

**Health and Social Care Information Centre Board**

**Agenda: Part 1 (Public Session)**

**10 June 2015 – 12:30pm to 14:30pm**

**Venue: Hill/Diggory/Bevan, Trevelyan Square, Boar Lane, Leeds, LS1 6AE**

<u>Ref No</u>	<u>Agenda Item</u>	<u>Time</u>	<u>Presented By</u>
HSCIC 15 02 01	<b>Chair's Introduction and Apologies (oral)</b>	12:30 – 12:35	Chair
HSCIC 15 02 02	<b>Declaration of Interests and minutes</b>	12:35 – 12:45	Chair
	(a) Register of Interests (paper) – <b>for information</b>		
	(b) Minutes of Board Meeting on 29 April 2015 (paper) – <b>to ratify</b>		
	(c) Progress on Action Points (paper) – <b>for information</b>		
HSCIC 15 02 03	<b>Transparency and Governance</b>	12:45 – 13:00	Chair
	(a) Improving Public Involvement:		
	i. Board Forward Business Schedule 2014-15 (paper) – <b>for information</b>		
	ii. Format of Board Meetings Proposal (paper) – <b>for comment</b>		
HSCIC 15 02 04	<b>HSCIC Annual Report and Accounts 2014-15</b>	13:00 – 13:45	
	(a) Annual Report and Statutory Accounts 2014-15 (paper) – <b>for approval</b>		Director of Finance and Corporate Services
HSCIC 15 02 05	<b>HSCIC Business Plan 2015-16</b>	13:45 – 14:00	
	(a) Business Plan 2015-16 (paper) – <b>for approval</b>		Director of Finance and Corporate Services
HSCIC 15 02 06	<b>Supporting the Health and Social Care System</b>	14:00 – 14:25	
	(a) Direction from NHS England for Maternity Services Dataset (paper) – <b>for ratification</b>		Director of Information and Analytics
	(b) Direction from NHS England for Mental Health Services Dataset – <b>for approval</b>		Director of Information and Analytics
	(c) Monitor Collaboration Agreement (paper) – <b>for approval</b>		National Provider Support Director
HSCIC 15 02 07	<b>Any other Business</b> (subject to prior agreement with Chair)	14:25 – 14:30	Chair

HSCIC 15 02 08 **Background Paper(s)** (for information)

None

**Date of next meeting 15 July - Birmingham**



## Board meeting – Public session

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<b>Title of paper:</b>	<b>HSCIC Board members Register of Interests 2015-16</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 02 (a)
Paper presented by:	Chair
Paper prepared by:	Annabelle McGuire, Secretary to the Board
Paper approved by: (Sponsor Director)	N/A
Purpose of the paper:	<p>The HSCIC is required by its Standing Orders to maintain a publically available Register of Members' Interests.</p> <p>The Register contains, as they become available, the Declarations of Interest made by Board members.</p>
Key risks and issues:	N/A
Patient/public interest:	Transparency and Openness
<b>Actions required by the board:</b>	For information

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### HSCIC Board Register of Interests 2015-16

Name	Declared Interest
<b>Non-Executive Directors</b>	
Kingsley Manning - Chair	<ul style="list-style-type: none"> <li>• Director – Newchurch Limited (non-trading since 01 June 2013)</li> <li>• Director – Hennig UK Limited</li> <li>• Trustee and Board member - Royal Philharmonic Society</li> </ul>
Sir Ian Andrews - Non-Executive Director	<ul style="list-style-type: none"> <li>• Director of IMA Partners Ltd (formerly known as Abis Partnership Ltd) provision of legal and management consultancy services to government, academia (KCL<sup>1</sup>) and Transparency International UK</li> <li>• Consultancy advice to DH on aspects of governance of NHS Transformation, renegotiation of Connecting for Health contracts with CSC<sup>2</sup>, and oversight of Fujitsu Arbitration process</li> </ul> <p><b>Other Offices:</b></p> <ul style="list-style-type: none"> <li>• Conservator of Wimbledon and Putney Commons</li> <li>• Trustee Chatham Historic Dockyard</li> <li>• Member of UK Defence Academy Academic Advisory Board</li> </ul>
Sir John Chisholm - Non-Executive Director	<ul style="list-style-type: none"> <li>• Executive Chairman – Genomics England Ltd.</li> <li>• Chair – Nesta (the charity)</li> <li>• Chair – Historic Grand Prix Cars Association Ltd.</li> </ul>
Professor Maria Goddard - Non-Executive Director	<ul style="list-style-type: none"> <li>• Member of Board of Directors for the York Health Economics Consortium at the University of York.</li> <li>• Professor of Health Economics at the University of York and head of department/director of the Centre for Health Economics at the University of York</li> </ul>

<sup>1</sup> King's College London

<sup>2</sup> Computer Sciences Corporation

Name	Declared Interest
Sir Nick Partridge - Non-Executive Director	<p><b>Other Offices:</b></p> <ul style="list-style-type: none"> <li>• Chair - Clinical Priorities Advisory Group, NHS England</li> <li>• Deputy Chair - UK Clinical Research Collaboration</li> <li>• Deputy Chair, Sexual Health Forum, DH</li> </ul>
Dr Sarah Blackburn – Non-Executive Director	<ul style="list-style-type: none"> <li>• Director - The Wayside Network Limited</li> <li>• Director - IIA<sup>3</sup> Inc</li> <li>• Independent member of the Management Board, RICS<sup>4</sup></li> <li>• Non-Executive Partner, The Green Practice, Bristol</li> </ul> <p><b>Employment (other than with the HSCIC):</b> The Wayside Network Limited</p> <p><b>Other Offices:</b></p> <ul style="list-style-type: none"> <li>• Audit Committee member, RAC Pension Fund Trustee</li> </ul> <p><b>Contracts held in last 2 years:</b></p> <p>The Wayside Network Limited has:</p> <ul style="list-style-type: none"> <li>• a contract to supply GP and primary care nursing services to Avon and Wiltshire NHS Partnership</li> <li>• a zero hours contract with the Chartered Institute of Internal Auditors</li> </ul> <p><b>Shareholdings:</b></p> <ul style="list-style-type: none"> <li>• 50% of The Wayside Network Limited</li> </ul>
<b>Executive Directors</b>	
Andy Williams – CEO	<ul style="list-style-type: none"> <li>• None</li> </ul>

<sup>3</sup> The Institute of Internal Auditors

<sup>4</sup> Royal Institution of Chartered Surveyors

Name	Declared Interest
Rachael Allsop - Executive Director of Human Resources	<ul style="list-style-type: none"> <li>• None</li> </ul>
Rob Shaw - Executive Director of Operations and Assurance Services	<ul style="list-style-type: none"> <li>• None</li> </ul>
Carl Vincent - Executive Director of Finance and Corporate Services	<ul style="list-style-type: none"> <li>• Employment: Department of Health (on secondment to the HSCIC)</li> </ul>
<b>Directors</b>	
Peter Counter - CTO <sup>5</sup>	<ul style="list-style-type: none"> <li>• Director at Canary Wharf College Limited</li> </ul>
Tom Denwood - National Provider Support Director	<ul style="list-style-type: none"> <li>• British Computer Society (BCS) Health, Vice Chair Policy and Strategy (a voluntary role at this registered charity)</li> <li>• Senior Responsible Owner (SRO) for Local Service Provider (LSP) Programmes on behalf of Department of Health</li> </ul>
James Hawkins - Director of Programmes Delivery	<ul style="list-style-type: none"> <li>• Parent Governor at St Peters Church of England Primary School, Harrogate</li> </ul>
Isabel Hunt - Director of Customer Relations	<ul style="list-style-type: none"> <li>• Trustee, Thackray Medical Museum (Leeds)</li> <li>• Council Member, Leeds Minster</li> <li>• Director - Barry Wades Estates Ltd</li> </ul>

<sup>5</sup> Chief Technical Officer

Name	Declared Interest
<p>Professor Martin Severs – Caldicott Guardian and Lead Clinician</p>	<ul style="list-style-type: none"> <li>• Trustee of Dunhill Medical Trust, a research charity</li> <li>• Consultant Geriatrician with Portsmouth Hospitals NHS Trust</li> <li>• Professor of Health Care for Older People with University of Portsmouth</li> </ul> <p><b>Other Offices:</b></p> <ul style="list-style-type: none"> <li>• Member of SoS<sup>6</sup> Independent Information Governance Oversight Panel</li> </ul> <p><b>Other relevant interests:</b></p> <ul style="list-style-type: none"> <li>• Medical consultant and member of the Royal College of Physicians, British Geriatrics Society and the Faculty of Public Health Medicine</li> </ul>
<p>Andrew MacLaren – Director of Information and Analytics</p>	<ul style="list-style-type: none"> <li>• None</li> </ul>
<p>Director of Strategy</p>	<ul style="list-style-type: none"> <li>• Vacancy</li> </ul>

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<sup>6</sup> Secretary of State





**Health and Social Care Information Centre**

**Minutes of Board Meeting – Wednesday 29 April 2015**

**Part 1 - Public Session**

**Present:**

Chair	Kingsley Manning
Non-Executive Director	Sir Nick Partridge (Vice-Chair)
Non-Executive Director	Sir Ian Andrews
Non-Executive Director	Prof. Maria Goddard

CEO	Andy Williams
Director of Human Resources and Transformation	Rachael Allsop
Director of Operations and Assurance Services	Rob Shaw
Director of Finance and Corporate Services	Carl Vincent

**In attendance:**

Chief Technology Officer	Peter Counter
National Provider Support Director	Tom Denwood
Director of Programmes	James Hawkins
Director of Customer Relations	Isabel Hunt
Director of Information and Analytics	Andrew MacLaren
Caldicott Guardian and Lead Clinician	Prof. Martin Severs

Secretary to the Board	Annabelle McGuire
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1. **Chair's Introduction and Apologies** (HSCIC 15 01 01)
  - 1.1 The Chair convened a meeting of the HSCIC Board. The Chair welcomed Andrew MacLaren, the newly appointed Director of Information and Analytics to his first Board meeting. He thanked Carl Vincent, Director of Finance and Corporate Services for covering the role in the interim period.

He welcomed the observers attending the Board meeting. The Board introduced themselves for the benefit of the observers.
  - 1.2 Non-Executive Director's Sir John Chisholm and Sarah Blackburn had registered their apologies.

2. **Declaration of Interests and Minutes** (HSCIC 15 01 02)

- 2.1 (a) Register of Interests (paper): HSCIC 15 01 02 (a)  
The Board agreed the Register of Interests was correct.
- 2.2 (b) Minutes of Board meeting on 31 March 2015 (paper): HSCIC 15 01 02 (b)  
The Board ratified the minutes of the meeting on 31 March 2015 as correct.
- 2.3 (c) Progress on action points (paper): HSCIC 15 01 02 (c)  
The Board noted the progress on action points resulting from the previous meeting.
- 2.4 (d) Matters Arising: HSCIC 15 01 02 (d):  
There were no matters arising discussed.

3. **Transparency and Governance** (HSCIC 15 01 03)

- 3.1 (a) Committee Reports: HSCIC 15 01 03 (a)
  - i. Assurance and Risk Committee (ARC): 22 April 2015 (oral) HSCIC 15 01 03 (a) i  
In the absence of the ARC Chair, Sir Ian Andrews provided the update. The ARC met on 22 April. The Committee reviewed progress on the HSCIC Annual Report and Accounts, which was satisfactory. The Committee received an update on the improvement plan for risk management, which demonstrated positive progress.

The Committee received presentations on two of the Strategic Risks:

- Safely collect, analyse, publish and disseminate high quality and timely data and information, which meets customer expectations.
- Secure a positive, responsive and trustworthy reputation and maintain effective relationships with stakeholders. The Committee asked the Director of Customer Relations to add a further risk within this area relating to the media.

There had been some progress made on aligning the assurance map with strategic risks. However, more work was required before this could support the internal audit plan and meet the assurance needs of the Board. A report on progress of Financial Reporting was received, and a paper on the fixed assets in the GP Extraction Service system.

There with eleven internal audit reports presented, which meant completion of the internal audit plan for 2014-15 except for one report currently in draft. The ARC congratulated management and the internal auditors for their dedicated efforts in this respect. Four of the reports offered only limited assurance, the rest were moderate.

The ARC approved the internal audit plan for 2015-16, noting that review and update was required throughout the year. The Committee welcomed the review of Cyber Security, although requested that the staff assigned to it be specialist not generalist auditors. The Committee requested that the internal auditors and management co-operate to meet a schedule of internal audit reports throughout the year, with auditees attending the ARC to discuss issues arising; and that internal audit implement tracking of recommendations and follow up of management actions.

He reported on the cancellation of the Information Assurance and Cyber Security Committee scheduled for 22 April, as there had not been sufficient business to bring before the Committee.

The Board received the update and there were no questions raised.

3.2 (b) Preparation of 2014-15 HSCIC Annual Report and Accounts Progress Update (paper): HSCIC 15 01 03 (b)

The Director of Finance and Corporate Services presented this item. The purpose was to confirm the overall content to be included in the 2014-15 annual report and accounts documentation, and set out the production schedule. Discussion had taken place at the Assurance and Risk Committee on 22 April and an approach agreed. He stated that in the previous year, the HSCIC had inherited a challenging position on fixed assets - the position had improved in 2014-15 however reaching a successful end-point remained a high priority. The Board discussed the issuance of this documentation alongside the HSCIC Strategy and Business Plan 2015-16 once the pre-election purdah period was over. The Board noted and received the update.

3.5 (e) Board Forward Business Schedule 2015-16 (paper): HSCIC 15 01 03 (e)

The Board noted the forward business schedule.

4. **Business and Performance Reporting (HSCIC 15 01 04)**

4.1 (a) Board Performance Pack (paper): HSCIC 15 01 04 (a)

The CEO presented this item. The purpose was to provide the Board with a summary of performance in February 2015.

He highlighted the following key performance indicators:

- Programme Achievement – noting the external Gateway reviews that had been undertaken
- IT Service Performance – observing overall a good position had been maintained
- Organisational Health – noting the modest progress on the professional groups
- Data Quality – observing the process of continual development of this indicator, this would be in the performance pack in July

**Action: Director of Information and Analytics**

- Financial Management – noting the position and that there would be a tighter financial environment in 2015-16
- Reputation - observing the redevelopment of this indicator, this would be in the performance pack in July

**Action: Director of Customer Relations**

The Board discussed programme management capability and capacity. The Director of Provider Support gave an update on the established programme management professional group and associated initiatives. The Chair highlighted that there should be a link between the performance pack, the business plan and the risk register. The Board noted and received the performance pack.

5 **Supporting the Health and Social Care System (HSCIC 15 01 05)**

5.1 (a) The Health and Social Care Information Centre (Immigration Health Charge) Directions (paper): HSCIC 15 01 05 (a)

The Chair opened the discussion and explained that approval via Chair's Action, alongside two other non-executive directors, had been required as there was a need to go live on 6 April, this fell between the March and April Board meetings - time pressures on the Department of Health and Ministers had necessitated the need for Chair's Action. The Department of Health had confirmed that as this Direction was in support of a number of publicised changes covered by the Immigration Act 2014, it was uncontentious and had no material impact. The Chair highlighted that Directions are significant and therefore it was crucial to employ a maximum transparency approach throughout implementation, he was therefore hesitant to take Chair's Action unless it proved essential.

The Director of Operations and Assurance Services explained that the Visitor and Migrant Cost Recovery Programme seeks to improve NHS charging for overseas visitors or migrants (NHS Act 2006) and support the introduction of the Immigration Health Charge (IHC or 'surcharge') from April 2015 (Immigration Act 2014 and the Immigration (Health Charge) Order 2015).

The Direction was required to address the need for the rollout of a solution that will allow Home Office to provide a data-feed to upload to NHS systems. This would allow specified roles to confirm eligibility for cost free NHS care. The data-feed from the Home Office would provide only basic demographic information and eligibility for cost free NHS care to identify those exempt from NHS charging by virtue of their exempt status or payment of the surcharge. He confirmed that the HSCIC will not share clinical or patient data with the Home Office as part of the transfer, and there is no requirement arising from this Direction for NHS organisations to share identifiable data with the Home Office. He confirmed the receipt of the first batch of data from the Home Office. The Board ratified the Chair's Action completing the approval of the Direction. The Board requested an update in six months' time.

**Action: Director of Operations and Assurance Services**

5.2 (b) NHS England Direction: Children and Young People Health Services Dataset (paper): HSCIC 15 01 05 (b)

The Director of Finance and Corporate Services presented this item, in his interim role as Director of Information and Analytics. The purpose was to present the final draft of the Direction to the Board to enable consideration of the Board's views as part of the formal consultation process prior to the signing of the Direction by NHS England. The Board approved the Direction.

5.2 (b i) The Caldicott Guardian and Lead Clinician brought a related matter to the attention of the Board. This was in respect to the Maternity and Children's Data Set (MCDS). He summarised the background and context, and advised that there was a high probability that Chair's Action may become necessary as the schedule indicated that the first collection would be in June 2015. The Chair thanked him for the notification and said he awaited the submission prior to a decision. The Chair highlighted that this was not particularly good practice.

5.3 (c) Streamlining the Independent Information Governance Advice to HSCIC (paper): HSCIC 15 01 05 (c)

The Caldicott Guardian and Lead Clinician presented this item, which was a further update on the paper presented at the March Board. The purpose was to inform the Board regarding developments on the integration of the GP Extraction Service Independent Advisory Group (GPES IAG) into the Standardisation Committee for Care Information (SCCI) and the HSCIC. In addition, to update the Board on further developments of the HSCIC Data Access Advisory Group (DAAG) and its change of name. The proposed name for the new group was the Independent Group Advising (on) Release of Data (IGARD). He stated that IGARD would be an advisory and not a policy-setting group. Advice had been sought from the National Data Guardian through her Independent Information Governance Oversight Panel (IIGOP). He mentioned receipt of a recent letter from medConfidential raising a number of points for consideration, the Board noted this letter did not form part of the Board papers. The Board welcomed and supported the outlined changes. The Board agreed with and supported the public consultation. The Board requested a further update in due course.

**Action: Caldicott Guardian and Lead Clinician**

6 **Strategic and Policy Items** (HSCIC 15 01 06)

6.1 (a) Provision of Service Agreement (PoSA) between NHS England and HSCIC (paper): HSCIC 15 01 06 (a)

The Board discussed the two Provision of Service Agreement (PoSA) items together. The Director of Programmes presented the items. The purpose was to inform the Board about the two PoSA's established between the HSCIC and the Department of Health and NHS England.

The Board discussed and agreed that if there were no material differences and they fell within the appropriate delegated authority levels that the CEO was authorised to sign future PoSA's.

The Board approved the Provision of Service Agreement between NHS England and HSCIC.

6.2 (b) Provision of Service Agreement (PoSA) between the Department of Health and the HSCIC (paper): HSCIC 15 01 06 (b)

The Board approved the Provision of Service Agreement between NHS England and HSCIC.

7. **Any other Business** (HSCIC 15 01 07)
- 7.1 There were no items of any other business.
8. **Background Papers**
- 8.1 (a) Forthcoming Statistical Publications (paper): HSCIC 15 01 08 (a)  
The Board noted the Forthcoming Statistical Publications paper for information.
- 8.2 (b) Programme Definitions (paper): HSCIC 15 01 08 (b)  
The Board noted the Programme Definitions paper for reference.
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- 9.1 The arranged date of the next public Board meeting was for 10 June 2015 - Leeds

**Table of Actions:**

<b>Action</b>	<b>Action Owner</b>
Board Performance Pack: Data Quality – observing the process of continual development of this indicator, this would be in the performance pack in July	<b>Director of Information and Analytics</b>
Board Performance Pack: Reputation - observing the redevelopment of this indicator, this would be in the performance pack in July	<b>Director of Customer Relations</b>
The Health and Social Care Information Centre (Immigration Health Charge) Directions: The Board requested an update in six months' time.	<b>Director of Operations and Assurance Services</b>
Streamlining the Independent Information Governance Advice to HSCIC: The Board requested a further update in due course.	<b>Caldicott Guardian and Lead Clinician</b>





## Board meeting – Public session

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<b>Title of paper:</b>	<b>Update on action points for the previous meeting</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 02 (c)
Paper presented by:	Chair
Paper prepared by:	Annabelle McGuire, Secretary to the Board
Paper approved by: (Sponsor Director)	Action Updates as submitted by the relevant Executive Management Team director.
Purpose of the paper:	To share an update on action points from the previous meeting for information.
Key risks and issues:	As stated in the action and commentary
Patient/public interest:	Corporate Governance
<b>Actions required by the board:</b>	To note for information

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### Summary of progress against Board meeting actions

✓ = completed

c/f = on-going

Status	Summary of Action	Commentary	Responsible Director	For Information Only
c/f	Board Performance Pack: Data Quality – observing the process of continual development of this indicator, this would be in the performance pack in July	Development of the Data Quality KPI is being reviewed with the Director of Information and Analytics. It is not anticipated this will be available for the July Performance Pack	Director of Information and Analytics	Yes
c/f	Board Performance Pack: Reputation - observing the redevelopment of this indicator, this would be in the performance pack in July	Ongoing	Director of Customer Relations	Yes
✓	The Health and Social Care Information Centre (Immigration Health Charge) Directions: The Board requested an update in six months' time.	Scheduled for 25/11/15	Director of Operations and Assurance Services	Yes
c/f	Streamlining the Independent Information Governance Advice to HSCIC: The Board requested a further update in due course.	To be scheduled	Caldicott Guardian and Lead Clinician	Yes





## Board meeting – Public session

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<b>Title of paper:</b>	<b>HSCIC Board Forward Business Schedule</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 03 (a) (i)
Paper presented by:	Chair
Paper prepared by:	Annabelle McGuire, Secretary to the Board
Paper approved by: (Sponsor Director)	None
Purpose of the paper:	This paper details the HSCIC Board forward business schedule for the financial year 2015-16.  Please note this schedule is subject to change.
Key risks and issues:	N/A
Patient/public interest:	Corporate Governance – decision making
<b>Actions required by the board:</b>	To note for information

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HSCIC – Draft Public Board Business Schedule 2015-16

29 April 2015	10 June 2015	15 July 2015	23 Sept 2015	25 Nov 2015	27 Jan 2016	30 Mar 2016
<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (Mar) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 Reports from sub-committees:  <ul style="list-style-type: none"> <li>Assurance and Risk 22/04/2015</li> </ul> </p>	<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (Apr) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 Annual Report and Accounts for 2014-2015 for HSCIC – <b>for approval</b></p>	<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (June) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 Reports from sub-committees:  <ul style="list-style-type: none"> <li>Assurance and Risk</li> <li>Information Assurance and Cyber Security Committee</li> </ul> Annual Review of Board Effectiveness – Internal Audit Report Information Assurance and Cyber Security Committee Terms of Reference Schema Delegation of Authorities – briefing note</p>	<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (July) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 Reports from sub-committees:  <ul style="list-style-type: none"> <li>Assurance and Risk</li> <li>Information Assurance and Cyber Security Committee</li> </ul> </p>	<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (Sep) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 Reports from sub-committees:  <ul style="list-style-type: none"> <li>Assurance and Risk</li> <li>Information Assurance and Cyber Security Committee</li> </ul> </p>	<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (Nov) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 and 2016-17 Arrangements for the Annual Review of Board Effectiveness Reports from sub-committees:  <ul style="list-style-type: none"> <li>Assurance and Risk</li> <li>Information Assurance and Cyber Security Committee</li> </ul> </p>	<p><b>Accountability</b></p> <p>Register of Interests Minutes of previous meeting (Jan) – <b>to ratify</b> Progress on Action Points Board Forward Business Schedule 2015-16 and 2016-17 Scheme of Delegation of Authorities - <b>for review</b> Annual Review of Board Effectiveness Report Reports from sub-committees:  <ul style="list-style-type: none"> <li>Assurance and Risk</li> <li>Information Assurance and Cyber Security Committee</li> </ul> </p>
<p><b>Supervising Management</b></p> <p>Board Performance Pack Forthcoming Statistical Publications Review of the National Back Office Tracing Service – Interim Progress Report</p>	<p><b>Supervising Management</b></p> <p>Board Performance Pack – <b>for information only</b> Forthcoming Statistical Publications – <b>for information only</b></p>	<p><b>Supervising Management</b></p> <p>Board Performance Pack Forthcoming Statistical Publications Review of the National Back Office Tracing Service - Final Report Data Release Review: Audit Status Report Staff Personal Development Review Report Care: data note – Board approvals and budget position</p>	<p><b>Supervising Management</b></p> <p>Board Performance Pack Forthcoming Statistical Publications Transforming Programme Mid-Year Report 2015-16</p>	<p><b>Supervising Management</b></p> <p>Board Performance Pack Forthcoming Statistical Publications</p>	<p><b>Supervising Management</b></p> <p>Board Performance Pack Forthcoming Statistical Publications Data Release Review: Audit Status Report</p>	<p><b>Supervising Management</b></p> <p>Board Performance Pack Forthcoming Statistical Publications Information Assurance and Cyber Security Annual Report 2015-16 Transformation Programme Report 2015-16</p>
<p><b>Strategy Formulation</b></p> <p>The Health and Social Care Information Centre (Immigration Health Charge) Directions 2015</p>	<p>No agenda items</p>	<p><b>Strategy Formulation</b></p> <p>Care: data revised NHS England Directions Care: data DH Directions on Objections Directions: Data Extractions for the Department of Work and Pensions Fit to Work Programme HSCIC Social Care Work Update</p>	<p><b>Strategy Formulation</b></p> <p>Directions – TBC HSCIC Information Governance Strategy</p>	<p><b>Strategy Formulation</b></p> <p>Update on the HSCIC (Immigration Health Charge) Directions</p>	<p><b>Strategy Formulation</b></p> <p>Directions - TBC</p>	<p><b>Strategy Formulation</b></p> <p>Directions - TBC</p>
<p><b>Planning</b></p>	<p><b>Planning</b></p> <p>No agenda items Business Plan 2015-16 – <b>for approval</b></p>	<p><b>Planning</b></p>	<p><b>Planning</b></p>	<p><b>Planning</b></p> <p>Mid-year review of Corporate Business Plan 2015-16</p>	<p><b>Planning</b></p> <p>Corporate Business Plan 2016-17 (Draft)</p>	<p><b>Planning</b></p> <p>Corporate Business Plan 2016-17 (Final)</p>
<p>April and May 2015</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team - weekly</li> <li>Board Strategy Session – 25 February</li> <li>Remuneration Committee – 30 March</li> </ul>	<p>June 2015</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team - weekly</li> <li>Board Strategy Session – 20 May</li> <li>Assurance and Risk Committee – 10 June</li> </ul>	<p>July and August 2015</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team - weekly</li> <li>Board Strategy Session – 20 May</li> <li>Information Assurance and Cyber Security Committee – 01 July</li> </ul>	<p>Sept and Oct 2015</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team – weekly</li> <li>Board Strategy Session – 02 September</li> <li>Information Assurance and Cyber Security Committee – 15 September</li> <li>Assurance and Risk Committee – 15 September</li> </ul>	<p>Nov and Dec 2015</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team – weekly</li> <li>Board Strategy Session – 28 October</li> <li>Information Assurance and Cyber Security Committee – 10 November</li> <li>Assurance and Risk Committee – 10 November</li> </ul>	<p>Jan and Feb 2016</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team – weekly</li> <li>Board Strategy Session – 16 December</li> <li>Assurance and Risk Committee – 13 January</li> <li>Information Assurance and Cyber Security Committee – 13 January</li> </ul>	<p>Mar 2016</p> <p><b>Key Meetings</b></p> <ul style="list-style-type: none"> <li>Executive Management Team – weekly</li> <li>Board Strategy Session – 24 February</li> <li>Information Assurance and Cyber Security Committee – 15 March</li> </ul>



## Board meeting – Public session

<b>Title of paper:</b>	<b>HSCIC Board Future Format</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 03 (a) (ii)
Paper presented by:	Chair
Paper prepared by:	Annabelle McGuire, Secretary to the Board
Paper approved by: (Sponsor Director)	Chair
Purpose of the paper:	<p>As part of an on-going programme of improving transparency, openness and reaching out to citizens, patients, service users, stakeholders and partner organisations across the health and social care system the HSCIC is proposing a revision to the format of its Board meetings to these arrangements.</p> <p>An evaluation has taken place following the introduction of a peripatetic style of Board meeting in July 2014. As a result the following proposal has been developed incorporating some adjustments.</p>
Key risks and issues:	The intended benefits are not realised
Patient/public interest:	Corporate Governance – transparency of decision making
<b>Actions required by the board:</b>	To note for information

# Advancing Transparency

## Format of HSCIC Board meetings

**Annabelle McGuire, Secretary to the Board**  
**June 2015**

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## 1 Introduction

As part of an on-going programme of improving transparency, openness and reaching out to citizens, patients, service users, stakeholders and partner organisations across the health and social care system the HSCIC is proposing a revision to the format of its Board meetings to these arrangements.

An evaluation has taken place following the introduction of a peripatetic style of Board meeting in July 2014. As a result the following proposal has been developed incorporating some adjustments.

## 2 Proposed Format

### 2.1 HSCIC Board Meetings - Public Session

The HSCIC Standing Orders, which are set out in the HSCIC Corporate Governance Manual, state that the HSCIC Board will meet at least six times a year in public, to consider performance, in relation to finance, workforce, procurement, programme delivery, and parliamentary accountability, and this will be supported by qualitative information.

It is proposed that six statutory public sessions of the Board will be held per financial year. Members of the public are and will continue to be encouraged to observe these meetings.

Board papers and associated information are available on the HSCIC web site at this link <https://www.gov.uk/government/organisations/health-and-social-care-information-centre/about/our-governance>

### 2.2 Proposed future format of HSCIC Board Meetings

- There will be five public Board meetings per year - alternating between the HSCIC Leeds and London offices.
- There will be one public Board meeting per year held in the HSCIC offices in Southport, Exeter and Redditch in turn. This meeting will be preceded by a morning seminar with presentations from HSCIC staff appropriate to the office location.
- The public Board meeting will be broadcast live via the web and will be recorded. An edited and book-marked recording will be made available on the HSCIC web site after the meeting has taken place.
- A further two of the public Board meetings per year will be preceded by a morning seminar, with invited external speakers. This makes a total of three Board meetings per year with morning seminars preceding them.
- The three morning seminars will be recorded and released on the HSCIC web site.
- The three public Board meetings with morning seminars will be preceded the day before with an HSCIC hosted nominal evening hospitality for external guests from across the health and social care sector. This reduces the number of these events per annum by 50 per cent.
- There will be five HSCIC Board non statutory business meetings per year.



## 2.3 HSCIC Board Meetings – non statutory business meetings

These are non-statutory meetings of the Board held in closed session without observers or members of the public to discuss items of developing business in detail.

A note will be taken of these meetings which will be a summary record of the main points discussed and the decisions made. This note is not intended to provide a verbatim record of the Board's discussion. No business will be officially conducted at these meetings.

It is proposed that the agenda and a summary of the discussion of the non-statutory business meetings are made available publically on the HSCIC web site.

## 2.4 HSCIC Board Meetings - Private Session

It is not proposed that the format of the HSCIC Board private sessions is changed. From time to time, the Board might need to consider commercial or staff in confidence agenda items that cannot be discussed in public. In that event a private session will be held without any observers. Admission of the press and public to the HSCIC Board meetings is as follows. The public and representatives of the press may attend all formal public meetings of the HSCIC Board but will be required to withdraw upon the Board resolving:

*'that pursuant to the Public Bodies (Admission to Meetings) Act 1960 that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest' (Section 1 (2) Public Bodies (Admission to Meetings) Act 1960)'.*

## 3 Schedule of Future Board Meetings

Date	Type of Session	Proposed Location
15 July 2015	Public Board – with morning seminar	Redditch
02 Sept 2015	non statutory business meeting	London
23 Sept 2015	Public Board	Leeds
28 Oct 2015	non statutory business meeting	Leeds
25 Nov 2015	Public Board	London
16 Dec 2015	non statutory business meeting	London
27 Jan 2016	Public Board – with morning seminar	London
24 Feb 2016	non statutory business meeting	Leeds
30 Mar 2016	Public Board	Southport

In conjunction with the Board timetable the current schedules for the Assurance and Risk Committee, Information Assurance and Cyber Security Committee and Remuneration Committee will be arranged with the Committee Chairs and appropriate Executive Directors.

## 4 Resources

It is anticipated that the proposal will not significantly impact the amount of staff time in administering the Board meetings.

### 4.1 Cost Estimate

It is anticipated that this proposal will not significantly impact the overall cost of administering the Board meetings.

The cost for live streaming and recording is estimated to be in the region of £35,000 per annum.

## 5 Actions Required of the Board

1. The Board is requested to comment on, and endorse the proposed format of future Board meetings.
2. The Board is requested to comment on, and endorse the proposed schedule of future Board meetings.
3. Note and comment on the proposed corporate governance meeting schedule for the year 2016-17 on page 6, overleaf.

**Proposed Corporate Governance Meeting Schedule the Year 2016/17**

**HSCIC Board**

Month	Type	Date	Time	Location	Notes
Apr-16	Board Business Meeting	13/04/2016	10:30 - 16:00	London	
May-16	Public Board	04/05/2016	10:30 - 16:00	London	Statutory
Jun-16	Public Board - Accounts	08/06/2016	12:30 - 14:40	Leeds	Statutory
Jul-16	Board Business Meeting	27/07/2016	10:30 - 16:00	Leeds	
Aug-16	-	-	-	-	
Sep-16	Public Board - seminar	07/09/2016	10:00 - 16:30	London	Statutory
Oct-16	Board Business Meeting	26/10/2016	10:30 - 16:00	London	
Nov-16	Public Board - seminar	30/11/2016	10:00 - 16:30	Leeds	Statutory
Dec-16	Board Business Meeting	14/12/2016	10:30 - 16:00	Leeds	
Jan-17	Public Board	01/02/2017	10:30 - 16:00	London	Statutory
Feb-17	Board Business Meeting	01/03/2017	10:00 - 16:30	London	
Mar-17	Public Board - seminar	29/03/2017	10:30 - 16:00	Exeter	Statutory

**Assurance and Risk Committee**

Month	ARC	Date	Time	Location
Apr-16	-	-	-	-
May-16	-	-	-	-
Jun-16	-	08/06/2016	10:30 - 12:00	Leeds
Jul-16	-	-	-	-
Aug-16	-	31/08/2016	10:00 - 13:00	London
Sep-16	-	-	-	-
Oct-16	-	-	-	-
Nov-16	-	16/11/2016	10:00 - 13:00	London
Dec-16	-	-	-	-
Jan-17	-	18/01/2017	13:00 - 16:00	London
Feb-17	-	-	-	-
Mar-17	-	15/03/2017	10:00 - 13:00	London

**Information Assurance and Cyber Security Committee**

Month	IACSC	Date	Time	Location
Apr-16	-	-	-	-
May-16	-	18/05/2016	13:30 - 16:00	London
Jun-16	-	-	-	-
Jul-16	-	20/07/2016	13:30 - 16:00	London
Aug-16	-	-	-	-
Sep-16	-	28/09/2016	13:30 - 16:00	London
Oct-16	-	-	-	-
Nov-16	-	16/11/2016	13:30 - 16:00	London
Dec-16	-	-	-	-
Jan-17	-	18/01/2017	10:00 - 12:30	London
Feb-17	-	-	-	-
Mar-17	-	15/03/2017	13:30 - 16:00	London



## Board meeting – Public session

<b>Title of paper:</b>	<b>2014/15 Annual Accounts briefing</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 04 (a)
Paper presented by:	Carl Vincent, Director of Finance and Corporate Services
Paper prepared by:	Carl Vincent, Director of Finance and Corporate Services
Paper approved by: (Sponsor Director)	Carl Vincent, Director of Finance and Corporate Services
Purpose of the paper:	To update the Board on progress of the Annual Report and Accounts and delegate the Chief Executive the authority to make minor changes to drafting if required.
Key risks and issues:	NAO still to complete their audit review which may result in a material change following the Board.
Patient/public interest:	
<b>Actions required by the board:</b>	To approve the Annual Report and Accounts and delegate the Chief Executive the authority to make minor changes to drafting if required.

# **2014/15 Annual Report and Accounts Briefing paper**

**Author**            **Carl Vincent**  
**Date**                **8 June 2015**

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# 1 Background

The purpose of this briefing paper is to:

- Provide a short summary of the key points for consideration
- Enable the Board to approve the Report and Accounts

## 1.1 Status of audit

The audit has been delayed primarily due to the amount of time it has taken to evidence the full audit trail for the non-current assets, particularly in relation to one particular supplier. This has had a knock on effect on other elements of the audit process. We are still aiming to lay the accounts to the original deadline.

## 1.2 Papers

The Annual Report and Accounts presented reflect the latest known position including the NAO observations made to date. However it is recognised that a further thorough drafting review still needs to be undertaken to ensure grammatical presentation and numerical accuracy, although we do not expect there to be significant redrafting. We are also aware that the NAO have not completed all their internal reviews.

There has been considerable feedback to the Annual Report and Governance Statement by members of the Assurance and Risk Committee, where two telephone conference meetings have been held to review progress and input comments.

## 1.3 Audit Process

Whilst we have made significant progress from last year the production of the year end accounts and the subsequent audit has continued to challenge our existing processes and controls, and significant further work will be required in the coming year to build on the improvements already made.

As expected, the reconciliation of the non-current assets has been the major area of work. In preparation for the audit a significant degree of effort has been spent on:

- Undertaking a full asset verification exercise, which primarily involved a physical check of assets in situ, supported by the use of various tracking tools and confirmation from staff of their individual equipment. This process was made especially difficult as the hosting centres and the Leeds offices were reorganised during the process,
- Updating the IT asset management system (CMDDB) for the physical count, some 24,400 assets in total,
- Creating a link (via invoice number and a newly created asset code) between the CMDDB and the Financial fixed asset register and undertaking a detailed reconciliation between the two,
- Reconciling both registers back to the nominal ledger,
- Identifying and reviewing internally generated software,
- Undertaking a review of the GPES asset valuation.

These exercises resulted in a large volume of adjusting entries in the final quarter of the year which took some time to reconcile and reflect correctly.



We were able to satisfactorily evidence most of the NAO sample checks, especially for prior year assets. However, the recording of in-year additions from one major supplier proved problematic to evidence to all source documents, and also to show the consistent treatment of the correct capitalisation policies. We have however been able to satisfactorily reconcile expenditure in total for this supplier.

We believe the outcome is that we can evidence all items contained on the CMDB. It may be that it is understated, but we believe not to a material extent.

Finance are in the process of implementing a new asset register which will allow for a more rigorous control environment. An end to end process review for the procurement of IT equipment and their recording has been undertaken and will be implemented during 2015/16.

The total audit process has yet to be finalised. We do not believe that the NAO have any material items left outstanding, however they are still to complete their full review of the text and accounts.

## 1.4 Key issues for consideration

The principle areas for consideration are:

- The Annual Report and Accounts contains a limited review of the organisation, now consisting of the CEO foreword and a slightly expanded Strategic Report. This was agreed by the Board because significant information is already publicly available to provide information to interested parties, and transparency would be enhanced by minimising the length of the document by limiting the content to the key issues,
- References to prior organisations are still required to explain prior year comparatives
- The Governance Statement recognises that the control environment for the organisation is still developing. This is reflected by a “Limited” internal audit assessment
- There are some significant “losses and special payments” due to the impairment of GPES, items which are technically deemed “lost” following the reconciliation of the fixed asset register and the abandonment of the development of the Clinical Indicator project
- Certain disclosures in the Remuneration Report were subject to a considerable amount of discussion, particularly how to show the readers more clarity in the methods of pension calculation. However we believe we have reached a satisfactory position.

However, subject to the NAO final review, we believe the Accounts as presented represent a fair reflection of the position.

## 2 Actions Required of the Board

You are recommended to approve the Annual Report and Accounts and delegate the Chief Executive the authority to make minor changes to drafting if required.

Should any material issues arise in the closing stages of the NAO work we will make the board aware and take the appropriate action.

## Board meeting – Public session

<b>Title of paper:</b>	<b>HSCIC Business Plan 2015/16</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 05 (a)
Paper presented by:	Carl Vincent, Director of Finance and Corporate Services
Paper prepared by:	Linda Whalley, Assistant Director for Strategy and Policy
Paper approved by: (Sponsor Director)	Carl Vincent, Director of Finance and Corporate Services
Purpose of the paper:	Formal approval of the HSCIC corporate business plan for 2015/16
Please specify the key risks and issues:	Failure to adopt an approved business plan would place the HSCIC in breach of its Framework Agreement with the Department of Health. This would impact adversely on the HSCIC strategic risk relating to legal and statutory obligations.
Patient/public interest:	<p>Patients and the public interest resides in:</p> <p>Confidence that HSCIC plans and delivers its business effectively</p> <p>Use of existing systems and services supported by delivery activities set out in this business plan</p> <p>Use of future systems and service that will be made possible by development activities set out in this business plan</p>
<b>Actions required by the board:</b>	The Board is asked to note this update and approve the corporate business plan for publication.

# The HSCIC's Business Plan

**Linda Whalley, Assistant Director for Strategy and Policy**  
**2<sup>nd</sup> June 2015**

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## Background

The draft Business Plan was submitted to the Board in March 2015. As we were unable to publish the Business Plan during the pre-election period, the Board requested that we should use this time to review the Plan should be reviewed to ensure consistency with our own strategy and with the need to support the implementation of the National Information Board's Framework for Action.

## The Business Plan

The Plan has been reviewed in detail, and is submitted (under separate cover) to the Board meeting for final review and approval. It sets out our priorities and our key commitments grouped under our strategic themes. It also provides the information that the Department of Health requires of its Arms Length Bodies.

The Plan does not replicate the detail that is held in the Directorates' own Business Plans. It also does replicate the detail relating to the National Information Board's workstreams, as the "NIB roadmaps" are being finalised in early June, with a view to being launched at the National Information Board's meeting on the 17<sup>th</sup> June.

We will now determine how the full set of commitments will be used in the performance monitoring and reporting, including how these will be reported to the Board.

## Actions Required of the Board

The Board is asked to note this update and approve the corporate business plan for publication.

## Board meeting – Public session

<b>Title of paper:</b>	<b>Direction from NHS England Maternity Services data set – ratification of Chair’s action</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 06 (a)
Paper presented by:	Andrew MacLaren, Director Information and Analytics
Paper prepared by:	Heather Pinches, Programme Manager Information and Analytics Directorate
Paper approved by: (Sponsor Director)	Andrew MacLaren, Director Information and Analytics
Purpose of the paper:	To bring the Direction to the Board in order to ratify the Chair’s action undertaken on 12 May 2015.
Key risks and issues:	The Direction provides a legal basis for HSCIC to collect the data and was required to be in place before data started flowing on 1 June. It was originally thought that the commencement order covered this collection, however, further legal advice and the advice of the HSCIC Caldicott Guardian and Information Governance professionals concluded that a Direction was needed. The Board were notified of this fact at the last Board meeting and a Chair’s action to accept the Direction was taken on 12 May 2015.
Patient/public interest:	Indirect
<b>Actions required by the board:</b>	Ratification of the Chair’s action to accept the Direction from NHS England

# **Direction from NHS England for Maternity Services data set**

**Ratification of Chair's Action by the HSCIC Board**

**Andrew MacLaren**

**10<sup>th</sup> June 2015**



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## Background

The Maternity Services data set (MSDS) forms part of an overall data set for Maternity and Children's Health Services, called the Maternity and Children's Data Set (MCDS). It is a key driver to achieving better outcomes of care for mothers, babies, children and younger people and incorporates the following individual information standards:

- Maternity Services Data Set (MSDS).
- Children's and Young People's Health Services (CYPHS) data set.<sup>1</sup>
- Child and Adolescent Mental Health Services (CAMHS) data set.<sup>2</sup>

The MSDS is intended for secondary uses purposes using data collected by Maternity providers as a result of direct care of the patient. Information in the data set will be extracted from provider IT systems from the data recorded as part of the care process. The MSDS will be implemented by all NHS-commissioned Maternity Services in England who have electronic data collection systems, including acute trusts, foundation trusts and private services commissioned by the NHS. The maternity care pathway covers antenatal, intrapartum and postnatal/postpartum episodes.

## Issues

The MSDS was planned to flow from 1<sup>st</sup> June 2015 and received approval from the Information Standards Board as an information standard in May 2012. It was originally thought that the commencement order covered this collection as it has been in development prior to the Health and Social Care Act coming in force. However, further legal advice and the advice of the HSCIC Caldicott Guardian and Information Governance professionals concluded that a Direction was needed. As the data was due to flow before the next scheduled Board meeting and a Direction was needed to give the legal basis the only option was for a Chair's action to be taken. The discussions were concluded around the time of the last Board meeting (29<sup>th</sup> April) when the Board was notified verbally of this issue and agreement sought to pursue the Chair's action which was taken on 12th May 2015. The HSCIC procedures are that any decision made through a Chair's action must be ratified at the following Board meeting.

## Strategy Implications

This proposal is in line with the Organisational Strategy to bring more data collection into the HSCIC and recognises that the HSCIC is best positioned to provide high quality data collection and reporting from NHS funded care providers in England. The MCDS is an existing project on the HSCIC portfolio with the data sets being delivered and transitioned to a business as usual service by April 2016. Work on the Maternity and Children's Data Set remains aligned to the policy direction from DH and NHS England.

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<sup>1</sup> The CYPHS Direction was approved at the Board on 29<sup>th</sup> April 2015.

<sup>2</sup> Child and Adolescent Mental Health Services (CAMHS) data set – is now incorporated into the Mental Health Services Data set (MHSDS) alongside current Mental Health and Learning Disability data set (MHLDDS) and the draft Direction is on the agenda for discussion at the Board on 10<sup>th</sup> June 2015.

## Stakeholder Implications

Key stakeholders include the Department of Health and NHS England were all pressing for the commencement of the collection by the HSCIC in line with the agreed timetable. The delivery of the maternity data set is also a ministerial priority.

## Financial Implications

The project is sponsored by the Department of Health (DH), and is commissioned by NHS England. MCDS is a legacy project, for which HSCIC is the supplier, and is justified through a Cabinet Office approved Full Business Case (FBC approved by Richard Douglas for DH on 12 February 2013, and then by Cabinet Office in May 2013). The FBC covers implementation costs and business as usual (BaU) activities to the end of the 2016/17 financial year. NHS England has confirmed budget allocation for 2015/16 in line with the FBC.

## Actions Required of the Board

*The Board is asked to ratify the decision to accept the Direction for the Maternity Services data set which was agreed through a Chair's action on 12<sup>th</sup> May 2015.*



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## DIRECTIONS

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### NATIONAL HEALTH SERVICE, ENGLAND

#### The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Maternity Services) Directions 2015

The National Health Service Commissioning Board gives the following Directions to the Health and Social Care Information Centre in exercise of the powers conferred by sections 254(1), (3) and (6) of the Health and Social Care Act 2012.

In accordance with section 254(5) of the Health and Social Care Act 2012, the National Health Service Commissioning Board has consulted the Health and Social Care Information Centre before giving these Directions.

#### Citation, commencement and interpretation

1. These Directions may be cited as The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Maternity Services) Directions 2015 and shall come into force on 1 June 2015.
2. In these Directions—
 

“The 2012 Act”	means the Health and Social Care Act 2012 <sup>1</sup> ;
“The Board”	means the National Health Service Commissioning Board <sup>2</sup> ;
“Information Standards Notice ISB 1513 ”	The notice of Information Standard ISB 1513 issued by SCCI;
“HSCIC”	means the Health and Social Care Information Centre <sup>3</sup> ;

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<sup>1</sup> 2012 c7

<sup>2</sup> The National Health Service Commissioning Board was established by section 1H of the National Health Service Act 2006 (2006 c 41.), and operates as NHS England.

<sup>3</sup> The Health and Social Care Information Centre is a body corporate established under section 252(1) of the Health and Social Care Act 2012

“Information Standard ISB 1513”	is the formal document with unique reference number ISB 1513 which defines the technical criteria, content, methods, processes and practices for collection of the Maternity Services Dataset and which was approved by SCCI under the non-statutory process for development of information standards by the Information Standards Board for health and social care appointed by the Department of Health Director General for Informatics which operated until 31 March 2014;
“Relevant Organisation”	means an organisation type that is listed under “applies to” in the Specification;
“SCCI”	means the Standardisation Committee for Care Information;
“Specification”	means the Maternity Services Data Set V1.5 - Specification 2.0 version 1.2 dated 28/03/2014 (Document ID: ISB 1513 Amd 45/2012) which is within Information Standard ISB 1513 and annexed to these Directions at Annex A;
“Technical Output Specification”	means the Maternity Services Secondary Uses Dataset (MSDS) Data Set Output Specification version 1.8.9 dated 15/01/2014 which is within Information Standard ISB 1513 and annexed to these Directions at Annex B.

### **Establishing and Operating the maternity Services Information System**

3. – (1) Pursuant to its powers under sections 254(1) and 254(6) of the 2012 Act, the Board directs the HSCIC to establish and operate a system for the collection of the information described in sub-paragraph (2) from the Relevant Organisations, such system to be known as “the Maternity Services Information System”.
  - (2) The information referred to in sub-paragraph (1) is the information described in the Technical Output Specification.
  - (3) The Board directs HSCIC to carry out the activities described in sub-paragraph (1) in accordance with the criteria in part 1 of the Specification and generally in such a way as to enable and facilitate compliance with Information Standards Notice ISB 1513.

### **S254(3) - Requirement for these Directions**

4. In accordance with section 254(3) of the 2012 Act, the Board confirms that it is necessary or expedient for it to have the information which will be obtained through

the HSCIC complying with these Directions in relation to the Board's functions in connection with the provision of NHS Services. In particular the information obtained through compliance with these Directions will facilitate or enable the achievement of the purposes of Information Standard ISB 1513 that are described in the Specification.

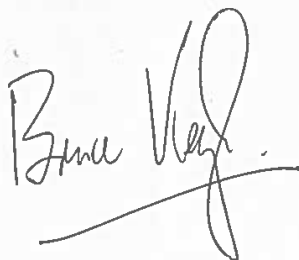
**Fees and Accounts**

5. Pursuant to sub-section 254(7) of the 2012 Act, HSCIC is entitled to charge the Board a reasonable fee in respect of the cost of HSCIC complying with these Directions and the Board acknowledges such right and agrees to meet such reasonable fee charged by HSCIC.
6. The HSCIC must keep proper accounts, and proper records in relation to the accounts, in connection with the Maternity Services Information System.

**Review of these Directions**

7. These Directions will be reviewed when Information Standard ISB 1513 is replaced by an information standard published by the Board under section 250 of the 2012 Act. This review will include consultation with the HSCIC as required by sub-section 254(5) of the 2012 Act.

**Signed by authority of the NHS Commissioning Board**



**Sir Bruce Keogh  
Caldicott Guardian**

**[14/05/15]**

## **Annex A – Maternity Services Data Set Standard Specification**



1513452012spec.pdf

## **Annex B – Maternity Services Data Set Technical Output Specification**



1513452012ospec.xl  
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## Board meeting – Public session

<b>Title of paper:</b>	<b>Direction from NHS England for Mental Health Services data set</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 06 (b)
Paper presented by:	Andrew MacLaren, Director Information and Analytics
Paper prepared by:	Heather Pinches, Programme Manager Information and Analytics Directorate
Paper approved by: (Sponsor Director)	Andrew MacLaren, Director Information and Analytics
Purpose of the paper:	To enable the views of the Board to be considered as part of the formal consultation on the Direction prior to it being signed by NHS England. This consultation is in line with our agreed process.
Key risks and issues:	The Direction provides a legal basis for HSCIC to collect the data and must be in place before data can flow from 1 January 2016. The Standardisation Committee for Care Information (SCCI) require a Direction to be in place as part of their pre-approval checks in recommending the Information Standards Notice (ISN) for publication. Both the ISN and Direction are then issued by NHS England. It is also good practice that at least 6 months' notice is given to the health system of such changes. Therefore, the draft is Direction brought to the Board to enable all key deadlines to be met. If the Direction is delayed then there may be an impact on the delivery of the data set to the agreed timetable with considerable reputational risks for the HSCIC.
Patient/public interest:	Indirect
<b>Actions required by the board:</b>	Consider the draft Direction and to identify any issues or concerns as part of the formal consultation process.

# Direction from NHS England for Mental Health Services data set

Formal consultation with the HSCIC Board

Andrew MacLaren

10<sup>th</sup> June 2015

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## Background

The Mental Health Services Data Set (MHSDS) consolidates, enhances and replaces the following standards:

- ISB 0011 Mental Health and Learning Disabilities Data Set (MHLDDS)
- ISB 1072 Child and Adolescent Mental Health Services (CAMHS) Data Set
- ISB 1509 Mental Health Care Clusters
- ISB 1078 Mental Health Clustering Tool
- ISB 0154 KP90.

MHSDS also incorporates additional requirements in support of learning disability services and Children and Young People's Improving Access to Psychological Therapies (CYP IAPT). It also includes a revised Child and Adolescent Mental Health Services (CAMHS) data set developed as part of the Maternity and Children's Data Set (MCDS)<sup>1</sup> project.

The MHSDS is a patient level, output based, secondary uses data set which will deliver robust, comprehensive, nationally consistent and comparable person-based information for children, young people and adults who are in contact with Mental Health Services. As a secondary uses data set it intends to re-use clinical and operational data for purposes other than direct patient care. Key changes in comparison to the previous data sets include:

- Creation of a common structure in line with the referral-contact-activity structure of the Children and Young People's Health Services (CYPHS) data set. This supports the flow of children and adult mental health services data, reduces the burden of collection and enables equitable analysis across both settings.
- Addition of new data tables and items to enable the flow of clinical terminology, including SNOMED CT (for example, Coded Scored Assessment tables). This is in line with the overall aim of moving to SNOMED CT in all clinical settings by 2020, as set out in the National Information Board Framework for Action.
- Incorporation of data items from the CYP IAPT data set.
- Incorporation of data items to enable the capture of aspects of the learning disabilities census and Assuring Transformation data.
- Renaming of data items to conform to the NHS Data Model and Dictionary.
- Inclusion of additional data quality metrics to support validity of the data set.
- Incorporation of Mental Health Care Clusters into this information standard.

## Issues

The MHSDS is planned to be mandated for central flow from 1<sup>st</sup> January 2016. A Direction is needed in order to provide the legal basis for HSCIC to collect the data and must be in place before the data can flow. The Standardisation Committee on Care Information (SCCI) also requires a Direction to be in place as part of their pre-approval checks in recommending the Information Standards Notice (ISN) for publication. In line with recommended good practice the ISN should be published at least 6 months' in advance to give the health system

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<sup>1</sup> The Maternity and Children's data set project included the delivery of 3 separate data sets ie Maternity Services Data Set (MSDS), Children's and Young People's Health Services (CYPHS) data set and Child and Adolescent Mental Health Services (CAMHS) data set. The CAMHS data set is the final data one to be delivered.

time to prepare for these changes. This means that the Direction and ISN need to be published by 1<sup>st</sup> July 2015. Both the Direction and ISN are issued by NHS England.

In line with our agreed process the draft Direction is brought to the Board for formal consultation to enable the views of the Board to be fed back to NHS England prior to the Direction being issued. It has been reviewed internally by EMT, Information Governance and HSCIC lawyers and is attached at appendix 1.

## Strategy Implications

This proposal is in line with the Organisational Strategy to bring more data collection into the HSCIC and recognises that the HSCIC is best positioned to provide high quality data collection and reporting from NHS funded care providers in England.

By bringing together and continuing to build on and rationalise the existing information standards related to mental health HSCIC is able to better meet customer needs as well as delivering our statutory duty to reduce burden on the system.

The improvement of mental health services remains a core policy priority for DH and NHS England. The development of robust data sets on mental health services in turn ensures better services for patients, better commissioning, better regulation and greater transparency.

## Stakeholder Implications

Key stakeholders include the Department of Health and NHS England and all are pressing for the commencement of the collection by the HSCIC in line with the agreed timetable.

If the Direction is delayed then there may be an impact on the delivery of the data set to the agreed timetable with considerable reputational risks for the HSCIC.

## Financial Implications

The revised CAMHS data set is part of the MCDS and is a legacy project, for which HSCIC is the supplier. This is funded through a Cabinet Office approved Full Business Case (FBC) which covers implementation costs and business as usual (BaU) activities to the end of the 2016/17 financial year. NHS England has confirmed budget allocation for 2015/16 in line with the FBC.

The various existing mental health data sets have previously been funded through Grant in Aid (GIA). However, negotiations are on-going with DH to agree a work package to be added to the Provision of Services Agreement that clarifies the funding for this consolidated and enhanced dataset. These negotiations will be concluded in the next few weeks as SCCI also require funding arrangements to be clarified as part of their pre-approval checks.

## Actions Required of the Board

*The Board is asked to consider the draft Direction and to identify any issues or concerns as part of the formal consultation process.*

## Appendix 1 Draft Direction

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### DIRECTIONS

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## NATIONAL HEALTH SERVICE, ENGLAND

### The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Mental Health Services) Directions 2015

The National Health Service Commissioning Board gives the following Directions to the Health and Social Care Information Centre in exercise of the powers conferred by sections 254(1), (3) and (6) of the Health and Social Care Act 2012.

In accordance with section 254(5) of the Health and Social Care Act 2012, the National Health Service Commissioning Board has consulted the Health and Social Care Information Centre before giving these Directions.

#### Citation, commencement and interpretation

1. These Directions may be cited as The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Mental Health Services) Directions 2015 and shall come into force on **[insert date]**.

2. In these Directions—

“The 2012 Act”	means the Health and Social Care Act 2012 <sup>2</sup> ;
“The Board”	means the National Health Service Commissioning Board <sup>3</sup> ;
"Information Standard"	means a document containing standards in relation to the processing of information as provided for in section 250(2) of the 2012 Act. References to the number and title of an Information Standard are to the number and title given to a particular Information Standard within the Information Standards Notice;
"Information Standards Notice"	means the document published by or on behalf of the Board or the Secretary of State to confirm the making or amendment of an Information Standard, summarise its purpose and scope, reference the documentation in which the

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<sup>2</sup> 2012 c7

<sup>3</sup> The National Health Service Commissioning Board was established by section 1H of the National Health Service Act 2006 (2006 c 41.), and operates as NHS England.

	details of the Standard are set out and mandate compliance with it;
“HSCIC”	means the Health and Social Care Information Centre <sup>4</sup> ;
“Relevant Organisation”	means an organisation type that is listed under “applies to” in the Specification;
“SCCI0011”	is the unique reference number for the Mental Health Services Data Set Information Standard;
“Specification”	means the Mental Health Services Data Set Standard Specification that has been published by the Board version 1.0 dated <i>DD/MM/YYYY</i> (Document ID: SCCI1011 Amd <i>MM/YYYY</i> ) and annexed to these Directions at Annex A or any subsequent amended version of the same document published by the Board which supersedes version 1.0;
“Technical Output Specification”	means the Mental Health Services Data Set Technical Output Specification version 1.0.5 dated 08/05/2015 and annexed to these Directions at Annex B or any subsequent amended version of the same document which is referred to in an amended version of the Specification and notified to HSCIC on publication of the amended Specification.

### Establishing and Operating the Mental Health Services Information System

3. – (1) Pursuant to its powers under sections 254(1) and 254(6) of the 2012 Act, the Board directs the HSCIC to establish and operate a system for the collection of the information described in sub-paragraph (2) from the Relevant Organisations, such system to be known as “the Mental Health Services Information System”.

(2) The information referred to in sub-paragraph (1) is the information described in the Technical Output Specification.

(3) The Board directs HSCIC to carry out the activities described in sub-paragraph (1) in accordance with the criteria in part 1 of the Specification and generally in such a way as to enable and facilitate compliance with Information Standards Notice SCCI0011.

### S254(3) - Requirement for these Directions

4. In accordance with section 254(3) of the 2012 Act, the Board confirms that it is necessary or expedient for it to have the information which will be obtained through the HSCIC complying with these Directions in relation to the Board’s functions in connection with the provision of NHS Services. In particular the information obtained through compliance with these

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<sup>4</sup> The Health and Social Care Information Centre is a body corporate established under section 252(1) of the Health and Social Care Act 2012

Directions will facilitate or enable the achievement of the purposes of Information Standard SCCI0011 that are described in the Specification.

**Fees and Accounts**

5. Pursuant to sub-section 254(7) of the 2012 Act, HSCIC is entitled to charge the Board a reasonable fee in respect of the cost of HSCIC complying with these Directions and the Board acknowledges such right and agrees to meet such reasonable fee charged by HSCIC.
6. The HSCIC must keep proper accounts, and proper records in relation to the accounts, in connection with the Mental Health Services Information System.

**Review of these Directions**

7. These Directions will be reviewed when the Board approves any amendment to the Information Standard SCCI0011. This review will include consultation with the HSCIC as required by sub-section 254(5) of the 2012 Act.

**Signed by authority of the NHS Commissioning Board**

**Sir Bruce Keogh  
Caldicott Guardian**

**[INSERT DATE]**



**Annex A – Mental Health Services Data Set Standard Specification**

*SCCI0011isnDraftV02 – File removed for Board report. A copy can be provided on request*

**Annex B – Mental Health Services Data Set Technical Output Specification**

*MHDS\_v1 0\_Technical\_Output\_Specification\_PreRelease.xlsm – File removed for Board report.  
A copy can be provided on request*



## Board meeting – Public session

<b>Title of paper:</b>	<b>HSCIC &amp; Monitor Collaboration Agreement</b>
Board meeting date:	10 June 2015
Agenda item no:	HSCIC 15 02 06 (c)
Paper presented by:	Tom Denwood, National Provider Support Director
Paper prepared by:	Martin Orton, Head of Customer and Account Services
Paper approved by: (Sponsor Director)	Tom Denwood, National Provider Support Director
Purpose of the paper:	To agree the strategic intent and principles for how Monitor and the HSCIC work together for the benefit of both organisations and the health and care system.
Key risks and issues:	<p>Monitor is dependent on data services, many of which are provided by HSCIC. The Agreement reflects the dependencies between the organisations and establishes a commitment to collaborate and cooperate while respecting each other's responsibilities, statutory foundations and independence.</p> <p>The Agreement does not commit the HSCIC to any specific activities; these would be agreed through the joint governance board outlined in the agreement, and detailed in a Provision of Services Agreement if appropriate.</p> <p>The Monitor Board approved the Agreement for publication on 28 May 2015, subject to no material changes being requested by the HSCIC as a result of its review and approval process.</p> <p>It complements HSCIC and Monitor's wider collaborative working through the National Information Board.</p>
Patient/public interest:	Indirect. Collaboration with Monitor should enable both parties to operate more effectively in their respective roles and, in line with established public policy, to reduce the burden of data collection on the system over time.
<b>Actions required by the board:</b>	To approve the (non-binding) Collaboration Agreement prior to sign off by the HSCIC Chair and CEO.

# Collaboration Agreement

between

**Monitor**

and

**The Health and Social Care Information Centre**

## Revision History

Version	Date	Summary of Changes
0.10	6 Dec 2013	Draft to share with Monitor
0.11	2 Jan 2014	Updated following initial Monitor review
0.12	30 Jan 2014	ISCG changed to NIB
0.13	24 Feb 2014	Monitor amendments
0.14	3 April 2014	Monitor amendments
0.15	12 Dec 2014	Amendments following Monitor-HSCIC senior management meeting
0.16	05 Feb 2015	Amendments following Monitor's TAC Meeting
0.17	18 Feb 2015	Final Amendments following TAC review
0.18	23 Mar 2015	HSCIC amendments
0.19	25 Mar 2015	Minor HSCIC amendment
0.20	13 May 2015	Corrections to spelling and membership
0.21	20 May 2015	Added reference to legal duty to cooperate
0.22	1 June 2015	Minor changes to spelling and an email address

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## Introduction

1. This agreement sets out the strategic intent and commitment of Monitor and the Health and Social Care Information Centre (HSCIC) to collaborate and cooperate to deliver common objectives for the benefits of patients and the taxpayer, while respecting our individual responsibilities, statutory foundations and independence.
2. Monitor uses data and information to understand and influence system performance, and supports the improvement of efficiency, quality and sustainability of health economies. The HSCIC is the national provider of data and information, IT systems and services and information standards (working through the Standardisation Committee for Care Information). These activities are inextricably linked. Effective joint working will, therefore, be instrumental in supporting improvements across the NHS.
3. This document reflects the duty in the Health and Social Care Act 2012 of Monitor and the HSCIC to co-operate with each other in the exercise of their respective functions. This document is not legally binding and cannot constrain either organisation in exercising their respective roles and responsibilities as set out in the Health and Social Care Act 2012 and under direction from the Secretary of State.

## Purpose

4. Monitor and the HSCIC agree to work together in a way which supports the overall system through the safe and effective sharing of information to enable care and understanding of care and drive positive change.
5. Monitor and HSCIC share the vision of supporting and enabling the delivery of safe, sustainable and high quality care to improve patient outcomes. We will achieve this by working together to a set of principles described below that enable each organisation to achieve its role more effectively than if operating in isolation.
6. This agreement sits alongside other arrangements which both Monitor and the HSCIC have in place with organisations operating within the wider health and social care system such as NHS England, CQC, Public Health England and NICE, noting that the National Information Board (NIB), provides the forum for agreeing joint priorities.

## Principles

7. Monitor and the HSCIC will work together effectively by:
  - Defining coherent information strategies for collecting, analysing and disseminating data required to inform effective decision making.
  - Defining a clear programme of work to enable long-run, safe access to data to enable Monitor to complete its statutory duties within required timelines.
  - Working together to review strategic and operational areas of overlap to:
    - Align our approaches and establishing a joint roadmap
    - Establish clear boundaries and touch points
    - Avoid duplication where practical

- Minimise burden by working collaboratively on interdependent systems
  - Adopt common information or technical standards where possible
  - Define appropriate, formal governance, where impacts or risks are high, and
  - Allow for independence of delivery but synchronisation of key initiatives.
- Reviewing the roadmap on an agreed, regular cycle to incorporate changes.
  - Establishing a simple and effective process for agreeing priorities between the HSCIC and Monitor as well as through the NIB.
  - Committing to effective delivery where the other organisation is reliant on outputs.
  - Establishing clear mechanisms for transferring authority and/or funding where necessary to complete essential tasks.
  - Sharing the output of our joint working to influence broader unified thinking through the National Information Board (NIB).
8. A clear process will be agreed for commercial and funding arrangements for services or projects, aligned with the NIB and the HSCIC commissioning process.
9. Our collaboration will give due regard to the following core principles:
- We will listen to people who use services and act in their interests
  - We will have regard to each other in decisions about priorities (bearing in mind the role of the NIB)
  - Our activities will be proportionate, accountable, consistent, transparent and targeted
  - We will understand and give due regard to each others' unique expertise and roles to add value through sharing of knowledge and expertise
  - We will make sure intelligence is proactively and consistently pooled and shared to identify emerging issues early and respond to concerns
  - We will give due consideration to both joint working and secondment of staff between the organisations to improve information sharing and working relations
10. Data and information must be collected and made available to Monitor, by one or other party, for Monitor to achieve its function.
11. Data and information produced by Monitor as part of its functions should be published by the HSCIC in line with its intended functions as the source of National data and information, where it is appropriate for wider dissemination.
12. Monitor will use existing national indicators where possible, and where suitable use the Indicator Assurance process to assure new indicators.
13. We will manage national requests for information using the Standardisation Committee for Care Information (SCCI) or replacement processes and ensure that we:
- Only collect information from service providers where there is a clear business purpose which justifies the administrative burden required to provide the information;
  - Work together to establish the HSCIC as the national base for information which is collected or extracted from local systems;



- Ensure that the collections and extractions are aligned with robust professional practice, such as NICE or other professional guidelines, and information standards;
  - Reduce and retire those national requests for information that are no longer needed or justifiable.
  - Work together to agree reduction in the burden of data collections that are undertaken outside the national process managed by the HSCIC.
14. We will work collaboratively to:
- Encourage care providers in the adoption of technology and systems which support the provision of safe, effective and efficient care, and the use of national information and interoperability standards
  - Make better use of technology to introduce more efficient ways of accessing, sharing and acquiring information, especially by moving away from manual transfers or collections of data to electronic transfers and automated extractions of data directly with local systems, and using existing data held nationally.

## Governance and Contacts

15. Regular contact will be formalised at operational and strategic levels. A Joint Collaboration Board will oversee the effectiveness of our collaboration and will be held accountable by our Chief Executives.

### Senior team to Senior Team

16. Monitor and the HSCIC will hold a senior team to senior team meeting on at least an annual basis to agree the strategic objectives for our collaboration and review the effectiveness of our collaboration and the impact it is having.

### HSCIC and Monitor Joint Collaboration Board

17. The Joint Collaboration Board will manage strategic and developmental issues and oversee the effectiveness and impact of our collaboration. Each party will nominate representatives for the group. The group will agree its remit and ways of working based on the principles in this agreement and the senior team to senior team meetings. This Board will meet on a quarterly basis, with one of the quarterly meetings becoming the annual senior team meeting.

### Operational Collaboration

18. Monthly assessment meetings will be held between Monitor and the HSCIC. Each party will nominate a Relationship Manager for overseeing the operation of the agreement and related services. The Relationship Managers and other key contacts are listed in Annex 1. The parties will notify each other as soon as possible if the key contact changes.
19. The Relationship Managers will be the prime point of contact between the organisations, in particular for:
- Managing and developing the relationship, including understanding the needs, capabilities and objectives of the organisations, and sharing strategies and plans.
  - Highlighting and resolving issues
  - Facilitating new contacts, services or opportunities for learning and sharing.

## Operation of the Agreement

20. The agreement will last until terminated by either party in writing, giving at least 30 days' notice. It should be reviewed at least annually to ensure it continues to represent the objectives and intentions of the two organisations in respect of how they work together.
21. Terms and conditions for the provision of services between the organisations will be detailed in a separate agreement, with schedules to define the particular services, including data sharing.

**Signed**

**Signed**

\_\_\_\_\_  
HSCIC Chairman

\_\_\_\_\_  
Monitor Chair

Date:

Date:

**Signed**

**Signed**

\_\_\_\_\_  
HSCIC Chief Executive

\_\_\_\_\_  
Monitor Chief Executive

Date:

Date:

## Annex 1 – Key Contacts

### Relationship Managers

#### HSCIC

Martin Orton  
Head of Customer and Relationship Services  
Email: martinorton@hscic.gov.uk  
Tel: 07867 800153

#### Monitor

Peter Sinden  
Chief Information Officer  
Email: Peter.Sinden@Monitor.gov.uk  
Tel: 0203 747 0711

### Joint Collaboration Board

#### HSCIC

Tom Denwood – Director of National Provider Support  
Email: tom.denwood@hscic.gov.uk  
Tel: 0113 254 7038

Andrew Maclaren – Director of Information and Analytics  
Email: a.maclaren@hscic.gov.uk  
Tel: 0113 2416171

Martin Orton - Head of Customer and Relationship Services  
Email: martinorton@hscic.gov.uk  
Tel: 07867 800153

#### Monitor

Adrian Masters - Managing Director of Sector Development  
Email: Adrian.Masters@monitor.gov.uk  
Tel: 0203 747 0044

Toby Lambert – Director of Pricing  
Email: toby.lambert@Monitor.gov.uk  
Tel: 0203 747 0359

Peter Sinden - Chief Information Officer  
Email: Peter.Sinden@Monitor.gov.uk  
Tel: 0203 747 0711