured and recorded correctly
- Group agreement that process document needs to be updates

***Action- Process and procedures documents need to be updated and signed off by governance group***

#### **8. Privacy Impact Assessment (PIA) Legal review - Alistair Robertson**

- AR – noted that there is a risk that the case finding purpose could equate it to Risk stratification in some aspects
- AR- Part of the data templates is not being useful for direct care, can be tricky as can be shifted as the use of the data is for the direct care; however NWL are using personalised budgets for direct care.
- KJ- would like to park recommendations on consent and risk stratification from the Pioneer Working group and would like some clarifications on it nationally.

#### PIA recommendations update

- Recommendation 6- Comms plan being established to mitigate risk
  - Recommendation 7- update to ISA to reflect the new opt out process when CIE consent engine is aligned with WSIC
  - Recommendation 8- SUS data doesn't extend to direct care, AR to take back to Debbie to talk about further
  - Recommendation 9- will be mitigated by a data quality working group
  - Recommendation 10- Part of the data quality working group, also includes the process for direct care of the patient record.
  - Recommendation 11- Care Information Exchange (CIE) for the next meeting to discuss future state
  - Recommendation 12- Central point of subject access requests, each data controller is responsible to for their own subject requests, each provider can give access to their integrated care record.
  - Recommendation 14- Agreement that the data controllers would like to have all data processor agreement all in one place. On the agenda for the next meeting.
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- KJ- GP record will be the core information for the WSIC Integrated care record, so will need to develop data quality
  - AS- Can the patient see all their ICR? And who can give them full access?
  - Group discussion around who is the subject access rights need to go to, as there are different sites have different access and views.
  - SM- so long as there is something in the ISA stating that data controllers we will respond to subject access requests as part of the information that they have access to.
  - JN- is this cost free for the patient? Will need to be part of care planning.

**Action- Consent and risk stratification clarification from the Pioneer Working group a requesting some clarifications nationally**

**Action- ISA stating that data controllers we will respond to subject access requests as part of the information that they have access to.**

**Action- ISA updated stating that data controllers we will respond to subject access requests as part of the information that they have access to.**



## 9. Risks and Issues – Selin Barnett

- SB noted to the group that the recommendations by the legal review would be mitigated by the data controllers by creating working groups that focus on data quality and communications to patients and care staff.
- It was noted that the working groups would be reporting directly to the governance group
- JN- would like lay partners to be co-chairs on both groups
- SB asked for nominations to groups and commitment from group initial suggestions for attendance are noted below
- Group agreement to continue and establish on their behalf



**Action- Partners to nominate members of their organisations to attend groups**

**Action- Updates of working groups back to group monthly**

## Part Three- WSIC Data Warehouse Operational Set Up Group

### 10. Cloud principles – Selin Barnett

- SB noted that the data processor are still working on paper as paper set by Security Officer was complex, commitment to paper for June Meeting

### 11. Register of interest – Dr Aumran Tahir

- AT noted that data processors were stalling as dynamics were changing in the working group

### 12. Process Documentation- Selin Barnett

- It was noted by the group that more works need to be done on the process document and it was not as yet fit for purpose
- KJ- data quality needs to be added as there was no mention in the paper
- SB- suggested that the over view and definition of the process document might be the remit of the data quality working group

### **13. Role Based Access Control – Jason Clarke**

- Jason gave an update to the group on what was working on and promised to come back to the group with a paper
- There was group discussion around using the smart card for access to the dashboards and consensus that this would be the most secure in the long term.
- SB noted that social care would also need to be involved as they do not have smart cards
- JC- will put together paper of pro's and con's of using smart cards or single sign in with passwords and send to all for next meeting

***Action- JC to bring back RBAC paper to Gov Group June***

### **Part Four- Communications**

### **14. Communication strategy – Tracey Whittingham**

- TW updated group on initial plans on communication strategy and defined the 3 stage process that we would like to take - Bronze, Silver, Gold standards to communication
- AS would like to see Healthwatch invited to the Communication groups on the WSIC
- SB asked for initial interest from partners and committed to bring a more formulated paper to the gov group in June
- KS volunteered WLMHT, RS, Recommend someone from Brent Local Authority,
- SB will follow up with others in due course

***Action-Health watch invited to the Communication groups on the WSIC***

***Action- Take Communication Plan to Governance Group in June***

### **15. Consent & social care workshop- Sonia Patel**

- SP noted that there was now a potential for patients to control consent .
- SP- Anxiety post-care.data, no standard lexicon for standard terms for implied, explicit, difference of understanding, so we can develop a NWL lexicon, so we have a common understanding on sharing and also engage your patients in how do we digitally engage in these.
- AS- is there a definition as to how much sharing is beneficial and how much is safe for the patient, need to emphasise this to the patients for their own safety.
- SP- need to work together to make sure that all are involved in the design and the outcomes needed
- MD- would like on agenda - Hillingdon GPs have asked if verbal consent into the system is? How much evidence is needed?
- KJ-ICP's other professionals such as community pharmacies, how can we get them involved and into the sharing.
- PR- CIE will be able to address some of these issues
- SP noted that we would be facilitating NWL Social Care workshop to discuss, NHS number, consent workshop, meeting and exchanging what is happening on their patch, so we can learn from each other, would like to make this happen.

- MD- 2 use one system, 3 use another system, so would like system suppliers in on the meeting.
- SP- nationally there is no minimum template for social care; it would help in standardisation so we can improve data quality.
- MD- new health and social care act, making local authorities have an obligation to health
- JN- extend of relevant of information being shared is to link into care planning
- PN- would also like to invite some HRA in the meeting

## **16. AOB**

Caroline Kerby- summary care opt out code for Brent

- MD-have an opt out guide for EMIS
- AT- can we post this online
- SP- this will be discession on behalf of GPs as there have been local sensitivities.
- RS- if they move will their consent travel with them?
- MD- yes it would, EMIS to systmOne then it would also count.

### ***Action- Post GP Opt out GP codes on Website***

Mike Davies- Mental Health Crisis

- MD noted that Met Police, LAS and also Mental Health practioners, sharing of information that originates in the mental health trust but does have a wider group that the ISA, should we try and encompass this or should we use make another ISA? This has the potential to impact on the CIE programme as well.
- As- safeguarding issues
- AT- can of worms
- MD- would this group also like to have oversight into
- AR- one option in Hillingdon, is to have a separate agreement, saying we adopt whats in the ISA, so rather than develop the ISA, we will use it to agree what's in the ISA so we don't have the re-write the WSIC ISA.
- KS- Multiagency mental health safeguarding hub agreement going around so might be best to tie it in with that?
- MD- asked if there was a governance group
- RS and KS will send you MASH document

## **Open 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>Central London still open</p> <p>Confirm West London representation</p>	Open
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46	04.05.2015	SP to share details of workshops coming up, Social care and consent at the next meeting	SP		Open
47	04.05.2015	SP to ask the national team to come in and give more clarification on risk stratification and the WSIC ISA	SP		Open
48	04.05.2015	SB to post Version 3 ISA on website	SB		Open

49	04.05.2015	No data is moved from GP practise unless the IGToolkit is passed.	SB		Open
50	04.05.2015	SB to add CWHHE on next meeting	SB		Open
51	04.05.2015	Draw up specified data request forms	SB		Open
52	04.05.2015	Process and procedures documents need to be updated and signed off by governance group	SB		Open
53	04.05.2015	consent and risk stratification clarification from the Pioneer Working group a requesting some clarifications nationally	SP		Open
54	04.05.2015	NWL Consent workshop to be added to national pioneers agenda	SP		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		Open
56	04.05.2015	JC to bring back RBAC paper to Gov Group June	JC		Open
57	04.05.2015	Health watch invited to the Communication groups on the WSIC	SB		Open

<b>58</b>	04.05.2015	Take Communication Plan to Governance Group in June	TW		Open
<b>59</b>	04.05.2015	Post GP Opt out GP codes on Website	SB		Open