



Date: 21st April 2020 - 14:00 to 15:00

Location: Virtual meeting to be held over Zoom

Attendees: **CASPA Board:**

Simon Papworth (SP), Robin Wells (RW), Robin Batchelor (RB), Taffy Gatawa (TG), Jonathan Papworth (JP) & Nuno Almeida (NA)

DSC:

Katie Thorn (KT), Daniel Casson (DC), Vic Rayner, part meeting (VR) & Claire Sutton (CS)

Apologies: Ian Turner

Subject: CASPA & DSC Meeting - 21.04.2020

1. Recap on outstanding actions

- a. KT to send CASPA info on two projects around mobile security
 - i. There has been a delay due to Covid-19 in the completion of these projects. Will update with timelines as soon as available.
- b. KT/CS to prepare off boarding/data retention information and share with CASPA
- c. IT to raise a meeting with CQC present: *“What is the best forum to promote knowledge and use of digital technology within adult social care”*. Carried over -CS to chase IT.
- d. CS - Continue developing SNOMED coding and keep CASPA updated on project progress. CS reported that project had ground to halt due to manager leaving. However PRSB have taken this up and are pushing for COVID codes to be adopted. JP/CS confirmed that SNOMED keen to better understand social care in order to cover more aspects of our sector.
- e. SP to produce a list of all interoperability projects
 - i. See recurring agenda item below

2. Completed tasks since last meeting

- a. KT to send information to SP on the usage of providers using digital and list of interoperability pathfinder projects now available at:



<https://digital.nhs.uk/services/social-care-programme/digital-social-care-pathfinders-programme-2019-21>

These projects should be put on both DCS and CASPA websites.

3. Challenges and hurdles

- a. Retained for discussion at next meeting

4. Data Survey - CASPA

- a. DC outlined data position and wanted to qualify what was detailed “quantitative” data.
- b. VR joined meeting: long discussion about significant discrepancy between ONS COVID data and that available from CASPA. Unanimous frustration from all that digital data was not being utilised properly by the NHS or CQC. CASPA had made anonymised data available to NHSD for the past 4 weeks and was frustrated that a consumer for this data was still not to be found within the NHS. The data provided a 25 to 30% snapshot of the social care market and other software providers in CASPA were willing to support the further collation of data.
- c. General consensus that ONS data was poor and out of date, whilst data from digital sources was both accurate and readily available.
- d. DC to take data to the CPA, as another possible route, whilst DC hoped that in time NHSD would be able to take data.
- e. CASPA (JP) had informed CQC that information is available digitally, but no positive response.
- f. DS presented his survey and ALL agreed to comment on its criteria. This would be reviewed by CASPA board and then sent to CASPA members. Action by end of June.

5. Research on use of tech during COVID-19

- a. KT to lead. To be reported at next meeting
- b. DCS has set up Helpline and the links could be shared on DSC and NCF website.

6. How to make best choice of system?

- a. Item carried over

7. Review latest list of interoperability projects

- a. To be discussed every meeting
- b. Simon to compile/has compiled and share

8. AOB

- a. Agree follow up action
- b. Arrange next meeting: end July

END OF MEETING