



London Health Data Strategy Independent Information Access Group - Minutes

Monday 19th May 2025 @ 14:00 to 14:40

Venue: TEAMS only

Attendees:

Name	Role	Organisation	IIAG Role
Graham Head	South East London Healthwatch and Data Usage Committee	South East London ICB	ICB Citizen Member & Interim Chair
Ian Colvin	GP, Islington GP Federation and NCL ICB Board Member of General Practice Provider Alliance	North Central London ICB	ICB Clinical Member
Caroline Law	Head of Information Governance and Data Protection Officer, Central London Community Healthcare NHS Trust	North West London ICB	ICB Clinical Member
Susan Ashbourne		South West London ICB	ICB Citizen Member
Mark Agathangelou	Lived Experience Partner	North Central London ICB	ICB Citizen Member
Kerry Beadling-Barron	Director of Communications	Health Innovation Network South London	Public and Patient Engagement Lead
James Friend	Director of Digital Strategy	NHS England - London Region	Secretary

Item 1: Apologies Given or Assumed

Name	Role	Organisation	Programme Role
To be Nominated / Recruited		North East London ICB	ICB Clinical Member
		North East London ICB	Expert Members
		North West London ICB	ICB Citizen Member
Matt Laundry	Chief Clinical Information Officer	South West London ICB	ICB Clinical Member
Lizzie Wallman	Deputy Chief Nurse	South East London ICB	ICB Clinical Member

Bill Jenks, Digital Manager and North East London Strategic Information Governance Network Chair on behalf of North East London ICB was not present at this meeting and the ICB has not yet nominated a successor Citizen member. James Friend noted that he had written to the ICB to escalate this matter.

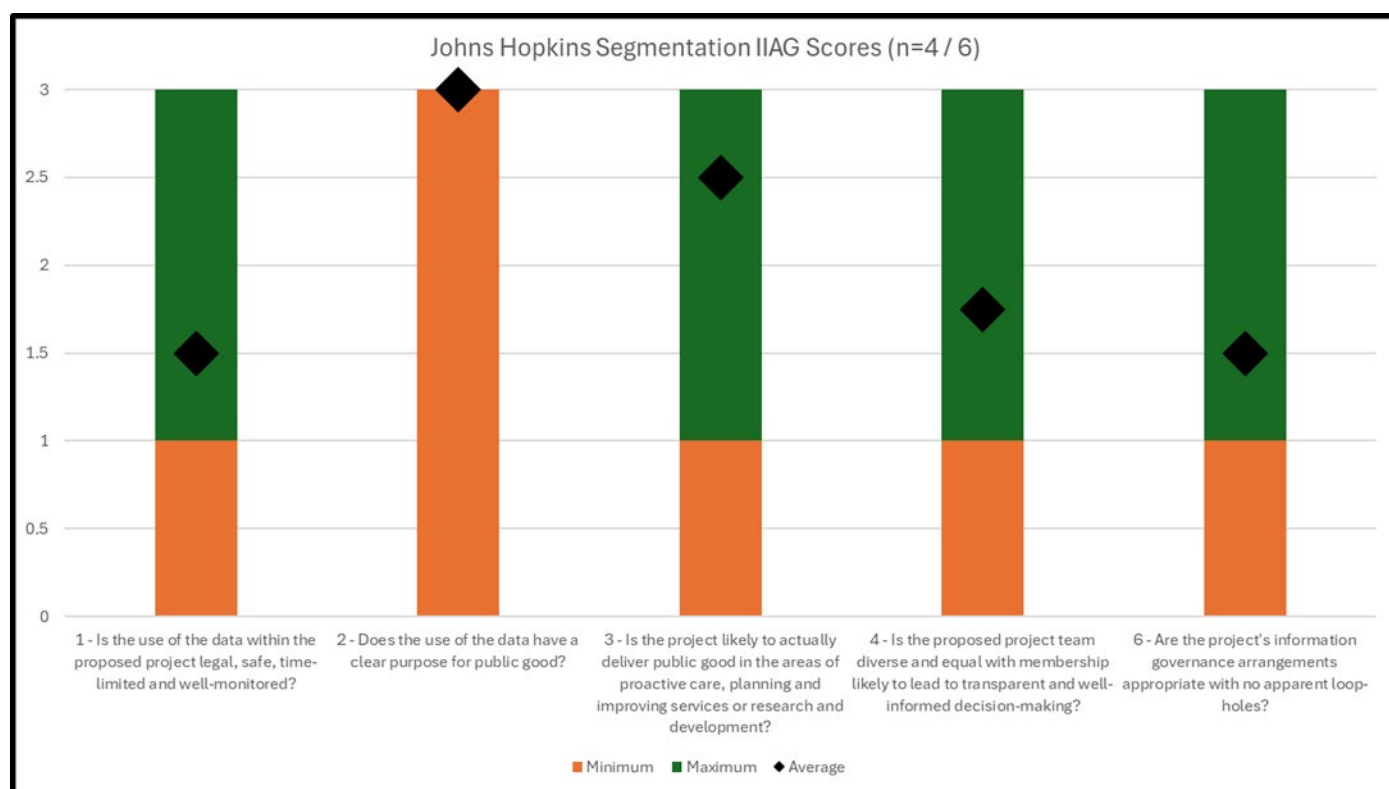


Item 2: Use Case Review - NHS 111 Risk Stratification Use of Johns Hopkins Segmentation

The IIAG's Terms of Reference and operating process allows it to come to one of three conclusions:

- Recommendation to the Data Controllers that the proposed Pan London data use be considered by them
- Not to recommend the proposed Pan London data use to the Data Controllers
- To require and where appropriate support the project team to develop the use case for further consideration after specific feedback points have been addressed.

The outcome of the members review in the context of its Terms of Reference key lines of enquiry was as follows:



The IIAG noted that the proposal at this time is for an ongoing use of the data and is not time limited. It was also noted that confirmation was not stated as being in place that (a) the organisations accessing the data are Data Protection Security Toolkit compliant or that (b) team members had signed appropriate confidentially agreements.

It would therefore fall into the third category of requiring development before recommendation to ICB Data Controllers.

Given the nature of the application (i.e. not a vanilla Research & Development use case) and the development of the London Data Service to act as joint data controller going forward and which brings together general practice and secondary care data sets, the suggestion is that the project team progress these three feedback aspects directly with the London Data Service as they progress the work through to their Data Controller / Data Access Committee formally considering the use case, specifically:



- Agree a formal date for reviewing the clinical and operational benefit of the use of the data and whether to continue so to do. It was suggested by the IIAG that the date be set as being 12 months from the start of the operational use.
- Note that North East London ICB as the host of the London Data and Analytics Service are DPST compliant and if other organisations are involved who are only working towards DPST compliance then work with the Digital Transformation business partner team to clarify any concerns
- Given NHS staff have the confidentiality agreement within their terms of employment, note that if there are any non-NHS Staff accessing the data then confidentiality agreements must be entered into.

Item 3: Pipeline of Use Cases

James Friend noted that a proposed use case to support the Eye Care Neighbourhood Pathway may be submitted for review at a future meeting.

The clinical pathway is demonstrated to work as a proof of concept and is to be developed through a scaled up approach using the nationally available digital infrastructure. Once that aspect of the Proof of Concept test with patient sets (GP practices) that are already commissioned to the Single Point of Access is developed the project team will move on to a Proof of Value stage by running it for a period of time alongside productivity and outcome metrics drawing data (baseline and comparator) from the London Data Service. IIAG use case review may be required to facilitate that, or it may be deemed appropriate to complete this phase when the use case is moving to a pan London footprint.

Item 4: Items for Noting

The minutes from the previous meeting on 17th March 2025 were approved.

Item 5: Any Other Business

It was confirmed that North East London ICB are in the process of issuing funding Memorandum of Understanding documents to the four other ICBs, in the same process as for the prior year and the IIAG members or their employing organisations should continue to submit claims as previously.

Additionally, IIAG members noted the potential implications of the recently published Model ICB documents which indicated changes to responsibilities for digital and data governance, and concluded that the operational processes of the IIAG may need to be reviewed in due course as a consequence. It was additionally noted that effective Patient and Public Involvement and Engagement would be important both for the development of the revised ICB approaches locally and specifically for the Neighbourhood Providers / Integrated Neighbourhood Teams.

Dates of the next meeting:

21st July 2025: 14:00 – 15:00

Agenda items would include:

- Update from NEL ICB on the recruitment to their IIAG roles
- Update on the implications of the Model ICB on data controller roles