GIG CYMRU NHS WALES | Bwrdd Iechyd Prifysgol
Betsi Cadwaladr
University Health Board

Information Governance and Informatics Committee
Minutes of the meeting held on 14.2.19
in the Boardroom, Carlton Court, St Asaph

Present:

Mr John Cunliffe	Independent Member– Committee Chair
Ms Lucy Reid	Independent Member
Cllr Cheryl Carlisle	Independent Member

In Attendance:

Mrs Kate Dunn	Head of Corporate Affairs
Mrs Grace Lewis-Parry	Board Secretary
Dr Melanie Maxwell	Caldicott Guardian
Dr Evan Moore	Executive Medical Director
Mrs Justine Parry	Assistant Director Information Governance and Assurance
Mr Andrew Strong	Wales Audit Office Observer
Mr Dylan Williams	Chief Information Officer

Agenda Item Discussed	Action By
IG19/1 Chair's Opening Remarks The Chairman welcomed everyone to the meeting.	
IG19/2 Apologies for Absence Apologies were received from Prof Jo Rycroft-Malone.	
IG19/3 Declarations of Interest None were received.	
IG19/4 Draft Minutes of the previous meeting Held on 13.11.18 and summary action log The minutes were approved as an accurate record. No matters arising were raised. Updates were noted to the summary action log.	
IG19/5 Review of Corporate Risks Assigned to the Information Governance and Informatics Committee **IG19/5.1** The Committee Chair outlined some confusion amongst the members in that they had expected to have seen three separate risks around health records, local infrastructure and national issues eg; NHS Wales Informatics Services (NWIS). The Assistant Director Information Governance & Assurance clarified the escalation process	

for any new risks and that the national NWIS risk had been discussed at the Executive Management Group (EMG) but now required further work. The Committee Chair reiterated that the Committee would wish to see reference within the Corporate Risk Assurance Framework that NWIS was a significant risk in terms of BCUHB's ability to deliver the IMT&IT agenda.	
IG19/5.2 In terms of CRR10a the comment was made that some of the detail from the original CRR10 had been lost and that the new risk did not reflect primary care elements. It was also suggested that the risk needed to be widened to include assets, capacity and capability. The Chief Information Officer undertook to further review and amend this risk including firming up the sources of assurance.	DW
IG19/5.3 With regards to CRR10b the Chief Information Officer was asked to refresh the narrative to better define whether the risk related to all health records or just some aspects, and to clarify where other known risk areas were being appropriately managed. He would also firm up the sources of assurance.	DW
IG19/5.4 It was resolved that the Committee receive the amended risks in due at the next meeting	
IG19/6 Informatics Operational Plan Objectives 2018/19 Quarter 3 Performance Update **IG19/6.1** The Chief Information Officer presented the report and indicated that he was looking to reflect on the format and style for future meetings to enable the reports to better identify where there had been change of note or exceptions. He highlighted that the Paediatric Mobile Nursing Application (known as CHAI) which should have been delivered within Quarter 3 was now being progressed. In terms of the Results Management project, a Welsh Clinical Portal pilot due to commence would be instrumental in informing the way forward. The Welsh Patient Administration System (WPAS) was on target to go live during the first week in March. It was noted that appointed Project Manager for the Welsh Emergency Department System (WEDS) had withdrawn. In terms of significant events to report, the Chief Information Officer drew members' attention approved pilots commencing in support of the Welsh Community Care Information System (WCCIS) project. He also noted there were resource constraints within the Patient Management Status Boards (PMSB) but it remained a positive project. Finally he confirmed that capital had been secured for upgrading the IPT Telephony project.	
IG19/6.2 A Committee member raised some general points regarding the completion of coversheets and ensuring that the relevant information was included within the appropriate sections and that where the accompanying narrative report identified risks or concerns that these are also highlighted on the coversheet. The Chief Information Officer would feed this back to authors of papers to the Committee and it would also be brought to the attention of the Board Secretary.	DW KD
IG19/6.3 A comment was made that it was difficult for the reader to reconcile the narrative with the data in Table 1 regarding progress against objectives. The Chief Information Officer accepted that the presentation of this data from an internal planning tool did not fully work and he would reflect and amend. In terms of paragraph 1 "Objective Status" it was noted this stated that a range of projects would "no longer be reported". It was requested that if this meant they were being reported elsewhere other	DW

than the IGI Committee, then the narrative needed to confirm where they were being reported.	DW
IG19/6.4 With regards to the CHAI project a question was asked why this was not wider than paediatrics. The Chief Information Officer reported that a range of departments went through a bidding process to trial the project with paediatrics being the successful department. He agreed that it was a more wider generic solution which had potential for rollout to other departments, particularly if the national solution for mobile nursing records did not work out.	
IG19/6.5 With regards to the IPT telephony project it was accepted that the statement "these issues are now suggested to be resolved" was poorly worded and the Chief Information Officer would amend to more clearly demonstrate that the issues were resolved. He was also asked to provide a statement to explain the issues that were being experienced with the "My Ping" solution and restrictions being placed on the Health Board by NWIS. The Chief Information Officer added that the intention was to evaluate "My Ping" properly. Members also asked that clarity be provided on what the WCCIS pilots were meant to deliver.	DW DW DW
IG19/6.6 The Committee Chair was keen to understand by how much the capital limit would be missed and the reasons for this. The Chief Information Officer indicated this would not be known until closer to year-end.	
IG19/6.7 It was resolved that the Committee note the report and the amendments to the 2018-19 Operational Plan as highlighted.	
IG19/7 Digital Strategy Development Update **IG19/7.1** The Chief Information Officer presented the paper, confirming that this was not a new strategy but was a high level document set in the context of the national plan and was being further developed to incorporate a more detailed costed plan. He drew attention to Figure 1 which aimed to illustrate how the demand for digital technologies was identified and flowed from demand to delivery. A number of digital enablers were also set out on pages 6-9 which would require prioritisation, and the Chief Information Officer highlighted Figure 4 which set out how acute systems could be harmonised to support Excellent Hospital Care. The paper also aimed to demonstrate a strong commitment to working across the region with partners being on the same system, however, it was apparent that the model for integrating services would be at risk if national developments were not delivered. Finally the Chief Information Officer indicated that the Strategy Partnerships & Population Health Committee had received the paper on the 5.2.19 but did not formally approve as members had queries and questions which were not able to be answered at the meeting. **IG19/7.2** A Committee member welcomed the paper which she found clear and easy to follow and that it more helpfully defined what were local and what were national projects. She did however feel that given the public nature of the paper it should more clearly define what is meant by primary care – ie GPs alone or other primary care contractors. The Chief Information Officer confirmed it related primarily to General Medical Services systems and undertook to reflect this more clearly within the scope of the document. **IG19/7.3** The question was asked as to who would be assessing and prioritising the potential digital enablers and it was confirmed this would primarily be the Digital Strategy	 DW

Group. The Board Secretary also confirmed that a new governance structure to oversee the delivery of the Three Year Plan and Annual Operational Plan had been signed off at Executive Team on the 13.2.19.

IG19/7.4 It was resolved that the Committee note the report.

IG19/8 Review and Approval of Informatics Operational Plan 2019-20

IG19/8.1 The Chief Information Officer presented the paper which set out the focus for Informatics over the next year, in line with the broader organisational plans for 2019-2022. He alluded to workforce challenges, although these were shared by other Health Boards.

IG19/8.2 A question was asked around the digital mobile workforce and the Chief Information Officer recognised the need for a cohesive national plan and that there would have to be detailed profiling of the needs of each area or team of healthcare professionals as they would have differing requirements. He reported that there had been a recent appointment within BCUHB of an individual to focus on mobile devices specifically. He also mentioned an initiative to improve connectivity with Local Authorities but that a major sticking point was primary care as their systems did not fall either within health nor social care networks. A member enquired about broadband rollout and the effect on informatics plans, and the Chief Information Officer state there was a joint North Wales document on future investment into infrastructure which he would circulate. A member also suggested that the date for the rollout of Office 365 seemed too generous; it was reported that there were migration issues which created challenges in compatibility which would require resolution

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IG19/8.3 The Chair noted that the Committee was being asked to approve the plan however there were elements yet to be finalised. The Chief Information Officer confirmed that at the time of writing best estimates had been included around budget and capital.

IG19/8.4 It was resolved that the Committee approve the Informatics Operational Plan 2019-20 subject to there being no significant changes once the budget and capital details were confirmed.

IG19/9 Chair's Assurance Report – Digital Transformation Group

IG19/9.1 The Chief Information Officer highlighted continuing issues with low attendance at the Group and that this had been escalated, and a communication sent directly to the membership to stress the importance of their engagement and attendance. He also drew members' attention to an interesting presentation by "Patient Knows Best" (PKB) regarding a digital patient portal. The Group had also reviewed informatics related risks, and the Assistant Director Information Governance & Risk reported that training for systems owners (in terms of the GDPR risk) was being very well received by staff attending. A Committee member noted her concern at the lack of engagement and issues around skillsets with systems owners, and the Chief Information Officer confirmed that action had been taken to check/ensure that they had been correctly identified as a system owner and to offer support and training. The Committee Chair noted reference to the Eye Care Business Case which had a national commitment to deliver but did not appear to be fully structured from a financial perspective; the Chief Information Officer accepted there were caveats around the resource to deliver.

IG19/9.2 It was resolved that the Committee note the issues of significance from the Digital Transformation Group.	
IG19/10 Information Governance Summary Key Performance Indicator (KPI) Report for Quarter 3 2018-19 **IG19/10.1** The Assistant Director Information Governance & Risk presented the paper, and noted that the last meeting of the Information Governance Group (IGG) had been stood down due to the number of apologies received. A summary KPI report had been prepared for sharing with the IGI Committee. The Assistant Director Information Governance & Risk highlighted key points including the reduction in responding to Freedom of Information (FOI) requests and non-clinical subject access requests which she explained related predominantly to delays in obtaining responses from departments and line managers. She was pleased to report an increase in responding to Health Records requests and that mandatory training compliance levels had been maintained. In addition, near misses were now also being reported in line with the Information Commissioner's Office comment last year. **IG19/10.2** A Committee member asked whether the full KPI report could not have been provided as the summary was difficult to follow and did not allow for comparison of trends or lessons learnt. The Board Secretary set out the challenges in ensuring the level of detail was meaningful but also was appropriate for the public domain, and suggested that the report would need to evolve as the IGI Committee matured. Following discussion the Committee were content that the full Quarter 4 report be provided in-committee to the next meeting to allow work to commence on revising the format as from Quarter 1 of 2019-20. A copy of the full KPI Quarter 3 report would be circulated to members via email for their information. **IG19/10.3** The Assistant Director Information Governance & Risk provided a verbal update against the two Level 2 incidents which related to an allegation of altering of a patient record and to missing community records. She undertook to circulate further information on IG incidents in terms of actual numbers and performance. The Caldicott Guardian noted that ideally there should be a good level of reporting of incidents categorised as low harm which would indicate that people were open and willing to report. In terms of FOIs a conversation took place regarding the context and scale of the request which it was felt was important when looking at performance levels.	 JP JP JP
IG19/11 Issues of Significance to Inform the Chair's Assurance Report To be agreed outside of the meeting but to include summary of discussions around corporate risks, barriers to CHAI project, the development of the digital strategy and the Information Governance KPI report.	
IG19/12 Date of next meeting 9.30am on 9th May 2019 in the Carlton Court Boardroom	
Resolution to Exclude the Press and Public That representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest in accordance with Section 1(2) Public Bodies (Admission to Meetings) Act 1960."	