The Northern, Yorkshire & Humberside NHS Directors of Informatics Forum

Information Governance Sub-Group Yorkshire & Humber Area Strategic Information Governance Network (SIGN)

Lecture Room, Goole & District Hospital, Woodland Avenue, Goole, DN14 6RX

Minutes of the Meeting held on Friday 14 September 2018, 13:00 – 16:00hrs

Present:

Present:		
Name	Initials	.
Shaun Beckingham	SB	Leeds CCG
Lucy-Ann Boatman	LB	Humber
Sarah Briggs	SBr	BDCT
Caroline Britten	CB	MLCSU
Liza Broughton	LBr	STH
Steve Creighton	SC	LCC
Lynda Da Costa	LDC	NLAG
Sue Drury	SD	NHSD
Kay Fowler	KF	Hospice
Richard Guthrie	RG	BDCT
Susan Hall	SH	Audit Yorlshire
Jo Higgins	JH	HDFT
Kay Hill	KH	HDFT
Gareth Jones	GJ	Doncaster CCG
Narissa Leyland	NL	Leeds Community
Steve Massen	SMa	RDaSH
Sue Meakin (Chair)	SMe	NLaG
Caroline Million	CM	eMBED
Adam Mosley	AM	The Retreat, York
Rachael Nicholson	RN	Mid Yorks
Gershon Nubour	GN	eMBED
Andy Nutting	AN	LCC
Tracey O'Mullane	TO'M	Humber
Jenny Pope	JP	ANHST / BTHFT
Joanne Robertshaw	JR	RDaSH
Karen Robinson	KR	Humber
Caroline Sampson	CS	Sheffield Children's
Derek Stowe	DS	TRFT
Hayley Surewood	HS	Locala
Lynne Trickett (Minute Taker)	LT	RDaSH
lain Twedily	IT	THIS
Roy Underwood	RU	DBHTFT
John Wolstenholme	JW	SHSC
Erin Wood	EW	HEE

In Attendance:

Name	Initials	Organisation
Dawn Friend, Local	DF	NHS England
Implementation Manager		
John Hodson	JH	NHS Digital

1. Apologies:

Name	Initials	Organisation
Matt Washington	MW	SWYT
Rachael Smith	RS	SWYT
Amy Cooper	AC	SHT
Caroline Squires	CS	Calderdale CCG

Notes from p	resentations	ACTION

Presentation: National Data Opt Out, Dawn Friend, NHS England

DF, Local Implementation Manager, introduced the National Data Opt Out programme, and explained the presentation will give an overview of where the project is post-launch, what organisations should be doing now, and what the next steps are.

Background – a few years ago the National Data Guardian was commissioned to undertake an independent review on security and use of data in health and social care. In response to this the government consultation followed. The data opt out came from this review. It was found that people understood and accepted the use of sharing information for their own care and treatment, what wasn't understood was what data was used for beyond this. The recommendation came to increase transparency and the patient be given the opportunity to opt of data sharing for purposes beyond treatment and care; and the NHSE was tasked with implementing this.

Setting service – on 25 May 2018 the setting service went live, on line. This is a secure way for patients to opt out on the website. The telephone service went live at same time. DF confirmed that two factor authentication is used online. The telephone service can help with off line services, forms etc. It was noted that a lot of information is available to enable the patient to make an informed choice. The patient can change their mind at any time.

Webpage – DF went through the overview, how it shows the benefits of data sharing and how the data is used. If a patient opts out this will be applied and respected by NHS Digital and Public Health England immediately. All other organisations are to adhere to this by March 2020.

Overview – the patient will set the opt out themselves, without going through their GP. The opt out is stored once, centrally, on the spine repository. This is looked up at the point of data dissemination taking place.

Launch – this has been live since 25 May 2018 in public beta and will be until the end September 2018. Refining and user experience work is taking place

up to this date. Work is taking place on changes to the non-digital forms based on the feedback received so far. Type 2 opt outs were discussed and DF confirmed these opt outs still stand.

Communications – products for patients and public have been disseminated as well as some media communication. Posters were sent to Trusts, GPs, dentists and pharmacies throughout May, June, and July this year. Additional products can be printed or ordered if required. The communication contains a summary level of how data is used, what patient confidential information is, and what doesn't affect care and treatment. There are also easy read versions and information in different languages available. Screen text is available for waiting areas.

Activity – since the service went live NHSE have been monitoring the use of the service and so far there have been approximately 7770 transactions since 25 May with 33338 supporting the use of data and 4432 opting out. 90% of people have done this digitally. Some have also changed their existing Type 2 opt out.

Organisations – NHSE are asking organisations to use the leaflets and posters provided and put up wherever possible. Organisations are to make sure information is there for anyone who wants it. It was noted this aligns with the ICO's Your Data Matters campaign. Care.Data was raised and DF confirmed this information required removing. DF encouraged all organisations to check existing information around opt outs and make sure any information is still correct and amend/remove if necessary.

DF also stated there is standard text available on the NHSD pages that can be used in Privacy Notices.

Workforce – patients are to be kept informed and frontline staff are to know enough to be able to sing post patients to where they can access more detail. Fact sheets are available on the website and operational policy guidance is also available.

It was noted formal proxies can be set up to opt out on behalf of others. Parents and guardians can opt out for a child up to the age of 13. Parent conflict was raised and DF confirmed the risk and impact of this was looked into but as this is not about individual care there is no risk considered in this respect.

Next steps – organisations are to analyse data flows to see if data opt out should apply. The responsibility of the data opt out will be of the data controller. This applies to paper data, and structured and unstructured data. It was confirmed this does continue to apply after the patient has died. It was also confirmed the opt out is not retrospective.

DF explained the process as an automated process where an organisation identifies a data flow the opt out should apply to, sends a list of NHS numbers to NHSD, NHSD sends back the NHS numbers that can be used.

Pilots – if any organisations are interested in joining the pilot let NHSE know:

newoptoutenquiries@nhs.net.

Presentation: Data Security and Protection Toolkit, John Hodson, NHS Digital

JH reported that currently approximately 9k organisations are registered. 380 incidents have been reported to the ICO; this is up by 40% based on what it was before.

JH confirmed pharmacists etc. should be doing the toolkit.

What is coming - changes to accessibility and user interface improvements will be put in place with enhanced reporting. It was confirmed public view will be an organisation high level view. It was noted the toolkit has legal exemption for FOI requests. An action plan aimed at smaller organisations is to be generated.

Levels of the toolkit – entry level is aimed at smaller organisations – care homes etc, who can then get NHS Mail. Standards met is the previous Level 2.

The IG training was raised as some slides are now out of date. JH confirmed a new version will be released that will include GDPR information. JH also confirmed, for the toolkit, it does not matter which version of the training (with or without GDPR reference) the 95% compliance is against. JH to report back on whether new training will be released for specialist roles such as Board, Caldicott and SIRO. It was noted training information is included on the 'Help' section of the toolkit.

Training for using the toolkit – two webinars take place each week. Toolkit training events are advertised on the Newspage of the toolkit.

A PowerPoint slide of how the toolkit fits into organisation's governance processes is available, including CQC inspections.

It was confirmed the October deadline was included in the standard when it was published and in the email when the toolkit was launched. It was noted some had not seen this.

Baseline – this only applies to NHS Trusts and the deadline is midnight 31 October. There is no minimum standard and more than one baseline can be published. Reminder emails will be circulated at the end of September.

Uploading was discussed and JH confirmed organisations can do this if they wish but it is not an expectation. Detail in the text box can be added if not uploading, or links added to policies, for example. It was noted that when a box says 'completed' it is confirming something has been put in there. More information can be added. Once the whole section has been completed it is ticked off at the bottom of the assertion.

JH confirmed the 'swingometers' only show mandatory items.

	Top tips – any of the organisation's profile responses can be altered up to publication. Certification dates can also be updated. JH advised for the mandatory assertions to be completed first rather than going through the toolkit in order. Survey questions are not mandatory. Administrators can create new users and set permission; only administrators can publish assessments or report incidents. Member users can add evidence. Audit users are read-only. What is reportable – if 'not likely' it won't be reportable. If likely to cause harm, the incident will be reportable, even if only concerns one patient or has minor impact. If the 72 hour deadline is not met the organisation must provide an explanation. Due to the length of the presentations it was agreed to role the full agenda over to the next meeting in October.	
2.	Minutes of the last meeting held on 13 July 2018 – Paper A	
3.	Action Points – Paper B	
4.	GDPR/Data Protection Act 2018	
	Due to time constraints this item was not discussed.	
5.	Regional/National Event Updates	
	Due to time constraints this item was not discussed.	
6.	IG Education/Personal Development Updates	
	Due to time constraints this item was not discussed.	
7.	Data Security and Protection Toolkit	
	Due to time constraints this item was not discussed.	
8.	Confidentiality, Data Protection and Freedom of Information	
	Due to time constraints this item was not discussed.	
9.	Data and IT / Information Security	
	Due to time constraints this item was not discussed.	

10.	Any Other Business	
	No other business was raised.	
	Date and Time of Next Meeting	
	Friday 12 October 2018, 13:00 – 16:00, Lecture Room, Goole and District Hospital, Woodland Avenue, Goole, DN14 6RX.	