DIGITAL MAJOR PROJECTS AUTHORITY COMMITTEE - MINUTES

Venue: Meeting held via WebEx   **Date:**   27th November 2020, 13:00 - 14:30

Members:			**In Attendance:**		
Mike Hoare	(MH)	Non-Executive Director (Chair)	Susan Rudd	(SR)	Assoc. Director of Corporate Governance
Richard Samuda	(RS)	Non-Executive Director (Trust Chairman)			
David Carruthers	(DC)	Acting CEO & Medical Director			
Mel Roberts	(MR)	Acting Chief Operating Officer	**Apologies:**		
Martin Sadler	(MS)	Chief Informatics Officer	Toby Lewis	(TL)	Chief Executive
Bethan Downing	(BD)	Joint Acting Director of People & OD	Kam Dhami	(KD)	Director of Governance
Helen Bromage	(HB)	Associate Chief Nurse	Nicola Taylor	(NT)	Group Director of Nursing
Siten Roy	(SSR)	Group Director Surgical Services	Liam Kennedy	(LK)	Chief Operating Officer

Minutes	**Reference**
1. Introductions [for the purpose of the voice recorder]	**Verbal**
The Chair welcomed DMPA members to the meeting which was held via WebEx. DMPA members provided an introduction for the purpose of the meeting's recording.	
2. Welcome, apologies, declarations of interest	**Verbal**
Apologies were received from Toby Lewis, Liam Kennedy, Nicola Taylor and Kam Dhami.	
3. Minutes from the meeting held on 30th October 2020	**DMPA (11/20) 001**
DMPA members reviewed the minutes of the meeting held on 30th October 2020. • Page 4 – Reference to BD to be changed to HB The minutes were **ACCEPTED** as a true and accurate record of the meeting.	
4. Matters and actions arising from previous minutes	**DMPA (11/20) 002**
The action log was reviewed. It was observed that some items had been completed. The following updates were made: • *DMPA (06/20) 002- Present the strategy utilised to review applications to the July DMPA Committee for discussion.* MS reported that the strategy for reviewing applications had been done. The roadmap for when	

applications renewal would take place would be presented in the New Year.

- *DMPA (08/20) 004 - DMPA (09/20) 004 - Obtain an update on patient interaction in relation to the Patients & Partners Portal and add it as an appendix to the September Committee' Unity Phase X paper.*

  MS reported that the patient portal had gone 'live' with positive registration numbers emerging.

- *DMPA (09/20) 007 - Investigate Risk 3614 and the storage of patient data on a stick.*

  MS reported that work was ongoing in relation to this action. In response to a query from RS about governance, MS stated that the management of information was covered by existing protocols and mandatory training was already in place.

  MS commented that the issue of USB sticks was generally restricted, but when they were issued the information was encrypted.

DISCUSSION ITEMS

5. Cyber Security including Windows 10 progress	DMPA (11/20) 003

MS explained that NHS Digital had written to the Trust requesting that it check five elements of its cyber security system and report back.

It was reported that a considerable amount of work had been done and MS expressed the view that in terms of its cyber security, the Trust was in the best position it had ever been in.

An update on the five elements ran as follows:

- o Back-up - All the Trust's systems were backed up and could be restored if necessary. Ten to twenty systems could be restored within the first 30 minutes of them being lost.

- o Patching – All of the Trust's service was up to date. Patching of desktops took place at the end of 2019. MS reported that the latest update had bugs but would be implemented when these were satisfactorily resolved.

- o Unsupported systems – Windows 7 machines were being removed across the Trust. There were currently ten still operating and in the process of getting advanced protection. Work was ongoing with the suppliers. MS reported that 45 Windows 7 machines had not been found and had been turned off so they could not access the network.

- o Advance threat protection – MS reported that the Trust had deployed Palo Alto traps which were over and above the minimum NHS suggested standards.

- o Secure boundary – MS reported that the Trust was not utilising the NHS product because its bandwidth was not big enough to cope with the Trust's incoming and outgoing network. However, the alternative that had been put in place was acceptable.

BD queried the risk attached to the kiosks and other medical devices in relation to back-up and asked where the Trust was in comparison to others. MS advised that the kiosks ran one application. The medical devices were generally standalone equipment, and both were fairly low risk as a result. Against other organisations, MS commented that it was his view that the Trust was ahead in some areas.

6. Update on change requests	DMPA (11/20) 004

MS reported that a few more Group Digital Committees had been established and meetings would be held monthly. It was hoped the Business Relationship Managers would engage with the service change request process.

There were many service-change requests and whilst they were being worked on, it was not being done quickly. The clinically urgent and strategic requests were being prioritised.

MS advised that a weekly meeting took place in Informatics to track progress and a monthly meeting took place with the owners of the requests.

Seventeen systems had been identified as needing upgrades in the last month. The PAS would be upgraded in January 2021.

Informatics had been working on a Bleep replacement for mobile phones and mobile devices which was expected to be in place in 2021.

The Windows 10 rollout had been completed and the Trust was looking at options for replacing telephones and the introduction of virtual Smart Cards to address the problem of losses.

MS reported that a lot of work in relation to imaging had been carried out and the Trust was trying to get the CRIS imaging solution to perform better. This would enable image sharing across the organisation.

RS queried the timeline in relation to the intention to change the rostering system. HB reported that a bid had been submitted for external funding to support the Trust in the implementation of the Allocate system, with the decision expected on 14th December 2020. A plan and timeline would follow.

In response to a query from MH, MR commented that Allocate, if used correctly, could reduce the amount of agency use among other benefits. HB commented that Allocate was a market leader and was very costly in its initial stages.

MH queried the CRIS issue and Radiology transfer. MS reported that the majority of the transfer problems had not been technical and instead, had been related to the task not being completed or received properly.

MS reported that a Business Relationship Manager had been allocated to Radiology to record all issues so they could be worked through one at a time.

SSR queried the transfer of records from Medisoft to Medisight and whether the system would be a complete transfer and whether it would connect better. MS offered to investigate.

Action: DC to speak to Danny regarding the CRIS transfer issues and their underlying cause.

Action: MS to investigate the transfer from Medisoft to Medisight to determine if it would involve a complete transfer of records and report back on connectivity.

7. Informatics preparations for MMUH	DMPA (11/20) 005

MS reported that a lot of work had been done in relation to MMUH from an Informatics perspective. Mark Taylor [Informatics Associate] had been leading the co-ordination for Informatics and the transfer to MMUH.

The Trust had been working with Balfour Beatty who had contractual responsibility for the network and routing (cable installation, firewalls etc) for MMUH, ensuring that it integrated with the Trust's wider

system. Engie was also involved.

RS queried who was responsible for the technology in relation to the guided vehicles. MS reported that Engie carried the risk for the vehicles' functionality, but Estates Management was also involved.

RS also queried the WiFi risk and functionality. MS advised that the WiFi in the contract was better than what the Trust currently had. MS commented that the building would be received six months before it opened, which would enable testing of WiFi etc.

MS reported that each programme had a charter defining what was expected. Project Managers had been brought in to move work forward. Informatics had also been talking to Ofcom about mobile phone coverage.

MH queried whether there was enough time to complete all the tasks required before the planned opening. MS expressed the view there was enough finance and staff in place to complete in time.

In response to a query from SSR about security cameras, MS reported that the Trust was investigating CCTV cameras which would be managed by Security and cameras (including motion-sensing cameras) in individual rooms.

8. Update on Informatics service improvement	DMPA (11/20) 006

MS explained that the paper outlined themes in Informatics which continued the three-year, three step improvement narrative and outlined some challenges currently being experienced and the plans to address those going forward.

MS reported that the Informatics team had been shortlisted for non-Clinical team of the Year and expressed the view that this was a very good achievement after only two years.

MS commented that, during COVID-19, Informatics had mobilised to enable more than 700 people to work from home including video conferencing, however, the Service Desk had been adversely impacted by a greater volume of calls. As a result, the department had not been able to deliver along the trajectory of continual improvement.

The Service desk's own tool would be replaced at the end of 2020 which would enable calls to be dealt with more effectively. In the meantime, four temporary staff had been taken on.

MS reported that there were seven full-time employees to cover 24-hour shifts, seven days per week which had not been feasible.

The Trust had still to improve the functionality of IVOR to reduce the demand on the switchboard from internal calls. Informatics had been looking at ways to make it easier to find the proper contact details for all staff. This would be a project for 2021. Office 365 (N365) would also be rolled out in 2021.

MH raised the issue of delays in call answering times during August 2020. MS responded that during the month there had been a lot of S-Drive problems, but this system had since been upgraded.

DC queried the alternatives available following the loss of the 'speak to a friend' option. MS reported that the common issues were know and the Trust had been talking to a number of companies offering options such as chatbots and automated services. More efficient portal utilisation was also being investigated.

MS stated that an IT hub had been set up at City and the ward walks by second line people had been reinstated.

9. Firewall extension (Link to MMUH and Cyber Security)	DMPA (11/20) 007

MS highlighted the requirement for the procurement of a three-year deal to extend the Trust's current firewall protection encompassing MMUH. Palo Alto would continue because they offered a good standard.

The Trust had gone out to tender, with the chosen supplier being Orange Cyber Defence at a cost of £1.3m (including VAT) over three years. This money was within the MMUH budget for IT security, but it could not be spent without authority from the Trust Board, delegated to DC.

The cost would be in addition to what the Trust was currently paying.

In response to a query from RS, MS confirmed it would be a capital project including hardware and support. MS explained that firewalls were required to protect the Trust's estate and expressed the view that it made sense to extend the network.

DC commented that this was an essential item and acknowledged the tender process and that the Trust was happy with the quality of the service. DC would consult with DMc.

RS queried whether there was a guarantee of a certain level of firewall protection. MS responded that the service would be constantly updated to respond to current and emerging threats.

The deal was **APPROVED** subject to DC consulting with DMc.

10. Informatics risks	DMPA (11/20) 008

MS referred Committee members to the paper and highlighted the following points to note:

Risk 4223 – This was new cyber risk relating to the Trust's network composition. (Further details of this risk have been deliberately withheld from this record by request for security reasons).
MS assured the Committee there was detection equipment on the network, but it was deemed appropriate to create a separate risk to address this issue. Mitigation would involve network redesign.

Risk 4216 – MS reported that this risk referred specifically to the quality of the accommodation in the Sandwell Data Centre and would enable the Trust to track actions more closely.

There was resilient power supply and air conditioning, with good progress on stability, but the building's integrity needed to be monitored.

MATTERS FOR INFORMATION/NOTING

11. Informatics scorecard	DMPA (11/20) 009

Not discussed.

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

It was suggested the following topic be raised to the Trust Board:

- Firewall delegation
- Update on MMUH (including telephony)

13. Any other business	Verbal

DMPA meetings January 2021

MS raised the issue of DMPA meetings that had been scheduled just three weeks apart in January 2021 (8th and 29th). SR to review.

Action: SR to review the DMPA meetings schedule for January 2021 to confirm meeting date.

Details of Next Meeting

The next meeting will be held on 8th or 29th January 2020 (TBC) 13:00 - 14:30 by WebEx.

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

Print   …………………………………………………………………………………………….

Date   …………………………………………………………………