Digital and Information Governance Committee
Minutes of the Meeting held on 21.11.19
in the Boardroom, Carlton Court, St Asaph

Present:

Mr John Cunliffe Independent Member– Committee Chair
Professor Nicky Callow Independent Member
Ms Lucy Reid Independent Member

In Attendance:

Dr David Fearnley Executive Medical Director
Mr Dylan Williams Chief Information Officer
Mrs Gaynor Gould Information Governance Manager
Mr Andrew Strong Wales Audit Office, Senior Auditor
Mr David Sheard Deputy Director of Programmes, (NHS Wales Informatics Service)
Mrs Danielle Edwards Head of Digital Records
Mrs Jody Evans Corporate Governance Officer

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<th>Agenda Item Discussed</th>
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<tr>
<td>DIG19/22 Chair’s Opening Remarks</td>
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<tr>
<td>DIG19/22.1 The Committee Chair welcomed everyone to the meeting.</td>
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<td>DIG19/23 Apologies for Absence</td>
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<td>DIG19/23.1 Apologies received from Dr Melanie Maxwell, Justine Parry Cheryl Carlisle, Andrew Davies and Helen Thomas.</td>
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<td>DIG19/24 Declarations of Interest</td>
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<td>DIG19/24.1 None were received.</td>
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<td>DIG19/25 Draft minutes of the previous meeting held on 29.9.19 and Summary Action Log</td>
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<td>DIG19/25.1 The Minutes of the last meeting held on 29.9.19 were confirmed as a correct record subject to:</td>
<td>JE</td>
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<td>• Page 1: <strong>Prof</strong> Nicky Callow (title) to be presented in full: <strong>Professor</strong> Nicky Callow.</td>
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<td>The Corporate Governance Officer agreed to action within version 1.0 of Committee Minutes.</td>
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<td>DIG19/25.2 Updates to the summary action log were also recorded therein and the Committee members reported the need to carefully</td>
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consider future timescales of actions being taken, in order to avoid slippage of timelines for completion.

**DIG19/26 DIGC Terms of Reference (ToR)**

**DIG19/26.1** The Committee discussed the Terms of Reference and the various amendments had been noted, *as follows;*
- Amendments to references to Informatics throughout the ToR to ‘Digital’.
- Include reference to the Senior Information Risk Officer only, (not named director role.)
- Include Lead Director of Information Governance department in attendance (following Director Portfolio changes.)
- Include section relating to Chair and Vice Chair appointments in line with other Board Committees’ ToR.

**DIG19/26.2** It was agreed that the Director of Finance (SIRO,) be invited to future DIG Committee Meetings, via the Office of the Board Secretary.

**DIG19/26.3** The Committee agreed to note the revised Terms of Reference and agreed to submit to the Audit Committee for ratification on behalf of the Board.

*It was resolved that* the Committee Approve the Terms of Reference.

**DIG19/27 Cycle of Business Review**

**DIG19/27.1** The Committee Chair provided the Committee with the opportunity to review the updated Cycle of Business and sought the advice of any additional items to be included from the Committee members.

**DIG19/27.2** Discussion ensued with regards to primary data relating to Digital within the Annual Plan, which had been debated upon at the recent Quality, Safety and Experience Committee. The presentation of the annual plan summary was queried. The Committee was advised that it had been suggested that all Annual Plan summaries should be submitted to all Board Committees in the first instance, prior to Health Board Meetings. Differences within the Annual and Digital Operational Plan were also raised. It was agreed for the Committee Chair to discuss outside of the Committee with the Executive Director of Planning and Performance, in order to gain a clear understanding of the context regarding the wider plan. It had also been noted to add the Annual Plan upon the current cycle of business.

*It was resolved that* the Committee review the agreed the Cycle of Business.
DIG19/28 Corporate Risk Register and Assurance Framework Report

DIG19/28.1 The report had been presented to the Committee and it was noted that the risks had previously been presented to the Board on the 7th November 2019, however due to a timing issue any updates from the Board meeting had not been captured within the version being presented. The Committee considered the relevance of the current controls and reviewed the actions in place and therefore considered the risk scoring for the presented risks, namely;

DIG19/28.2 CRR10a National Infrastructure and Products.  
Key progress: There had been no further updates since the previous submission to the Committee. The status of the Service Level Agreement with NWIS was discussed and the Committee asked if escalation was needed in order to achieve target risk scoring. It had been reported by the Chief Information Officer that the issue was ongoing and clarified that the team were not in the position to immediately produce the viable SLA, but progress was ongoing in order to resolve.

DIG19/28.3 CRR10b Informatics - Health Records  
Key progress: There had been no further updates since the previous submission to the Committee. The Committee Chair drew attention that the title of the risk had been changed and that the risk should also reference “Community”. The Committee asked for the original title of the risk to be reinstated to ensure the risk covered all health records. The typographical error within the paragraph of “risk explanation” (here should read There) was also raised. The scoring of the risk was discussed and the Chief Information Officer and the Executive Medical Director would arrange to meet Head of Risk Management to discuss further with regards to scoring updates.

DIG19/28.4 CRR10c Informatics infrastructure capacity, resource and demand.  
Key progress: There had been no further updates since the previous submission to the Committee. The movement in the current risk rating had been noted and a discussion took place, it was agreed that there was no further action to be taken at present to change the aligned targets.

DIG19/28.5 Further discussion ensued with regards to a future workshop being held on the 2nd December 2019, and that the workshop would further align and discuss the target risk ambitions regarding long term actions to achieve target risk scores therein. It had been also raised that the risks presented to the Committee had underlying data attached with regards to the detail relating to specific ratings within Datix. Risk Escalation mechanisms were also discussed with regards to visibility to the Board and clear links through the hierarchy mechanisms. Procurement of Datix and modules currently being used with regards to functionality and actual day to day requirements had also been discussed. Clarity in relation to where Risk Management sits, (as a
Committee) within BCUHB was also raised. The Information Governance Manager agreed to clarify.

**It was resolved that** the Committee considered the relevance of the current controls and reviewed the actions in place.

**DIG19/29 Annual Plan Progress Monitoring Report (APPMR)**

**DIG19/29.1** The report provided the Committee with the summary of progress against the Key Actions within the Annual Plan. It was noted that the paper had been scrutinised by the Executive Team, approved by the Executive Directors and had also been presented at Board Level.

**DIG19/29.2** Further to the earlier discussion within item DIG19/27.2. It was agreed to invite the Executive Director of Planning and Performance to the Committee, in order to discuss the expectations of the DIG Committee.

**It was resolved that** the Committee noted the report.

**DIG19/30 NWIS Update report**

Mr David Sheard, Assistant Director Service Transformation (NWIS) in attendance via Skype.

**DIG19/30.1** The Committee Chair welcomed the Assistant Director for Service Transformation to the Committee and introductions were made. The Assistant Director for Service Transformation provided a verbal presentation regarding the National Update report, outlining progress and planning *in relation to*; Welsh Patient Administration Systems, Electronic Test requesting, Welsh Clinical Portal, eforms, Emergency Department Systems, Hospital Pharmacy Replacement System, National Data resources and the Special Health Authority. The Committee was also briefed regarding the Blaenavon Data Centre Incident and of the recommendations made.

**DIG19/30.2** The Committee commented upon the roll out of the Welsh PAS system across Primary Care and commented on the 2 year delay. It had been noted that the delay had been in relation to process mapping, functionality and data migration quality issues. It was highlighted that within Primary Care; the system would be rolled out practice by practice. It was also noted that the benefits of the system would be measured and mapped out by next November, it was clarified that the system would be key to single integrated pathways.

**DIG19/30.3** The Assistant Director of Service Transformation reported that with regards to electronic test requests (WCP and GPTR,) it was explained that the BCUHB were the highest user within NHS Wales. Improved functionality planning and test sets were also being introduced. Overall with regards to WCP and GPTR it was confirmed that good progress was being made. With regards to MTED and the number of discharges made in October, Independent Member - LR commented upon the low number compared to actual discharges. The
limited ability to roll out the system was discussed and the Chief Information Officer confirmed that the business case had been produced and was currently under review.

**DIG19/30.4** Welsh Hospital Electronic Prescribing Pharmacy Medicines Administration (WHEPPMA) had also been reported upon and it had was noted that the system was now subject to being signed off in relation to the capital monies.

**DIG19/30.5** Microtest GP systems was raised by the Committee in relation to the forward plan and existing legal contracts. The need to ensure the seamless replacement via procurement had been stressed. It was noted that discussions were taking place to look at options. The Chief Information Officer had further agreed to provide update to the Committee with regards to the status update

**DIG19/30.6** It was agreed (as previously stated,) to develop a more focused template for reporting.

**It was resolved that** the Committee noted the update.

**Comfort break**

**DIG19/31 A Digitally Enabled Clinical Strategy for Betsi Cadwaladr University Health Board – a blueprint for better outcomes.**

**DIG19/31.1** The Executive Medical Director presented the Digital Strategy update and informed the Committee of the detail that the report set out, which included the case for the wide-ranging redesign of clinical services across the Health Board, based explicitly upon:

- a deeper understanding of population health
- partnerships
- evidence based pathways
- professional networks
- a new digital platform
- a learning health system
- value-based health care
- co-production

**DIG19/31.2** The Executive Medical Director summarised that the strategy focused on better outcomes by adoption of effective person centred care, supported by professional networks and of digital health care technology. The paper also summarised discussions held at the Health Board, DIG Committee, Strategy, Partnerships and Population Health Committee, and other meetings with clinicians and partners since September 2019. The paper was noted as being the first report of the proposed new strategy. A discussion ensued regarding the way forward. It was agreed that the plan was to be driven by the strategy and the relevant sense checks would be made with regards to capacity and relevance, whilst paving the way for sustained investments. The
Committee noted the report and it had been agreed to seek further assurance to enable the strategy to be considered by the Health Board. The Executive Medical Director agreed to continue and take forward.

**It was resolved that** the Committee note the update.

**It was resolved that** the strategy be considered by the Health Board.

**DIG19/32 Transformation Fund allocation and planning for future Transformation fund opportunities**

DIG19/32.1 The Chief Information Officer provided the latest update on national digital funding allocations. At the time approximately £24 million and £20 million capital and revenue had been allocated across Wales. The local share of the bids were £1.75 million and £0.7 million capital and revenue respectively, both of which are non-recurring. The Chief Information Officer explained that the original bids were multi-year bids focussed in particular on cyber security and Office 365 implementation and the non-recurrent nature of the funding meant it was a challenge to establish sustainable resource. The Chief Information Officer also outlined potential future bids relating to digital health record ecosystems, digital enablers, community team support and pathway management. Alternative models for funding were suggested, including ‘fair shares’ based population or a sustained uplift over five years to the budget would be a real enabler for change.

DIG19/32.2 The Chief Information Officer highlighted the impact of the costs savings applied to the underlying budget for Informatics and that, whilst the in-year savings target would be achieved, the stretch target and non-funding of cost pressures would mean that the budget would be overspent by circa £40k per month in the new financial year. It was further illustrated that the recent ‘stretch target’ of £470,000 means the Chief Information Officer was not being able to set up a permanent cyber and Office 365 team.

DIG19/32.3 The Chief Information Officer updated the Committee on the Digital Opportunities discussion from the Digital Improvement group who would prioritise a digital core bundle for future investment.

**It was resolved that** the Committee note the update.

**DIG19/33 Informatics Quarterly Assurance Report**

DIG19/33.1 The Chief Information Officer provided the report and updated the Committee on key performance indicators.

The report summarised updates relating to the

1. National Audit Office Reports and Compliance Measures for service areas against mandated National Targets and local targets.
2. Compliance measures for several service areas against mandated National Targets and local targets. The report highlighted
compliance with coding completeness and patch management. The report also highlighted increased requests for access to Health Records.

DIG19/33.2 Following the summary and discussion, the following actions/notes had been agreed:

- The Chief Information Officer agreed to amend the wording of the report from “Welsh” to “Wales” within the term “Welsh Audit Office”.
- It was noted that the report in relation to coding had not been discussed at the recent Quality Safety Experience Committee, but would subsequently be taken to the next Committee.
- In relation to the status recommendations from 2014; The Chief Information Officer agreed to circulate the detail of the “in progress and overdue” actions.
- The Committee Chair referred to item 2.2.6 and 8 in relation to additional areas/locations where notes are held. Further to this; it had been confirmed that funding had been made available to recruit a project manager to progress the work.
- The Chief Information Officer further agreed to provide within future reports the “legend and title” of the table within item 2.3.4.
- It was also confirmed that the information team had been working to review and amend processes to improve reporting compliance.

It was resolved that the Committee noted the update and advised the service of additional metrics required.

DIG19/34 Informatics Operational Plan 2019/20: Progress Monitoring Report

DIG19/34.1 The report was presented by the Chief Information Officer to provide assurance on the delivery of the Informatics Operational plan. The report presented the following:-

1. Summary data to highlight progress against Informatics Strategic Principles (page 4) which are detailed with the 2019/20 operational plan.
2. Summary data reported directly to the board and used by them to monitor progress against the annual plan (page 5) for core Informatics Projects (i.e. Digital Health Programme). More detailed performance updates against the Milestones of the projects (page 6 to 8) which was used to attribute status and is not subject to standard submission / scrutiny by the board.
3. The Revenue and Capital position at the end of Quarter 2

DIG19/34.2 The Committee received the report and scrutinised the content and provided assurance regarding the data provided. Backlog management had been raised in relation to the recent discussions at the Quality Safety and Experience Committee. The National System for Cancer Tracking had also been discussed in relation to WPAS reporting and it was explained that the continued support and tracking via SharePoint would continue for the foreseeable future.
**DIG19/34.3 BCU Symphony / National Welsh Emergency Department System (WEDS) Briefing paper**

**DIG19/34.3.1** The Chief Information Officer provided the briefing paper following action DIG 19/6a.1 ED YG, and presented the overview in relation to the current status of the BCU Symphony / National WEDS project, which included the detail of how the plan contributed to organisational effectiveness.

**DIG19/34.3.2** The Committee Chair queried if the WEDS module could in future be utilized at all 3 sites. It was clarified that there would need to be further input from the project board. The differences in the range of systems used within BCU Emergency Department’s had then been discussed along with the clarity of being a national integrated system. Functionality and version issues were also raised and noted. Local approaches were discussed along with a summary of brokering of funding past April 2021.

*It was resolved that* the Committee received the reports, noted and scrutinised the content.

**DIG19/35 Digital Information Group (DIG) Chair’s Report**

**DIG19/35.1** The Committee received the summary report and noted the issues.

*It was resolved that* the Committee received the Chairs report and noted the issues of significance raised.

**DIG19/36 Information Commissioners Office Data Protection Follow Up Audit Report**

**DIG19/36.1** In the absence of the Assistant Director of Information Governance and Risk; the Information Governance Manager presented the follow up Audit Report to the Committee. The Information Governance Manager reported that the Information Commissioners Office (ICO) Follow Up Audit Report had been submitted to highlight the significant progress being made following the initial audit undertaken in June 2018 and the Committee were asked to note the areas requiring further attention. The Committee noted the three scoping areas, two had been reported as reasonable assurance and one was limited assurance, which related to requests for personal data. It was also raised that the Health Board were required to provide evidence to support compliance with the original 58 recommendations and the ICO had confirmed the Health Board had responded positively.

**DIG19/36.2** The Information Governance Manager explained that there remained areas requiring full completion, in relation to:
• Recording of all processing activity on the Asset Register; The Information Governance Manager reported that the issue is ongoing, due to staffing issues.
• Formal attribute and confirmation of ownership for staff and corporate records; the Information Governance Manager stated that the report would be prepared and offered to the February Committee for consideration.
• Formally implement the updates to the Confidential Waste Contract; the Information Governance Manager asked the group to note that the contract had ran out in September 2018, which had then been extended to March 2019. The Information Governance Manager confirmed that the team were working with procurement to ensure sign off of the contract.
• Implement and comply with Standard Operating Procedures for verbal access to Health Records subject access requests; The Information Governance Manager stated that comment would be fed back to the Committee regarding the position, in order to capture non clinical requests for information.
• Implement and comply with the quality assurance process for processing Access to Health Records subject access requests. It had been recognised that this would be taking place within in the centralised service and due to resource issues. The Information Governance Manager confirmed that it would then be built into health records procedures ensuring a robust and improved process.

**DIG19/36.3** The Information Governance Manager confirmed that all actions had been transferred into the appropriate work programmes and would be monitored by the Information Governance Group. –The Committee referred to the partially completed recommendations; the Information Governance Manager agreed to clarify the position and feedback following the meeting.

**It was resolved that** the Committee received the update and noted the improvements achieved. Outstanding actions had also been discussed.

**DIG19/37 Information Governance Quarter 2 Key Performance Indicators (KPI) Report 2019/20**

**DIG19/37.1** The Information Governance Manager presented the quarter 2 KPI report for 2019/2020, which included:
- Freedom of Information Profile
- Data Protection Act – Subject Access Request Profile
- Information Governance Incidents
- Information Governance Training
- Information Governance Servicedesk (portal)
- National Intelligent Integrated Auditing Solution notifications
- Audits
- Sharing of information
- Data Protection Impact Assessments (DPIAs)
The Committee noted that the report provided a high-level analysis, highlighting the trends and issues of significance along with Actions taken to address the issues of significance. The Information Governance Manager reported the predicted dip in progress for the next quarter, due to staffing issues raised, however work is ongoing with leads.

The Committee queried that there had been an open FOI from the Month of September. The Information Governance Manager agreed to feedback on specifics for clarity.

It was also discussed regarding the need to recognise the high importance of Freedom of Information requests. The Committee also reiterated the significant links between the delays in responding and subsequent media attention. A discussion took place with regards to initial responses being delayed due to FOI pathways being bypassed. The Committee also recognises the need to promote and build confidence with stakeholders, staff and the public in relation to the information governance process.

It was resolved that the Committee received the update and noted the improvements with compliance.

The report provided the update regarding the issues of significance from the Information Governance Group meeting held on 22nd October 2019. The Committee noted the issues of significance.

The BCU Digital Strategy update had been considered at the Information Governance and Informatics Committee held in private session on 27.9.19.

The Committee is asked to note the report

To be agreed outside of the meeting.

9.30am on 13.2.19 in the Boardroom, Carlton Court.