

Wessex Data Access Committee: Minutes

Date: Friday 28th November 2025
Time: 13:00-15:00
Location: Virtual via TEAMS (meeting recorded for training and reflection)

Chair: Dr Rachel Chappell
Secretariat: Rebecca Wood

Present:

Rachel Chappell (Chair) RC; Keith Gomes Pinto (NHS Dorset) KGP; Will Jennings (Associate Dean Research & Enterprise, UoS) WJ; Patricia Fuller (Research Fellow, NIHR ARC Wessex) PF; John McBeth (Professor of Health Data Science, UoS) JM; Heather Case (Deputy Director of Data and Analytics, NHS Dorset) HC; Andy Taylor (Digital Critical Friend) AT; Sam Fortune (Digital Critical Friend) SF; Sandra Hall (Digital Critical Friend) SH; Lindsay Anderson (Digital Critical Friend) LA; Mark Heffernan (Director of Operations, Wessex SDE: Presenter) MH; Michael George (Clinical Digital Research Fellow) MG; Rebecca Wood (Minutes) RW.

Apologies: NA

	Item
1.	<p>Welcome and Administrative Business</p> <ul style="list-style-type: none"> • Chair welcomed attendees to the Wessex SDE Data Access Committee meeting. • No apologies received. • Declarations of Interest: Committee member noted involvement with Southwest SDE leadership board; committee agreed no conflict at program level, but vigilance needed for project-level conflicts. • MH noted the convergence plan to reduce the number of SDE's. Wessex, Southwest and Kent Medway and Sussex to converge 'front doors'. • Previous minutes (Paper A) agreed. • The Chair informed members that the DAC Committee's presence on the SDE website is likely to go live towards the end of December and when available, the link will be circulated. Members are invited to suggest changes. • Opportunity to reflect on paperwork The committee discussed the circulation of meeting papers and the documents included, the chair noted that the current process of sending documents in line with the ToR is five working days before the meeting which often results in a Friday afternoon rush. Members commented they typically read papers the following week, so the committee are comfortable with late circulation if it prevents delays to research approvals. Members agreed the papers included provide enough information. Members suggested highlighting critical or noteworthy issues upfront to streamline review.

2. Study 1: Outcomes of Infective Endocarditis

MH Presented an overview of the study and shared slides.

This study aims to analyse treatment patterns and outcomes for patients with infective endocarditis across multiple hospitals, including UHS, Portsmouth Hospitals University and University Hospital Dorset. Data will be brought into the SDE and consolidated to enable comparative analysis. No identifiable data will come into the SDE. REC authority required.

Discussion:

- How the SDE check pseudonymised data for duplications, deduplication is not required for this study but methods for future cases were explained.
- SOP for low number suppression confirmed; re-identification of individuals is not permitted under current governance, in order for this to be possible the SDE would need an amendment from the Health Research Authority to the confidentiality advisory group approval and our research Ethics Committee approval.
- Confirmation that the researcher does not have their own ethical approval; the approval will come from the SDE's REC approval.
- Committee agreed this is a clear, low-risk design and an excellent example of SDE functionality.

Decision: Approved

3. Study 2: Prostate Progress

MH Presented an overview of the study and shared slides.

Prostate Progress is a national initiative led by Prostate Cancer Research to link consented patient-reported outcomes with NHS clinical data. Wessex SDE will deliver a first phase by providing structured UHS data fields to researchers within the SDE. Further phases will be brought back to the DAC.

Discussion:

- Researchers have their own REC approval and patient consent for linkage; Wessex SDE self-funding initial phase and are hoping to be the first SDE to be able to provide data to researchers.
- Committee member noted the dates on the pre-read documents. The group discussed the delay in data flow and identified barriers that have prevented data flow previously including multiple sites.
- Commercial interest and funding are anticipated in future phases, but current work is non-commercial.
- Committee noted strong alignment with SDE objectives and public benefit.

	Decision: Approved
4.	Comfort break
5.	<p>Study 3: Connect-D</p> <p>MH Presented an overview of the study and shared slides.</p> <p>Connect-D is a national driver project funded by NHS England, with Wessex as the lead SDE with Thames Valley, Surrey, Kent, Medway and Sussex and West Midlands. It aims to create a federated dementia data system combining acute trusts, community/mental health trusts, and primary care records to support research into dementia prevention, treatment, and clinical trials. DAC approval to start bringing the data into the SDE, individual studies would return to the DAC for approval in the future.</p> <p>Discussion:</p> <ul style="list-style-type: none"> • Model for DAC approval process when multiple SDE's are involved. At the moment 5 separate DACs will take place for any studies wanting to access the data. • Requires temporary warehousing of identifiable data for linkage, restricted to a small technical team; researchers will only access pseudonymised data. • Clarification provided on terminology used in the papers and data flow slide (TRE (Trust and Research Environment) vs SDE) and need for consistent acronyms. • Committee agreed this is a flagship project with significant public benefit and future research potential. <p>Decision: Approved</p>
6.	<p>Final Plenary Discussion: Conclusions and Next Steps</p> <ul style="list-style-type: none"> • Chair thanked the committee for their attendance and contribution to discussions. • EULA document has been circulated to the group, same document used by all SDE's across the country. • Committee member enquired how the Wessex DAC are going in relation to the UHS DAC, Chair informed the group that the UHS DAC has been stood down for the last 3 months as all studies have been brought to the Wessex DAC.
7.	<p>AOB</p> <ul style="list-style-type: none"> • MH thanked committee members for their participation at the ICB and SETT conference.
8.	Close of meeting