Sandwell and West Birmingham Hospitals NHS

NHS Trust

MINUTES DIGITAL MAJOR PROJECTS AUTHORITY COMMITTEE

Venue   Room 13, Education Centre, Sandwell   **Date** 26th April 2019 13:00-14:30
General Hospital

Members Present:

Ms Marie Parry (Chair)	(MP)	In attendance:	
Ms Raffaela Goodby	(RG)	Ms Katie Gray	(KG)
Mr Martin Sadler	(MS)		
Mr Harjinder Kang	(HK)		
Ms Kam Dhami	(KD)	Committee Support:	
Mr Toby Lewis	(TL)	Mrs Patricia Lee	(PL)
Ms Rachel Barlow	(RB)		

1. Introductions	**Verbal**

2. Welcome, apologies and Declarations of Interest	**Verbal**

Apologies were received from:

Nicola Taylor, Amanda Geary, Siten Roy, Richard Samuda and Michael Hoare.
There were no declarations of interest recorded.

3. Minutes of last meeting, held 29th March 2019	**DMPA (04/19) 001**

The minutes of the meeting held on 29th March 2019 were accepted as an accurate record.

4. Matters arising	**DMPA (04/19) 002**

The Chair proposed that the majority of actions would be incorporated into the regular report as many were duplicated within technical readiness actions or recruitment and training actions. The log would be brought to the next meeting in a brief format and regular update work would be included in the reporting.

Exceptional actions were noted as follows:

(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 confirmed that the back-up risk was not related to patients and over the next month they will document what other back-ups remained on un-shared devices. TL suggested that this item should remain as a matter arising on the agenda.

(11/18) 4.3 SQl database recovery points and objective back up plans per contract.
MS confirmed that this item remains on track for May 2019 completion.

(11/18) 3 Traceability – a plan of action together with a full list is to be made available at the next meeting.
MS advised that this would be installed over the next four weeks.
(08/18) 4 Create plan to transfer to Azure (cloud) system by the end of December 2018.

MS confirmed that this item was ongoing however the transfer would not be to Azure.

(10/18) 4.1 Infrastructure – Pipeline of work needed
It was confirmed that this item would be ready for the next meeting.

(*10/18) 4.1 Infrastructure – Specialist external audit to be commissioned in February / March 2019 to review risk.*
MS confirmed that the penetration test had been ordered and was underway. The results would be reported at the next meeting.

5. IT turnaround	DMPA (04/19) 003

MS noted the paper and the following points were made:

- The average time of a severe service outage was around four hours.
- In March, 1,000 more incidents were logged than in February
- The team managed to close 800 incidents at first point of contact (52%).
- Incident data was broken down so that underlying incidents could be dealt with. MS reported that 20% of incidents were about passwords.
- There had been no more gold outages than usual so it was not considered that they could have been responsible for the 1,000 extra incidents.
- The extra 1,000 calls were considered to be due to customers being more inclined to contact IT, due to growing confidence in their ability to resolve issues.
- Tracking the number of open calls showed that they continued to decrease.
- The current trajectory was that by summer the number of calls open at the end of each month be around 200.
- Work continued around conferring with the customer to close incidents.

TL called out item 2.4 of the paper and asked if there were there any other ICM known issues that needed addressing. MS explained that when they applied the fix of the known issue, ICM confirmed that there were no other known issues on the Trust's system.

TL questioned the digital issues in Imaging and MS confirmed that they were under control. He added that they had identified issues and had a plan to resolve each of them. Whilst this item did not appear on the agenda, it was agreed that it would be examined at the Committee today. MS circulated the paper and the following points were made:

- MS had received the Outsourcing Radiologist Report and would carry out some integrations so that they had definitive dates with Teleconsult. It was anticipated that the 4Ways handover would happen at the end of May. MS confirmed that the Trust, in collaboration with Teleconsult and 4Ways, had found a solution that worked.

- MS advised that he had engaged with IBM regarding the PACS stability issue. He confirmed that the Trust's infrastructure would be upgraded, and the time server would be installed, to ensure that the timing issues were resolved by the end of next month.   MS confirmed that IBM would be in attendance to assist the Trust to get to a level of stability. MS confirmed that everything would be predictable for PACS by early June, when they would upgrade to the latest version of PACS, which would remove most of the glitches in the system.

- MS advised that the L3 (Line3) resource availability related to technical individuals who

formed part of the Informatics team, and that he had total control over their availability.

- The Home Report was at the point where a test schedule was being agreed and the Trust was in receipt of necessary testing equipment.

- CRIS Analytics also included an Imaging Dashboard which was implemented at the Wellbeing point.

- RISP was yet to be scheduled, although the storage would be available in May. Further discussions surrounding the RISP installation would be held separate to this Committee.

Discussion continued regarding the Imaging Outsourcing Timescale. RB advised the Committee as follows:

- The first supplier would start in mid-May, there was already a technical relationship with the HL7 & Wellbeing and that due diligence had been carried out.

- Teleconsult was at the start of a new technical relationship with HL7, so they would need to carry out due diligence.

TL noted that in practical terms the Trust would not be fully outsourced until June 2019. MS confirmed that he had made it clear to all concerned that the Imaging timetable must be adhered to.

6. One Page HSCN Plan	DMPA (04/19) 004

MS noted the paper and the following points were made:

- HSCN was the replacement of the N3 network. The HSCN provider had changed from BT to Virgin, so it was necessary to carry out the replacement in two stages.

- One Gigabyte lines would be put into Sandwell and City, giving the Trust 15 times the amount of traffic than currently. The Sandwell line would be installed and working by the end of May. The City line would be installed and working on 21st June. The migration of all services onto the HSCN line would occur in July.

- MS met with Virgin yesterday and a detailed plan was being produced of all the other community sites which require a connection.

- TL queried the definitive and contractual agreement with Virgin about the first two dates for the one Gigabyte lines. MS advised that their Project Manager had confirmed those dates to the Trust. TL requested this be provided in writing on Monday.

- MS agreed to check the dates for the five Gigabyte lines to ascertain if these were confirmed dates. MS confirmed that the main hospital site was the priority, before the community sites. TL advised that a re-group of MS and his team together with RB and her team was necessary to get an agreed service strategy for the Digital Team to follow, including a meeting with Virgin. He emphasised the need for this to occur prior to the next Board meeting and it was noted that the current situation was unsatisfactory.

7. Updated Go Live Criteria	DMPA (04/19) 005

RB noted the paper and KG reported the following:

- The paper presented was built on the March Committee paper.

- The paper outlined readiness from different perspectives:
  - Operational readiness assessment.
  - Individual readiness within Unity.
  - Team competency.

- The stratification of the organisation in terms of gold and silver had been carried out.

- Optimisation KPI's were being developed together with the governance behind them.

- The GLO group would be responsible for tracking the KPI's and putting together suitable coaching for those requiring it prior to Go Live.

- A trajectory base-line would be published to show the minimum expectation of Unity competence requirement. There would also be a chart for staff to show when they have risen in competence.

- TL pointed out that there was a distinctive set up between the Go Live criteria, being about measuring if individuals could use the system safely, and the optimisation criteria, which was about if an individual was optimally using the system.

- RB confirmed that additional gold teams had been identified being:
  - Chemotherapy Unit.
  - Maternity
  - The pharmacy
  - Junior doctors
  - Porters

8. Technical Readiness	Presentation

MS went through the presentation. The following points were made:

- MS confirmed that the stability of the network was being monitored and it was stable.
- Cerner tests around the Cerner Failover line had been conducted, and the next test for that was next week.
- Printing was now working, and a team of people were installing printer drivers where necessary to enable Unity printing.
- The Back Office had received over 40 applications for various positions.

- There were two last changes to be approved on IP addresses either next week or the week after.
- Items for concern were the users time lag, the two Citrix issues and Trust wide Wi-Fi. MS explained as follows:
  - The solution on the user's time lag had been identified and would be in place early next week.
  - It was confirmed that one of the Citrix issues had been resolved after the presentation was circulated and the suppliers were working on the remaining unresolved issue.
  - The PRTG edge was working.
  - An update was given regarding Wi-Fi as follows:
    1. Ward by ward reconfiguration was being carried out at Sandwell and this would be finished by the end of May.
    2. The community sites installation would take place over the next two weeks and Wi-Fi would be up and running by the middle of May in these areas.
    3. The City plan had been split into retained and non-retained areas and a remediation plan had been compiled for the non-retained aspect. MS agreed to bring the City plan forward by one week.
    4. The Cerner failover line and 724 viewers were both working well.

- The remote access pulse secure solution was currently being implemented and fitted into the community access.

KG queried the non-tap in tap out areas and the lack of knowledge of what the routine would be for them. MS confirmed this would be resolved on Thursday.

9. People – Exception Reports and Risks	DMPA (04/19) 006

RG noted the paper and the following points were reported:

- The team were working on a revised plan for training.
- The Trust had paid £11,500 for supporting the Play System and this was being implemented in time for the 28 Day Challenge.
- RG called out that community could not access the Play System unless they were on site, KG advised that the Play System could be used on Pulse. TL advised that it was necessary to resolve this and that it would be addressed on Tuesday.
- RG explained the 28-day challenge commencing on Monday, to the Committee, and added that regular updates would be provided to track how this incentive was working.

10. IT Department	DMPA (04/19) 007

MS noted the paper and made the following points:

- As part of the IT turnaround a new structure had been put in place and funding had been agreed.
- Several vacancies were currently out to adverts, some adverts had closed, and interviews were starting next week.
- A 24 by 7 service would be built so that people who worked outside of standard hours were supported.
- Roles for apprentices had been included in the plan.

- A University one-year placement for an undergraduate had been added to the plan.
- Every role in the department had a list of skills they were expected to have, together with explanations of the training available to obtain the necessary skills. New employees were being recruited already having the necessary skills.
- There was a £100,000 budget allocated to staff training this year.
- The role of the IT business partner will be similar to that of an HR business partner.
- TL requested a table showing information which included the closing dates and interview dates.

Action: MS to produce a table showing closing dates and interview dates.

11. Risks	DMPA (04/19) 008

MS noted the paper and the following points were made:

- MS had examined the risk tool for the Trust and his senior team have re-evaluated the Informatics risks.
- Updated actions had been added into the risks and duplicates had been closed.
- They had resolved some items that were no longer risks because of the activities carried out over the last 6 months.
- All risks in the appendix were live risks with actions and were all in date.
- All risks in the appendix were scored.
- These risks will be incorporated into the June Board meeting.
- MS confirmed that this was a reviewed set of risks, but it hadn't yet been through the Risk Management Committee. It was agreed that the Senior Leadership of the IT department would attend the Risk Management Committee in May to work through the risks.
- It was confirmed that the risks shown were risks owned by the IT department but there were other IT related risks in the risk register, and the IT department were required to review them.

Following a discussion regarding the RSM Audit Report. TL identified that there were 7 high risk control issues and 17 medium risk control issues. He expressed that he was unclear if the fact that they did not appear was an oversight or a deliberate omission. MS clarified that they had not appeared in the report deliberately, as he saw them as issues rather than risks.

Action: MS to pull together a list of both IT owned and IT related risks into one full suite of risks.

12. Meeting effectiveness / matters to raise to Trust Board	Verbal

The Chair noted that the meeting was considered effective.

Matters to raise to the Trust Board:

- The Committee remained concerned about timescales. An update would be given at the Trust Board meeting.
- Updated version of the Unity 14 enablers would be given at the Trust Board meeting.
- The end of May commitment around staff recruitment.

13. Any Other Business	Verbal

TL questioned MS about how he engaged with his Senior Leadership Team within the Department, to enable visibility surrounding the items discussed within the Committee.

MS explained as follows:

- A weekly team meeting.
- A rolling monthly focus to talk about staffing issues on the last Monday of the month.
- Risk issues were discussed on the 2nd Monday of every month.
- Projects and serious change requests were discussed on the 3rd Monday of every month.
- Performance was discussed on the 1st Monday of every month.

The Chair read out some questions on behalf of Richard Samuda as follows:

1. *Printing Capacity as a residual programme, do we have the right suppliers?*
   It was agreed that this question had already been covered within item 8 of the minutes.

2. *People Paper, concern over the June/July training deadlines, could these be met?*
   It was confirmed that these deadlines had been moved back to September.

3. *Risk Paper, have we considered how a major business interruption would impact IT?*
   It was agreed that this was an issue on the Business Continuity Plans and one of the issues in the RSN Audit Paper noted considerable concerns about business continuity integration. **This item will appear as a matter arising for the next meeting.**

Details of next meeting	Verbal

The next meeting will be held on **Friday 24th May 2019 from 13:00 to 14:30** in Room 13, Education Centre at Sandwell General Hospital.

Signed ……………………………………………………………………………………………….

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Date ……………………………………………………………………………………………….