

**Ref:** care.data/Programme Board/Paper 06

**Title:** care.data Pathfinder Stage – CCG Recruitment and Selection Process

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**Purpose:** To outline the planned process for the recruitment and selection of the Clinical Commissioning Group (CCG) 'Pathfinders', and to seek your agreement to providing the selection panel with the authority to make the selection decision.

**Background:** In February 2014, the decision was taken to delay the start of the extraction of primary care data from general practice following concerns raised by key stakeholders, in the media and across social media. Since then the programme has been listening to the views of patients, the public, GPs and stakeholders on how best to build trust and confidence in the care.data programme.

A set of 'planning principles' were produced and approved by the programme board at the 16 July 2014 Programme Board meeting. The planning principles reflected what the programme team had heard and provided a framework within which to move forward with detailed planning and delivery.

In line with the 'planning principles' we are now adopting a phased approach to the implementation of care.data, starting with a 'pathfinder' stage. The pathfinder stage will involve working with a small number of CCGs (between 2-4) encompassing up-to 500 GP Practices in order to test, evaluate and refine all aspects of the communication and data extraction process ahead of any further (national) rollout.

**Key Points:** This paper sets out the planned process for the recruitment and selection of pathfinder CCGs. A targeted approach to recruitment is being followed, with the programme engaging with those CCGs that expressed an 'informal' interest in participating in the pathfinder stage during early stages of the 'listening' exercise.

Regional NHS England colleagues are currently engaging with these CCGs in order to provide further information to them on the benefits of becoming a pathfinder, the support available, and the levels of local effort required. This will enable the CCGs to make an informed decision as to whether or not they wish to go forward to the selection panel. This engagement will also enable the programme to collect information on the suitability of each CCG to become a pathfinder and to support the programme to meet the objectives of the pathfinder stage.

The selection panel (see pages 3-4) is scheduled to meet on 27<sup>th</sup> August to assess and select pathfinders ahead of a formal invitation being sent to those CCGs that have been selected by the panel. Ahead of formal confirmation of CCG pathfinders and any external communication, formal approval/acceptance of the invitation through the CCGs local governance arrangements will be required.

**Desired outcome(s):** For the board to note the planned process for the recruitment and selection of CCG pathfinders, and to confirm agreement to providing the selection panel with

the authority to make the selection decision, or to provide any feedback or direction.

**Circulation:** Programme Board and Advisory Group

# care.data Programme: Pathfinder Stage – Recruitment and Selection process

08 August 2014 (v1.0)

## Purpose

1. The purpose of this briefing note is to set out the planned process for the recruitment and selection of CCGs that will be involved in the care.data 'Pathfinder' stage.

## Recommendations

2. That the Board notes the next steps and associated timeframe, and confirms that it will endorse the decision made by the selection panel once notified of the outcome via correspondence.

## Background

3. The care.data programme has proposed that the extraction of primary care data for care.data is undertaken in a phased manner with the first stage including between 100 to 500 pathfinder practices. This approach will allow NHS England and the Health and Social Care Information Centre (HSCIC) to work with a smaller number of CCGs and GP practices to test, evaluate and refine materials and processes ahead of any further roll-out. This paper sets out how interested CCGs are being engaged, what information is being collected from them, contingency arrangements should there be insufficient numbers/geographical coverage from CCGs engaged so far, and the selection process.

## CCG Selection

4. A targeted approach to recruitment is being followed, with the programme engaging with those CCGs that expressed an 'informal' interest in participating in the pathfinder stage during early stages of the 'listening' exercise. This steers away from the approach discussed previously with the programme board which would have involved inviting expressions of interest from all CCGs, which may have resulted in a large burden being placed on many CCGs, and which may have been disproportionate given the aim to recruit between 2-4 CCGs.
5. NHS England Regional Heads of Intelligence are leading on engagement with CCGs that informally expressed an interest. The engagement will enable the programme to outline the benefits and support available to CCGs interested in becoming pathfinders, as well as the level of local effort required and risks. This will enable the CCGs to make an informed choice as to whether they would like to go forward to be considered by the selection panel.
6. The engagement is also being used by the programme to capture information on the suitability of each CCG to become a pathfinder. A template used by the programme to capture this information is included as **Annex A1** and **Annex A2**. The populated templates which include information on GP System Supplier used, numbers of practices, support requirements, and local support available, will be used by the selection panel to

inform their selection.

7. In addition, key stakeholders including the British Medical Association (BMA), the Royal College of General Practitioners (RCGP) and Healthwatch England are being kept informed as we progress through this initial stage.
8. If there are insufficient CCGs identified through the current approach, additional CCGs will be identified by using local relationships including local Healthwatch groups and the NHS England Area Team Medical Directors.

### **Selection Panel**

9. The selection panel will meet on 27<sup>th</sup> August 2014 to assess the information put forward and to decide which CCGs most strongly meet the selection criteria. Individuals invited to participate on the selection panel are:

<b>Member</b>	<b>Organisation</b>
Eve Roodhouse	Programme Director, care.data
Dr Beth McCarron Nash (BMA representative)	BMA
Nigel Mathers	RCGP
TBC	Healthwatch England
TBC	Patient Representatives
Andrew Chronias	NHS England Regional Head of Intelligence
Rachel Merrett	NHS England Programme Policy

### **Selection Criteria**

10. The following criteria will be considered as part of the approach to identification of practices / CCGs to ensure the pathfinder objectives can be met:
  - A mixture of practices to include those who have concerns.
  - A mixture of practice sizes – to test the feasibility of the rollout with differing levels of support structures available between large and small practices.
  - CCGs, GP Practices, Patient representative groups such as local Healthwatch, Patient Participation Groups (PPGs) willing to collaborate in the phased rollout.
  - To cover at least 3 out of the 4 main GP system suppliers i.e. EMIS, TPP, INPS and Microtest.
  - A mix of population demographics in terms of socio economic background, diversity and urban/ rural – to be broadly representative of the population at large.
  - Ideally a mixture of maturities in existing data sharing for primary care purposes e.g. local health record sharing for co-ordinated care and having regard to planned implementation of other data sharing initiatives in particular the Summary Care Record rollout plans.

### **Pathfinder next steps**

11. After the decision has been made by the selection panel and the programme board has been notified of the outcome via correspondence, the selected CCGs will be formally invited to become a pathfinder and they will be asked to confirm their acceptance by 12th September 2014.

### **Pathfinder Timelines**

12. The planned timeline is shown below.

<b>Task/Deliverable/Milestone</b>	<b>Forecast date</b>
Confirmation of CCGs going forward to selection panel	22 August 2014
Pathfinder selection panel	27 August 2014
CCGs formally invited to become pathfinders	29 August 2014
Pathfinder areas confirmed	12 September 2014



**Support**

**6. Support Required**  
Provide details of any expectations the CCG has in relation to support available from the care.data programme and regional teams for both the CCG and its practices.

6a. Communication products required	
6b. Attendance at meetings	
6c. On the ground support	
6d. Phone line support	
6e. Quality assurance of local materials	
6f. Any other resources	

**7. CCG & Practice Capacity**  
Provide details of any resources the CCG has identified it will be able to provide and any resource difficulties at either the CCG or practice level that have been recognised.

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**Additional Information:**

<b>8. Number of practices represented by the CCG</b>	
<b>9. Does the CCG use a Clinical Support Unit? (Yes/No)</b>	

**Offer/ Acceptance Next Steps**

**10. Formal Offer Process**  
Please identify what steps will be required for the CCG to be able to confirm/decline a formal offer to become a Pathfinder

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**11. Formal Offer Timescale**  
Formal offers for those identified as the best fit to become a pathfinder are expected to be made by 29/08 with an expectation that selected CCGs would be asked to confirm/decline a formal offer soon after.

If a formal offer is made, identify the date by which the CCG expects it will be able to confirm/decline the offer.	
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## Annex A2: Practice Information

Practice Details					
<b>1. Practice Name</b>					
<b>2. Practice ODS Code</b>					
<b>3. GP IT System (version)</b>					
<b>4. Practice Register size</b>					
<b>5. Practice Geographical Coverage by Post Code Sector</b>					
<b>6. Population Profile</b>					
For each of the following categories identify broad ranges within which the practice population is expected to fall and any specific points worth noting e.g. if there is a particularly high concentration in a grouping					
6a. Urban/rural mix					
6b. Deprivation/Socio Economic Background					
6c. Ethnic diversity					
6d. Age ranges					
<b>7. Medical Record Sharing Schemes in Existence</b>					
Please indicate whether the practice is known to participate in each of the following schemes and at what stage they may be at e.g., at initiation stage, implementing, deployed plus any other specific points that it is considered may be worth noting					
7a. Summary Care Record					
7b. Local/ Regional Health Record Sharing					
7c. Direct Patient Access					
7d. Research Affiliations e.g. Clinical Practice Research Datalink, TPP Research One, The Health Improvement Network, EMIS QResearch					
<b>8. Engagement Position</b>					
In terms of becoming a possible pathfinder, identify the likely position the practice will take	<b>Against - likely to opt out</b>	<b>Against - likely to opt in</b>	<b>In Favour</b>	<b>Impartial</b>	<b>Unknown</b>
<b>9. Other</b>					
Any other information about the practice that may be considered pertinent to the selection exercise					