

Meeting Description		IAPDR Group Meeting		
Meeting Date		10 February 2022	Meeting Time	
		14:30 – 16:00		
Location		Teams Meeting		
Attendees	Chair	Professor David Forman (DF)	Secretariat	NHSD Secretariat
		Michael Chapman (MC)	Director	NHS Digital
		Dani Breitingen-Blatt (DBB)	Associate Director ODR Workstream	NHS Digital
		Simon Branston (SB)	Senior Project Lead	NHD Digital
		John Marsh (JM)	Patient Representative (Deputy Chair)	Lay Member
		Sophie Newbound (SN)	Head of Partnership and Awareness	NDRS
		Ifeanyi Sargeant (IS)	Patient Representative	Lay member
		David Seymour (DS)	Executive Director	HDR UK
		Estelle Spence (ES)	Head of Strategic Engagement for Research and Life Sciences	NHS Digital
		NHSD Secretariat (CJ)	DARS Business Support	NHS Digital
Apologies		Judith Bisatt (JB)	Patient Representative	
		Nicola Keat (NK)	NCRI	
		Dharmishk Parmar (IP)	Faculty of Public Health Medicine	
		Russ Viner (RV)	NIHR	
No	Title	Notes		
1	Welcome, introductions	The chair (DF) welcomed all to the meeting, and invited SB and ES to give a brief introduction as they are new to the panel		
2	Approval of previous Minutes and update of Actions from previous meeting 14/12/21	<p>The chair (DF) asked the group if they were happy that the minutes from the last meeting were an accurate reflection of the discussion held on the 14/12/21</p> <p>The group agreed it was an accurate reflection of the meeting and approved the minutes</p> <p>The outstanding actions from 14/12/2021 were discussed and updated during the meeting. It was agreed that Actions 3 and 6 should remain open. A copy of the revised action log will be shared with the minutes.</p> <p>ACTION – 10 MC asked that all panel members of IAPDR be made aware that the minutes from these meetings will be held on an NHSD webpage. All members names will be visible. This will be noted when the minutes for this meeting are submitted to the panel.</p> <p>10- Complete/Closed</p>		

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		<p>Action 11 - ES shared a link to the Research Advisory Group webpage (Research Advisory Group - NHS Digital) for members to see an example of what the content will look like</p> <p>11 – Complete/Closed</p>
3	Update on ODR service including MI and data on backlog (SB)	<p>SB presented Paper 1 and talked the group through the Milestone Indicators (MI) regarding the backlog in detail.</p> <p>SB advised that the report has been updated since sharing with members with the agenda, and it was largely the MOU milestones that have changed. SB advised that there have been constraints on capacity and capability which has impacted the MOU milestones. He highlighted in detail what is being done, what the team are intending to do and that not all the back log is for NHSD, but the escalations are being tracked through NHSD. SB also pointed out that some of the outstanding cases may not be applications but expressions of interest and the work he is doing now is to understand exactly what the volumes are for all the outstanding cases.</p> <p>DS stated that this is a desperate situation and the group need to consider what they can collectively do to improve the situation as these delays are stopping research from happening and quality of care improving. DBB advised that there is a lot of resource focused on this work to allow us to deliver at pace and the picture has improved considerably from last week. SB added that a workshop was held last week which allowed the team to align the work which has had a direct impact. MC provided an update on the resource picture and acknowledged that the hole is getting deeper. MC advised that he felt ‘in doubt status’ was the right status currently and confirmed that the focus will be on the important applications from Researchers and Arm’s Length Bodies.</p> <p>DF asked whether Researchers are being informed on the status of their applications, SN advised that they are high level but not in detail, and she is working on steps to do this. SN reassured that any people who contact/chase are having a 1-1 conversation. DF asked if it was clear that NHSD are responsible for the communications and DBB confirmed it was.</p> <p>DS asked whether a community group could be convened to do the prioritisation of these cases and SN advised that the prioritisation hadn’t been done because of lack of capacity but more around lack of information and SB confirmed that the blocker was around the source of the information. MC acknowledged DS comments and advised that the original plan hasn’t worked which is why we need to have an alternative plan that does work.</p> <p>DF asked SB whether several KPI’s could be distilled into the headline measures to be tracked. SB advised if he could get the necessary information from the front door then he can put the information into the correct buckets and report on them. He caveated this as he may need a little longer to drill down into the information before being able to provide these KPI’s.</p> <p>ACTION 12: A revised copy of paper 1 will be shared with members with the minutes.</p> <p>12 - Complete/Closed</p>
4	Update on Data Access Programme and Future Plan (DBB)	<p>DBB thanked SB for his amazing work which highlighted where we are and the future plans to progress ODR through the DARS team. We need to keep track to see how effective this is and look at the outcome. The backlog is growing, and we are bringing in extra resource. We have one person from ODR working across both teams and are hoping to bring in an Senior Case Officer on a contractual basis. One new person is starting in a few weeks, and we are advertising for another two roles. DBB confirmed funding is not an issue. The issue is finding the correct resource and training them up,</p>

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		<p>training takes time, but we should start to see a difference soon. The future plan is to bring the ODR work in quicker and prioritise it. Simon has a full team around him and is therefore fully supported. We are looking at one way only of Cancer data coming into Data Access. The request will come through and the team will progress</p> <p>ACTION 13 - DF asked if the panel could receive fortnightly updates to allow them to look at the progress and where we are up to and provide feedback on their findings. SN and SB will get together and put a process in place to ensure regular updates are issued to the panel members. The panel will work with NHSD to create a small number of KPI's on an ongoing basis</p> <p>13 - Complete/Closed</p>
5	Data Release Register for ODR in NHSD	<p>ODR will have its own register within NHSD. Data releases in progress from PHE/UKHSA will be carried across and SB and ES will ensure that this happens. The legacy PHE Release Register will not come over into NHSD, copies will be held in archive and links can be provided.</p> <p>ACTION 14: Once UKHSA have provided NHSD access to the legacy Release Register we can provide a link and publish.</p>
6	Items for next meeting and AOB	No AOB was raised.

Next Meeting	20/04/2022	Meeting Time	14:30 to 16:00
Location	Teams Meeting		