

DIGITAL MAJOR PROJECTS AUTHORITY COMMITTEE - MINUTES

Venue: Room 13, Education Centre,
Sandwell General Hospital

Date: 29th November 2019, 13:00-14:30

Members:

Ms M Perry (MT) Non-Executive Director (Chair)
Mr M Hoare (MH) Non-Executive Director
Mr T Lewis (TL) Chief Executive
Ms R Goodby (RG) Director of People & OD
Mr M Sadler (MS) Chief Informatics Officer
Ms R Barlow (RB) Chief Operating Officer

Apologies:

Mr S Roy (SR) Group Director
Ms A Geary (AG) Group Director of Operations
Mr R Samuda (RS) Chairman
Ms K Dhami (KD) Director of Governance

Minutes	Reference
1. Introductions	Verbal
<p>The Chair welcomed the members to the meeting.</p> <p>The Committee members provided an introduction for the purpose of the meeting recording.</p>	
2. Welcome, apologies, declarations of interest	Verbal
<p>Apologies were received from Mr S Roy, Ms Geary, Mr R Samuda, Ms K Dhami</p>	
3. Minutes from the meeting held on 25th October 2019	DMPA (11/19) 001
<p>It was proposed that the Committee accept the minutes of the meeting held on 25th October 2019 as an accurate record.</p> <ul style="list-style-type: none"> <i>Page 6, Item 10 – A contract with CCG had not been entered into for two months, rather, a clause in the contract allowed for activity variance. To be amended.</i> <p>The minutes were ACCEPTED subject to the amendment.</p>	
4. Matters arising	DMPA (11/19) 002
<p>The Committee reviewed the action log and noted the following updates:</p> <ul style="list-style-type: none"> <i>DMPA (08/19) 005 - Advise the Committee next time as to how they could firm up a line by line plan for each of the Penetration Test's 14 action items for the timeline of six months for completion.</i> <p>MS reported the penetration test was due to be scoped in December. He confirmed that achieving the target of 50 per cent completion before the end of November was on track.</p> <ul style="list-style-type: none"> <i>DMPA (08/19) 006 - To conduct the Risk Register review exercise that was used at the CLE on the IT related Risk register.</i> <p>MS reported that the Risk Register Review exercise was continuing and all the risks were up to date. This was to be an agenda item for the December meeting. MS stated that a more detailed plan for</p>	

outstanding risks would be prepared.

- *DMPA (10/19) 004 - Add the Committee identified reporting targets to the PTRG Plan.*

Discussed later in the agenda. MS reported that enhancements to what was monitored had been made.

- *DMPA (10/19) 006 – Approach NHSI/E to identify who was purchasing off their networks in regard to cyber security.*

TL explained that this issue concerned the frameworks that the Trust could use to get cyber security input into the organisation. It was noted that this was NHS Digital, not NHSI. MS reported that he would bring the information to the next meeting of the Committee [December].

- *DMPA (10/19) 006 – Effect a reduction in IT budget to cover outsourced services.*

MS reported the discussion of outsourced services was ongoing. TL commented that a detailed 2-year plan was required for at least five of the ten services identified. Five services were highly likely to be outsourced and there were five to be considered.

MS further reported that discussions had begun on the identified services that could potentially be outsourced with Contract Manager Thomas Simpson. Finances were part of the discussion.

- *DMPA (10/19) 006 – Prepare a strategy of what applications could be supported in-house correlated to the money saved on external company support of those applications.*

Not due until January 2020.

- *DMPA (10/19) 006 – Prepare an assessment of in-house service of internal and external network management compared to an external supplier over a period of 14 months.*

Not due until January 2020.

Action: The Risk Register review to be included on the agenda for discussion at the December 2019 DMPA meeting.

Action: MS to bring information concerning appropriate cyber security frameworks to the December 2019 DMPA Committee meeting.

5. SBAF – Route to adequate

DMPA (11/19) 003

MS reported that the focus was on how to get the current SBAFs in informatics to be regarded as adequate. This concerned SBAF 8 (Development of the Digital Plan) and SBAF 16 (Unreliable Informatics Infrastructure). He referred Committee members to the paper and made the following points:

SBAF 8 Development of our Digital Plan.

- MS reported that the people who needed to be engaged with and presented to had been identified in terms of capturing the requirements.
- A review of the audit would be undertaken i.e. those items which had been identified as being unsatisfactory and best practise would be sought from NHS Digital and suppliers [industry experts].
- Initial feedback on the Digital Plan would be considered and co-ordinated in January 2020. A second set of feedback would be sought to further refine the Plan. The Plan would then be tabled for discussion by the CLE, the DMPA Committee and taken to groups.
- MS reported that by March 2020, the Trust would have a digital strategy ready for sign off.
- MS reported that the Digital Transformation Team was in charge of the project. This was comprised of the Business Development Managers co-ordinated by Digital Transformation Lead. However, there were no dedicated people from other areas included and there was no person yet identified who would write it up.
- RB commented that the necessary momentum appeared to be lacking in the project. She

suggested workshops and a sub-planning group might be needed.

- MH commented that the utilisation of technology and a communications plan could aid engagement and thinking across the organisation.
- TL commented that there was a lot of work to do. He proposed that a coalition of people be established who could properly drive the project and devise strategy.

SBAF 16 Unreliable Informatics Infrastructure

- MS reported that SBAF 16 was about the informatics infrastructure and the lack of digital and technical skills, the lack of business owner involvement and customer insight.
- MS reported that infrastructure was becoming more stable. Regular monitoring was helping but there were a few systems that were not as stable as they needed to be.
- Numbers and duration of severe service disruptions were reducing.
- PRTG was continuing to be configured and refined and this would be built into the gold and silver services.
- Recruitment was ongoing to fill final vacancies. An Infrastructure Manager post was being advertised. A recruitment Open Day was being organised for technical roles.
- Business Owners were close to being identified. Documentation of systems was being undertaken.
- Staff were upskilling with training courses.
- MS reported that he was confident that the support contacts for all systems were known. The support contracts were being refined.
- TL commented that the DMPA Committee had been informed that all gold systems had 24/7 support contracts in place that the Committee considered were adequate. MS confirmed that support contracts were adequate but that attempts were being made to make them better.
- MS reported that the PTRG tool offered monitoring of internal networks, internal wi-fi points, external connections and traffic. MS further reported however, that old telephones could not be monitored.
- MS confirmed that where there was copper wire telephony, there was reasonably good non-copper coverage through IP telephones. Therefore, voice and data infrastructure was covered by the monitoring regime.

Action: The Committee to further discuss SBAF 16 and decide whether the infrastructure had achieved adequate status, taking into account the extent of copper wired telephony.

6. Network performance

DMPA (11/19) 004

MS referred Committee members to the paper discussing KPI metrics for network performance using the PTRG system. The following points were made:

- External Network availability recorded a Green status. HSCN achieved 100 per cent availability with no unplanned network outages. Bandwidth had not been measured.
- MH commented that latency and capacity should be measured together. MS reported that page load time indicated latency but offered to investigate further.
- MH observed that Internal Network availability KPIs concentrated on wi-fi and not LAN switching, internal performance and routing and requested this wider information be included in

the metrics.

- MS reported that IP Telephony quality of service was not measured. MH commented that core failures and core drops should be measured.
- MS reported that location and user experience across the estate had not been taken into account when measuring page load-time but was happy to take them into consideration. TL agreed that location experience was important.
- MH commented that user experience should also be considered in relation to IP Telephony.
- MS reported that all services in this area would be measured and refined by the end of March 2020.

Action: MS to investigate how latency could be measured in the External Network performance metrics.

Action: LAN switching, internal performance and routing to be included in the Internal Network availability KPIs.

Action: Core failures and drop-outs to be introduced and measured in the IP Telephony KPIs.

7. Unity: Month 1

DMPA (11/19) 005

RB referred Committee members to comparison data in the paper. The following points were made:

- The Lights On indicators ranked the Trust against peers. Progress had been made since Unity's launch.
- In 23 out of 30 reportable indicators, the Trust ranked in the top 50 per cent of users in week 7 or 8.
- Some indicators were not qualified and discussions were being held with Cerner to make those available. RB expressed the view there was nothing for the Trust to be concerned about in relation to rankings in other metrics.
- RB reported that making KPI reports available to the organisation had been delayed but the forecast was on track. A handful of reports had been more difficult to get hold of and RB and MS were working with Cerner to ensure input. The reports were now with clinical groups.
- Optimisation indicators were being developed, the priority being backlog clearance.
- RB reported that the top five alerts would be reviewed systematically. Changes were on track and there was no backlog of change requests.
- TL noted that the Trust was 6 weeks behind with the optimisation programme. RB stated that greater analysis was required to identify data points indicating improvements.
- RB reported that super users needed more momentum and a meeting would take place to address this. TL expressed the view that a demonstration of impact was required.
- TL expressed the view that a second step would be an investigation of potential technical blockages in PCCT.
- RB reported that Trust employees were taking a lot of time to enter data using the Capman system. Liam Kennedy and Paula Gardner had programmes in place to upskill employees and improve competency with the system.

8. Digital ambitions: next steps

DMPA (11/19) 006

TL reported that there had been a long discussion at the Board. The following points were made:

- TL expressed the view it would be useful to draw up a prototype document to help people to

engage with the digital programme.

- TL expressed the view there was a need to ensure that the people’s imaginations were being stimulated rather than ask them what they want which would require engagement roadshows.
- TL commented that patients’ views also needed to be considered because digital innovation was a way to help them in the care and administration areas.
- A commitment to engage with a wide group of stakeholders was considered positive and would deliver benefits.

Action: The DMPA Committee to draw up a strategy document to identify digital ambitions and the future direction/goals.

9. Meeting effectiveness/matters to raise to Trust Board	Verbal
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- TL reported on the SBAF: Route to adequate was on the Board agenda.
- TL proposed Committee feedback could centre on Unity progress.

10. Any other business	Verbal
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None.

Details of Next Meeting

The next meeting will be held on Friday 24th January 2020, 13:00 - 14:30 in Room 13, Education Centre, Sandwell General Hospital.

Signed
 Print
 Date