OpenSAFELY Oversight Board

Terms of Reference

Purpose
OpenSAFELY promotes and facilitates the use of modern, open, collaborative approaches to computational data science, especially in healthcare; and achieves this by delivering high quality open source software that facilitates secure and reproducible data science. OpenSAFELY is a software platform that makes it possible for data to be accessed more securely than before, and therefore facilitates wider and more secure access. The OpenSAFELY team is collaborating closely with Data Controllers (principally NHS England) on establishing the best methods for evaluating potential users’ skills and projects; however OpenSAFELY is not a Data Controller, and this board does not oversee legal or regulatory aspects of access to the data; these decisions remain with the relevant Data Controllers for any data that OpenSAFELY runs across.

Role of the Board.

1. To provide strategic advice on delivering the OpenSAFELY core goals of:
   a. High quality open source software for health data research
   b. Facilitating, promoting and requiring open analytic methods
   c. Producing highly secure analytics framework for analysing disclosive data
   d. Creating and contributing to a broader collaborative ecosystem of teams and individuals building open source tools for computational data science.

2. Horizon scanning for risks and opportunities.

3. To help ensure that OpenSAFELY continues to have access to data to run across.

4. To ensure that OpenSAFELY is working to earn public trust by upholding high standards around quality, ethics, and transparency.

5. The board is advisory and has been established in response to a requirement from a Wellcome grant; the board’s primary objective is to ensure the goals and objectives of the OpenSAFELY project are delivered (Appendix).

Meetings
The OpenSAFELY Board is chaired by Professor Nigel Shadbolt.

The OpenSAFELY Board will meet virtually via Zoom, for two hours, every 3 months.

The OpenSAFELY Board secretariat consists of Liam Hart and Pete Stokes.

The OpenSAFELY Board agenda will be decided 2 weeks in advance of each OpenSAFELY Board meeting, by the secretariat, the OpenSAFELY CTO and PIs, and the OpenSAFELY
Board chair. Members are encouraged to submit suggested agenda items to the secretariat ahead of this date. Relevant papers will be circulated to members one week in advance of the meeting, labelled as “for information”; “for discussion”; “for approval”.

OpenSAFELY Board meetings will be recorded for the purpose of minuting key discussions. Brief, action-oriented, minutes will be published on the OpenSAFELY website within two weeks of being ratified at the subsequent board. Occasionally, there may be agenda items that have to be dealt with under confidentiality. As a result, the OpenSAFELY Board may, at the discretion of the chair, conduct a closed discussion where necessary to meet the objectives. The minutes from these occasional discussions will not be made public.

For decisions taken by the OpenSAFELY Board to be valid, the meeting must be quorate, however, it is at the discretion of the chair to conduct the meeting for information sharing purposes when a quorum is not present.

Membership

Core Members

- **Chair:** Prof Sir Nigel Shadbolt
- Wendy Harrison (OpenSAFELY NHS England IG; Head of Data Governance / Deputy Data Protection Officer, NHS England)
- Sean Kirwan (OpenSAFELY NHS England IG; Senior Data Sharing and Privacy Manager, NHS England)
- Drs. Paul Atkinson and Imran Khan (RCGP)
- Dr. Mark Coley (BMA)
- Dr. Ben Goldacre (OpenSAFELY Principal Investigator and NHS Doctor)
- Dr. Liam Smeeth (OpenSAFELY Principal Investigator and NHS Doctor)
- Dr. Laurie Tomlinson (OpenSAFELY researcher; Associate Professor, LSHTM)
- Sebastian Bacon (OpenSAFELY CTO)
- Dr. Alexandra Freeman (Executive Director, Winton Centre for Risk & Evidence Communication, University of Cambridge)
- Professor Stephen Evans (OpenSAFELY researcher; Professor of Pharmacoepidemiology, LSHTM)
- Dr. Amir Mehrkar (OpenSAFELY head of IG and external relationships; NHS Doctor)
- Pete Stokes (Director of Platform Development)
- Kevin Minier (Expert patient representative)
- Jeni Tennison (Open Data Institute)
- Lay membership is represented by OpenSAFELY ‘Digital Critical Friends’ Group (Patient Advisory Group) who meet immediately before each Oversight Board Meeting to discuss the same agenda; their input is feedback into the Oversight board via Pete Stokes.
- Liam Hart (OpenSAFELY Research Administrator; secretariat)
Invited Members

- Dr. Chris Bates (OpenSAFELY-TPP; Director of Research and Analytics, TPP)
- Dr Shaun O’Hanlon (OpenSAFELY-EMIS; Chief Medical Officer, EMIS Group)
- Alex Eavis (Chief Product Officer for Digital, Data & Analytics, EMIS Group)
- Representative AMRC (replied: no capacity at the moment)
- Tariq Khokhar (Wellcome Trust)
- Rony Arafin (Chief Operating Officer - AphA CIC) Representative for NHS analyst community
- Sam Smith (MedConfidential/Privacy group)

Quorum

- Chair
- One Principal Investigator (Ben Goldacre or Liam Smeeth, with Laurie Tomlinson as deputy)
- OpenSAFELY CTO (Sebastian Bacon) or nominated technical delegate
- Representatives from NHS England (Data Controller)
- One representative from the BMA or RCGP
- Expert patient representative
- Either Pete Stokes (OpenSAFELY; Director of Platform Development) or Amir Mehrkar (OpenSAFELY Head of IG and external relationships)

Appendix
For our Wellcome funding we have committed to deliver these following project milestones which should form the basis of our goals and objectives:

Our goals:
1. High quality open source software for health data research
2. Facilitating, promoting and requiring open analytic methods
3. Producing highly secure analytics framework for analysing disclosive data

Project Milestones:
1. By April 2021:
   a. Identify and on-board 5 external researcher groups to write code and run analyses
   b. Deploy OpenSAFELY within NHS Digital
   c. Enhance the OpenSAFELY codebase
   d. Publish OpenSAFELY documentation
2. By Nov 2021:
   a. At least 10 analyses completed and shared by external researchers
3. By Nov 2022:
   a. Set up an instance of OpenSAFELY on non-UK EHR data
   b. At least 5 user-generated code libraries on OpenSAFELY
   c. Collate and report evidence of impact on health data policy
4. By Nov 2023:
   a. At least 50 analyses completed and shared by external users
   b. Collate and report evidence of culture shift in EHR research towards modern open collaborative computational data science approaches
5. Ensure a range of perspectives are represented in decisions regarding priorities for platform development
6. Review processes for (e.g.) allowing external users to use the OpenSAFELY platform, providing objective feedback