# NHSCR Governance Board Seventh Meeting: 10 December 2008

#### Minutes

Duncan Macniven, Register General (Chairman)
Paul Rhodes, SG
Dr Malcolm McWhirter, SG
Prof Graeme Laurie, University of Edinburgh
Martin Morrison, NHS National Services, PSD
Muriel Douglas, Head of NHSCR, GROS
Kirsty Maclachlan, Head of Demography, GROS
Irene Henry, NHSCR, GROS (Minutes)

#### **Welcome and Introductions**

1. The Chairman welcomed members and particularly Martin Morrison. There were apologies from Dr Lorna Ramsay and Jim Kinney. Dr Andrew Riley has resigned from the board as the Director of Public Health representative and the Chairman was seeking nominations for a replacement.

## Minutes of meeting on 14 May 2008 and matters arising

2. The minutes were approved with the amendment at paragraph 5 to 2,082 registers.

### NHSCR's information governance standards

3. The standards were now in their final form and the Chairman thanked Muriel Douglas for the work put in on it. A discussion followed on how to prevent unauthorised access to the records. Muriel Douglas outlined the training and appraisal system in NHSCR, where an ongoing emphasis is placed on the importance of confidentiality and accessing records only when necessary. She would discuss with GROS's Information Security Manager the timing of his visit to check compliance with the standards.

#### **NHSCR** and the Citizen's Account

4. Muriel Douglas spoke to paper NHSCR GB 5/08, adding that the number of query cases from the Improvement Service was now expected to be in the region of 114,000. Volumes and quality of the data to be provided by the Improvement Service once the steady state was reached is still unknown. The latest download of 45,714 updated records from the NHSCR would be provided to the Improvement Service in the next few days. There was discussion on possible uses of the Citizen Account infrastructure within the health service, which was already in hand for a group of diabetic patients and which might have wider application. Muriel Douglas explained the different levels of authentication within the Citizen Account and that the initial sign up included agreement to share data, including with the Registrar General. A copy of the application form can be viewed at www.entitlementcard.org.uk.

### Creating a backup to NHSCR archive

5. Muriel Douglas spoke to paper NHSCR GB 6/08. Response times for the new index were not as fast as expected. Investigations are in progress and members noted that there was more than one way of improving response times. The new search facility has greatly improved the searching on older people and provides the opportunity to find people without the 1939 address. The Scottish Longitudinal Study (SLS) is carrying out a feasibility study to extend the SLS back through time using the index. There may also be opportunities to re-visit other studies using the index.

### **NHSCR Memorandum Trading Account**

6. The Chairman spoke to paper NHSCR GB 7/08, explaining that the NHSCR was self-financing. The current spit was 80% Health and 20% Citizen Account, based on relative workload volumes. This was not fixed and SLAs would determine the split in future years. Medical research income had deceased significantly due to a lack of new studies. The large ongoing studies, including SLS, are now in the maintenance stages. A revised MTA including actual figures for 2007-08 as well as budget will be sent out in January.

# **Revising the NHSCR Regulations**

7. The Chairman gave a oral update on the revision of the NHSCR regulations that were in the final stages of approval by Parliament. It had been decided not to request approval for NHSCR to take on records from the Citizen's Account where the person was not registered with a GP. These records were however being stored separately and it would be possible to assess whether their numbers justified a fresh regulation to authorise their inclusion on the Register. Meantime, it was permissible under the 2006 Act to add to the NHSCR any people who were on the CHI but not on the NHSCR.

### **Relationship with NHS Information Centre**

8. The Chairman said that, because of the organisational change affecting the English NHSCR, extra attention had been paid to liaison with the NHS Information Centre of which it now formed part. He had had a useful meeting in Southport; senior managers from NHSIS had visited Edinburgh; and members of PIAG (the English analogue of PAC) had visited Dumfries. Initially there had been delays in medical research applications being forwarded to Scotland with the move of the PIAG secretariat from London to Southport but this has now been resolved with an electronic system. Dr Ramsay and PAC were now only looking at applications containing participation by Scottish patients. A process is in place where applications will be considered when patients subsequently move to Scotland. It was noted that England and Wales had the legislative framework to approve studies without individual informed consent. Graeme Laurie had provided a paper on this – Data Linkage Legal and Ethical Issues – for discussion at PAC.

## Any other business

- 9. The Chairman tabled a questionnaire from SG's eHealth team about the functioning of the Board, to which he had responded, and invited comments.
- 10. The Chairman undertook to prepare a report on the work of the Board for the Chief Medical Officer.
- 11. Muriel Douglas tabled a requested from the SG's Public Protection Unit for assistance in tracing missing offenders from the Sex Offenders Register, possibly 4-5 per year. It was considered that current legislation contained in the LEARS (Scotland) Act 2006 and the Management of Offenders etc (Scotland) Act 2005 would allow this.

### Date of next meeting

12. Proposed dates in May would be circulated to members. Thereafter, once the scope of the Citizen's Account work was clearer, it would probably be sensible to move to an annual cycle.

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