# Summary of activities 15/03/21 for SHcAB

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## Research

1. **NIHR study – Building a Public Health Research System in Local Government** **(Key Update)**
   * Final report development in progress by Lindsey Forbes
   * KSS CRN is funding a team from the Centre for Health Services Studies at the University of Kent, for 1 year to work within KCC Public Health to promote Public Health and prevention research.
   * The aims of the service are the team from CHSS will act as champion(s) for public health research for KCC, promoting a research culture, developing research capacity, growing the recognition that research can promote better value in council services and building staff motivation to carry out research. The team will connect academic partners with key local authority teams across the wider determinants of health (eg. public health, transport, planning, education, social care) to develop and deliver public health research and expand the CRN Public Health portfolio.
2. **NIHR application for ‘Unlocking data to inform public health policy and practice’** – **(Key update)** KSS ARC have been successful in their application. Focus of the bid will be:
   * Form a new working community between data scientists at universities, Local Authority PH teams, teams who run linked datasets, and public representatives. The community will discuss challenges, barriers and solutions, using workshops and events called data-sprints, to brainstorm and kick-start solutions for understanding the complex datasets, and identifying skills and methods needed to tackle pressing data issues chosen by the LAs.
   * Provide dedicated time and funding for 6-months for 2 PH analysts in Kent and Sussex to be actively supported and trained by university data scientists to work on problems tackled at the datasprints. The problems will focus on linking complex sources of data together (Kent), and using linked health and care data to identify earlier opportunities to keep people well and independent for longer (Sussex).
   * Hold discussion groups with members of the public to understand more about their views around the use of health data and other forms of data that might be linked by ICS. We want to advise ICS plans for including the public in decision-making around data access and priorities for data projects, and how to be clear and trustworthy about data use.
3. **KID Data access requests (Key updates)**
   * **Health Economics Unit project on Heart Failure risk profiling**. Access formalities likely to be finalised this month
   * **Lung Cancer AI Tool development** – Cancer Digital Board and KM Cancer Alliance have given their approval to **Quantum** for the study to go ahead, subject to SHcAB approval. (data access request and slide presentation attached)
   * Other queries received for data access have been requested around topic areas such as cost analyses on pressure sores, hernia, machine learning algorithms for patient care optimisation
4. **Application submission by KSS AHSN to Health Foundation around developing Innovation Hub** – Awaiting bid outcome
5. **Strength in Places Bid** – Chris Farmer to update
6. **Joint Research Collaborative** Edyta Mccallum to update
7. **NIHR application around AI & Health Inequalities –** This is a new project that has just started. Kent & Medway PH teams currently in discussion with KSS ARC colleagues for a collaborative application to explore AI based approaches in linked data quality optimisation and tool development in key areas of interest such as diabetes

<https://www.nihr.ac.uk/funding/artificial-intelligence-and-racial-and-ethnic-inequalities-in-health-and-care-call/26868>

## KERNEL & IG work (Key updates)

1. SHcAB IG weekly group discussions ongoing. Attended by Helen O Neil, Abraham George, Marc Farr, Chris Farmer, Simon Bailey and Edyta Mcallum
2. SHcAB IG Policy Operating Procedure almost completed but finalisation put on hold until outcome of discussions with national PHM team on linked dataset architecture and IG issues
3. KERNEL DPIA finalisation – meeting with IG leads in January to socialise the programme of work met with positive feedback / no serious objections. Finalisation also put on hold for same above reason
4. Meeting with LMC in January to discuss KERNEL and SHcAB Joint control development. Proposal for ‘road show’ with GPs, part of broader engagement plan to promote secondary uses of linked data, being considered. Can tie in with CCG plans to get GPs sign up / approval for KMCR and KERNEL / Joint Controller agreements. Lookout for any GP champions for secondary uses who might want to join the SHcAB IG group.
5. Funding for IG & admin support to SHcAB being finalised. Likely to commence from April onwards
6. Ongoing discussions with national PHM team around IG and technical process for access and linking of **Patient Master Index (PMI)** in the KERNEL. Options appraisal currently. Work to be sped up to prepare linked dataset as per PHM programme requirements. Weekly calls have been arranged on data readiness with local and national PHM to monitor progress.
7. Long term ambition is to prepare a Section 251 exemption application to the national Confidential Advisory Group (CAG) to allow local data linkage (‘in the clear’) between NHS and non NHS data. Plan to start application process very soon.
8. Plan for application to Health Research Authority to commence soon re: Database Access Committee. Chris Farmer leading on this.
9. KID governance changes. Letter to go out to SHcAB

## Kent & Medway COVID Modelling & Surveillance group

* A group of senior analysts and officers representing NHS (E&I, K&M CCG and acute trusts), Public Health, Kent Resilience Forum (Multi Agency Information Cell) meet every Wednesday to discuss latest assumptions and modelling outputs, led by representatives from Whole Systems Partnership <https://www.thewholesystem.co.uk/>
* The group builds on historical system dynamic modelling work commissioned and led by KCC Public Health over a number of years <https://www.kpho.org.uk/joint-strategic-needs-assessment>
* Modelling conclusions and insights are fed back through regular Health Protection Board, CCG and Kent Resilience Forum reporting arrangements mentioned above.
* Modelling on deaths has successfully helped in the decision to step up additional body storage capacity at Aylesford just before Christmas several weeks before the Kent & Medway hit its highest weekly peak of >750 in second week of January. This cushioned the extreme demand for body spaces within a relatively short space of time.
* Further success was achieved in generating early insight for senior leadership towards vaccination effectiveness and lockdown restrictions from January onwards.
* As a result, the Kent & Medway modelling approach has been applied across the South East across to different public health and NHS teams (same model applied to 19 different footprints).
* This is being commissioned led by Head of System Improvement at NHSEI for the Southeast Region.
* Plans are currently under way to improve and develop a better approach for quality assurance on model outputs and assumption generation for the model design and development

## COVID vaccination uptake analyses by ethnicity

* CCG and Public Health colleagues currently exploring different data sources and dashboards around robust monitoring and equity analysis of uptake rates by age group, geography, deprivation and ethnicity
* EKUHFT led project also underway to explore uptake rates by ethnicity using ‘Origins’ tool. Marc Farr to update.

## Data sharing between Public Health and acute trusts re: Pre-admission testing status

* <https://opendatasaveslives.org/news/using-pillar-2-testing-data-to-improve-covid-patient-flow-within-hospitals/>
* Project still ongoing
* No progress with NHS Digital to access same data via secure NHS route
* Statistical analyses to ascertain outcomes ie. reduced nosocomial infection and hospital mortality rates to be completed

## Level 7 Systems Thinking Practitioner Apprenticeship Standard

* <https://www.instituteforapprenticeships.org/apprenticeship-standards/systems-thinking-practitioner-v1-0>
* Intro Presentation delivered to Kent & Medway Learning Development Leads in Sept 2020 (attached herewith)
* 5 national providers currently registered to deliver training
* End Point Assessor organisation has been confirmed
* Standard now live, national trailblazer group will be launching road show later this year
* Kent & Medway Learning & Development group are keen to roll out bespoke training programme
* KCC leading in tendering process and spec development
* Anybody interested to learn more please contact me for further details

