Cheshire and Merseyside Health and Care Partnership

Data Sharing Agreement (Tier Two)

Workstream: COVID-19 Intelligence

Addendum B - Covid-19 Vaccination NIMS

Contents

Addendum B - Covid-19 Vaccination NIMS

1. Overview

This Addendum sets out the additional work for the NIMS vaccination reporting data flows, and includes:

- COPI Notice to NHS Digital – 17 March 2020
- NIMS COVID-19 Vaccination Reporting - Functional Specification Document
- Other local documents supporting the work

This Addendum should be read in conjunction with the:

Cheshire and Merseyside Health and Care Partnership:
Workstream: Combined Intelligence for Population Health Action (CIPHA)
COVID-19 Intelligence
- Data Sharing Agreement (Tier Two)
- Data Protection Impact Assessment (DPIA)
- Addendum A - Flu and Pandemic Covid-19 Vaccinations

2. Lawful Basis

The COPI Notice, under Regulation 3(4) of the Health Service Control of Patient Information Regulations 2002 - **COPI Notice 20 March 2020** sets out:

- Delivering services to patients, clinicians, the health services and adult social care services workforce and the public about and in connection with COVID-19, including the provision of information, fit notes and the provision of health care and adult social care services;

N.B. COPI Notices have been extended until the end of March 2021 to help give healthcare organisations and Local Authorities the confidence to share the data needed to respond to COVID-19.

The common law duty of confidentiality is met by the public interest. The legal gateway is the COPI Notice.

In addition, GDPR is met by:

Processing Personal Data - Article 6
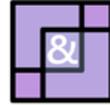
6(1)(e) Necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller

Processing Sensitive Personal Data – Article 9

9(2)(h) Necessary for the reasons of preventative or ==occupational medicine==, ==for assessing the working capacity of the employee==, medical diagnosis, the provision of health or social care or treatment or management of health or social care systems and services on the basis of Union or Member State law or a contract with a health professional

9(2)(i) Necessary for the reason of public interest in the area of public health, such as protecting against serious cross border threats to health or ensuring high standards of healthcare and of medicinal products or medical devices.

The highlights in ==yellow== show how COPI and GDPR link to the workforce in this instance, and in ==green== the link that staff are well enough to work, as the employer owes their staff and the wider workforce a duty of care for health and safety provision during this global pandemic.
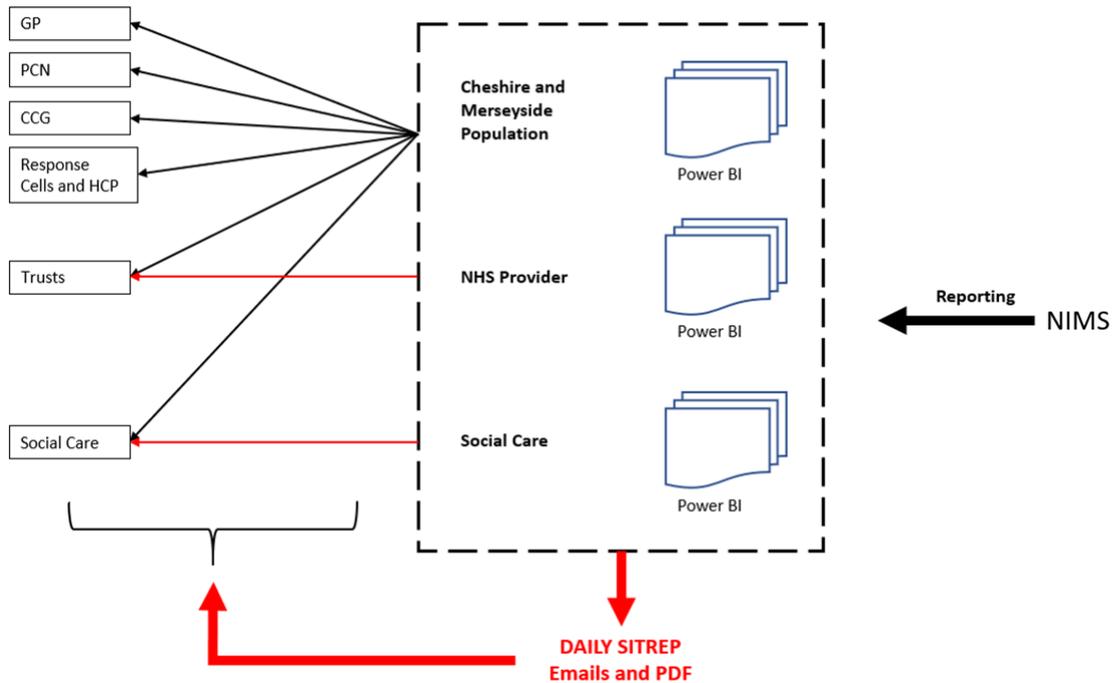
3. NIMS Data Flows

The Simply Book App and NIMS App use the following data flow, the example below shows 'Pandemic Vaccination' for PCN Non-Roving Service Model – this supports COVID vaccination pathway for all PCN cohorts that will not be serviced via a Roving Model.
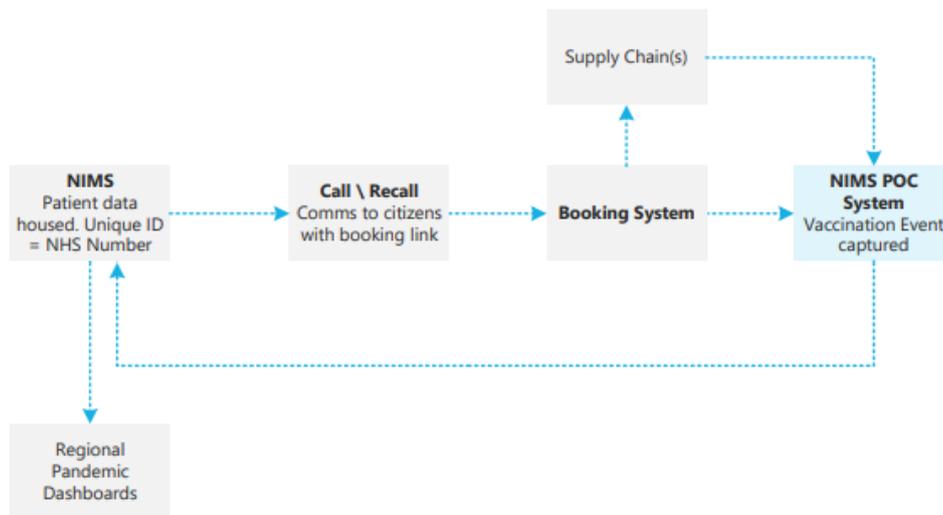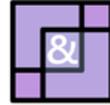
4. CIPHA Reporting Schematic

Letter from: Terry Whalley, C&M Covid-19 Testing Incident Director

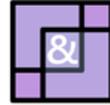ACTION REQUIRED: Names to receive COVID vaccination reports

20201128 - Letter to
COVID Vacc leads No

Population Health Analytics - NIMMs Cloud Access Security mass JIRA New User bulk account Creation loader

Nims onboarding
for COVID vacc repor

5. COPI Notices to NHS Digital

The Secretary of State for Health and Social Care has issued NHS Digital with a Notice under Regulation 3(4) of the National Health Service (Control of Patient Information Regulations) 2002 (COPI) to require NHS Digital to share confidential patient information with organisations entitled to process this under COPI for COVID-19 purposes.

COPI Notice to NHS Digital – 17 March 2020

copi-notice-to-nhs-
digital-covid-19 (1).p

Extended COPI Notice to NHS Digital – 29 July 2020

29072020-extended
-copi-notice-to-nhs-

6. DHSC - QA and Pillar 2

The two data feeds that we receive from DHSC (QA and Pillar 2), are embedded below:

Graphnet
Pillar2andQA dataset

The list of data fields that Graphnet process are:

- On the Pillar 2 mast data set we add some fields in to enable linking with the wider CIPHA data set (no wider analysis is taking place currently). These fields are coloured in light blue.
- For the QA data set, this is the field set sent by DHSC.
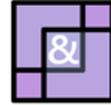
7. NIMS COVID-19 Vaccination Reporting - Functional Specification Document

DRAFT v0.4 – final available January 2021

Further details of the vaccination reporting can be found in the following document embedded below:

> Combined Intelligence for Population Health Action: CIPHA
> Cheshire and Merseyside COVID-19 Vaccination Reporting
> Functional Specification Document

NIMS COVID-19
Vaccination Reportin

8. Reports Overview

Cheshire and Merseyside Health and Care Partnership

https://www.cheshireandmerseysidepartnership.co.uk/about-us/

Combined Intelligence for Public Health Action (CIPHA) programme progresses to second phase

https://www.cheshireandmerseysidepartnership.co.uk/news-and-publications/combined-intelligence-for-public-health-action-cipha-programme-progresses-to-second-phase/

Significant progress has been made to ensure that Cheshire and Merseyside's Combined Intelligence for Public Health Action (CIPHA) dashboard is operational before the winter period.

The data and intelligence dashboard, which was commissioned by the Hospital and Out of Hospital Cells and funded by NHSX, will provide an integrated and shared intelligence base to support partners across the region when managing COVID-19 outbreaks.

The dashboard will monitor the incidences of cases and mortalities in near real time across acute, community mental health and local authority services whilst also monitoring and reporting on the capacity in the system to handle the demand of a second surge, should one occur.
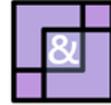
It will be an important element of managing outbreaks in the region and will support both cells, Public Health England, Local Authorities, the NHS and CCGs to manage the response on a strategic level.

The main sources of data that inform this dashboard include all providers in Cheshire and Merseyside, national data sources and testing centres in the region.

Over the past few months, the project has met many milestones, including:

•Established governance, with the creation of a Board, programme team and workstream leads

•Enacted a detailed five-week delivery plan, with the first phase of this now complete

•Engaged with partners through various workshops and meetings (e.g. (COVID-cells, clinical informatics Group, GPs, NWAS, NHS Provider Trusts, LMCs, digital leadership community, Local Authorities, Public Health, labs and NPEX, IG groups and leads and The University of Liverpool)

•Developed a target operating model – including initial use cases covering epidemiology and capacity and demand planning

•A robust data sharing agreement in place (with contributions from stakeholders) with most of the main providers signed up and nearly half the GPs.

Having established the platform and initial outputs the programme is now moving into the second phase. During the next phase, the programme will prioritise on creating a clinical outcomes radar, integration with public health reporting and a renewed focus on reporting of vaccinations.

Further updates about the progress of this project will be shared in upcoming editions of Connect, the Partnership's stakeholder newsletter.

The following summarises the reports that will be available: -
- Workforce and vaccination report that enables a user to drill from an organisation to a department and see aggregate level data on % staff vaccinated
- COVID-19 vaccination reporting similar to the Flu vaccination report which enables a view on population by CCG/Practice/PCN and local authority/ward
- Invitation for vaccination – this report will provide information on who has been
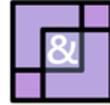
9. Combined Intelligence for Public Health Action (CIPHA)

Please see the CIPHA website for key documents that support the work:

www.cipha.nhs.uk

Information Governance
https://www.cipha.nhs.uk/information-governance/

Data Sharing Agreements

Tier Zero S2C Overarching Data Sharing Agreement

Tier One S2C Data Sharing Agreement Standards

Tier Two S2C Data Sharing Agreement Workstream COVID Intelligence

Addendum A

Full DPIA COVID Intelligence S2CDOC- ID000026 Final 280920

COVID-19 Transparency Notice and Privacy Notice
https://digital.nhs.uk/coronavirus/coronavirus-covid-19-response-information-governance-hub/coronavirus-covid-19-response-transparency-notice

https://www.nhsx.nhs.uk/media/documents/exampleprivacynotice.pdf

COPI for COVID-19 Purposes
This link gives the first and the extended COPI for COVID-19:

https://digital.nhs.uk/coronavirus/coronavirus-covid-19-response-information-governance-hub/control-of-patient-information-copi-notice

The Secretary of State for Health and Social Care has issued NHS Digital with a Notice under Regulation 3(4) of the National Health Service (Control of Patient Information Regulations) 2002 (COPI) to require NHS Digital to share confidential patient information with organisations entitled to process this under COPI for COVID-19 purposes.

10. FAQs

[GP FAQ's](#)

[Local Authority FAQ's](#)

11. COVID Tracking

A short video can be found at:

https://www.cipha.nhs.uk/training-materials/covid-tracking/

12. Simply Book DPIAs

DPIA - short

Covid JBS Simply
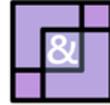Book_short_DPIA_for

DPIA - full

DPIA - JBS Platform
v0 4 clean.docx

Also, see the following from the **Future NHS Collaboration Platform**

https://future.nhs.uk/CM_DGH/view?objectId=24265168

C&M Digital Collaboration Hub ▸ ... ▸ Technical and FAQ's ▸ Information Governance

13. Email: NWICC 4493 Lateral Flow Reporting

From: EPRRNW, England (NHS ENGLAND & NHS IMPROVEMENT - X24)
Sent: 26 November 2020 17:58
Subject: NWICC 4493 Lateral Flow reporting

Dear all,

Given that there have been a number of conversations around reporting for the Lateral Flow testing it was felt that it would be helpful to share the current expectations for reporting. We are currently asking for 3 regular reports, each for a different purpose – apologies it has ended up slightly fractured, but hopefully you can appreciate why.

1. **Daily SitRep** – This is based on the letter from 24th November, and is a daily return looking at distribution of kits, participation, and the impact on workforce (NHSStaffLFT attached). We recognise that there are fields in here that will be 0 or unknown – for example we are aware that the distribution method in some Trusts means that there is not a point of refusal for staff, and that data around first day absence or return would not be captured. This has been fed back to the national team, but in the meantime please complete this as well as you can. This is to be **returned by 2pm daily** through the portal.

2. **Weekly Portal submission** – This is the weekly submission to be completed on Fridays (COVIDReportingTemplate attached), showing the staff testing information for the previous week. This will have the information by staff member, and will contain information on e.g. demographics. This will be reported on nationally, with the slight delays in production this entails. This is to be **returned by COP Friday** through the portal.

3. **Weekly headline summary –** We are required to report to IMT on a weekly basis on Friday afternoon – this will be the first view that regional colleagues have of rollout and positivity, and so may inform early investigation and decision making. I have done some work with the leads from the Early Mover sites to make sure we are asking for information that can be easily pulled out of the two reports above and the data you are capturing, so I don't believe this is a significant additional burden. This covers kit distribution, Lat Flow results and results compared to PCR. This is to be returned to englandcm@nhs.net and miles.taylor@nhs.net by **3pm on Fridays.**
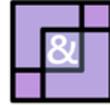
I hope this is clear, and is what people were expecting, but if there are any issues please feel free to get in touch.

Thanks,

Miles

Miles Taylor

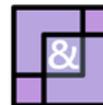Lancashire and South Cumbria Improvement Manager

NHS England and NHS Improvement North West

07702 409 654

14. Single Point of Contact (SPOC)

The SPOC for the North West is:

Helen Chainey
Single Point of Contact (SPOC)
Incident Coordination Centre (North West)
NHS England and NHS Improvement
e: england.eprrnw@nhs.net
t: 0114 324 0457
m: 07724 426305

15. Honorary Contracts

Honorary Contract arrangement for access to Pillar 2 Testing Data for Liverpool University

At its meeting on the 4th November the DAAG approved the attached process for accessing pseudonymised data for CCG's and Local Authorities. We agreed as part of this that any requests for data that were outside of these two organisations would be a request to the DAAG Group.

The mass testing programme has been implemented in Liverpool and CIPHA has secured the DSA – embedded below - to allow for the patient level data to flow from DHSC into CIPHA.

A request came from Gold Command for analysis of this dataset. A subsequent request was then received from Iain Buchan, Executive Dean, Institute of Population Health, University of Liverpool, to obtain access to the pseudonymised data flow to undertake this analysis. Iain is an employee of Liverpool University which is not listed in the DSA with DHSC for the Pillar 2 testing data (embedded below). Therefore we have issued Iain Buchan an Honorary Contract with Liverpool CCG in order that he can gain access to this pseudonymised dataset – embedded below.

The Data Sharing Register– embedded below - reflects this project.

RBAC_DataMart_v2. pptx   Data Sharing Agreement between

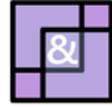Copy of CIPHA Data Sharing Register.xlsx

Honorary Contract template (COVID Tes

16. NHS Digital Data Sharing Agreement

Since August we've been working with NHS Digital to flow data into CIPHA platform that supplements the near real time Graphnet data with cleaned and standardised flows from the providers via NHSD.

The DSA for signature is embedded below.

SSAF.docx

17. Secretary of State for the Department of Health and Social Care

For reference, please see the DSA between:
Cheshire and Merseyside Health and Care Partnership and Graphnet /System C and St Helens and Knowsley Teaching Hospital NHS Trust (See Annex 1)
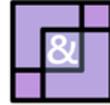
and

Secretary of State for the Department of Health and Social Care

This is embedded below.

Data Sharing
Agreement between

18. Reporting to Public Health England (PHE)

PHE are expecting an ImmForm submission fortnightly from every Trust. We have agreed that we want to:

- Avoid Trusts implementing a separate process for reporting to PHE
- Use a single source for the data / performance reporting

It therefore is our recommendation and makes more sense for PHE to receive their data directly from NIMS database and via our existing reporting channels.

We have therefore added PHE into this Addendum B. This will cover Cheshire and Merseyside to permit the sharing of data to PHE, under COPI.

PHE will need to apply for access to the NIMS.

We will then add PHE to our distribution list for Covid Daily Performance Dashboards (circulation list)
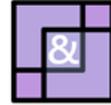
We will keep everyone as necessary appraised with updates on dashboard and reporting progress / status.

PHE require us to see up at an aggregate level Cheshire and Merseyside population uptake (by GP practice and by Council Ward) and on-board the relevant people through our existing process.

If PHE wish to see reports for employees of Trusts/LAs then these are at staff identified level and will go to individual organisations from NIMS through power BI dashboards. We don't get these centrally because of the PID nature of the data.

We will work with PHE to establish the names and contact details of the people to be on-boarded to receive staff identifiable data.

Consequently, we have included PHE to this Addendum B, for transparency.

Appendix One

COVID Vaccine Workforce Status Report – Staff Detail

Job Role	Employee Count	First Dose Complete	Second Dose Complete
Add Prof Scientific and Technic	355	17	0
Additional Clinical Services	2,654	71	0
Administrative and Clerical	2,363	64	0
Allied Health Professionals	626	7	0
Estates and Ancillary	1,223	15	0
Healthcare Scientists	262	1	0
Medical and Dental	1,709	187	0
Nursing and Midwifery Registered	3,336	140	0
Students	14	2	0
Total	**12,542**	**504**	**0**

Access is secured at Organisational level (e.g. NHS Trust or Local Authority). High level statistics of COVID vaccinations by staff type are available to give an organisation the ability

to view vaccination status within their organisation. The report allows drill down to person identifiable level and person details can be exported.

Users are able to identify the vaccinated and not vaccinated population in their workforce. The individual records can be exported for separate analysis.

This report provides the Vaccination history and records of vaccination recorded using the NIMS web app and is **only available to users of the NIMS web app**. The report is secured by organisation and can be filtered by organisation, cohort, vaccinator and location. The data held in this report can be exported.