

Action notes

Meeting: GP Data Patient and Public Engagement and Communications Advisory Panel

Date: Thursday 31st March 2022

Time: 09:30am to 11:00am

Location: MS Teams dial in

Time	Agenda Item	Owner
09:30	Welcomes and Introductions	Chair
09:35	Reflections from previous meeting	Chair
09:40	GDPR programme update	NHS Digital
10:10	Data security discussion – pt3.	NHS Digital
10:40	Deputy Chair discussion	Chair
10:50	Meeting planner	Chair
10:55	AOB	Chair

Attendee name:	Organisation
Urte Macikene	Healthwatch
Lay Member 1	Independent member
Eileen Phillips*	National Data Guardian
Research Manager	NHS Digital
Communications and Stakeholder Engagement Manager	NHS Digital
Information Governance Lead	NHS Digital
Grace Melvin	AMRC
Programme Head	NHS Digital
John Marsh	use MY data

*meeting chair

Action notes

Apologies:	Organisation
Lay Member 2	Independent member
Lay Member 3	Independent member
Lay Member 4	Independent member
Lay Member 5	Independent member
Head of Communications	NHS Digital

Agenda Item	Notes
0 & 1	<p><u>Welcome, introductions and reflections from the last meeting</u></p> <p>Panel members were welcomed to the meeting and the Chair ran through the agenda and planned discussion points.</p> <p>Apologies were noted.</p> <p>Action notes from the 17 March were agreed as an accurate reflection of the meeting and agreed for publication. It was agreed that the names of the use MY data representatives be included in the published action notes.</p>
2	<p><u>GDPR programme update</u></p> <p>The GDPR Programme Head attended and gave an update on the programme overall and the key workstreams.</p> <p>Further to the verbal update, a commitment was made to provide the panel with a written update summarising the current programme position, which is provided as follows:</p> <p><i>TRE development</i> - The proposal is to build the TRE and expand its functionality through four stages.</p> <p>UMD queried whether the TRE would use synthetic data. It was confirmed that the use of synthetic data in the TRE is part of the forward plan.</p> <p>A discussion took place about the existing practice of data sharing that takes place between GP Practices and other parties. The programme head recognised the concerns raised but confirmed that it was out of the scope of the GDPR programme to review this. The panel were informed that a system owner would need to be identified to look at this and that the matter would be escalated.</p> <p><i>Type 1 opt-out burden reduction</i> - The panel were updated on progress against the Ministerial commitment to reduce burden for GP practices. The</p>

Action notes

team have been working on this for several months, working through the discovery and design phases of service design. They will attend a future PPECAP meeting to present the emerging proposal.

Communications and engagement – the programme is in the listening phase and the focus has been on public, patient and GP practice research. The panel were thanked for their input into helping to shape this work. The research will conclude by the end of April, the findings will then be analysed and a presentation of them given at a future meeting.

Operational challenges - An overview of some of the operational challenges regarding access to data for direct care and payment of GPs was provided. Whilst this sits outside the scope of the GDPR programme, an outline of how proposed plans could affect the delivery of the GDPR programme was discussed.

The Programme Head explained that the timeline for the GDPR programme is yet to be confirmed and will be set once the ministerial commitments have been met. There is a firm commitment to create the necessary space to undertake meaningful comms and engagement, and to ensure that the go-live timing works for GP practices and doesn't coincide with the winter pressures period. The panel were informed that the programme will continue to run in parallel with immediate work required outside of the programme to address capacity challenges in the current system, specifically for direct care and payment purposes.

The panel were asked to offer support to the development of communications and engagement for this parallel work to align the messaging, despite it being out outside the scope of the GDPR programme. The panel were happy to support this.

It was queried whether the Type 1 opt-out and NDOO will be combined. It was confirmed that the NHS Data Strategy would provide an opportunity to start exploring this and that the programme has flagged that a conversation is required about it. There is no agreed timescale for this yet.

3

Data security – communication needs

The exploration of data security was concluded, the focus of which was communications needs. The findings will be written up and shared with the panel for approval, ahead of being published.

The panel highlighted the need to provide clarity about how risk is managed as this will maintain transparency and act to reassure the public.

As part of the discussion, the desire for the work of the panel to be visible was highlighted and confirmation given that the drumbeat communications plan is being developed and a blog about the work of the PPECAP is planned for May.

Action notes

	<p>Panel members will have an opportunity to feed into the blog.</p>
<p>4</p>	<p><u>Deputy Chair discussion</u></p> <p>The Chair welcomed the interest from panel members in raising the issue of the Deputy Chair role and broadened the discussion to invite views on extending the rotating role of Chair more widely across the panel.</p> <p>Views were mixed:</p> <ul style="list-style-type: none"> - some preferred the existing arrangement with the three rotating Chairs to offer continuity and reduce potential confusion; - others supported the idea of a co-chair however had experience of it being challenging where it rotates; - concerns raised about the need for a Deputy Chair – the role has to be meaningful; - there was a view that the role could be benefit but there was a preference for less frequent rotation - 6 or 12mth periods. <p>The Chair stressed that all views were welcomed and were essential from everyone. It was therefore agreed to revisit the topic at the next meeting when other patient reps were in attendance.</p> <p>The Chair highlighted the importance of ensuring that the voice of patients and the public is at the centre of this panel and queried whether the panel would benefit from wider representation. Members are invited to consider this for discussion at the next meeting.</p>
<p>5</p>	<p><u>Meeting planner</u></p> <p>The meeting planner was reviewed. It was agreed to defer a discussion about commercial organisations to a meeting in May, to allow more time to cover TRE and opt-out as well as revisit the conversation about the role of Deputy Chair. An agenda item will also be added to the next meeting to explore expanding the panel membership.</p> <p>The Chair confirmed that the meeting due to take place on 14 April would be cancelled owing to annual leave and apologies over the Easter period.</p> <p>The next meeting will take place on Thursday 28 April.</p>
<p>6</p>	<p><u>AOB</u></p> <p>No further business was raised.</p>