

REDACTED

REDACTED REDACTED

1. Welcome and introductions (REDACTED)

REDACTED welcomed attendees and asked all to introduce themselves for new attendees.

2. Review of minutes, actions and decisions (REDACTED)

The minutes of the previous meeting were approved with no amendments.

Updates were given on the following actions:

- A17 –
 - REDACTED has been assigned as the Domain C communications lead. Meetings will be set up shortly with programme heads to discuss future action. REDACTED is due to meet REDACTED who is leading from NHS England
 - REDACTED has asked REDACTED to draft the engagement approach to use with the GP Profession.
 - NHS England is seeking to identify an SRO for the GP data set
- A29 – Owner changed to REDACTED.
- A33 – Once next steps agreed on contingency options and procurement approach, REDACTED / REDACTED to seek approval from REDACTED and REDACTED for content and positioning of dialog with GP suppliers. Linked to A17 – Closed.
- A35 – Covered in agenda item 3 – Closed.
- A36 – REDACTED confirmed REDACTED agreed to own the requirements that GP Data needs to implement in relation to Type 1 objection. Discussions ongoing currently with REDACTED's team, further clarity on assumptions to be given provided to REDACTED w/c 13th March by National Opt-out programme.
- A40 – REDACTED to attend Ops Board on the 16/3 and recommendations from the Ops Board to be taken to EMT on the 29/3. Formal decision to be circulated when agreed.
- A41 – REDACTED to attend until GP Data SRO assigned and new representative to attend. Closed.
- A51 – REDACTED / REDACTED / REDACTED meeting held, no additional steps required regarding governance for GP Dataset – Closed.
 - **Further action** – REDACTED / REDACTED to discuss the option of a broader engagement piece with NHS England in order to share plans for replacing GPES and the strategic direction. (New action A66).

- A52 – To be discussed at the March Domain C Board.
- A58 – MVP 1.0 to be released March 2019 and confirmation provided that it will contain functionality to meet the GP Data for Secondary Uses requirements (informal confirmation provided by REDACTED) Closed.
- A59 – Closed.
- A60 – REDACTED to seek endorsement for contingency option 2b as per the slide deck from REDACTED by the end of March.
- A61 – REDACTED discussed with REDACTED. Resource requirements sufficient for the next stage of project but will need to be carefully monitored – Closed.
- A62 – Work ongoing to finalise sponsorship. REDACTED in discussion with PHE, PHE have asked for more time to confirm use cases. Ongoing work to confirm with NHS England – linked to decision on the SRO for GP data set.
Further action – REDACTED to contact REDACTED around additional examples for the use case document (missing research agenda and winter pressures). (New action A67).
- A64 – RACI work ongoing, to be circulated to the board once deliverables for the next stage of the project have been agreed.
- A65 – REDACTED discussed with REDACTED, next RAVE engagement to be dependent on supplier approach – Closed.

3. GP Data Contingency Options* - recommended next steps for approval

(REDACTED/ REDACTED)

REDACTED presented GP Data Contingency Options.

Options presented as per the slide deck (paper 3):

a. Option 2a – Like for Like Replacement

No questions asked.

b. Option 2b – Do Minimum Replacement

REDACTED raised assumption that option 2b aligns with NDSD and DSP and this alignment has been discussed and agreed with the relevant people. REDACTED confirmed the alignment and that discussions have taken place and proposal agreed. Discussions with the Digital Delivery Centre (DDC) will continue to involve NDSD.

REDACTED raised concern around the language of aggregate and bespoke data within the proposal, and wanted clarity on where the data would be collected as one extract. REDACTED confirmed that payment extracts (aggregate extracts) will continue to run separately. REDACTED asked to look into potentially refining the language.

REDACTED asked what the commercial view of moving onto the GPSoC contract, how this fits with agenda item 2, and whether previous GPSS work can be reused to minimise potential GPSS workload. REDACTED stated work will be done with the suppliers to develop their own solutions. REDACTED confirmed that the intent will be there, and contingencies will be maintained at each step and the option to extensions may be may retained.

REDACTED raised the question of why not patient data first, and whether this is due to the risk that this would require a longer approvals process. REDACTED stated that there is work that needs to be done now to ensure continuity of the current extracts. REDACTED stated that there are no restrictions on this and conversations can be had in parallel but in order to maintain timescales this work needs to be completed first.

REDACTED raised question regarding NDSD and timing. If NDSD deliver a technical component by the end of March, and looking at solution assurance, integration tests, service readiness etc. How will this integrate into this option? REDACTED stated that NDSD's view would be to consume what GPDIP complete as part of their end to end solution. REDACTED from a test view the work to be completed by July 2018 will be considered as the tactical solution, this testing will then be expanded for component based (depending on the minimum viable product) DSP testing to be completed for March 2019. REDACTED further work to be done to generate an overall plan.

REDACTED presented the recommend next steps:

- Endorsement from the board on preferred option and preferred procurement approach
- REDACTED to endorse the proposal by end of March, and give agreement to go ahead with GP Profession engagement

- Discussions with solution assurance, NDS, service management and digital delivery centre regarding preferred option, and ATOS regarding exit and potential extensions to take place during March and April
- Draft up supplier engagement content to seek approval from REDACTED and GP Data Implementation Board by end of March
- Commercial discussions to start in April (as per procurement strategy)

REDACTED endorsed option 2b, with the caveat that commercial arrangements are understood further.

The Board endorsed option 2b (decision point 7).

ACTION – REDACTED to seek endorsement for option 2b from REDACTED by the end of March (Action A60).

ACTION – REDACTED/ REDACTED to complete further work on the fit between option 2b and potential commercial options.

4. GP Data Procurement Approach* - recommended approach for approval (REDACTED)

REDACTED and REDACTED presented the GP Data Procurement options for the standard GP Dataset. REDACTED clarified that the options to be presented do not cover option 2b.

Options presented as per slide deck (paper 3).

a. Option A – Direct award to the Principal Suppliers

REDACTED stated this option is discounted following legal advice as there is no legal route to follow as it is outside the scope of the current GPSoC framework.

b. Option B – Mini-competition under GPSoC

REDACTED stated due to the length of GPSoC framework this may be completed under the GPIT Futures framework.

REDACTED asked for clarification on what is being procured. REDACTED confirmed that this is the standard GP dataset, both service and data specification.

c. Option C – Mini-competition under another framework

REDACTED stated commercial are currently looking at the market as it stands to understand who is on the frameworks and who provides the required service.

d. Option D – Full OJEU

REDACTED stated that this option has been discussed as taking too long (12 months) for the requirements of the programme however, time may become available if option 2b is endorsed.

It was discussed that the most viable options are B and C. TS stated that REDACTED and REDACTED would complete a market assessment to confirm the most viable option.

ACTION – REDACTED to present Market Engagement strategy to the next board.

5. SCCI Process (REDACTED)

REDACTED presented the current SCCI process as per slide deck.

REDACTED confirmed the Data Coordination Board will sit before the SCCI process, and replace the current SCCI committee meeting.

REDACTED asked for clarity on who will be taking the GP dataset through SCCI as if the Primary Care Domain is expected to then resource will need to be planned.

ACTION – REDACTED to look into who will be taking the GP Dataset through the SCCI process.

If anyone has any further questions please contact REDACTED

6. Highlight Report

Not presented. All to review for information.

7. Risk and Issue Report

Not presented. All to review for information.

8. Plan on a Page

Not presented. All to review for information.

9. AOB

REDACTED asked if the decision to endorse option 2b can be shared. REDACTED stated yes it can be shared subject to the stated caveat.

10. Date of next meeting

5th April 2017 – Room 807.

Open actions table		
Ref	Action	Owner

<p>29/06/2016 A17</p>	<p>Plan on a Page – GP System Suppliers</p> <p>Consult with REDACTED on the reactive lines to take with external bodies on engagement regarding national data set at different stages in the project and REDACTED to speak to REDACTED to ascertain whether a strategic communications plan exists around the national data set. Update 19/01/2017 – Authorised to proceed but further understanding of engagement approach is needed prior to external communications. Further discussions are taking place - REDACTED with REDACTED and REDACTED with REDACTED .</p> <p>Update 01/03/2017 –</p> <ul style="list-style-type: none"> REDACTED has been assigned as the Domain C communications lead. Meetings will be set up shortly with programme heads to discuss future action. REDACTED is due to meet REDACTED who is leading from NHS England REDACTED has asked REDACTED to draft the engagement approach to use with the GP Profession. NHS England is seeking to identify an SRO for the GP data set <p>Update 26/03/2017 –</p> <ul style="list-style-type: none"> REDACTED is working with the team on the upcoming supplier workshops – mainly ensuring that corporate communication messages on key areas are confirmed before these sessions Further work is still ongoing to define how NHS England / NHS England will be working together to deliver the communications for paperless 2020. There is an item on the agenda for the engagement approach with the GP profession <p>Close and add recurring agenda item?</p>	<p>REDACTED / REDACTED</p>
<p>04/08/2016 A29</p>	<p>GP Data for Secondary Uses Highlight Report</p> <p>REDACTED to speak to REDACTED about seeking a direction for the GP Dataset and what it would mean for the programme. Update 24/11/2016 – No further progression until go-ahead agreed with SCCI. In principal REDACTED happy to lead on work. Update 19/01/2017 - REDACTED expectation that a Direction is required. REDACTED to determine with Kemi on how the decision on which organisation the direction comes through.</p> <p>Update 01/03/2017 - Owner changed to REDACTED .</p>	<p>REDACTED</p>
	<p>Update 27/03/2017 – Relates to GP Data Set and we need to agree an owner for the data set before progressing this work</p>	

<p>14/09/2016 A33</p>	<p>Plan on a Page – Requirements</p> <p>Chair to speak with REDACTED to confirm what we can do in terms of supplier engagement etc. while we are waiting for DH response to the NDG Review.</p> <p>Update 24/11/2016 – No supplier engagement prior to February.</p> <p>Update 19/01/2017 – REDACTED caution is needed. Before any engagement commences REDACTED needs to be clear what will be communicated and why.</p> <p>Update 18/02/2017 – Once next steps agreed on contingency options and procurement approach, REDACTED / REDACTED to seek approval from REDACTED and REDACTED for content and positioning of dialog with GP suppliers. Linked to A17 – Closed.</p>	<p>REDACTED Closed</p>
<p>14/09/2016 A35</p>	<p>Risks and Issues Reports</p> <p>The Chair to engage with REDACTED on a technical contingency against the risk that DSP would not be able to support a GPES replacement by August 2018</p> <p>Update 19/10/2016 – Covered by agenda item. See board minutes. Further actions regarding Risks and Issues – A43, A44.</p> <p>Update 19/01/2017 – Action owner changed to REDACTED . Agenda item to cover update on contingencies.</p> <p>Update 01/03/2017 - Covered in agenda item 3 – Closed.</p>	<p>REDACTED Closed</p>
<p>14/09/2016 A36</p>	<p>Risks and Issues Report</p> <p>The Chair to ask James Hawkins for guidance on treatment of Type 1 objections and proceeding on the basis of the earlier board decision (D2). Update 24/11/2016 – Follow current assumption. Further action: If type 1s remain – what is impacted by type 1s remaining at source? What is needed? New scenario to be considered. Update 19/01/2017 – Pseudo at source moving forward internally, not tested externally. REDACTED working on identifying options. REDACTED has asked REDACTED to own the requirements that GP Data needs to implement in relation to Type 1 objection. There is an external dependency on REDACTED to confirm the working assumption.</p> <p>Update 01/03/2017 - REDACTED confirmed REDACTED agreed to own the requirements that GP Data needs to implement in relation to Type 1 objection. Discussions ongoing currently with REDACTED 's team, further clarity on assumptions to be given provided to REDACTED w/c 13th</p>	<p>REDACTED</p>

	<p>Update 26/03/2017 – Current assumption is that Type 1 objections will remain in the short-term. The National Opt-out programme has also communicated to the team that de-identification needs to be included within the scope of GP Data for Secondary Uses requirements to be discussed with suppliers. Clarity required on whether this applies to GPES Uplift and current GPES PID extracts.</p>	
<p>14/09/2016 A40</p>	<p>AOB</p> <p>Chair to speak with Programme Director [REDACTED] about which Board [REDACTED] should be involved in in terms of MIQUEST.</p> <p>Update 01/03/2017 - DR to attend Ops Board on the 16/3 and recommendations from the Ops Board to be taken to EMT on the 29/3. Formal decision to be circulated when agreed.</p>	<p>[REDACTED]</p>
<p>19/10/2016 A41</p>	<p>GP Implementation Board membership</p> <p>[REDACTED] to have a discussion with [REDACTED] regarding GP Implementation Board membership. Update 19/10/2016 – [REDACTED] to attend on behalf of [REDACTED]</p> <p>Update 24/11/2016 – [REDACTED] to confirm with [REDACTED] who is attending future boards.</p> <p>Update 01/03/2017 - [REDACTED] to attend until GP Data SRO assigned and new representative to attend. Closed.</p>	<p>[REDACTED] Closed</p>
<p>24/11/2016 A51</p>	<p>Customer Facing Requirements</p> <p>[REDACTED] to talk to [REDACTED] regarding governance routes</p> <p>Update 19/01/2017 – Meeting took place with [REDACTED] e to share progress on GP Data and strategic approach to data collection. No additional steps regarding governance routes for the GP Data set identified.</p> <p>Update 01/03/2017 - [REDACTED] / [REDACTED] / [REDACTED] meeting held, no additional steps required regarding governance for GP Dataset – Closed.</p>	<p>[REDACTED] Closed</p>
<p>24/11/2016 A52</p>	<p>Customer Facing Requirements</p> <p>[REDACTED] to talk to [REDACTED] and [REDACTED] regarding governance routes. Update 19/01/2017 [REDACTED] t has responsibility of GPES replacement – GP Data Implementation project delivers GPES replacement governed under [REDACTED] . MW to take to the Domain C board to make structure clear.</p> <p>Update 01/03/2017 - To be discussed at the March Domain C Board.</p>	<p>[REDACTED]</p>

<p>24/11/2016 A56</p>	<p>Local standardised plan</p> <p>REDACTED / REDACTED to further discuss responsibilities regarding standardising local data flows.</p> <p>Update 19/01/2017 – REDACTED to pick up as a priority.</p>	<p>REDACTED</p>
<p>19/01/2017 A58</p>	<p>NDSD solution</p> <p>Formal confirmation required from the appropriate groups in NDSD that MVP (Minimum viable product) 1.0 will contain functionality to replace GPET-Q. Also confirmation of timescales for MVP 1.0.</p> <p>REDACTED and REDACTED to consider who should provide formal confirmation.</p> <p>Update 01/03/2017 - MVP 1.0 to be released March 2019 and confirmation provided that it will contain functionality to meet the GP Data for Secondary Uses requirements (informal confirmation provided by REDACTED) Closed.</p>	<p>REDACTED Closed</p>
<p>19/01/2017 A59</p>	<p>GPES Uplift proposal</p> <p>REDACTED to complete further analysis on benefits case for the GPES Uplift proposal</p> <p>Update 18/02/2017 – Assessment of benefits of GP Data contingency options covered under main agenda. Closed.</p>	<p>REDACTED Closed</p>
<p>19/01/2017 A60</p>	<p>Governance routes</p> <p>REDACTED to discuss with REDACTED decision and approval route for GPES Uplift outside of formal boards due to time limitations</p> <p>Update 01/03/2017 - REDACTED to seek endorsement for contingency option 2b as per the slide deck from REDACTED t by the end of March.</p> <p>Update 27/03/2017 – REDACTED has contacted REDACTED to confirm approval for next steps.</p>	<p>REDACTED</p>
<p>19/01/2017 A61</p>	<p>Resourcing</p> <p>REDACTED to provide position on resourcing requirement. Update 18/02/2017 – REDACTED to provide to REDACTED and REDACTED once Project Board agrees next steps on contingency options.</p> <p>Update 01/03/2017 - REDACTED discussed with REDACTED . Resource requirements sufficient for the next stage of project but will need to be carefully monitored – Closed.</p>	<p>REDACTED Closed</p>

<p>19/01/2017 A62</p>	<p>Governance plan</p> <p>REDACTED to review governance plan required around dataset including:</p> <ul style="list-style-type: none"> • Intent, activity, resource, process, dependencies and how they fit together. • Further work to understand the impact of providing information to the public, is it the right time to submit to DCB – who is responsible and accountable for this being completed correctly and in context with the projects overall set of objectives. S REDACTED to seek advice from REDACTED . <p>Update 18/02/2017 – A meeting has taken place between REDACTED , REDACTED and REDACTED . The governance process is understood and agreed that it needs to be set out in the timeline for the GP Data options. Further work required regarding sponsorship and approval of the GP Data Set by REDACTED and the project team. REDACTED to start with REDACTED for NHS England and REDACTED for Public Health England.</p> <p>Update 01/03/2017 - Work ongoing to finalise sponsorship. REDACTED in discussion with PHE, PHE have asked for more time to confirm use cases. Ongoing work to confirm with NHS England – likely to be linked to decision on the SRO for GP data set.</p> <p>Update 26/03/2017 - We have NHS England use cases but situation remains the same that we have no sponsor and no one to approve the use cases at present. REDACTED and REDACTED continuing to raise through the appropriate</p>	<p>REDACTED</p>
<p>19/01/2017 A64</p>	<p>Governance RACI</p> <p>REDACTED to circulate governance RACI – board to review and advise on any further groups that may need consulting.</p> <p>Update 18/02/2017 – A RACI has been drafted but will need to be reviewed following a Board decision on the preferred option for contingency.</p> <p>Update 01/03/2017 - RACI work ongoing, to be circulated to the board once deliverables for the next stage of the project have been agreed.</p> <p>Update 22/03/2017 – Agenda item to cover. To close?</p>	<p>REDACTED</p>

<p>19/01/2017</p> <p>A65</p>	<p>RAVE process</p> <p>REDACTED to confirm with REDACTED current process is acceptable and look into how RAVE would fit with commercial exercise.</p> <p>Update 18/02/2017 – Agreed that the current process is acceptable, next steps with RAVE will depend on the selected procurement and contingency approach.</p> <p>Update 01/03/2017 - REDACTED discussed with REDACTED, next RAVE engagement to be dependent on supplier approach – Closed.</p>	<p>REDACTED</p> <p>Closed</p>
<p>01/03/2017</p> <p>A66</p>	<p>Customer Facing Requirements</p> <p>REDACTED / REDACTED to discuss the option of a broader engagement piece with NHS England in order to share plans for replacing GPES and the strategic direction.</p> <p>Update 27/03/2017 – REDACTED and REDACTED to review NHS England representation at the GP Data Project Board as a first step.</p>	<p>REDACTED/</p> <p>REDACTED</p>
<p>01/03/2017</p> <p>A67</p>	<p>Customer Facing Requirements</p> <p>REDACTED to contact REDACTED around additional examples for the use case document (missing research agenda and winter pressures).</p> <p>Update 26/03/2017 – A discussion has taken place, and will be incorporated into document but a sponsor is still required.</p>	<p>REDACTED</p>
<p>01/03/2017</p> <p>A68</p>	<p>GP Data Contingency Options</p> <p>REDACTED / REDACTED to complete further work on the fit between option 2b and potential commercial options.</p> <p>Update 22/03/2017 – Agenda item to cover this</p>	<p>REDACTED /</p> <p>REDACTED</p>
<p>01/03/2017</p> <p>A69</p>	<p>GP Data Procurement Approach</p> <p>REDACTED to present Market Engagement strategy to the next board.</p> <p>Update 22/03/2017 – Agenda item to cover this</p>	<p>REDACTED</p>

GP Data Implementation Project Board Decisions

<p>D1</p>	<p>A decision was made to approve the terms of reference (subject to the correction identified in action 9).</p>	<p>20th May 2016</p>
-----------	--	---------------------------------

D2	A decision was made that the working assumption for the business case is that patient consent will be handled in a central platform, rather than at practice level.	20 th May 2016
D3	A decision was made to approve procurement with 3 rd party suppliers to support VfM comparisons on options developed in the business case.	20 th May 2016
D4	A decision was made to approve in principle a separate feed of aggregate data for payment purposes.	14 th September 2016
D5	A decision was made to endorse Tolerance Exception Report 1	14 th September 2016
D6	A decision was made to endorse OBC	19 th October 2016
D7	A decision was made to endorse contingency option 2b	01 st March 2017

GP Data Interim Strategy Board Assumptions		
A1	Seeking a direction for an extract and the SCCI process will remove the requirement for the current practice authorisation model (stage 1 and stage 2).	19 th January 2017
A2	QOF will continue for at least the next two years.	19 th January 2017
A3	MVP 1.0 will not be available before March 2019 and will contain functionality to meet the GP Data for Secondary Uses requirements (informal confirmation provided by REDACTED)	01 st March 2017
A4	Delivery of contingency option will be done in such a way that it can be consumed by the DSP	01 st March 2017