

Minutes of the meeting

National Data Guardian's Panel Meeting



11.01.22



Microsoft Teams Virtual Meeting

Panel members present:

Dr Nicola Byrne
Adrian Marchbank
Andrew Hughes
Dr Chris Bunch
Dr Edward Dove
Eileen Phillips
Dr Fiona Head
Prof Ian Craddock

Prof James Wilson
Dr Joanne Bailey
John Carvel
Maisie McKenzie
Rob Shaw

Observers in attendance:

David Riley
Dr Arjun Dhillon

NDG Office staff in attendance:

Karen Swift
Ross Thornton
Ryan Avison
Dr Vicky Chico
Layla Heyes
Carl Beesley

Guests:

Michael Chapman
Jackie Gray
NHS Digital Team

1. Welcome, apologies, and declarations of interest:

The National Data Guardian (NDG) Dr Nicola Byrne chaired the meeting. Apologies were received from panel members David Watts, Dr Geoffrey Schrecker and Rakesh Marwaha.

Andrew Hughes attended the meeting between 13:10-14:00.

Maisie McKenzie attended the meeting between 14:00-16:00.

Dr Arjun Dhillon signposted his conflict of interest on the NHS Digital Items. He sat in discussions for both items but did not participate.

No other declarations of interest pertaining to items on the agenda were recorded.

2. Minutes from previous meeting, actions, and decisions:

The minutes from the NDG's panel meeting held on 14 December 2022 were accepted as an accurate record of the meeting.

Ryan Avison provided an update on the two open actions.

All other actions were agreed as having been completed prior to this meeting.

3. 1589: Research and Clinical Trials, NHS Digital (NHSD), Strategic Context and Key Deliverables:

Michael Chapman, Director of Research and Clinical Trials and Jackie Gray, Solicitor & Executive Director, Privacy, Transparency and Ethics from NHS Digital attended panel to provide an update on NHS Digital's Research Services.

Panel members discussed the key themes from Michael's paper and made several observations on NHS Digital's work to support research. Panellists thought that social care can often come across as being an afterthought in these issues and asked if their future plans could include focussing on engagement with the social care sector.

Jackie Gray stated that transparency over the data the system collects, analyses and shares and with whom is a key principle of how NHSD operate and is a safeguard that will be taken forward in the NHSEI merger work as they design the new operating model and look at how those statutory functions will work in the future.

Panel members acknowledged that the merger of NHS Digital and NHSX with NHS England will of course have implications for data access functions and understood that the details of that are still being worked through.

The NDG thanked Michael and Jackie for attending and said it will be important to engage and watch the conversations to ensure the merger addresses all these issues.

4. 965: Retirement of General Practice Extraction Service (GPES) system and managing payments:

An NHS Digital team came to talk about GP data for payments and direct care, represented by a programme manager, the head of business and operational delivery, a programme director and communications lead.

They discussed some of the issues with the existing GPES system, including its primary role to manage data for direct care, GP contracts and payment needs. NHSD explained how GPES is old and has limitations on capacity and capability which are causing problems for the NHS to be able to manage new requirements for direct care and payments data effectively.

They presented a possible solution of moving existing data feeds into a new technology platform for collection and processing. The key difference using this new proposed system for payments is that data would need to be extracted initially in identifiable (rather than aggregated) form, thereby raising the question of how Type 1 opt outs are honoured. The group discussed their intention to ensure that trust, transparency and privacy protection are built into their approach for payments once GPES retires.

Panellists considered their proposal regarding payments and contracts and acknowledged that this was a problematic issue as processing of confidential patient information for the purpose of invoice validation does not fit within the definition of direct or individual care. However, the panel noted that data being processed for payments is a necessary consequence of direct care.

Panel members agreed that providers of care or services should receive payment and emphasised the need for transparency, discussing how any proposed changes to current arrangements would need to be communicated to patients, so that the programme can demonstrate its trustworthiness along the way.

The NDG and members of her panel thanked the team for attending the meeting to discuss this difficult issue and for continuing to listen to the NDG's feedback.

2022.01.11/4.1: The office to collate panel members feedback following the meeting and respond to NHS Digital with the NDG's comments.

5. Any Other Business:

No other items were raised by members in the meeting.