

DIGITAL MAJOR PROJECTS AUTHORITY COMMITTEE

Venue Room 13, Education Centre,
Sandwell General Hospital

Date 29th March 2019. 14:00-15:30

Members Present:

Ms M Perry, Non-Executive Director (Chair) (MP)
Mr R Samuda, Chairman (RS)
Mr M Hoare, Non-Executive Director (MH)
Mr T Lewis, Chief Executive (TL)
Ms R Barlow, Chief Operating Officer (RB)
Mrs R Goodby, Director of People and OD (RG)
Mr M Sadler, Chief Informatics Officer (MS)
Miss K Dhami, Director of Governance (KD)
Ms N. Taylor, Group Director of Nursing (NT)

Committee Support:
Mrs P Lee, Executive Assistant (PL)

1. Introductions [for the purpose of voice recording].	Verbal
Introductions were given.	
2. Welcome, Apologies and Declarations of Interest	Verbal
Apologies noted from Siten Roy, Amanda Geary and Katie Gray.	
3. Minutes of last meeting held 22nd February 2019	DMPA (03/19) 001
The minutes of the meeting held were accepted as a sufficient record to proceed with the business of the Committee with the following amendment:	
Item 10. Delete the whole of the fourth sentence following the word month.	
4. Matters arising	DMPA (03/19) 002
The Chair went through the actions as follows:	
<ul style="list-style-type: none"> • <i>(02/19) Synchronised time source to be investigated.</i> It was discovered that amongst the systems there were four different time sources. An order was raised for a single time source to be installed within the Trust. It was agreed that this would be kept as a matter arising on the agenda. • <i>(02/19) Back office solution to be presented at next meeting.</i> To be presented at the next meeting. • <i>(01/19)006 Training plan for IT staff to be completed in 2018/19.</i> A list of training courses for next year were agreed and that staff would be made aware of the training they would attend. • <i>(11/18)4.3 sql database recovery points and objective back up plans per contract.</i> A list of all sql servers across the Trust had been created and it was anticipated that work would be complete by May 19. • <i>(10/18)4.2 Critical Incident – Produce plan to resolve and implement improvements to include</i> 	

a monitoring regime.

The monitoring tool had been purchased and would be installed and configured over the next six weeks.

- *(10/18)4.5 Critical Incident – As part of strategic plan ensure that system is capable of issuing early warnings.*

The monitoring tool would be installed over the next six weeks.

- *(11/18)3Traceability – a plan of action together with a full list is to be made available at the next meeting.*

It was confirmed that this item was still under evaluation.

- *(10/18)4.1 Infrastructure – Specialist external audit to be commissioned in February /March 2019 to review risk.*

It was confirmed that the audit report would be received by the Trust in draft next week.

- *(10/18)4.1 Infrastructure – Address issue of passwords.*

It was advised that alternatives were currently being considered.

- *(08/18) 4 Create plan to transfer to Azure (cloud) system by end of December 2018.*

It was confirmed that a team implementation meeting would be held on 17th April.

- *(10/18)4.1 Infrastructure – Need people plan and performance indicators.*

It was noted that this item would be covered under item 9 of the agenda.

- *(10/18)4.1 Infrastructure – pipeline of work needed*

It was noted that a high level of pipeline work was yet to be carried out and a paper would be presented next month.

- *(10/18)4.5 Critical Incident – consider outsourcing to achieve our aims.*

It was agreed that the plan would be brought back at the end of May.

- *(11/18)4.2 Pathology system supplier business continuity assessment required.*

It was confirmed that the business continuity was in place with the current supplier until 2020. MS confirmed that he had met with the providers, DXC who confirmed their continuing support.

The chair asked that in future the log was annotated to allow the committee to focus on the main outstanding or concerning items.

5. HSNC switch-over readiness

DMPA (03/19) 003

MS updated the Committee regarding the status of the HSNC switch-over and the following was noted:

- The go-live date of 11th April was not going to be met.
- The Trust had written to Virgin Media to clarify their contractual obligations and clarify their intentions. Weekly meetings with them were being conducted and it was advised that a workshop was arranged for 8th of April to agree on proposals, comprising of the existing N3 network plus two new lines (the existing link the Trust has with Virgin to be put into full service plus a new link).
- TL confirmed that he would like to see in writing that the proposed option would work together with some external visibility.
- MS confirmed that they had liaised with Birmingham Children's Hospital who had moved from M3 to HSCN to see what their plans were, Also, that they were working with Virgin and NHS Digital who were managing the process.
- It was confirmed that by 11th April the Trust would have put in place their go-live criteria and therefore any issues would be solely on the Virgin Media side.
- It was confirmed that specialists were reviewing the 3000 rules.

- TL requested that the review on 8th April include everybody involved in the project to be physically present at the review.
- It was agreed that a full update on the process would be presented at the next meeting.
- MS noted that the original reason for switching over was due to N3 pricing being set to increase dramatically. It was confirmed that in the interim there would be no increase in costs due to the Trust's commitment to Virgin.
- MS also noted the move away from N3 was agreed due to N3 being unstable and not ready for Unity, whereas two dedicated lines, one from Sandwell and one from City, were going to work on the Unity server.

Action: Arrange for all involved to be physically present at the review on 8th April with TL

6. Unity Go Live Criteria

DMPA (03/19) 004

TL circulated a summary of the Unity – Go Live Criteria paper and requested the Committee consider "Appendix 5" of this summary for consideration and approval.

There were in-depth discussions regarding the paper. RS asked for power supply testing to be added to the paper as written and this was agreed.

TL advised that if the Committee supported the proposal then clarity would be required regarding which departments within the Trust would be critical to Unity success.

TL advised that optimisation readiness was being worked through and that a paper clarifying optimisation would be available for the next meeting.

7. Unity Success – optimisation project

DMPA (03/19) 005

Discussion ensued regarding the following points:

- User experience and measures of user experience.
- Log on and log off timings, working at tap in tap off.
- No plan yet regarding single sign-on, however this would be picked up later in the year.
- User effectiveness.
- Optimisation measures.
- Using KPI's as draw-down into the depth and breadth of the organisation.
- Alignment with the training team and the 28-day challenge.
- Digital signatory protocols.

The project was welcomed through the chair. RB reaffirmed that this work was essential as the step before benefits realisation during 2020-21. TL noted that in that year the wider emphasis within the Trust would be on time, and as such we needed to help ensure that, after bedding in, Unity helped that and did not hinder it.

8. Risk Register and mitigations in informatics

DMPA (03/19) 006

MS went through the risks and the following was noted:

- One of the most common risks was the data centre at Sandwell, which was prone to flooding.
- The data centre at City was also old and the part of the site where it was situated had been sold.
- It was clarified that the back-up regime was not sufficient.
- The issue of the lack of training of remaining staff.
- It was agreed to keep the informatics risk register on the agenda for the time being.

KD questioned whether all of the risks on the register were all of the risks within the department and whether any of the extant risks were in fact crystallised and as such issues. TL noted some discomfort with the paper, as it appeared to contradict advice earlier in the meeting on pathology. MS acknowledged both issues and suggested that the committee view this paper as a work in progress to return next time. The Chair accepted this suggestion but emphasised the need to have control over our risks before AGS drafting.

Action: MS to look into possible back-up regime improvements and confirm that the back -up risk was not related to patient data and report back at the next meeting.

Action: MS to investigate correct way of reflecting training of staff and recruitment within the risk register and provide a staffing update at the next meeting.

9. Informatics Scorecard and Turnaround Milestones

DMPA (03/19) 007

MS went through the paper and made the following points:

- The PACS time delay issue still caused a problem which would be eliminated by providing a central time server for PACS.
- There was an issue with the server running out of space and it was discovered that the server wasn't working properly as it was reporting more available space than was actually available. This was a configuration mistake and was now resolved.
- Discussion took place regarding employees within I.T. carrying out work that was not checked at the time it was carried out and MS confirmed that current work was now being checked and also over the last five years.
- TL asked if more resources or assistance could be given to speed up the checking and correcting of problems which had been found by MS. MS agreed that the issue of extra people being brought in to carry out the I.T. cleanse of past work as a one-off exercise would be helpful.
- MS confirmed that the majority of the Logica work was now complete and the network was stable.
- The Chair asked if MS had the resources to carry out everything that was asked of him and he clarified the following:
 - that he had the resources to complete the build of the I.T. service;
 - that he had staff vacancies so did not have the permanent people that he needed;
 - that he had the capital budget to buy the tools and the equipment needed to manage the service.

Support was given to the fact that an acceleration of time for MS to complete the tasks would

require more resources on a short-term basis.

Action: MS to present the imaging and I.T. position up to and including PACS to the next meeting.

10. Meeting effectiveness /matters to raise to Trust Board

Verbal

The meeting was considered effective.

TL requested that the back-up issue was not specified in the public Board space but was considered again at the next meeting with a solution in mind. The Chair agreed to this request.

11. Any Other Business

No further items were raised.

12. Details of next meeting

Verbal

Friday, April 26th, 2019, 13:00-14:30, Room 13, Education Centre, Sandwell General Hospital.

Signed

Print

Date

**Digital MPA Meeting
Action Log following meeting held on 22nd February 2019**

Meeting Item Number	Action	Lead	Due	Status
DMPA (03/19) 002	Arrange for all concerned to be physically present at the review on 8 th April.	MS	ASAP	
DMPA (03/19) 006	Look into possible back-up regime improvements and confirm that the back - up risk was not related to patient data and report back at the next meeting.	MS	26.04.19	
DMPA (03/19) 006	Look into a correct way of reflecting training of staff and recruitment within the risk register and provide a staffing update at the next meeting.	MS	26.04.19	

DMPA (03/19) 007	Present the imaging and I.T. position up to and including PACS to the next meeting.	MS	26.04.19	
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