

	Project Brief Template		
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**NHS (England) Open Standards, Simplified Sign On
Project: Roadmap Scoping and Evaluation project.**

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Approvals:

This document must be approved by the following:

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Distribution:

Project Board

NLH SMT

NLH TDAG members and website

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1 PURPOSE OF DOCUMENT

The purpose of this document is to provide a firm foundation for the initiation of the project.

The project brief specifies the initial view of the scope, objectives and requirements of the project and includes the initial business case, risks, quality and acceptance criteria for the project.

2 PROJECT DEFINITION

2.1 Background

The National Library for Health (NLH) holds the Athens contract on behalf of the NHS to provide an Access Management Service (AMS) to the NHS in England and the Department of Health.

The current contract runs for 5 years (from Spring 2007) and is let to Eduseriv plc. The contract is in two halves. First Business as Usual allows for the ongoing support and development of the current Athens based service. The second part provides for the joint development of an open, standards based service capable of integration with other Identity Providers.

For at least 10 years both the NHS and Higher Education (HE) communities have been using Athens for access management to electronic library and knowledge resources. This has been beneficial for both sectors. However the Joint Information Services Committee (JISC) who coordinate such activity for Higher and Further Education in the UK, have changed their strategy for access management. JISC will no longer centrally fund the use of Athens from July 2008, although individual institutions can continue to fund their use of Athens themselves. The main reasons for this change are:

- Development of Secure Access Mark-up Language (SAML) standard (as part of the OASIS group¹) and federated access management approaches as part of the Internet 2, middleware services project.
- The recognition that the use of Athens is almost entirely restricted to the UK, whereas the use of federated access management is a global development.
- Improved user privacy and reduced data protection responsibilities, when implementing the recommended approach by the UK federation².
- The adoption of shibboleth for federated access management in education and research in many countries.

¹ Organization for the Advancement of Structured Information Standards <http://www.oasis-open.org/who/>

² UK Access Management Federation for Education and Research <http://www.ukfederation.co.uk/>

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- Simplified sign on to resources by reducing the number of logins required by the user and the number of independent passwords required to access resources.
 - Open source software implementation.
 - No subscription charges for service providers.

NHS library services include provision to University students in health courses such as medicine, dentistry, nursing and allied health professions, and those who teach them. In addition there are University researchers who have honorary NHS contracts or similar arrangements that give NHS entitlement to library resources. There is therefore significant overlap between the NHS and HE in those that are using NLH resources.

NHS library services are themselves often provided under contract from University library services, especially in the large traditional medical teaching hospitals. So there is significant overlap in service provision too.

In the last ten years this overlap between the NHS and HE has at least been facilitated by the common use of Athens but this is about to change.

At the same time, the Department of Health Review of Library Services has recommended that all NHS staff should have Athens accounts and the new NLH content procurement has included all health students and those involved in their teaching for the first time.

NLH wishes to ensure that sign-on services used by NHS library services are able to:

- Accommodate all NHS staff in a simple way, encouraging maximum uptake of NLH services by those authorised to use them.
- Support access by health related students and those who teach them, and University staff with honorary NHS contracts or equivalent authorisation.
- Keep in step with, and benefit, from international standards and developments.
- Implement best practice in terms of user privacy, data protection and information security.

2.2 Project Objectives

The objective is to deliver an implementation plan for achieving a SAML compliant knowledge sign on for the NHS library service in England during the lifetime of the Eduserv contract.

It is assumed that will be developed in association with the UK Access Management Federation for Education and Research (the federation) to maximise the benefits of NHS HE collaboration.

Work will begin on constructing an implementation road-map to move towards a SAML compliant knowledge sign-on for the library service. Work will commence on investigating the feasibility of joining the UK Access Management Federation for Education and Research and of NLH becoming a Service Provider and Identity Provider compliant with the principles of the UK federation.

This complex area is prone to misconceptions. The work will commence with development of Use Cases, identification of benefits and risks of migration, establishment of requirements and infrastructure components and dependencies.

The principle output during this period will be an implementation road map, with a view to developing demonstrator pilots with one or more external institutions or content providers. Further stakeholder events will be organised as part of a communications strategy to ensure that the NHS library service is kept informed and can influence developments.

This output will also inform future business decisions on access and identity management beyond the current Eduserv contract period.

2.3 Project Scope

2.3.1 In Scope

Access to NLH services by authorised users

Access to local NHS library services in England, including local content

Access to any other NHS services in England currently controlled by Athens

Access to NLH resources via NHS CfH clinical or staff systems

Access by NHS (England) staff to University library and knowledge services where authorised

Access by eligible HE staff to NHS knowledge resources and services where authorised

2.3.2 Out of Scope

Access to NHS library and knowledge services in Scotland, Wales and Northern Ireland (but with strong communication and discussion of plans)

Access management for the National Institute for Health Research (NIHR) (at this time dependant on development of an access management solution for the research portal)

Access to any other NHS knowledge resources not currently controlled by Athens (although this was recognised as a benefit area by projects in HE).

2.4 Key Stakeholders

NLH

NHS Libraries, including joint NHS/University libraries

Content providers to the NHS

NLH partners – notably Map of Medicine, CfH, NIHR.

University Medical, Dental and Nursing Schools and Schools of Professions Allied to Medicine

2.5 Outline Project Deliverables

The initial deliverable will be a “Road Map” document outlining the major steps to taken.

This will be developed by further workshops with stakeholders but is likely to identify three main elements to this project:

a. Joining the UK Access Management Federation, this involves reviewing the membership policies for any difficulties and the administrative process of applying. This is a pre-requisite of using the federation.

b. Setting the NLH up as a Service Provider within the UK Access Management Federation so that it can offer NLH services to those authorised users who are enabled for federated access eg University students and staff who have NLH access rights

c. Considering and implementing the best approach for the NLH to be an Identity Provider within the UK Access Management Federation. This might be achieved for instance through the use of OpenAthens from Eduserv.

The deliverables in summary will be:

Design deliverables:

- Collection and documentation of User Scenarios from stakeholders, with technical commentary on issues for implementation
- Formal UML based Use Cases and Sequence diagrams. Attribute requirements identified.
- Test cases for subsequent evaluation exercise
- Analysis of benefits and risks associated with federated access management
- NLH becomes a member of the UK federation as Identity Provider (IP) or Service Provider (SP) or both.

Technical Deliverables

NLH SAML Roadmap - Project Brief v1 3x final on hold on hold

PLEASE NOTE THIS PROJECT IS “ON HOLD” – MADE AVAILABLE AS AN OUTLINE OF THE ISSUES ONLY

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- Technical Specification document describing functional and technical requirements.
 - A high level “road map” document describing key implantation steps for our stakeholders

Implementation Deliverables

- NLH to become a member of UK federation on a trial basis for the purposes of this project
- Establish several pilot demonstrators each with one HE stakeholder, one or more NHS stakeholders and one or more content providers aiming to include as broad a range of organisations as possible both to test the approach of this project and to help to start raising awareness and knowledge of this technology.
- Evaluation of pilots.

Communications deliverables

- A formal communications strategy outlining stakeholders and communications activities, to include email list, updates, workshops and presentations on outputs

Depending on the “Road Map”, the other deliverables may be done separately for becoming a “Service Provider” and an “Identity Provider”

2.6 Constraints

The constraints include:

- The terms of the NLH contract with Eduserv although it was framed with a move to SAML based access in mind.
- The management and technical resources at NLH given the extensive programme of other work planned and the move of NLH from the NHS Institute for Innovation and Improvement to form a core part of “NHS Evidence” under the National Institute of Health and Clinical Excellence (NICE) in April 2009.

Ideally those staff and students, who are authorised to use both NHS and University electronic library resources, would see these resources combined for access through one log-in and one front-end. This is not currently available through the use of UK Access Management Federation. However it is believed that this functionality is more likely to be developed in the future this way as it is a recognized international problem that is being tackled by the open source community.

2.7 Dependencies

The Dependencies include:

- NHS Collaborations evaluation work
- Identification of appropriate external expert support for review
- The ability of the UK Access Management Federation to include members outside the immediate education and research community
- The support for federated access being in place by the relevant Universities and Content Providers
- The NLH Enterprise Architecture overseen by the Technical Design Authority Group (TDAG)

3 BUSINESS CASE

Description of how this project supports business strategy plans or programmes and the reasons for selection of this solution.

3.1 Business Benefits

This project contributes to the following benefits outlined in the NLH Business Plan:

This project contributes to the following NLH benefits:

Access for All - Inclusive access to resources and services for everyone involved in the delivery/support of care to NHS patients in England.

Easier and transparent access to core NHS knowledge services and resources - Fewer steps required for users to find relevant NHS knowledge services and resources – removing barriers to access

Bringing the best available knowledge closer to decision making - The facilitation of getting NHS knowledge resources closer to the decision making process, and at the point of need, thus helping to embed knowledge into practice. (Enabler)

It also enables improved collaboration between the NHS and the education and research communities supporting the many staff and students who are directly involved in both sectors.

3.2 Business Options

3.2.1 Options Available

A. Do Nothing

If the NLH does not undertake this work it will be left with a proprietary access management infrastructure which overtime will receive less support from the content provider community. The long term availability of classic Athens as a service may not be guaranteed as the customer base for it may be NHS only. Re-procurement of an AMS for NHS content will be more open to competition if we are in an open standards position.

B. Develop Road Map and pilot(s)

3.2.2 Recommended Option

Option B is the recommended option. Progress to option B is without prejudice to the findings of the evaluation and any subsequent implementation stages.

4 ORGANISATIONAL STRUCTURE

This Project will report to the NLH Technical Design Authority Group (TDAG).

Project Board

A Project Board will comprise:

Ian McKinnell, Head of Development for NLH

Alison Turner – Head of collections for NLH

Cheryl Twomey, co-chair of NLH TDAG

Malcolm Teague – NHS-HE forum and JANET(UK)

Henry Hughes – UK AMF

The project board will be at two month intervals

Delivery Team

A Delivery team will be established to take forward work on the deliverable above. It will comprise

- NLH technical architect – Kailash Sohoni

- NLH Business Analyst – Rushma Panchal
- UK federation: access to operational & technical resources – Mark Tysom
- Eduserv technical support – to be identified when required

Malcolm Teague will be the Project Manager and Facilitator for both the Project Board and Delivery Team.

The Delivery Team will meet fortnightly and the project manager will provide fortnightly project updates to the Board.

The Delivery team will co-op additional members as needed e.g. for pilot sites as required.

User Engagement

Appropriate user engagement will be obtained via one or more workshops involving key users and technical personnel in the development of deliverables. A wide range of stakeholders will be surveyed to establish and validate user scenarios. Outputs of the design phase will be circulated for comment. At least one major seminar will be held for NHS library, HE and CfH personnel to present findings.

5 COSTS and resource requirement

Item	Quantity	Cost
Eduserv technical support – to be determined when required	Tbc	To be covered as part of existing contract
Stakeholder Workshops (Roadmap workshop in July; Implementation workshop in Autumn: both for about 50 people)	2 Workshops	£6,000
NLH UML / Requirements analyst	0.1 wte	Allocation of existing NLH resource
NLH Technical Architect	0.1 wte	Allocation of existing NLH resource
NLH Analyst Developer	0.1 wte	Allocation of existing NLH resource
NLH test analyst	0.1 wte	Allocation of existing NLH resource
UK Access Management Technical and Policy Input	0.1 wte	Allocation of existing JANET(UK) resource
Project Management and Facilitation	0.2 wte	Allocation of

		existing JANET(UK) resource
NHS membership of the UK Access Management Federation for pilot purposes (rather than full Policy Board membership)		No charge

The Workshop costs will be shared equally between the NHS and JANET(UK).

It should be noted that pilot sites will not be centrally funded for their participation so such sites will need to be interested in doing this work for their own purposes and benefit.

There will be an annual subscription or similar charge for the NHS (England) to join the UK Access Management Federation for Education and Research. The policy for this is in development.

6 CRITICAL SUCCESS FACTORS

What has to be achieved for the project to be deemed as a success?

1.	Use cases and UML are generated that are agreed by stakeholders and that can form a firm basis for this and other related projects.
2.	A shared understanding of the technical options, risks and benefits is documented and agreed with stakeholders
3.	An outline plan for development (the roadmap) is agreed with all parties.
4.	A business case and implementation plan is agreed for the pilot stage of the roadmap.

7 RISKS

Describe any risks that are known at this time, how they are being dealt with and who is responsible for owning and resolving the risk.

No.	Risk	Mitigation	Likelihood	Owner
1	Project is not seen as a priority once NLH has moved to NHS Evidence leading to lack of resource for undertaking the NHS components.	Chair of Project Board to write to NHS Evidence setting out the importance of the Project and the importance of the wider TDAG role. This in addition to the case being argued within NHS Evidence by NLH staff. Project to set clear objectives and deadlines and to deliver.	M	CT and IM
2	UK Access Federation Policy Board do not support the widening of membership to groups like the NHS or make joining prohibitively difficult or expensive.	Keep the Policy Board closely in touch with the project and develop membership policies and procedures with the NHS in mind.	L	HH
3	Lack of interest by third party suppliers to help with the project.	Low risk because they are working on open standards and federated access for other markets. However contractual pressure can be brought to bear by NLH and importance can be stressed by the federation.	L	HH and IM
4	Lack of interest by potential NHS pilot sites	There is concern about the potential destabilisation of well organised NHS mechanisms for Athens administration. There may be little appetite for relying on other sources of user credentials in the Identity Provider part of the project. These issues will be explored and evaluated fully as part of the stakeholder engagement workshop and development of the roadmap.	M	CT and IM
5	Lack of interest by potential HE pilot sites	Low risk because HE already engaged with this agenda and they would like a better solution to access from the welcome widening of NLH resources to all students in clinically related subjects and their tutors. Need to keep potential sites well informed and involved however.	L	MT and MM

8 OUTLINE PROJECT PLAN

Breakdown of key milestones that relate to project deliverables

ID	Deliverable	End Date
1	Start Date	Sept 2008
2	Initiation and Start-Up (ending with TDAG approval of Project Brief)	End Feb 2009
3	Project Board meetings	ongoing
4	Fortnightly Project Status Reports	ongoing
5	NHS Use Cases and UML	End March 2009
6	Technical Framework Document on requirements for NLH as a Service Provider	End June 2009
7.2	Roadmap workshop with stakeholders	Mid July 2009
7.8	Publish agreed Roadmap	Mid Sept 2009
8	Join UK Access Management Federation (assuming this is a desired outcome in roadmap)	Mid Sept 2009
9.2	Stakeholder workshop on implementation phase for pilots	Early Oct 2009
9.3	Business Case for pilot implementation	End Oct 2009
9.4	PID for pilot implementation	Mid Nov 2009