NHS Health Check
Data, Intelligence and Information Governance Sub Group
Terms of Reference

Programme/Policy Area	NHS Health Check
Directorate	Health Improvement
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Document history

Document Revision/Release Status

Revision	Description of Changes	Author / Editor
24.10.2013	Incorporated comments from group members	Sarah Stevens
31.10. 2013	Revised membership	Sarah Stevens
04.12. 2013	Revised following comments from Group; included a review date, added additional objective, included members from LA, revised appendix 1 to include QA subgroup relationships	Sarah Stevens
23.6. 2014	Amended in light of new Chair	Lorraine Oldridge
21.11. 2014	Title of the group changed to include 'IG' as agreed by the group on 18th September 2014	Catherine Lagord
16.02. 2015	Revised membership	Catherine Lagord
24.11.2015	Drafted revised version as instructed by members of DIIG group	Catherine Lagord
21.06.2017 29.06.2017	Drafted revised version as instructed by members of DIIG group Minor revisions as instructed by members of DIIG group on 27/06/2017	Catherine Lagord Catherine Lagord

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Revision	Description of Changes	Author / Editor
20.02.2019	Revised membership	Catherine Lagord

1.   Committee Accountability

The NHS Health Check Data, Intelligence and Information Governance Subgroup are accountable to the NHS Health Check National Steering Group. This group has been developed as a sub-committee and therefore should report its findings and recommendations through the Steering Group or the Expert Scientific and Clinical Advisory Panel (ESCAP) as appropriate.

2.   Objective and Scope of Activities

The purpose of the Data, Intelligence and Information Governance Subgroup is to ensure on-going information governance processes; to co-ordinate and oversee the further implementation of robust data extraction and to develop innovative reporting and sharing of NHS Health Check data. A strong theme will be ensuring all opportunities for optimising the use and dissemination of NHS Health Check data are explored
The objectives of the group are:

- To consolidate existing IG and data knowledge, experience and expertise together with learning from other relevant programmes
- To seek the views of appropriate stakeholders, through the Local Implementers Forum, and the Regional and Centre NHS Health Check Sub Group.
- To identify and assess the available options/tools to ensure appropriate information governance and consistent, high quality data to enable effective cohort generation, quality assurance, performance monitoring and research.
- To provide leadership and act as advocates for information governance and the development of improved data reporting, building the case for embedding data extraction into programme delivery.
- To provide advice to stakeholders and guidance to commissioners of NHS Health Check on information governance considerations and data extraction processes.
- To provide leadership, expertise and advice in order to secure a comprehensive national data extract
- To identify opportunities for optimising the use and dissemination of NHS Check data through the wider National Cardiovascular Intelligence Network (NCVIN).

In turn, contributing to the overall aims of the programme to reduce avoidable premature mortality and narrow health inequalities.

3.   Specific responsibilities

The Data, Intelligence and Information Governance Sub-Group, working with others, will:

- Ensure the release and review, on a regular basis, of NHS Health Check best practice guidance describing all the elements and standards it would expect of a quality programme such as quality of delivery and robustness of data capture and reporting
- Explore long term solutions to free up the system to enable the flow of data, including to and from GP practices, for the best possible delivery of the NHS Health Check programme. It will explore the use of innovation and IT technologies to allow the seamless flow of NHS Health Check data across the health and social care system. This will create an environment that supports local teams to commission and evaluate programmes which aspire for excellence and improved outcomes
- Provide advice on the NHS Health Check national data extract, with a particular focus on the extraction, information governance, and data analysis performed by PHE in order to monitor the programme. The group will also aim to engage with other CVD related data extract and analysis groups, such as the Diabetes Evaluation and Analysis Group.

4.   Frequency and Description of Meetings

The Data, Intelligence and Information Governance Sub-Group will routinely convene quarterly with a minimum dispatch standard for agenda and supporting papers one week ahead of the meeting.

The chair will oversee and manage the group, and seek to ensure that all views and opinions are heard and considered, within the objectives and scope of the work.

The responsibilities of the chair will be to:
- Ensure that the work plan is driven forward within agreed timeframes and that the group is appropriately supported and managed; this may include coordinating and establishing working sub groups
- Ensure that reports/issues for action or resolution are taken to the NHS Health Check National Steering Group or the ESCAP as appropriate

The members of the working group will:
- Agree, progress and monitor the work programme
- Identify current best evidence and best practice and bring it to bear on the work
- Consult with others they represent and communicate any concerns/issues to the group
- Come to a consensus on and work to meet the work plan
- Agree final recommendations

The Data, Intelligence and Information Governance Sub Group will have a group members e-mail facility which can be used by the Secretariat and committee members to communicate any key programme information between formal meetings to ensure members are informed of relevant programme developments.

The meetings will be closed to members unless prior approval is granted by the Chair or Vice Chair for additional membership.

The duration of this group will be open and continuing whilst the work programme is live.

5. Membership and Designation

DIIG membership will be driven by the topic and knowledge expertise requirements as set out in Table 1. This topic expertise will be reviewed every two years and will inform changes to membership.

- National Lead – National Cardiovascular Intelligence Network (NCVIN), PHE (**Chair**)
- National Lead for Cardiovascular Disease Prevention & Associate Deputy Chief Nurse, PHE
- Head of Vascular Disease Prevention, London Borough of Bromley
- Founder, Clinical Systems Consultant, Cartron Consulting Ltd
- Co-Director, Learning Disabilities Observatory Team, PHE
- Head of Public Health Data Science, PHE
- Senior Public Health Manager, Royal Borough of Greenwich
- GP & National Clinical Advisor to NHS England & PHE
- Principal Epidemiologist, Directorate Office, PHE
- Heart Intelligence Lead, NCVIN
- Data and Information Policy and Partnerships Lead, PHE
- Deputy National Lead, Cardiovascular Disease Prevention Team, PHE
- Deputy Director, Science and Strategic Information, PHE
- Deputy Head of Indicators & Risk Factors Intelligence, PHE
- Public Health Data Scientist, Risk Factors Intelligence, PHE
- Analyst, Cardiovascular Disease Prevention Team, PHE

Table 1.

Topic knowledge required
NHS Health Check commissioning
NHS Health Check implementation
Information Governance
Primary care data IT systems
Programme management
Data management and security
Statistical analysis
Quality assurance
Monitoring and research methods
Recording of clinical information
Health equity and inequality

6. Subcommittees

Subcommittees/ subgroups composed of members and non-members of the parent committee may be established with the approval of the Chair or his/her designee. The subcommittees must report back to the parent committee who will be responsible for advising on significant policy recommendations. The ESCAP and the NHS Health Check National Steering Group will be notified upon establishment of each subcommittee and will be provided with information on its name, membership, function, and estimated frequency of meetings.

7. Recordkeeping and Risk Management

The Data, Intelligence and Information Governance, established subcommittees, or subgroups of the committee, shall be responsible for producing records of their activities. These records should be available for public inspection and copying, subject to the Freedom of Information Act.
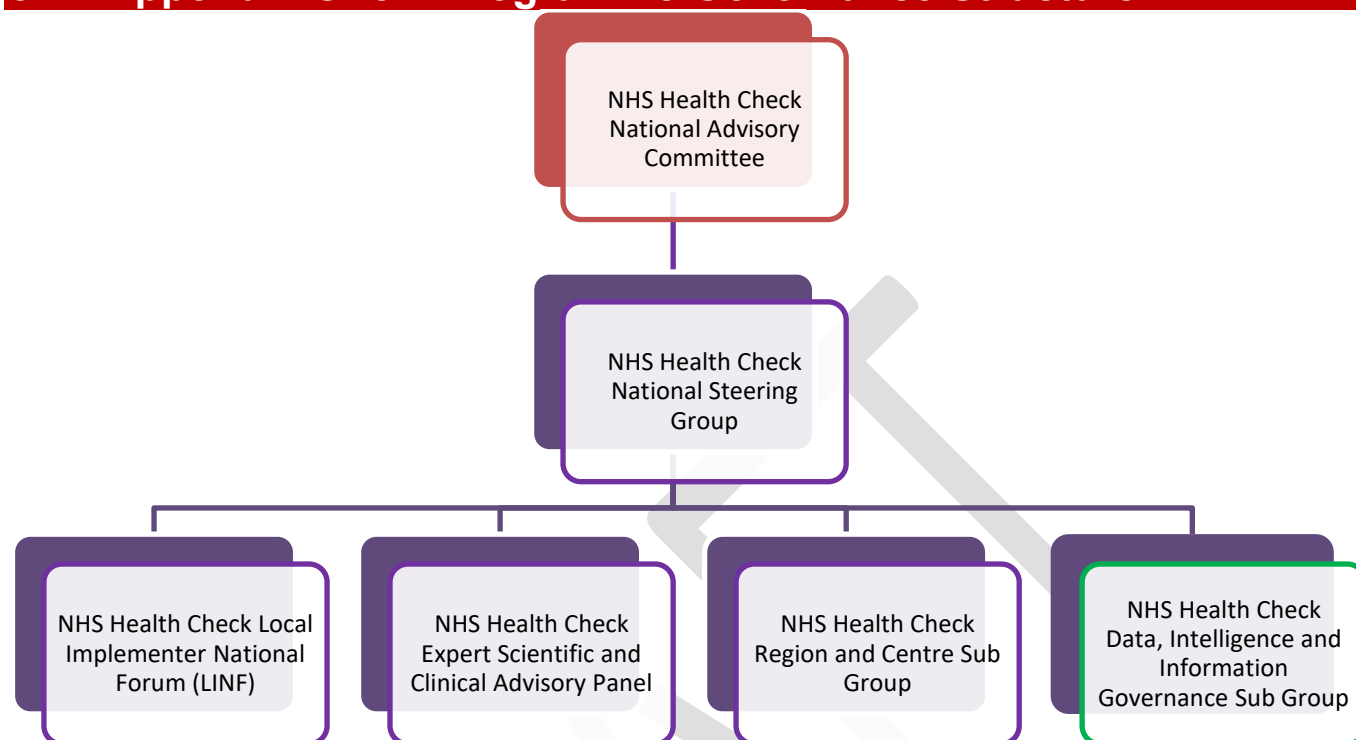
8. Ways of working

The following principles will be adopted by ESCAP and its members in delivering its role and responsibilities.

Communicate
- communicate openly, honestly and clearly, avoiding jargon
- seek out and share knowledge, suggest solutions
- encourage, listen and be receptive to others' views
- invite, offer and respond to feedback

Achieve together
- work together towards PHE's objectives
- nurture open relationships and build trust
- work collaboratively with all customers, internally and externally
- empower each other and hold each other to account

Respect
- treat colleagues and customers as they would wish to be treated
- value difference by embracing diversity and inclusion
- look after our own wellbeing, and support each other
- recognise and celebrate our successes, large and small

Excel
- provide excellent service to colleagues and customers
- drive personal development and suggest ways to improve
- lead by example, acting as a role model internally and externally
- maintain professionalism at all times

8.1 Appendix One – Programme Governance Structure

NHS Health Check National Advisory Committee

NHS Health Check National Steering Group

NHS Health Check Local Implementer National Forum (LINF)

NHS Health Check Expert Scientific and Clinical Advisory Panel

NHS Health Check Region and Centre Sub Group

NHS Health Check Data, Intelligence and Information Governance Sub Group

8.2 Appendix Two – Membership by name as of 20 February 2019

- **Lorraine Oldridge**, National Lead, National Cardiovascular Intelligence Network (NCVIN), PHE (**Chair**)
- **Jamie Waterall**, National Lead for Cardiovascular Disease Prevention, PHE
- **Gillian Fiumicelli**, Head of Vascular Disease Prevention, London Borough of Bromley
- **Hazel Chappell**, Founder, Clinical Systems Consultant, Cartron Consulting Ltd
- **Gyles Glover**, Co-Director, Learning Disabilities Observatory Team, PHE
- **Julian Flowers**, Head of Public Health Data Science, PHE
- **Emma Brezan**, Senior Public Health Manager, Royal Borough of Greenwich
- **Matt Kearney**, GP & National Clinical Advisor to NHS England & PHE
- **Jurgen Schmidt**, Principal Epidemiologist, Directorate Office, PHE
- **Clare Griffiths**, Deputy Head of Indicators & Risk Factors Intelligence, PHE
- **Andrew Hughes**, Heart Intelligence Lead, NCVIN
- **Robert Kyffin**, Data and Information Policy and Partnerships Lead, PHE
- **Slade Carter**, Deputy National Lead, Cardiovascular Disease Prevention Team, PHE
- **Felix Greaves**, Deputy Director, Science and Strategic Information, PHE
- **Emma Clegg**, Public Health Data Scientist, Risk Factors Intelligence, PHE
- **Catherine Lagord**, Analyst, Cardiovascular Disease Prevention Team, PHE