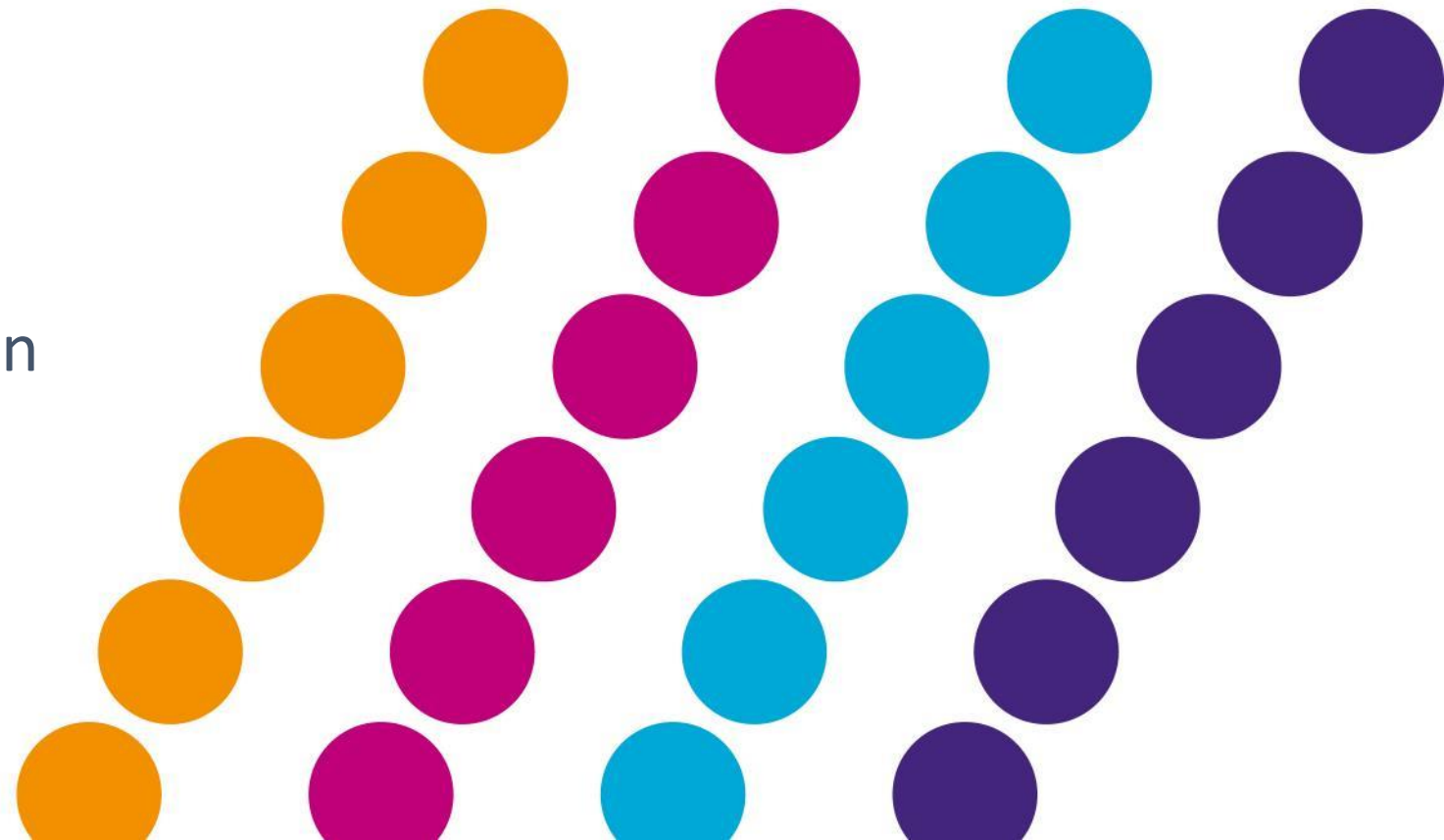


# What do you do when IT hits the fan?

Martin Sadler

Executive Director for Information  
Technology and Digital

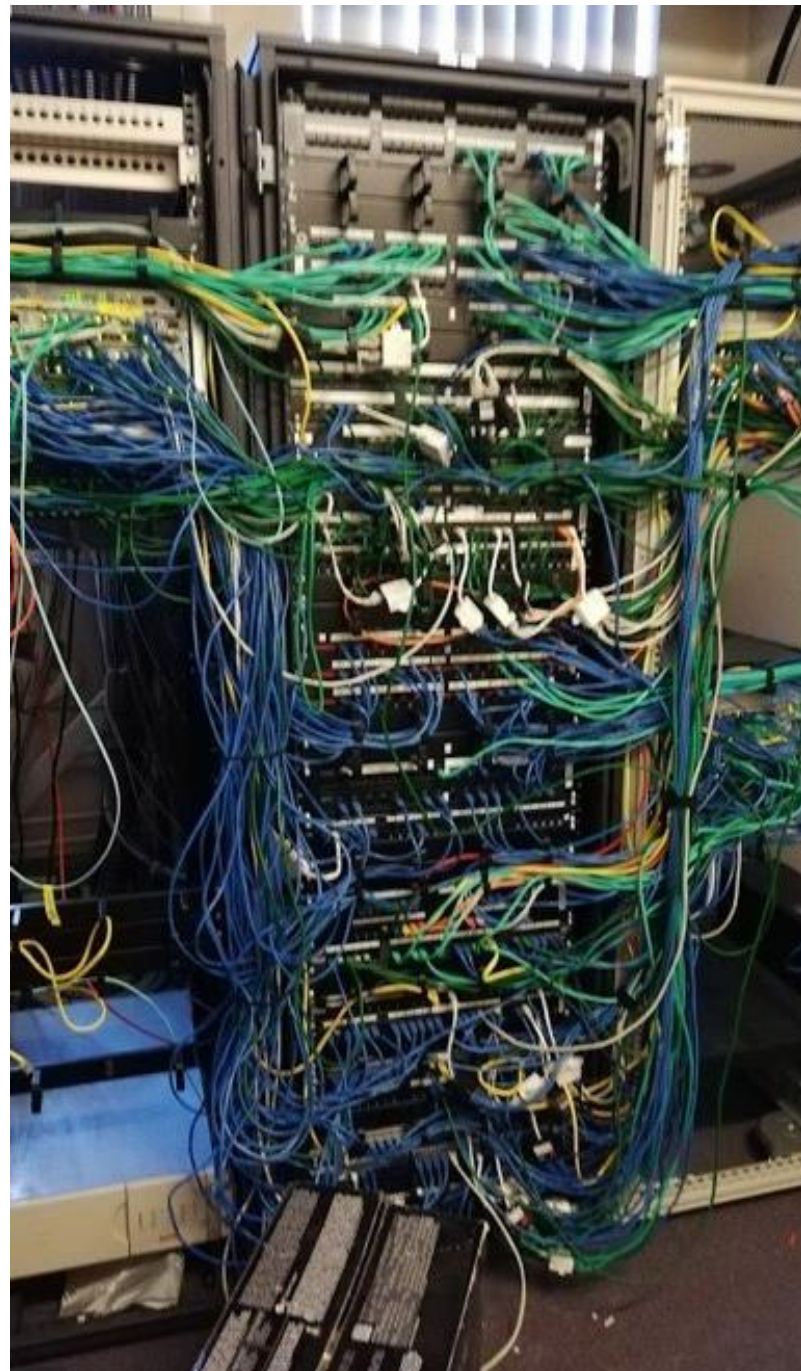
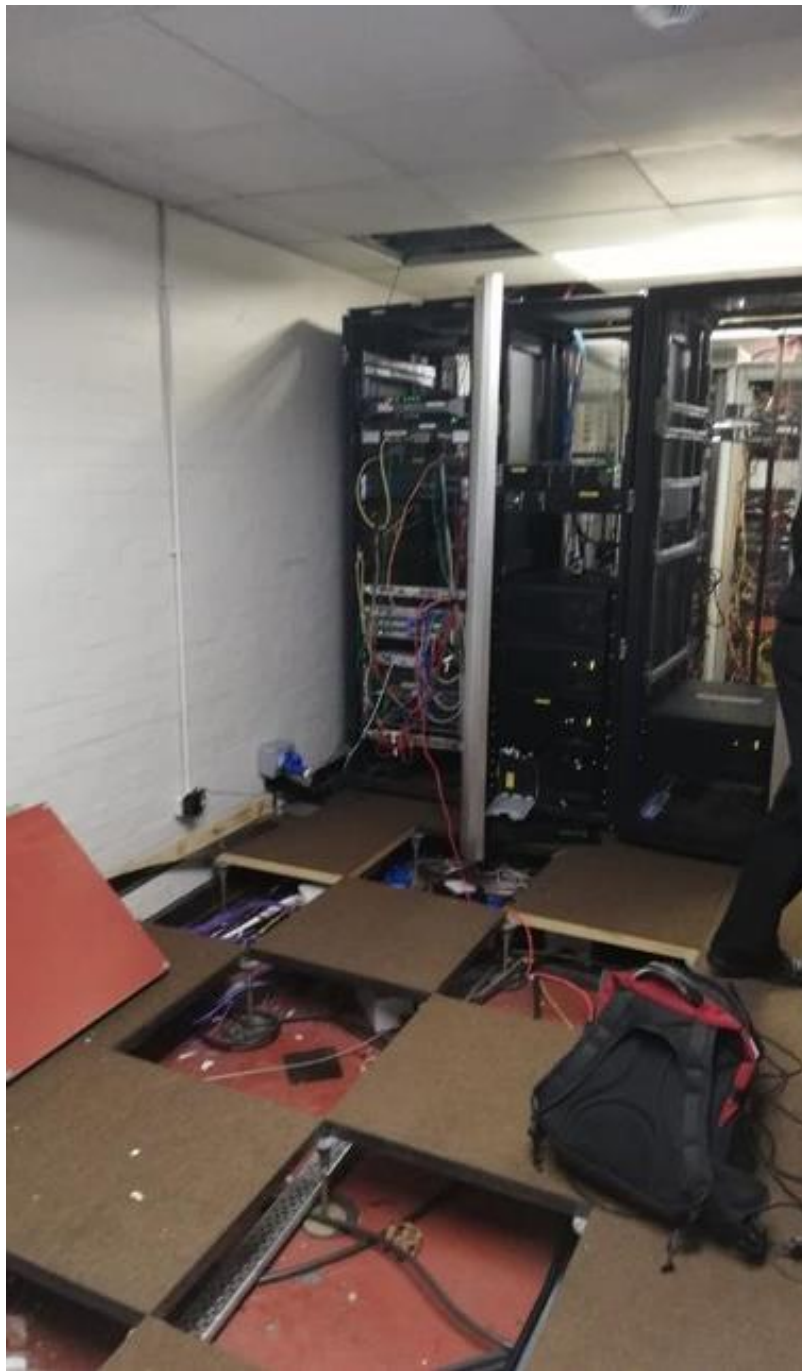
( CIO )



# 7th CIO in 10 years

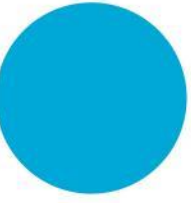
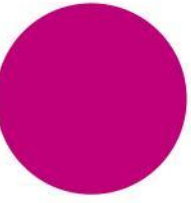
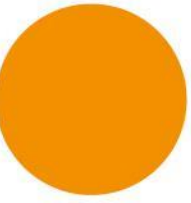


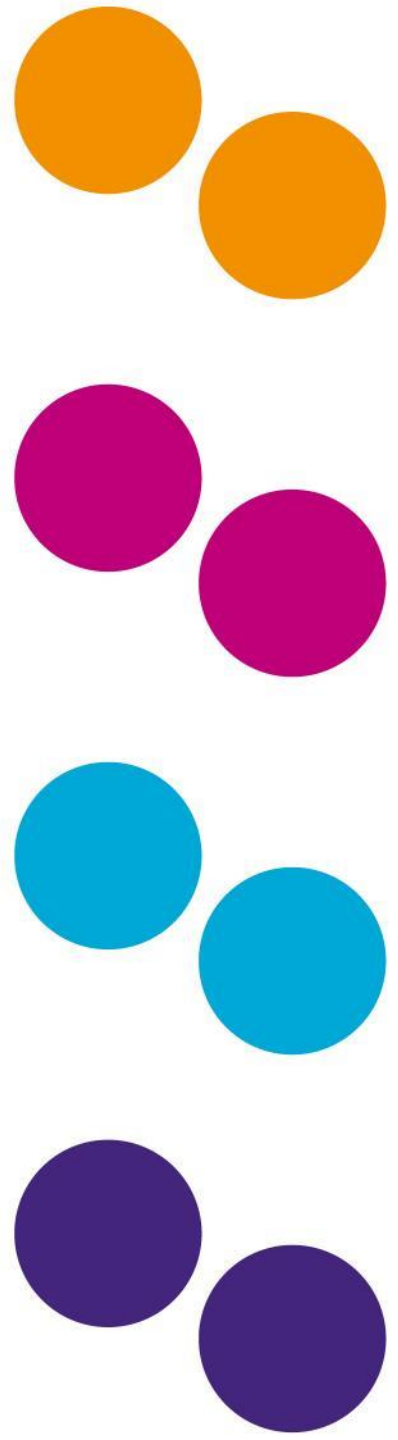
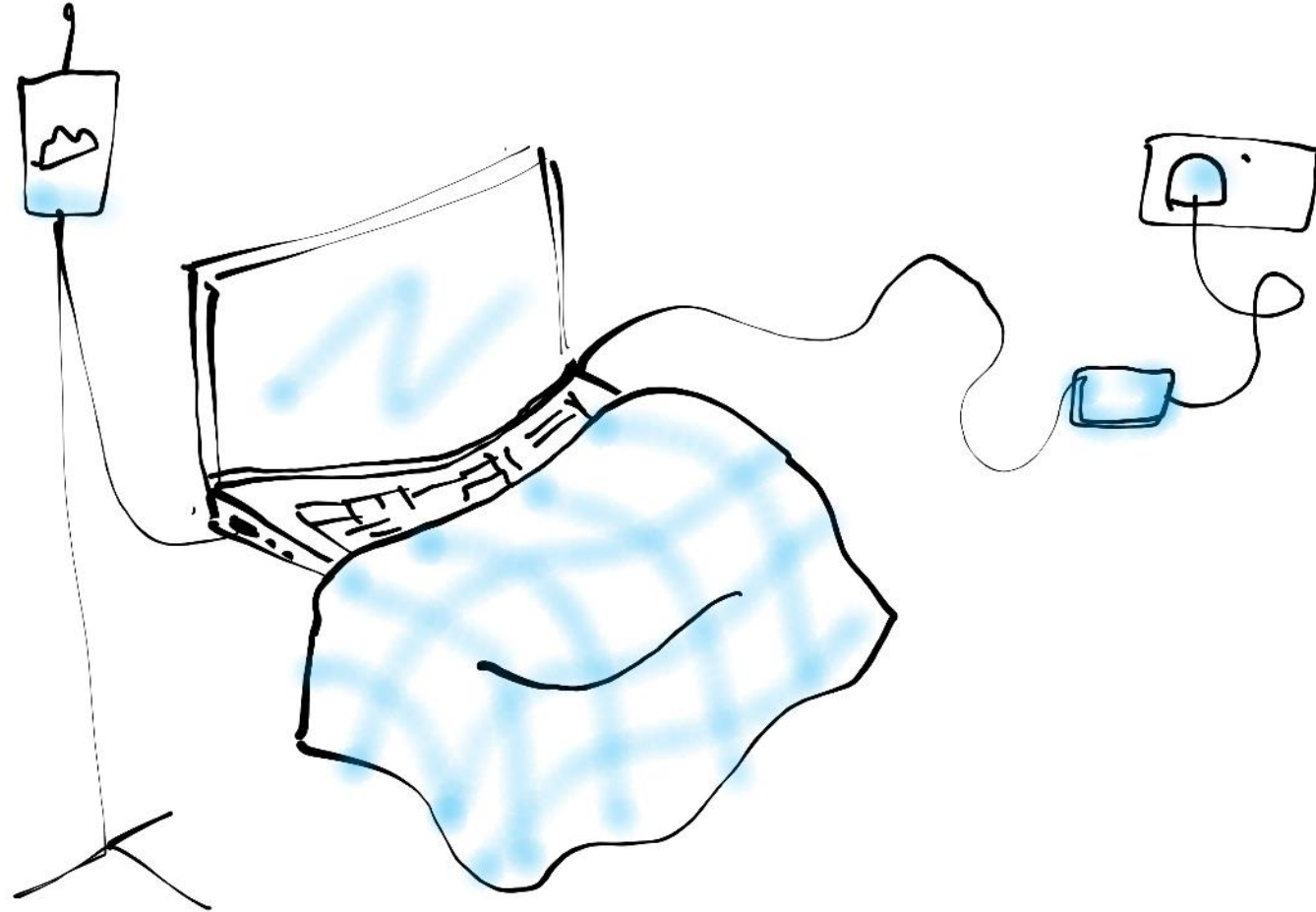




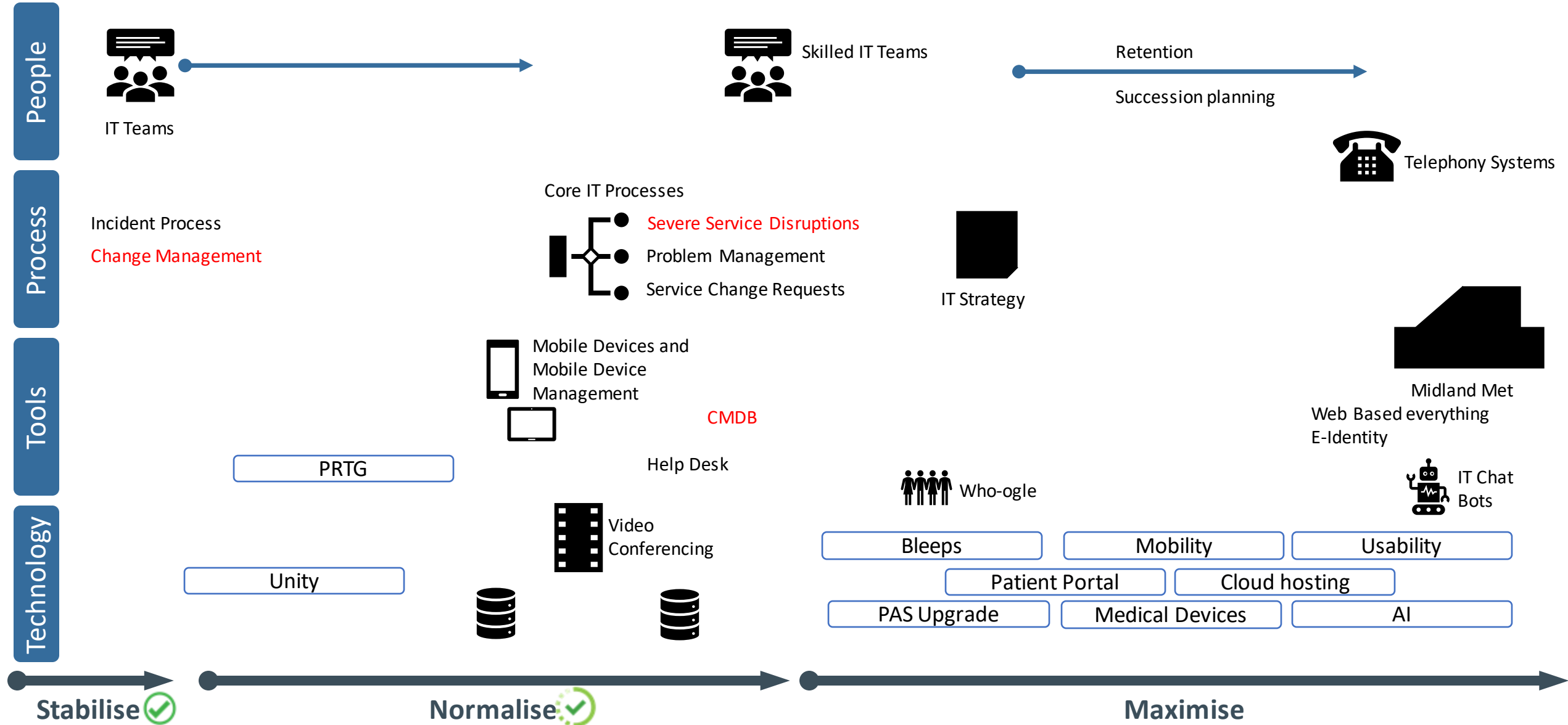








# IT improvement plan to the end of 2021





The image shows three industrial workers in a factory or construction site. They are wearing yellow hard hats, safety glasses, and orange high-visibility safety vests over dark work jackets. The worker on the left is looking towards the right. The worker in the middle is talking on a mobile phone. The worker on the right is looking towards the left. The background features industrial structures, pipes, and a large window or opening. A warm, golden light flare is present in the bottom right corner.

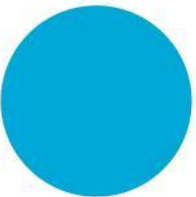
# Foundations

- Change management
- Severe Service Disruption process
- Culture change
- Information sharing



# SSD agenda

1. Introductions
2. What is the situation from the end user point of view?
3. What has changed since the last meeting?
4. What are the possible causes?
5. What options do we have?
6. What option will we try?
7. How long will it take before we know whether it worked?
8. What comms do we need to issue?
9. When is the next meeting and who needs to attend?



## Main Page

### Welcome to the Informatics Wiki Home Page!

#### Introduction

This Wiki is designed to be a 'one-stop' shop for **ALL** Informatics staff who need to find accurate information easily and quickly relating to all things Informatics.

It has been set up as a collaborative knowledge-based tool where we can continually expand our collective knowledge; it uses the same software that powers *Wikipedia* so has the same look and feel. The format, layout and general structure have been designed to make things as easy as possible to locate information as well as encourage contributions of knowledge content from potentially everyone in Informatics.

Like Wikipedia, the knowledge content is contained in pages known as **Articles**.

#### Using Search functionality

You should be able to locate and retrieve the right level and quality of detailed information for your needs without too much trouble.

There are **four** main ways to search and navigate:

1. by 'clicking' through the various **Contents** menus starting with the one just below
2. by using the 'Search informatics' box in the top right corner of this and any other page in the Wiki - you can often find the article you want by typing one or two letters that prompts a 'drop-down' list that should display the page you're looking for
3. by using the many **links** found in most articles and pages.
4. by 'clicking' through to the '**Page Index**' just below that takes you to a full **A to Z** list of every Wiki page (with links).

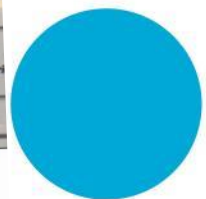
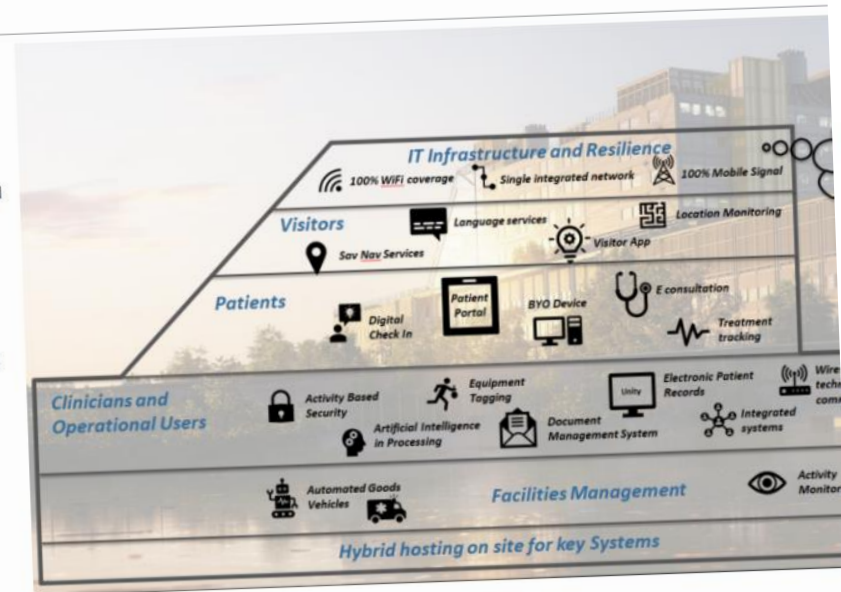
It's hoped that from this page, you'll be able to find what you're looking for within 3 to 5 'clicks'. (preferably 3).

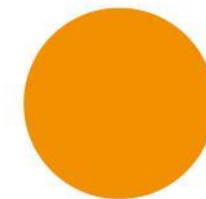
For those of you who wish to edit and contribute but unsure about how to do so then, please go to the **How to edit the Wiki** page where there is a step-by-step guide that takes you through the basics.

#### Page Index

Our Wiki doesn't have a specific content list though there is an **A to Z index** - click on the link on the left to access the list of all individual Wiki pages (with links to every page).

#### Policies and Guidelines

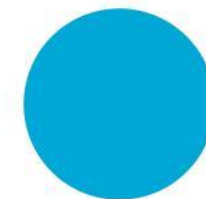
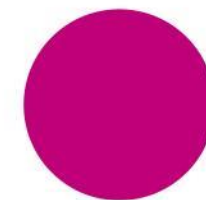




## Gold applications table

Please click the [ [Expand](#) / [Collapse](#) ] link on the right hand side of the row to **access / hide** the data contained within this table which may also be **sorted** (ascending/descending) by clicking on the arrow in the desired column header.

1. App / System	2. Also known as	3. Description	4. Trust Application Lead	5. Key business users	6. Monitored	7. Hosted on	8. Backup schedule	9. Resilience	10. Clinical impact	11. Non-clinical impact	12. Cap Mgmt	13. No. of IT Specialists	14. Support? / By whom	15. Supported hours	16. Renewal date	17. Dependencies	18. [Collapse] Interfaces
Telepath	iLAB Pathology or LIMS	Laboratory Information Management System (LIMS)	Tobi Alabi	Pathology	No	Internally hosted	Externally managed by DXC	Yes	Major	Minor	Yes: managed by DXC	L3 / DXC IT Support	Yes: by DXC	24/7	31/08/2021	HSCN, IPM, Rhapsody, ICM	
Rhapsody	Messaging bus	Interface Engine processing all of Trusts HL7 messaging	Neil Isham	Informatics	No	Internally hosted	3 times per week	Yes: Cross-site	Major	Major	Yes: managed by Rhapsody & Informatics	2	Yes: by Rhapsody Health & Informatics	24/7	31/03/2021	All messaging systems - External and Internal ESB	<a href="#">All Rhapsody Interfaces</a>
Image Exchange Portal	IEP	Image transfer portal / service	Julian Mansell	Imaging, ED, Stroke	Yes: by Sectra	External Data Centre	Externally managed by Sectra	Yes	Significant	Significant	Yes: managed by Sectra	3	Yes: by Sectra	24/7	31/05/2021	CRIS, PACS	CRIS, PACS
Alfresco	EDRMS or Alfresco EDRMS	Patient Document Management	Trish Kehoe / Pam Towers / Neil Isham	Clinicians	Yes: by PRTG	Hyper-V	None	Yes: partial	Major	Minimal	Yes: managed by Syn Apps	L3 / Sys Admin	Yes: by SynApps	Alfresco: 24/7, SynApps: 9 to 5, M to F (ex BHs)	01/08/2021	CSS (CDA), Unity	CSS (CDA), Unity
Ricoh Printing / Scanning	Printing	Integrated Trust solution using MFDs for Printing, Copying and Scanning	Mac Lines	ED & Pharmacy & Others	No	Various	N/A	Yes: Partial	Major	Significant	Yes: managed by Ricoh	5	Yes: by Ricoh	9 to 5.30 M to F	01/06/2022	HSCN	HSCN
Active Directory	AD	Core Infrastructure Directory	Tarun Dewat	Informatics	Yes: by PRTG	Hyper-V	AD Schema is backed up	Yes	Major	Major	Yes: managed by Informatics	L3	Yes: by Informatics	24/7	N/A	All trust applications that authenticate against network login	LDAP
HSCN (formerly NHS Internet)	NHS Internet	NHS Internet Service, Health and Social Care	Sarah Cooke	All Trust staff, patients and	Yes: by BT	External Data Centre	Externally managed by	Yes	Major	Major	Yes: managed	4	Yes: by BT	24/7	Ongoing	All external access to NHS systems	No direct clinical interfaces



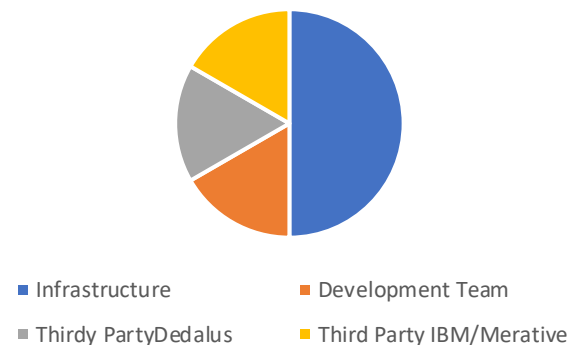


# Informatics Monthly Service Review Pack September 2022

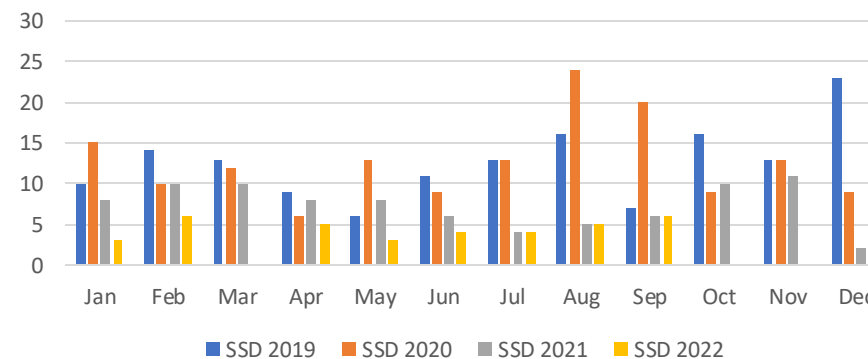
## SSD Trending

Month	SSD 2019	SSD 2020	SSD 2021	SSD 2022
Jan	10	15	8	3
Feb	14	10	10	6
Mar	13	12	10	0
Apr	9	6	8	5
May	6	13	8	3
Jun	11	9	6	4
Jul	13	13	4	4
Aug	16	24	5	5
Sep	7	20	6	6
Oct	16	9	10	
Nov	13	13	11	
Dec	23	9	2	
Total	151	153	88	36

SSD Count By Primary Resolver



SSD Count



# Informatics Monthly Service Review Pack 2022

## Severe Service Disruptions Trending

Month	SSD 2019	SSD 2020	SSD 2021	SSD 2022
Jan	10	15	8	3
Feb	14	10	10	6
Mar	13	12	10	0
Apr	9	6	8	5
May	6	13	8	3
Jun	11	9	6	4
Jul	13	13	4	4
Aug	16	24	5	5
Sep	7	20	6	6
Oct	16	9	10	4
Nov	13	13	11	4
Dec	23	9	2	3
<b>Total</b>	<b>151</b>	<b>153</b>	<b>88</b>	<b>47</b>



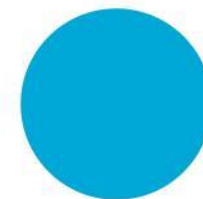
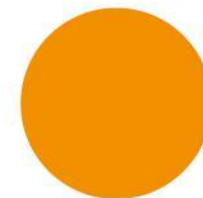
# NEWS

[Home](#) | [Cost of Living](#) | [War in Ukraine](#) | [Coronavirus](#) | [Climate](#) | [UK](#) | [World](#) | [Business](#) | [Politics](#) | [Tech](#) | [Science](#)

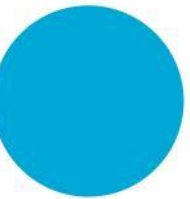
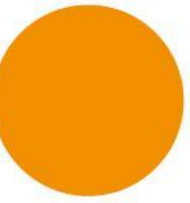
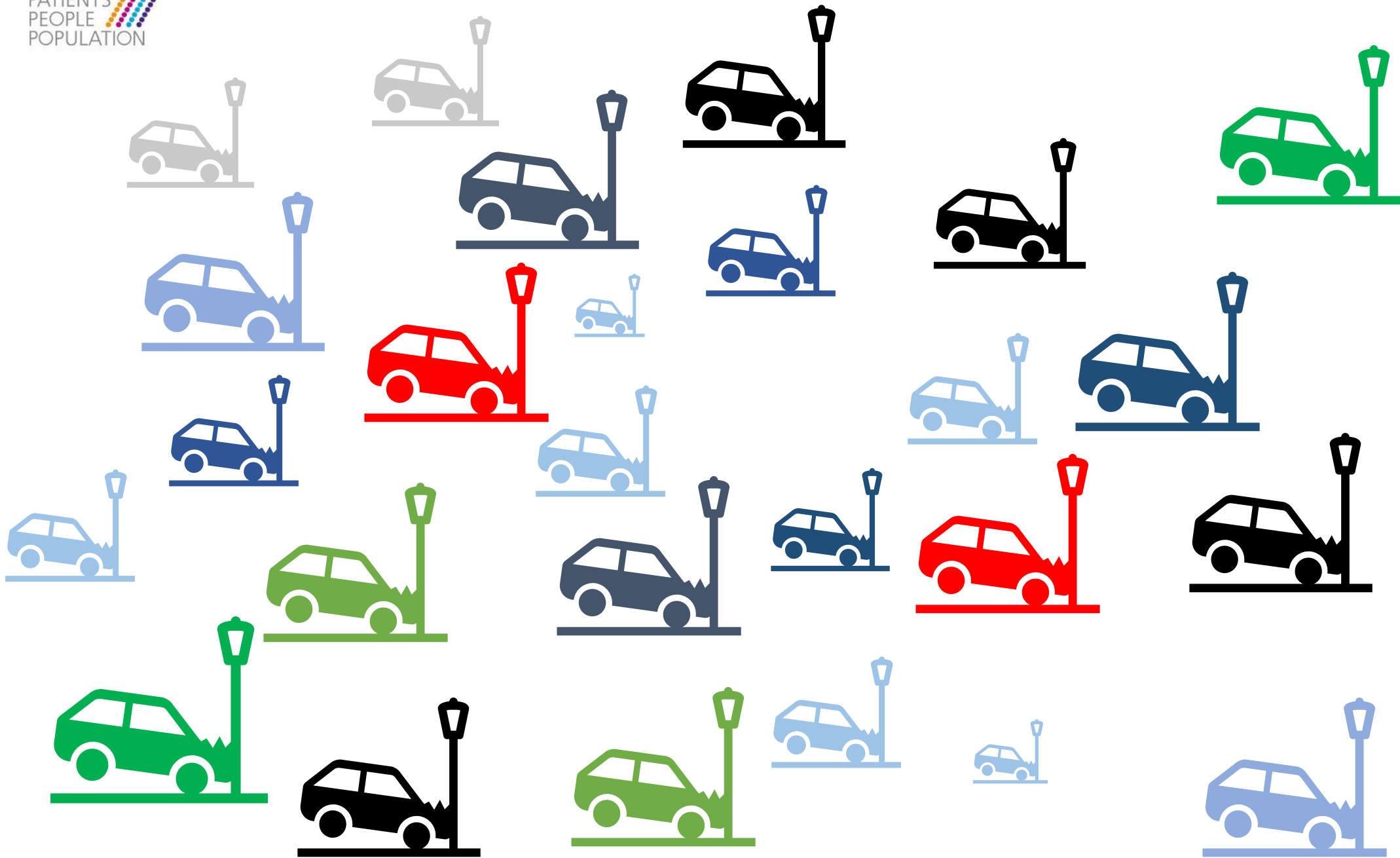
[England](#) | [Local News](#) | [Regions](#) | [Birmingham & Black Country](#)

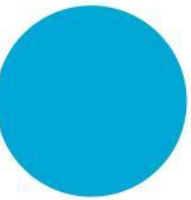
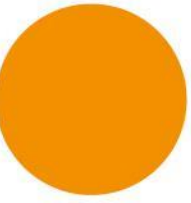
## Treatments cancelled amid Sandwell and Birmingham IT glitch

🕒 10 December 2021









# What happened

VMware vSphere Update 3

During rollback to a U2 systems failed

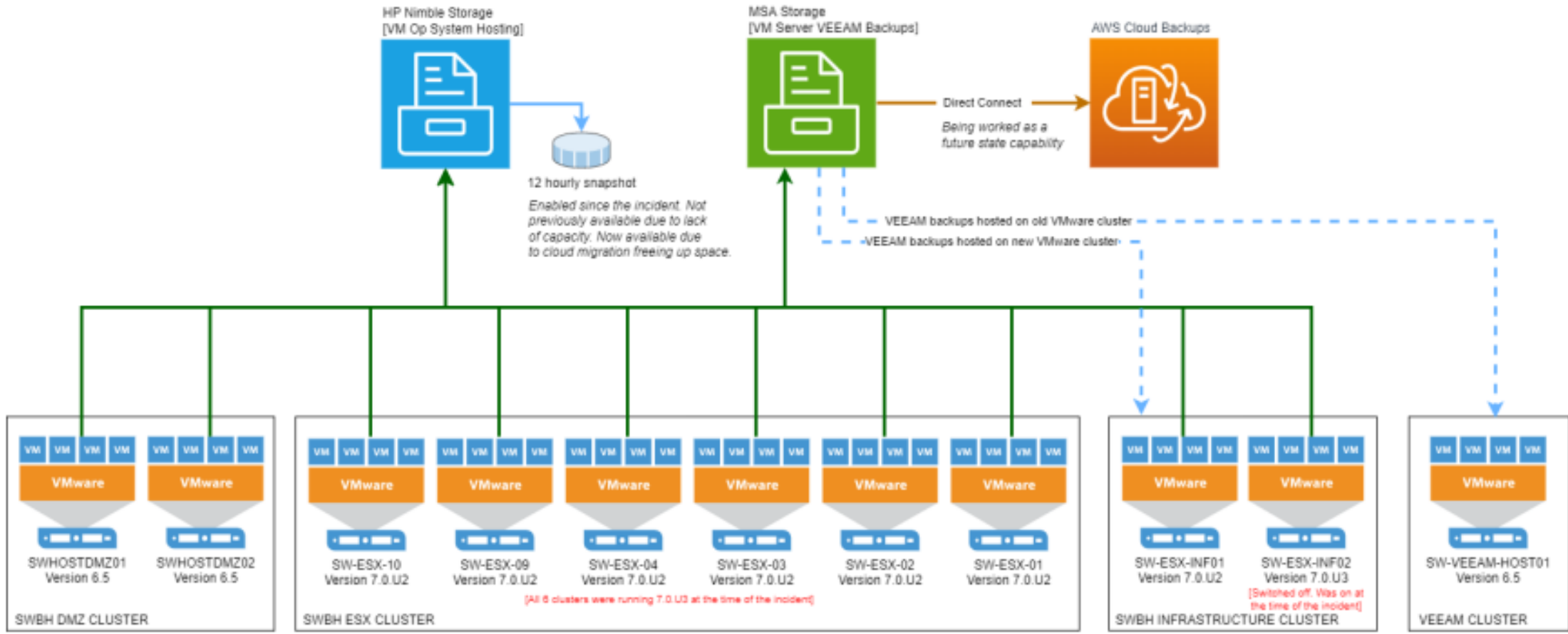
Where backups existed they were lost or corrupted, data was overwritten

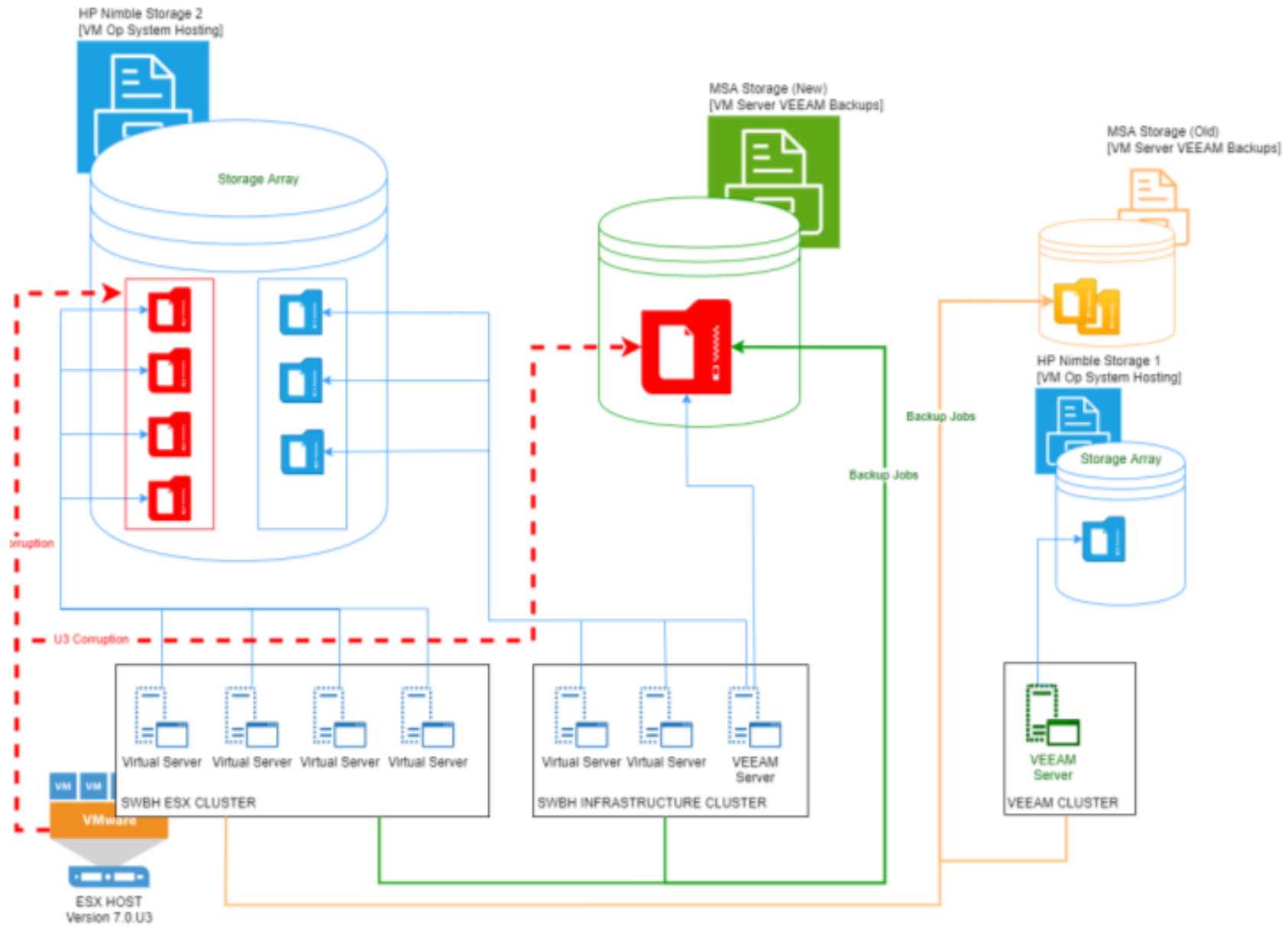
26 systems were adversely impacted



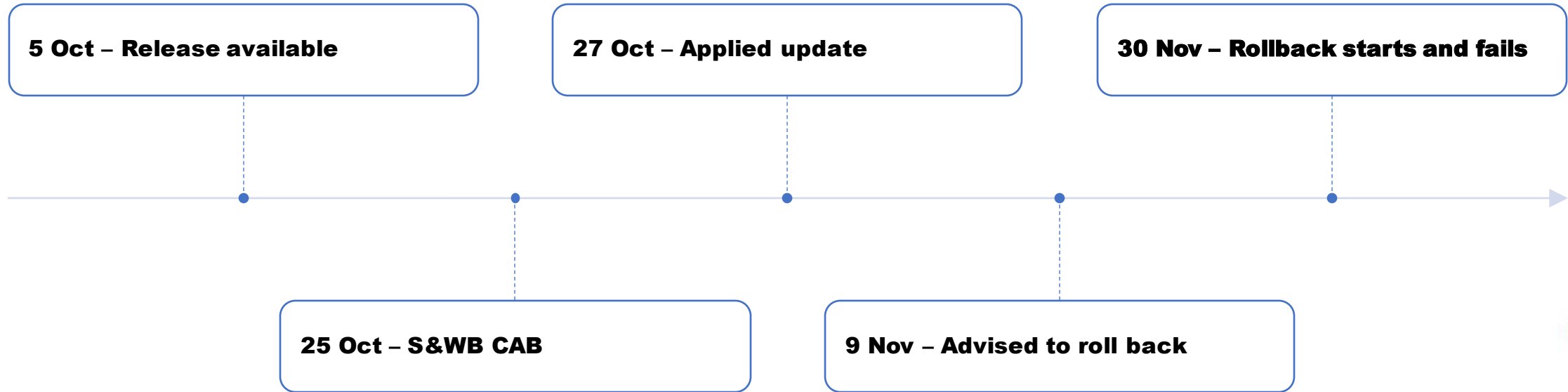


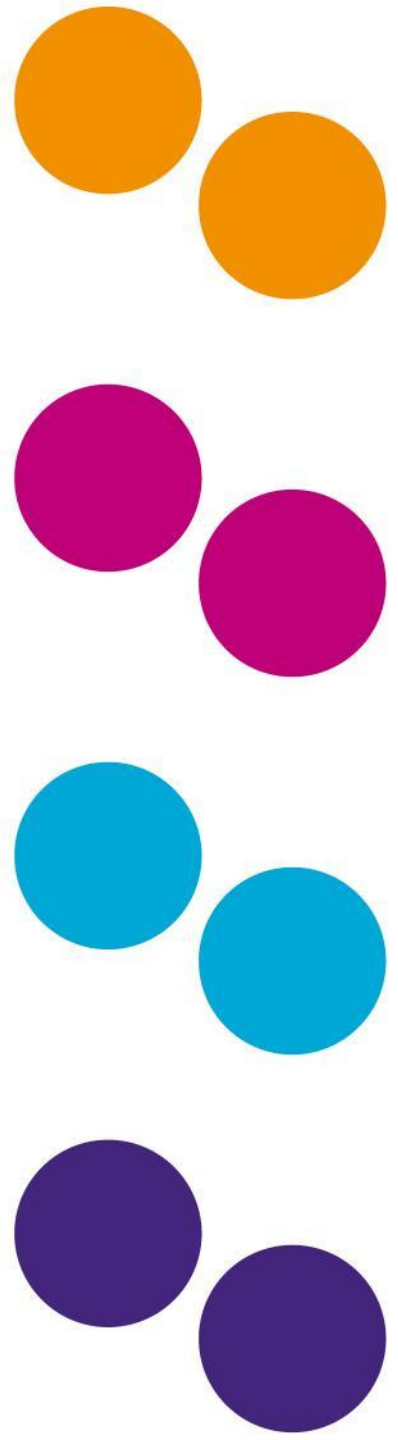
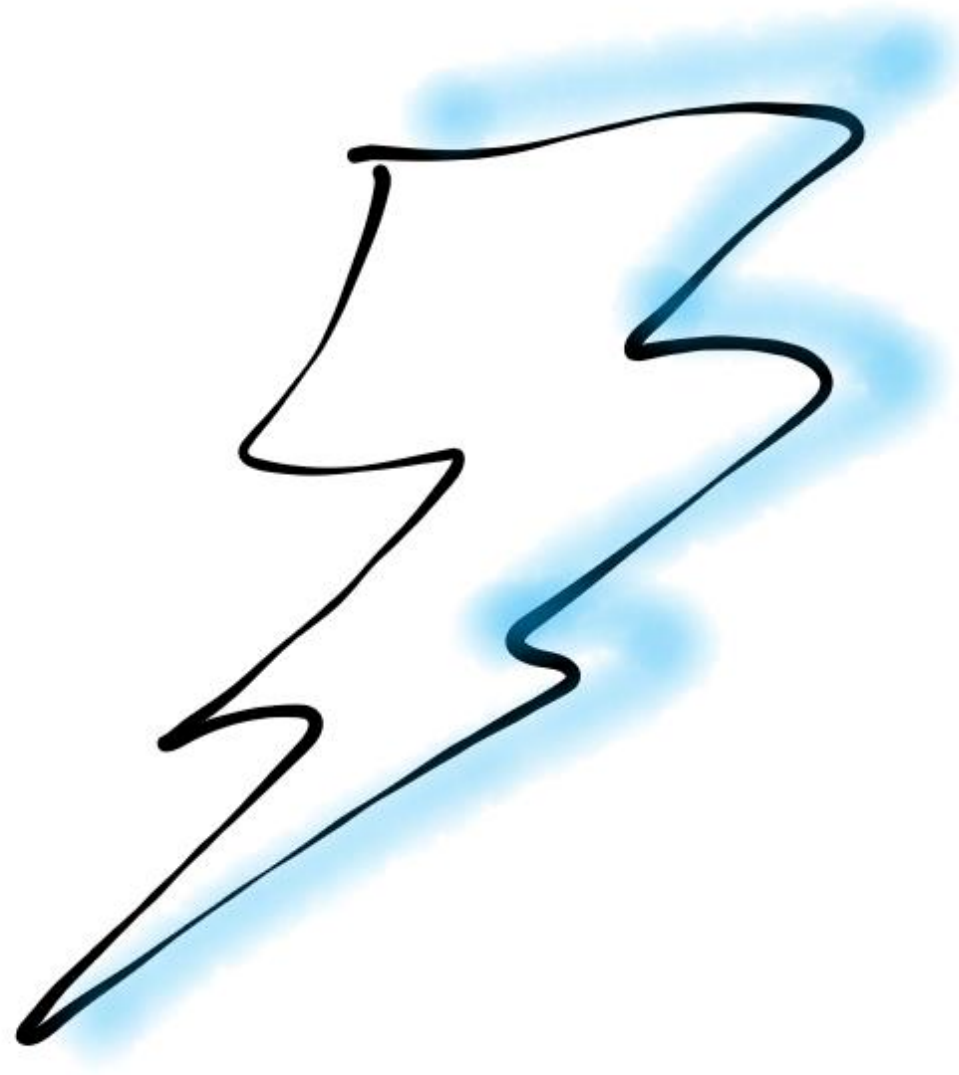
# ESX Clusters





# Timeline - 2021







# Severe Service Disruption

## Severe Service Disruption SSD

### Overview [\[edit\]](#)

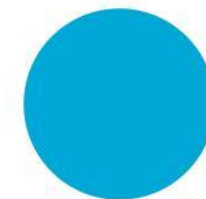
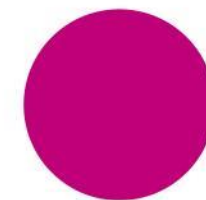
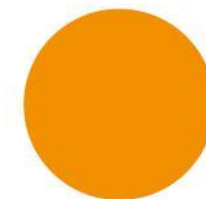
We call IT Major incidents **Severe Service Disruptions**, SSD's. Because that is what they are.

They have a set agenda, are focussed on the end user experience and are dynamically managed.

If you are running the SSD then the Agenda is as follows:

#### **Severe Service Disruption Agenda**

1. **Introductions** (The co-ordinator, an end user representative, a technical team representative)
2. What is the current situation from the end users point of view (Is this an SSD?)
3. What do we know has changed to cause this or since the last meeting?
4. What could be the possible cause?
5. What options do we have to try and restore service or introduce a work-around?
6. Which option should we authorise to go away and try - this is the one most likely to relieve the situation
7. When will we know whether that action has had an impact or not?
8. When shall we meet again and who should attend?
9. What do we need to communicate?
10. The meeting ends – repeat until unnecessary ( decided at point 1)





NOT A "MAJOR INCIDENT"



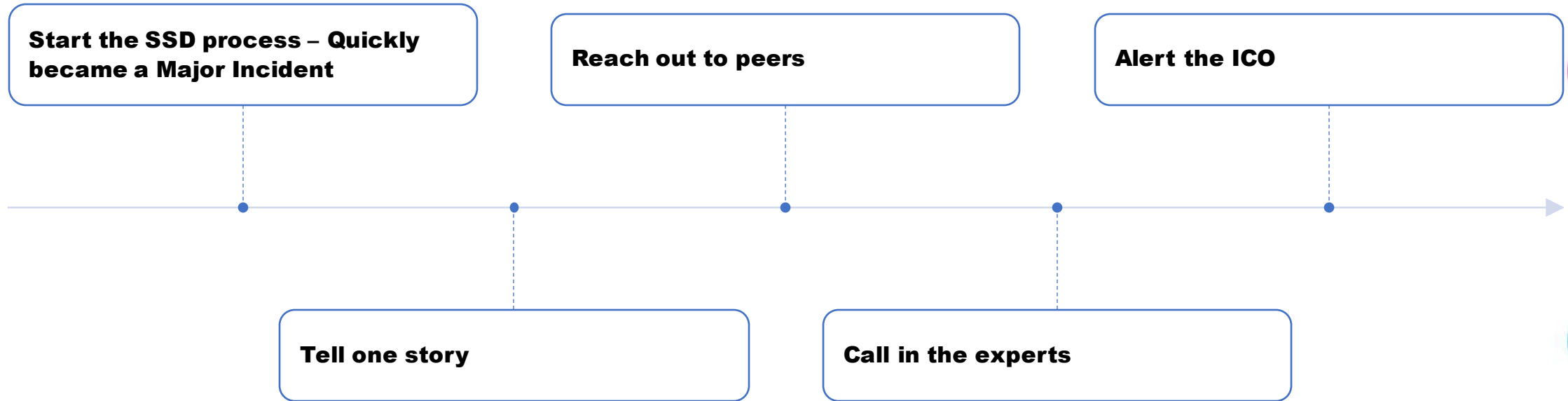
NOT A "TECHNICAL BRIDGE"

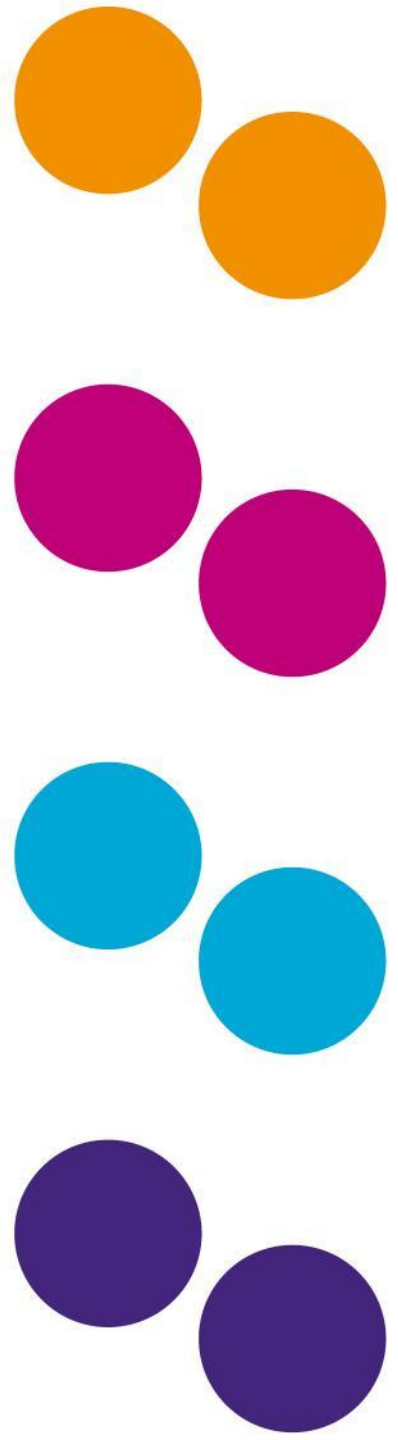


RESTORING CUSTOMER  
ABILITY TO WORK FOCUSED



# What we did







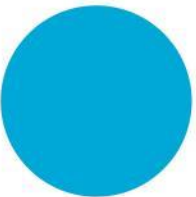
# Tracking

Excel VMware recovery - Saved															
Search (Alt + Q)															
File Home Insert Draw Page Layout Formulas Data Review Accessibility Reminder View Help Editing															
Calibri 11 B I Merge General \$ .00 .00 Conditional Formatting Styles Format As Table															
Q3															
A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P
Clinical Area	Service	Vendor	Server Build	Application Applied	Data Restored from Date	Tested	Service Status	Last data backup	Update	Next expected update	Clinical impact	RFC Num	Application restore required	Server rebuild required/resource	Database restore required/n
Community, WHC	SWBH-F501 Y/W drive, comms share, Diabetes share L drive, wheelchair data [Other areas affected aswell]	N/A Internal Infrastructure	N/A	N/A	02/07/2021		In Progress	02/07/2021	<p>13/12/2021 Data has been recovered and restored. Comms team are validating data in comms share. Subtan and Andy F to continue data validation, however over 70% of data is corrupt/missing</p> <p>16/12/2021 - Informatics are presenting all folders with known security groups for the organisation to validate</p> <p>22/12/2021 - Decision to be made over the status of this service</p> <p>01/02/2022 - Ontrack are in the process of recovering the Backup LUN which contains an entire backup of everything, including SWBH-F501 and the Medisoft DB. However the integrity of this data is not guaranteed as it may be corrupt/unstable</p> <p>22/02/2022 - F501 recovered from backup taken on 26/11/2021 and mounted in VEEAM. Infrastructure team will present recovered files to Diabetes dept and Comms team</p> <p>01/03/2022 - Recovered drive is a backup from July 2021. Subtan confirmed data is valid/usable. Ontrack are in the process of recovering a drive believed to be from November 2021</p> <p>18/03/2022 - Infrastructure team working on a plan to re-integrate recovered drive</p> <p>26/04/2022 - Infrastructure team have sent recommended plans to Martin Sadler for review, this will likely need Trust Board approval before implementation</p> <p>24/05/2022 - Approval given, Infrastructure team are working on implementation</p> <p>31/01/2022 - Change 684066 completed within the scheduled window. Historic HFA data and CSS letters are visible in the live Medisoft instance (Paul Bell stresses this data is not complete and only contains data Medisoft could retrieve)</p> <p>16/01/2022 - Informatics continues to work through issues raised by clinicians. Medisoft present in reviews. Ash Sharma raised concern over historic configurations, historic audit is unavailable bar a few changes recorded in the last 2 years.</p> <p>18/03/2022 - Change 698203 Emergency Firewall access for Medisoft for Ophthalmology - System configuration changes to revert to pre-incident settings. - Completed successfully</p> <p>24/03/2022 - Change 700152 Emergency Firewall access for Medisoft to enable the letters for the DNA episodes within the letters and notes configuration screen - Completed successfully</p>	21/06/2022 12:30	All clinical data stored on the affected shared files are unavailable; this may lead to a delay in patient care. W Drive - Wheelchair Service impact and unable to provide data to the CCG and therefore NHSE regarding historical Personal wheelchair budgets as all spreadsheet and information are saved on the W drive.	CR-12	NO	YES	NO
Ophthalmology	Medisoft	Medisoft	Yes 02/12/21	YES 06/12/21			Live - With follow up actions	02/07/2021	<p>31/01/2022 - Change 684066 completed within the scheduled window. Historic HFA data and CSS letters are visible in the live Medisoft instance (Paul Bell stresses this data is not complete and only contains data Medisoft could retrieve)</p> <p>16/01/2022 - Informatics continues to work through issues raised by clinicians. Medisoft present in reviews. Ash Sharma raised concern over historic configurations, historic audit is unavailable bar a few changes recorded in the last 2 years.</p> <p>18/03/2022 - Change 698203 Emergency Firewall access for Medisoft for Ophthalmology - System configuration changes to revert to pre-incident settings. - Completed successfully</p> <p>24/03/2022 - Change 700152 Emergency Firewall access for Medisoft to enable the letters for the DNA episodes within the letters and notes configuration screen - Completed successfully</p>		Service Areas - General Ophthalmic, Paeds, Glaucoma, Corneal, Med Ret/Fast Track, Pre-Op, Theatres, Injections. Impact to accessing historical patient images, data and care plans to complete comparisons, refer to baselines, medication history, forward instructions from last visit including details on drugs or not to drop or to see specific person. Reduced patient flow as OCTs used to view and take images. Pre-op information not accessible. Biometry not available, manipulation of data when different lenses are requested, unable to "forward look" remotely. No previous surgical details available, specific requests/discussion outcomes, Scans to support decision making. Management plans not accessible, no access to previous injection history.	CR-1, CR675939, CR675990, CR678154, CR683488, CR684066	YES	YES - VMware/Ravi	No DB backup
Pathology	Test SW-Haemtest blood track server	Haemonetics	Yes	Yes 22/03/2022			Live		<p>24/02/2022 - Review with Haemonetics on 25/02/2022 to discuss initial server build plan</p> <p>24/02/2022 - Pathology IT to raise CR for firewall access, Andy Farrington will ensure account is set up</p> <p>01/03/2022 - Andy Farrington building r2012 server</p> <p>18/03/2022 - CR698844 - Remote access for Haemonetics to setup test server - access scheduled for 22/03/2022 11:00-18:00. Remote session will be</p>		Potential Delays to Projects				



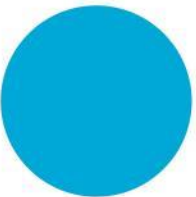
# Spreadsheet columns - customer

- > Clinical Area
- > Service
- > Vendor
- > Clinical impact
- > Next expected update
- > Server Built
- > Application Applied > Data Restored from Date > Tested > Service Status > Last data backup >
- Update > RFC Number >
- Application restore required > Server rebuild required/resource >
- Database restore required/resource > System recovery actions



# Spreadsheet columns - IT

- > Server Built
- > Application Applied
- > Data Restored from Date
- > Tested
- > Service Status
- > Last data backup
- > Update
- > RFC Number
- > Application restore required
- > Server rebuild required/resource
- > Database restore required/resource
- > System recovery actions



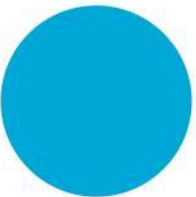
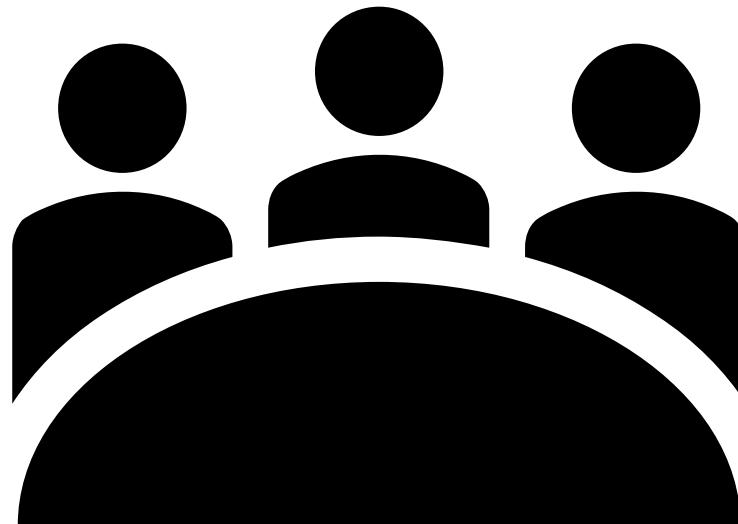
# Good stuff

We told everyone

We asked for help

We kept the end user informed

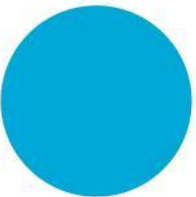
We got an independent audit of cause, impact, process and people





# Medisoft and ophthalmology

- Loss of systems – backup corrupted
- Different impact depending on specialism
- Data Recovery was of the structured records – free text narrative lost
- Medisoft re-engineered records



Our processes - SSD

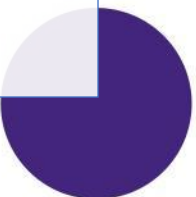
Our behaviour

Our cloud based systems

Our WiKi

Supplier management

Medisoft



20% of global customer were impacted

There are companies dedicated to restoring lost data from the supplier

**We needed to make sure that we followed the manual completely and we use the service at our own risk**

# External recommendations

- Test your business continuity exercises
- Review change management policies with regards to risks and rollbacks
- Review back-up strategies
- Carry on with cloud investment plans
- Review contact details with all suppliers
- Get some more substantive staff





# Finally

- We got our response from the ICO
- The clinicians worked amazingly through the adversity
- Medisoft were amazing
- We continue to move services to the cloud
- Our culture and our people have changed



# Personal impact



Thanks. Any questions

