NHS HE Information Governance Working Group

Notes of Teleconference on 16th October 2013

Present:

Kirsty Benn-Harris (KBH)	NIHR CRN Coordinating Centre
Tito Castillo (TC)	University of Cambridge
Will Crocombe (WC)	University of Leeds
Vanessa Kaliapermall (VK)	HSCIC
Bridget Kenyon (BK, Chair)	UCL
Sarah Lawson (SL)	NPEU, University of Oxford
Lucy Lucas (LL)	HSCIC
Trevor Peacock (TP)	UCL
Malcolm Teague (MT)	Janet
Apologies:	
Athanasios Anastasiou (AA)	University of Plymouth
Stuart Bloom (SBl)	Mott MacDonald
Sally Bridges (SBr)	Health Education Kent Surrey Sussex
Andrew Burnham (AB)	University of Leicester
Michael Hollis (MH)	Institute of Cancer Research
Janet Messer (JM)	Health Research Authority
Lee Moffatt (LM)	University of Manchester
Paul Newton (PN)	HSCIC
Marion Rosenberg	London School of Hygiene & Tropical Medicine
Christopher Walker (CW)	University of Leeds
Alyson Williams (AW)	University of Manchester
Hawys Williams (HW)	Arthritis UK

Minutes of the meeting on 29th August 2013

1   VK noted that in paragraph 4c, it is not the case that the Health and Social Care Standards Board is the "final decision maker". **Action 2.1**: VK to provide revised wording on this to MT so the minutes can be amended. Subject to this change the minutes were agreed.

Matters arising not on the agenda

2   VK reported (re para 4a) that the IGT editorial board had now met for the first time. They have decided that they need to broaden the representation to reflect better the membership of the Board it reports to e.g. need to include other stakeholders such as the Care Quality Commission (CQC), NHS England, Public Health England. The terms of reference are being changed to reflect this and the next meeting is in November. It is quite a significant change to the board and it will no longer deal with the detail of

changes. The detailed work will be picked up by a subgroup made up of HSCIC staff and subject specialists. BK suggested that a person should be on editorial board to represent and be an advocate for "the customer" if there isn't one already. **Action 2.2**: VK to report the suggestion of a customer representative on the IGT editorial board. **Action 2.3**: VK to brief the editorial board on the existence of this Working Group.

Revised Terms of Reference

3   LL noted that in paragraph 6 it should say version 12 and not 11. Subject to this amendment the terms of reference were agreed.

4   VK asked whether in paragraph 7, it was envisioned that the group would collate potential exemplar materials or provide guidance templates. SL said she envisaged collating resources initially and passing them to VK for review. It may be that some will inform the development of templates.

Update on Actions from previous meeting

5   These were as follows:

Ref.	Action	Who	Update
1.1	Working Group to review the IGT application form and feed comments back to BK or MT	All	A copy of the application form had been circulated. AW had commented that the first questions about the organisation were not clear. A proposed amendment had been circulated. VK had sent out a draft new version of an IGT in support of s251 applications submission process document, plus supporting guidance. This is for review by the group, MT to collate comments in the first instance. **Action 2.4**: All to review the draft revised submission process and supporting guidance documents and feedback comments to MT by 4th November.
1.2	A list of University coordinating contacts on IGT will be created as a point of reference for HSCIC and any new University applicants.	MT	An initial draft had been circulated. VK said for HSCIC purposes it would be very helpful to have an extra column indicating the overall approach the University is taking. Perhaps three categories: hosting on behalf of all groups; provision of partial solution; delegated to individual departments. **Action 2.5**: MT to add an extra column to indicate the approach the University is taking. **Action 2.6**: MT said he would like to publish the list on the website. It was agreed that the contacts would be asked permission for this within a specified timescale.
1.3	Develop a mapping between ISO 27001/2	BK	Bk reported that VK had provided the fuller version of the requirements but the work on the

	requirements and the IGT		mapping itself had not yet started. VK said she had mentioned this work to a Department of Health Information Security Policy colleague who had said he was interested in it. VK emailed the contact details to BK and BK will contact him.
1.4	Review existing guidance around use of safe havens in relation to secure transfer of patient data between the NHS and research and education organisations.	MT	No progress as yet. Carried forward to meeting on 12th November.
1.5	Raise the issue of the potential DPO bypass in incident reporting with the ICO and NHS England and report back	VK	VK has discussed this with a senior manager and it has been logged as an issue. Version 12 would be the earliest that it could be incorporated in to the system, even if agreed. It needs to be included in a change request. In the meantime Action 1.6 has to be the way forward.
1.6	The Working Group will include in its output guidance on local formal notifications to the DPO as at least a stop gap measure.	BK	The wider NHS-HE IG group could be emailed about this in the first instance, also a mention in the update at the next NHS-HE Forum.
1.7	Requests will be made for resources that IGT applicants are willing to share to the wider community	SL	There has not been a call as yet. SL noted that she had a series of documents at Oxford. BK and TP said they would send through the UCL documents (about 20).
1.8	Feedback on frequently found issues reported to HSCIC to be shared	VK	VK said the feedback had been incorporated in to the draft documents mentioned in the update to Action 1.1(i.e. new Action 2.4.)
1.9	The NIHR CRN IGT training package will be made available to others	KBH	KBH said the training package was expected to be completed by the end of October. It will then be considered how it can be shared with the group.
1.10	Raise the idea that the MHRA might include the IGT in their audits of CTU's etc.	JM	MT said that JM had let him know that she has done this.
1.11	Arrange follow-up meetings and workshop	MT	It was agreed that the meeting for 12th November would be part meeting and part workshop. MT to poll members to see if they can stay for a workshop session in the afternoon.

Feedback on the IGT itself, how to proceed with this

8   VK reported that version 11.2 was in testing, and for review by NHS England etc. A list of the developments can be circulated later, if of interest. This should be after the end of October. The Editorial Board developments have already been covered (para. 2 above).

9   Paul Newton is involved in the PSN Code of Connection mapping to IGT work. The group has met once and it is still early days. They are working to the same timescales towards changes to be proposed for version 12.

10   The working group will consider the IGT requirements themselves at the proposed workshop session on 12th November. Initially though, it would be helpful to get any written responses by 4th November, to MT & BK for collation in preparation for the meeting. **Action 2.7**: All to send any written comments and suggestions on the IGT requirements to BK and MT for collation for the next meeting on 12th November.

Research Organisations that have achieved the IGT

11   MT is trying to keep the list up to date at https://community.ja.net/groups/nhs-he-forum-connectivity-project/article/information-governance-and-nhs . BK noted that the University of Sheffield are listed for the whole University and as a particular research group. VK offered to contact the administrator within the IGT to ask them to get in touch

12   Following a suggestion from BK - **Action 2.8**: VK to consider whether it would be possible for anyone registering with the IGT from research and education to be told of the existence of the working group.

Any other business

13   Following a question from TC on use cases, it was noted that not all IGT applications are for s251 requests. Demonstrating IG best practice was for instance the motivation for NIHR and not all UCL groups doing the IGT are for s251 requests. It was confirmed that this is reflected in the terms of reference.

Summary of New Actions:

Ref.	Action	Who
2.1	Provide revised wording for the minutes so they can be finalised and published.	VK (done)
2.2	Report the suggestion of a customer representative to the IGT Editorial Board.	VK
2.3	Brief the Editorial Board on the existence of this Working Group.	VK
2.4	Review the draft revised submission process and supporting guidance documents and feedback comments to MT by 4th November.	All
2.5	Add an extra column to the list of contacts to indicate the approach the University is taking.	MT
2.6	Ask permission of the contacts that the list of IGT contacts can be published on the website.	MT
2.7	All to send any written comments and suggestions on the IGT requirements to BK and MT for collation for the next meeting on 12th November.	All
2.8	Consider whether it would be possible for anyone registering with the IGT from research and education to be told of the existence of the working group	VK