



### The NHS-HE Forum

Wednesday 30th May 2012

Adrian Williams
Voice, Data and Network Specialist Team

Department of Health – Technology Office Informatics Directorate (DHID)





### **NHS Network Futures**

- Major networks such as those making up PSN (Public Services Network), GSI and Janet will be connected to N3 through secure gateways or interconnections.
- The Department of Health and the N3 Programme are working closely with the Cabinet Office PSN Programme to ensure that the NHS information governance model is supported by PSN.
- Continued joint working between the NHS and Janet to develop new joint models of information governance which will enable expansion of the use of the current N3 Janet gateway
- Work towards an acceptable shared Information Governance process for Academia



# DH Department of Health

## NHS Network Futures – N3 PSN Compliance timelines

Given the continual development of the Public Services Network (PSN) N3SP is:

- Now working toward being a certified supplier of Services
- High level engagement with Cabinet Office to ensure all work is completed on time (Currently progressing)
- N3SP currently involved in GCHQ/CESG Information Security assessment (May/June 2012)
- The aim is that N3SP will have PSN certification for DNSP (Direct Network Service Provider) by the (end of June/ Early July 2012)
- •http://www.cabinetoffice.gov.uk/content/public-services-network



# PSN/NHS information sharing requirements and improvements

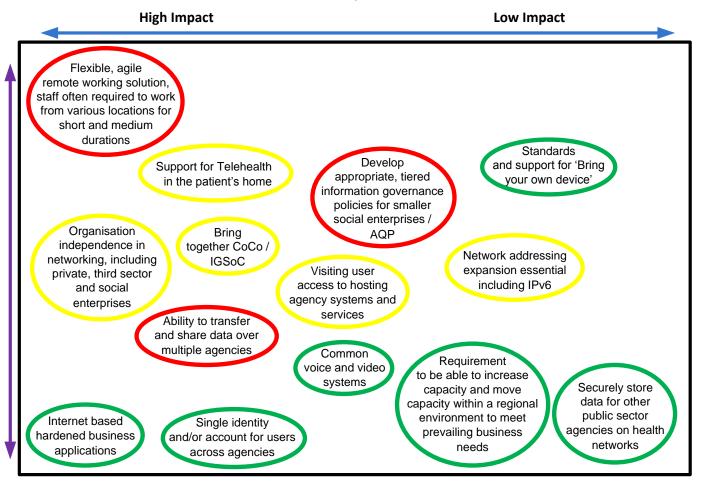




Information Sharing and Access Scenarios - Matrix

> Based on the 2012 Investigations about Information Sharing Requirements between Local Government and the NHS DHID VDNS 19<sup>th</sup> Apr 2012 v0.2

#### Service Improvement



High Demand

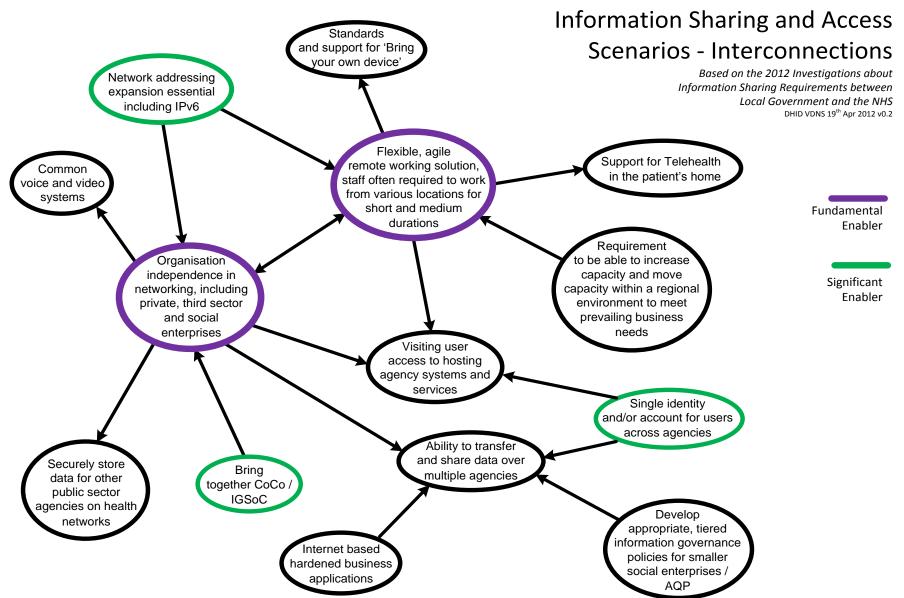
Health Requirement

> Low Demand



### Health / PSN User Case –information cross sharing scenarios







#### **Current focus of the project:**

- IGSoC (Information Governance Statement of Compliance) is currently one size fits all and will need amending to fit Academia:
  - Initial discussions have taken place but more needed to draft suitable scope for IG compliance (Summer 2012)
  - Identify what existing components of the IGSoC could complement the IGT assurance (usually "Hosted Secondary Use Team/Project view")
  - This to make case for follow-on work to develop processes that can be optimised and defined to become Business as Usual (BAU) and to secure funding.
  - The Offshore Support Policy will need to be considered in detail as Janet covers Scotland, Wales and Northern Ireland as well as England and there are use cases where Janet access from the other home countries to N3 in England is needed.
  - Discussions with small number of academic facilities as potential proof of concept trial sites for IG/IGT process





#### Business requirements- Pilots examples -1

#### <u>User case scenario</u>

A small group of NHS users in a location which happens to be serviced by a Janet connection and there is advantage in being able to access N3 by this route.

# NHS Business requirements- Pilots examples -1 Department of Health

#### **Key driver:**

Access to a new Foundation Programme Application System (FPAS) by Foundation Schools within Deaneries (currently part of Strategic Health Authorities)

Recently qualified medical graduates have to apply to gain Foundation Programme places in the NHS for further experience. A new computerised system, FPAS, has been procured for this for 2012 and this will be hosted on N3 in terms of its administration from Foundation Schools throughout the UK (the applicants can access it from the internet).

This led to a review of the Foundation Schools and whether they had access to N3 or not. Most did but three sites in London (one based around Imperial and another around UCL) and Cardiff (Cardiff University site) did not and these sites would have preferred to access N3 via the N3 Janet Gateway if possible. Some other sites might also wish to move from limited VPN type solutions if the N3 Janet Gateway were available. (There had also been previous requests for use of the Gateway for other purposes by London and Oxford Deaneries).





#### Business requirements- Pilots Examples -2

#### **User Case Scenario**

The NHS user is located part time at for instance a University and occasionally needs to access N3 systems for NHS clinical purposes or other reasons while there from his or her "Janet connected device" e.g. the Professor who works half the week in an NHS Trust with a clinical role and half a week at the University undertaking research





#### Business requirements- Pilots Examples -2

#### **Key user case drivers**

#### **University of Northampton – access to systems at Local Trust**

A Senior Lecturer in Podiatry works 4 days per week as a radiologist at Northampton General
Hospital and 1 day per week at the School of Podiatry University building on the Northampton
General Hospital campus. During the University day she needs access to the Trust's PACS system.

#### Robert Gordon University – access to NHS systems from the Nursing College

 RGU have a faculty that deals primarily with nurse teaching and the staff would like to access resources within the NHS that they would normally have access to whilst working in the NHS.

#### Access to N3 by School Nurses at Special Educational Needs Schools in Surrey

 Surrey PCT asked whether the infrastructure existed for connecting a number of school nurses and special needs teams based in Surrey Special Educational Needs schools to N3 via Janet

# Further Considerations - Clarification for network sharing opportunities

- Must be cost efficient for local organisations concerned by reducing the number of physical network connections required.
- Must be built to allow information sharing
  - Shared security policies
- Solutions should be deployable on both new networks & existing networks.
  - Leveraging best use of existing investment where possible.
  - Full recognition and acceptance of both infrastructures for governance rules
- Must allow simple management.
  - Simple, clear and well defined network management ideally via single helpdesk.
- Must be supported by robust local governance structure. e.g. MoU
- Remote access
  - Single platform allowing users access to correct network areas. e.g SSL



### Speak with us!



- We are looking to use real case scenarios for information sharing between heath and academia.
- Please approach us if you would like to assist with the business assessment of information governance sharing requirements for JANET phase 2 project to enhance the business case for the use of a bi-directional gateway
- n3pmo@nhs.net For the attention of Stuart Woodhouse





### Thank you

Any questions?

adrian.williams3@nhs.net