



Velindre NHS Trust Headquarters  
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Our ref: SH-rc/2018

Nick Ramsay AM  
Chair of the Public Accounts Committee  
National Assembly for Wales,  
Senedd,  
Cardiff Bay Link Road,  
Cardiff  
CF10 4PZ

**28<sup>th</sup> June 2018**

Dear Mr Ramsay

### **NHS Wales Informatics Services**

I have been asked to respond to several specific questions following your receipt of a letter from the Auditor General at your meeting on the 11<sup>th</sup> June. My apologies that I am unable to attend in person but I will address each question in turn:

- What do you see as yours and the Trust's wider role in addressing these concerns.

In terms of my role as lead CEO for informatics I provide the focal point for the Chief Executives group in discussing informatics issues, plans, and strategies but operating within existing governance arrangements and not overriding them. This involves liaising with the Assistant Directors of informatics group (which acts as a peer group for the service), NWIS, and government in developing strategies and ways of working. Therefore, in this instance there are no specific responsibilities as a result of the role in addressing the concerns which have been raised, however, I have updated Chairs and other Chief Executives regarding progress and developments.

The hosting agreement (Feb 2011) in place between the Trust and Welsh Government, defines that;

- NWIS will be directed by WAG in respect of both strategy and operational management.
- Velindre NHS Trust will host NWIS on an "arm's length" basis only, and will not engage in a direct managerial relationship with NWIS and its functions.

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In addition, the hosting agreement specifies that;

- NWIS agrees to comply with Velindre NHS Trust policies and procedures, for example Standing Orders, Standing Financial Instructions, and HR Policies and Procedures.

In respect of this latter point, and further to reports from the NHS Wales Delivery Unit (March 2017) and NWSSP Internal Audit on NWIS Value for Money (July 2017), the Trust strengthened the governance arrangements in respect of Serious Incident Reporting under Putting Things Right Regulations (PTR), and wider governance and assurance requirements. Following the Delivery Unit report, Velindre NHS Trust, as a **responsible body** under PTR, has aligned processes within NWIS following meetings between the Trust Executive lead for PTR, NWIS Directors and senior managers. As a result quarterly reporting of NWIS technical SI events that impact on patient safety are integrated into the Trust's governance arrangements to the Board and with Welsh Government through the quarterly Quality & Delivery performance meetings.

All statutory NHS organisations in Wales are **responsible bodies** under the PTR Regulations and each organisation will need to assess the scale and the impact of an NWIS technical event in relation to their patient populations across primary, secondary and tertiary services and to report this to Welsh Government in accordance with the Serious Incident reporting process.

The Trust agreed with Welsh Government following the Delivery Unit report to establish a national working group with representation from the Delivery Unit, all Health Boards and Trusts in Wales and the group has developed a governance framework to clarify roles and responsibilities across the health sector, in accordance with the Putting Things Right regulations. A feasibility exercise has been conducted to test and refine the proposed framework which will now be implemented shortly and formatively evaluated in 12 months' time.

To share wider system learning arising from patient safety incidents, it is proposed that thematic reports will be drawn from Incident investigations and provided to the National Quality & Safety Forum. This will be discussed further with Welsh Government in the coming weeks.

In summary, the Trust is a responsible body under PTR along with all other HB and Trusts in Wales and each statutory body will need to ensure that it discharges its duties for serious incidents as required by the Regulations. The Trust does not get involved in the root cause analysis of the technical incidents, unless of course, the incident has

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an impact on services provided by the Trust as reflected in the Trust Board report provided by the Auditor General.

- Whether the lines of communication for raising concerns are sufficiently clear, in the context of the governance issues that we have already explored as part of our inquiry.

Clearly given the issues raised by Boards there are improvements required with respect to lines of communication to ensure that assurance is received on a timely basis by individual Boards. This will be improved through the implementation of the above framework mentioned earlier. However, arrangements are in place operationally through the national Infrastructure Management Board and the Informatics Planning and Delivery Board to provide opportunities to both raise concerns and receive assurance.

- What action have you taken personally to respond to concerns that have been raised with you (both within the Trust and by other health boards, notably ABM UHB)

Within the Trust we have held a meeting at senior level with NWIS to consider further ways of mitigating the risk of system outages in relation to CANISC and to explore opportunities to automate some aspects of our business continuity response.

We have also discussed our business continuity response to ensure that we have the most effective response in place should further outages occur.

On a wider basis I have met with NWIS, WG, and facilitated discussions with both Chairs and Chief Executives in relation to further improvements which could be made.

- Whether you or NWIS has yet provided a formal response to the concerns that have been raised in recent months and whether other health boards have been raising similar concerns to those expressed by ABMUHB and identified by the Trust. If there has been a formal response, then we would welcome sight of it.

After liaising with WG colleagues, I responded, in my role as Chief Executive of the host organisation, to Tracy Myhill, CEO of ABMu on 20<sup>th</sup> June noting that the concerns raised and assurances being sought sat outside of the responsibilities of Velindre Trust as host. I advised that the letter had been passed to the Director of NWIS who had liaised with WG and has since responded directly to ABMu.

Attached is my response sent to Tracy Myhill at ABMu HB, together with the response from Andrew Griffiths in NWIS, sent directly to ABMu.

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- How serious do you consider the concerns to be.

Any issue which has the potential to affect the confidence of those using our systems to support patient care is very important and this is reflected in the concerns which are being raised and the clarity which is being sought from Boards in terms of prompt reporting in relation to the causes of incidents and the changes which have been made to avoid the issues in the future.

- Why is it taking so long for NWIS to complete and report back on investigations into specific incidents.

The Trust is unable to comment on specific reasons and suggest this is a matter for NWIS to respond on.

- What are the main reasons for these outages, and is there hard evidence that underlying infrastructure issues are a significant factor.

In terms of the outages on a wider basis than the Trust, I'm not aware that there is one specific issue but Andrew Griffith's letter to ABMU does refer. Improvements have been made already, further improvements are planned and an external review of the datacentres has been commissioned. The role of the Infrastructure Management Board which is chaired by a Health Board representative in overseeing NWIS' planned changes in the national infrastructure and incidents and reporting key issues to IPAD and NIMB has recently been strengthened

In terms of Velindre NHS Trust the issues relating to CANISC are further complicated as result of the systems age and design. As a consequence of this it has been reflected in the national informatics risk register and a plan has been developed, facilitated through the Cancer Network, and is being implemented to replace the system. This has meant that the Trust is now utilising the National instance of the Welsh Clinical Portal, which enables the service to take advantage of other functionality such as access to the Welsh Care Record Service, GP Summary Report, the ability to view Test Results and is currently in the process of piloting the Medicines Transcribing and electronic Discharge module.

In terms of further technical solutions, we are actively working with Health Board colleagues and NWIS to deliver more information currently stored within Canisc into the Welsh Care Records Service so that this will be visible through the Welsh Clinical Portal across Wales. Furthermore, over the next two years we will continue to prepare the Cancer Centre for the transition away from Canisc and to using the Welsh Patient

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Administration System and the Welsh Clinical Portal as the clinical interface, which will not only remove the Canisc vulnerabilities it will also enhance the visibility of Information across organisational boundaries.

Hopefully this will provide you with the details you require

Yours sincerely

Steve Ham  
**Chief Executive**

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Our ref: SH-rg/2018-19

20th June 2018

Tracy Myhill  
Chief Executive  
ABMU Health Board  
Headquarters  
One Talbot Gateway, Seaway Parade,  
Port Talbot  
SA12 7BR

Dear Tracy,

My sincere apologies for the delay in my response to your letter from 27<sup>th</sup> April noting concerns raised by your Board about NWIS.

As you are aware the Trust hosts NWIS on behalf of Welsh Government and the assurances you seek relate to areas that sit outside our responsibility within these arrangements.

I forwarded your letter to Andrew Griffiths and following agreement with Welsh Government I'm aware that he has responded to you directly.

If there is anything further that I can do to help please let me know.

Yours sincerely



Steve Ham  
**Chief Executive**

Cc: Frances Duffy, Director of Primary Care & Innovation  
Andrew Griffiths, Director of NHS Wales Informatics Service

Tracy Myhill  
Chief Executive  
ABMU Health Board  
Headquarters  
One Talbot Gateway, Seaway Parade  
Port Talbot  
SA12 7BR

12th June 2018

Dear Tracy

### **NWIS Business Continuity Incidents**

Further to your letter of 27<sup>th</sup> April 2018, addressed to Steve Ham in Velindre NHS Trust, I have set out below a response to the concerns raised from the perspective of the NHS Wales Informatics Service. As the Director of the Informatics Service, I am acutely aware of the impact of any service outage and consider myself personally responsible for ensuring that issues are addressed comprehensively and in a timely fashion. I am therefore keen to ensure that you have the information needed in order to assure yourselves that actions have been and continue to be taken in the manner that you would expect and I am happy to discuss any of these points further with you directly if that would be helpful.

Firstly, with regard to the issues themselves and the analysis of their cause and the corrective actions taken, I have attached to this letter the Serious Incident Report into the incident that occurred on 24<sup>th</sup> January 2018 and a further Briefing Document following the incident on 21<sup>st</sup> March 2018. You will note that both incidents have been fully investigated, involving the third party suppliers where applicable, and a number of corrective actions have already been undertaken.

You mention in your letter the option to failover services, in this case the WLIMS; as you would expect the design of the infrastructure allows for failover to an alternative data centre. In the case of WLIMS, the complexity of the service and the process required to failover can take a number of hours to complete and therefore a 2 hours contingency has been introduced during which time a decision is made. A decision to failover is only made if expectations of outage exceed this time.

We recognise that in the event of any loss of service pro-active communications are key and that was certainly the case with the two incidents in the data centre. At a senior management level we link in with the Assistant Directors of Informatics, in these two cases arranging regular telephone calls to update on the situation, and subsequently to share the outcome of the investigations via the Informatics Planning and Delivery Group (IPAD) forum; As well as issuing a notification as soon as the

incident occurs and regular updates via our Service Desk to the Health Board Service Desks for local escalation.

I note in the ABMU Debrief Report the point was raised about the lack of any notification to the Health Board Communications Team *“and therefore, dealing with media enquiries was difficult, particularly with regard to the queries in relation to Cyber Security.”* This is currently being considered as part of the procedural review with Welsh Government, as this is not currently an action assigned to NWIS; In the majority of cases I would anticipate that the Health Board will be better placed to understand the specific impact on their services of any issues with their IT Services and we respect your decisions in terms of wider communications.

The Infrastructure Management Board, whose members include representatives from all of the Health Boards and Trusts, in ABMU’s case Carl Mustad, has discussed these issues in detail and has overseen all activities in terms of both the remedial actions as well as the additional measures that we are taking for further assurance.

In addition to regular audits in relation to our ISO Accreditation status for ISO 20000-1 IT Service Management Systems, NWIS already has a number of external technical audits that are undertaken periodically on key components of the infrastructure. These include an Active Directory Risk Assessment, Exchange (Email) risk assessment and Microsoft SQL (Database) supportability reviews. Work to commission external reviews of the following is also now underway:

- Data Centre Networks and Firewalls
- NWIS Citrix estate (used in the delivery of LIMS, WPAS, CANISC and others).
- Backup systems


To provide additional assurance and identify any further remedial actions.

In summary we have had very few incidents in the provision of data centre services across NHS Wales but we are very aware of the impact of any disruption in service provision and have taken actions not only to ensure that the specific issues have been addressed but also to ensure that the resilience of these services is robustly tested and any additional measures taken. In doing so, we work closely with the Health Boards through the Infrastructure Management Board, Service Management Boards, IPAD and the National Informatics Management Board and I will ensure that we continue to do so.

I am happy to discuss any of these points further when we meet on 11<sup>th</sup> July 2018.

Yours Sincerely





Andrew Griffiths

Chief Information Officer NHS Wales  
Director of NHS Wales Informatics Service

cc: Hamish Laing  
Matt John