

Minutes of IM&T Steering Group

Friday 25th May 2018

15.00 – 17.30 pm

Meeting Room 2, King Edward VII Hospital, Windsor

Chair – Dr Wishav Goel

Present	Initials	Job Title & Organisation
Dr Wishav Goel	WG	Clinical Lead (EB CCG – Rep BA Locality) – Chair
Mark Sellman	MS	AD of Digital Transformation (NHS SCW)
Debbie Fraser	DF	Deputy Director of Finance (EB CCG)
Catherine Mullins	CM	Snr Project Manager (NHS SCW)
Alan MacKay	AM	Practice Manager (EB CCG – Rep WAM Locality)
Anshu Varma	AV	Head of Corporate Services (East Berkshire CCG)
Ahmad Chughtai	AC	Director of Digital Transformation (NEH&F CCG)
Jennie Ford	JF	Practice Manager (EB CCG – BA Locality)
Dr Priya Kumar	PK	Slough GP (EB CCG - Slough Locality)
Ryan Edridge	RE	Infrastructure Consultant (NHS CSW)
Shirley Jones	SJ	Project Support (NHS SCW)
Apologies:		
Sarah Bellars	SB	Director of Quality and Nursing (EB CCG)
Claire Isham	CI	IT Services Locality Manager (NHS SCW)
Darren Morgan	DM	IT Training Manager (NHS SCW)
Jonathan Pettit	JP	Head of Financial Management and Reporting (EB CCGs)
Simon Hodge	SH	Business Relationship Manager (NHS SCW)
Tracey Burrows	TB	Senior Information Governance Manager (NHS SCW)
Dr Adrian Hayter	AH	Clinical Chair (EB CCG – WAM Locality)
Roy Allerton	RA	Programme Manager (NHS SCW)

Item No	Item	Action
1	Welcome and Apologies	
	Chair opened the meeting. WG welcomed those present.	
2	Declarations of interest	
	No declarations or conflicts of interests	
3	Notice of Any Other Business	
	None	
4	Minutes of the Last Meeting held	
	Correction to items: <ul style="list-style-type: none"> Sarah Bellars' title is Director of Quality and Nursing 	
5	Action Log	
	Actions reviewed:- 1.37, 1.72 1.37 – Remote Working – Action to be added as Agenda item. This pertains to the laptops being ordered. WG asked for update. AV also asked why this is being blocked as the request was made in February 2018. MS advises the issue is that capital funding from the last financial year is at risk as no orders have been placed. RE confirmed equipment order is with Procurement. MS to email Steve and copy in AV.	MS

	<p>AV will also escalate via SLA and RE will manage this to support AV and SH</p> <p>1.72 – SMS Messages – to be added under IM& T Project for update</p>	RE
6	Terms of Reference	
	<p>AV thanked everyone who had input. The main change is that we are still responsible and accountable to Primary Care Commission Committee but we need to report on a monthly basis. This committee will be the steering Group and will have financial responsibility for GPIT but a plan is needed.</p> <p>AV confirmed the risk register will stay on there and Lindsay Blamires will be invited to the meeting.</p>	AV
7	FOI Quarterly Report	
	<p>AV went through the report – number of breaches in Q4 was identified on page 3 of the report.</p>	
8	Information Governance	
	<p>AV reported that there has been no change regarding training numbers.</p> <p>Updated privacy notices are on CCG website for GDPR and this has been highlighted through the GP bulletin as well as send directly.</p> <p>AV will be the DPO for EB CCG (but on an interim basis only for Practices). Comms will be issued via GPIT to confirm interim state until end of September. This will contain email contact details as public is entitled to know details of the DPO, the suggestion is that whilst AV is named as the DPO, the email could be a generic one that doesn't overwhelm AV inbox and is sustainable for when the role is taken over after October, WG suggested dpo@ebccg.nhs.net for example. AV will look into it.</p>	AV
9	Finance	
	<p>DF advised that we are on budget for everything, but with the caveat that the costs for the final month (March) have not come through yet.</p> <p>ETTF monies were received at year end (month 12). £262 overspent but some accruals added. Biggest area of spend is transformational projects. The overspend there is funding by ETTF on additional bids.</p> <p>Frimley slippage show spending in CSU, Graphnet and third parties.</p> <p>Online Consultation – Need to find out if there was an allocation last year which has not been spent. DF to ask JP if he has accrued it? DF will need to check with procurement teams. AC will complete a paper for this Group to recommend approval.</p> <p>PK has asked who the third parties are in Appendix 3. DF to find out.</p> <p>DF to add revenue to report and will develop the reports so this Group has what it needs. DF to speak to procurement team to ensure groups are all aligned.</p>	<p>JP/DF/AC</p> <p>DF</p>

10	IM&T Projects	
	<p>MS presented on the East Berkshire Portfolio Dashboard (on behalf of Roy Allerton) and on the reporting for this Group. Consistency is key with visibility needed at Board level of all workstreams to be delivered, the key deliverables, RAG status, when projects to be delivered, key contacts, financial status. This is to be supported by monthly updates / highlight reports.</p> <p>AV asked if more detail could be added to finance to show if over or under budget, where the funding is coming from, and RAG if in line with agreed expenditure. Everyone agreed with AVs suggestion, CM to take this forward with RA from SCW</p> <p>This Board to approve all projects in 2018 / 2019. CM was asked to feedback that deployment is not the finish of the project, but the successful maintenance and on-going review, WG suggested that there is a written review 6 months after implementation as a possible way of completing this. Additional detail required around what the change & the transformation looks like.</p> <p>MS says this will be cleaner as it leverages off Verto. AV enquired whether viewing rights to Verto could be assigned so project status can be seen rather than having to rely on other groups, CM to check with RA about if this is a part of the Verto functionality. MS advised Verto transition will be over the next few months, but the Dashboard is likely to be issued next month.</p> <p>CM confirmed all projects would captured on this spreadsheet so it can be reported back and seen to the members of the IM&T Steering Group, MS went through a brief outline of each project. PK enquired whether iPlato should be on the Dashboard as it is going through Procurement and MS stated both SMS and GPIT Procurement could be included on the Dashboard. RA to add to dashboard</p> <p>MS advised there is also a need to go through the dashboard to undertake prioritisation.</p> <p>HSCN - AC advised around costings of the localised solution that has been implemented and has found that it is more expensive than the like-for-like as quotes obtained from national supplier. Cost pressure will be more as savings not being seen. This has been escalated to NHSE.</p> <p>Virtual Smartcards – have been some concerns around the IG and NHSD have been raised and this is currently being trialled in one hospital and not signed off yet. Query around if there could be a rep from NHSD who will be able to come to the next meeting and give more context around the national picture of HSCN and the virtual smart cards. MS will see if there is a rep from NHSD who can support this.</p> <p>DXS – Agreement that the IM&T Steering Group needs to have clinical oversight of DXS and that there is a need for a mechanism to report issues and activity. Additionally needs to be able to capture when access is unavailable. Suggestion is that there is an email for issues as a central place for issues to be raised and logged and then can be resolved. AV confirmed that this came up as a part of the meeting with Andy Ferrari from SCW this week and that she was waiting to hear about this and some other actions.</p> <p>EDMS – this was mentioned as it may become a priority for the locality due to the administration burden, not just local but also out of area, e.g. London hospitals. Broad discussion on the impact of just “switching off” faxes and if that would be workable in terms of impact.</p>	<p>MS</p> <p>CM / RA</p> <p>CM / RA</p> <p>RA</p> <p>MS</p>

11	On Line Consultation Procurement	
	<p>AC spoke of benefits of doing this jointly which is financial savings of £18k – eConsult would offer additional discount. £100k for East Berks for 3 years – savings of £54k across all areas. AC states if we have the money we can proceed – AV thinks money has been received but will check.</p> <p>Action: AC to do paper for governing body (as mentioned above in Finance) as he has already started one for elsewhere but will rebadge this.</p>	<p>AV</p> <p>AC</p>
12	GPIT procurement	
	<p>SH has sent his apologies for non-attendance today.</p> <p>Andy Ferrari (AF) met with AV to address the concerns around the tight timescales on GPIT procurement. SH had said the rigorous timescales were set by NHSE. AV understands from SH that AF will prepare paper for ICS Finance Procurement group and this will need to be considered in line with other CCGs. ICS Finance procurement group will make decisions on next steps. AF to escalate to NHSE that we don't want to follow their timeline.</p> <p>Action: AV to send date of next meeting to AF.</p> <p>SMS & iPlato</p> <p>CM advised that after talking with SH this week, licencing costs of iPlato has gone up. There have been some discussions and a proposed recommendation that a one year extension obtained. During that time, a robust tender process will take place during which a 3 – 5 year contract timescale will be discussed.</p> <p>WG stated there has been no detail of why costing has increased and this has left Group in a difficult position as contracts need to be awarded by 31/5.</p> <p>Action: DF, AV, WG and Simon will need to have a telephone meeting on morning of Wednesday 30/5 with detailed breakdown of costs clearly identified and why there has been an increase so there can be an understanding of what is going on before any approval is given. CM to arrange</p>	<p>AV</p> <p>CM</p>
13	VDI / Patient Wi-Fi	
	<p>Patient WiFi</p> <p>Has finished procurement – signed off last week. Gone back to Procurement to award contract. Once pilot site is set up should be able to roll this out quickly. RE to check this</p> <p>VDI</p> <p>Is still in Procurement due to value of contract – just under £3m but this is for the whole contract. Procurement wants to push it through NHSE although it has been suggested the award is redrafted for £300k which is the value of our portion and NHSE will be able to sign it off.</p> <p>AV – our lay members have raised a concern on there being too many single tender waivers where we don't go to the market. Whilst this is an appropriate action to take, there is an awareness of being able to evidence and justify actions if there is a challenge.</p>	<p>RE</p>

17	Any Other Business	
	<p>JF – regarding email received at 13.55 today on cyber attacks. She has had a letter from EMIS saying the Check-In system is out of date and would be expensive to replace. JF asks if there is a need to look at this again as this could lead to a cyber attack if software is out of date.</p> <p>WG asked RE to look at this – it may need to go to Roy and would the Practices or CCG be funding this. PK stated the CCG is bringing in a cyber element to their inspection visits. RE stated costs are approximately £2700 for a floor standing model and £1800 for wall mounted.</p> <p>PK advises if we are going to do this, it should be linked in with eConsult so more than one thing is picked up.</p>	RE

Next Meeting:

Date and Time - Friday 6th July 2018 15.00 – 17.30

Location – Meeting Room 2 / The Henry Room KE VII Hospital, Windsor

NOTE: Change of date for next meeting