Digital and Information Governance Committee  
Minutes of the Meeting held on 13.02.2020  
in the Boardroom, Carlton Court, St Asaph

Present:  
Mr John Cunliffe Independent Member – Committee Chair  
Mrs Jackie Hughes Independent Member – Co-opted Member

In Attendance:  
Dr David Fearnley Executive Medical Director  
Mr Dylan Williams Chief Information Officer  
Mrs Justine Parry Assistant Director of Information Governance & Risk  
Mrs Carol Johnson Head of Information Governance  
Mrs Helen Hughes Director of Information, Information Services (NHS Wales Informatics Service (NWIS))  
Mrs Jody Evans Corporate Governance Officer

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<tr>
<th>Agenda Item Discussed</th>
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<tr>
<td>DIG20/48 Chair’s Opening Remarks</td>
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<td>DIG19/48.1 The Committee Chair welcomed everyone to the meeting and expressed thanks to the co-opted Independent Member for attending. The newly appointed Head of Information Governance was also welcomed to the Committee.</td>
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<td>DIG20/49 Apologies for Absence</td>
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<td>DIG19/49.1 Apologies received from Cheryl Carlisle, Professor Nicola Callow, Medwyn Hughes, Sue Hill and Melanie Maxwell.</td>
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<td>DIG20/50 Declarations of Interest</td>
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<tr>
<td>DIG20/50.1 None received.</td>
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<td>DIG20/51 Draft minutes of the previous meeting held on 21.11.19 and Summary Action Log</td>
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| DIG20/51.1 The Minutes of the last meeting held on 21.11.19 were confirmed as a correct record apart from;  
  • The recording of “Executive” to “Experience” within the title “Quality, Safety and Experience Committee”.  
  • Updated additional action item - DIG19/30.5 - The Chief Information Officer had further agreed to provide update to the Committee with regards to the status update. |
• It was also noted to update the item DIG19/32.2 “stretch target” to £470,000 rather than £470.

**DIG20/51.2** Updates to the summary action log were also recorded therein.

**DIG20/51.3** HASCAS Action Item – Storage of Clinical Records

The item had been referred from the Quality, Safety and Experience Committee; via the Chair’s report to the Board regarding storage of clinical records; which had been identified as an ongoing issue arising from the HASCAS and Ockenden review.

**DIG20/51.3.1** The Committee Members discussed and reviewed the actions logged in relation to the current impact upon services.

**DIG20/51.3.2** It was agreed that since the submission of the documented actions taken, that progress had since moved on and that further assurances and processes were now in place to mitigate risks. The Committee discussed the assurances and the need to communicate the updated actions taken and update the assurances logged. The Chief Information Officer therefore agreed to review and update the actions formally documented in order to answer the specific recommendations.
**DIG20/52 Performance against the Board approved 2019/20 annual plan** - Dr David Fearnley, Executive Medical Director

**DIG20/52.1** The report provided the self-assessment made by Executive Leads regarding progress being made; in delivering the key actions contained in the 2019/20 Operational Plan.

**DIG20/52.2** Discussion ensued with regards to the timeline of the report. Comment was raised by Committee members regarding item reference AP016 and where it was in the overall Digital plan. The Chief Information Officer confirmed the amount of work undertaken to date and also referred to AP10 which included links to AP059 and highlighted multiple actions with regards to integration with local authorities. Difficulties regarding the complexity and difficulties in relation to the deferring of timelines and team localities were also noted. Barriers were also discussed due to the ongoing differing prioritisations and needs.

**DIG20/52.3** Within reference AP061; It was noted that Cancer Services had declined to adopt the current version of the WPAS Cancer Tracker; due the tracker not meeting the service requirements. It had been further explained that the tracker was under further development, in order to fit the needs of the service.

**DIG20/52.4** Following notification by a Committee member of item AP025 being incorrectly rated, it was agreed to contact the Executive Director of Planning and Performance, in order to update the rating with the previously agreed amber status rating.

**RESOLVED:** The Digital & Information Governance Committee reviewed and noted the report.
The Assistant Director of Information Governance and Risk presented the report. The Committee noted and accepted the timing issue of the report and it was confirmed that the updates had been fed back to the January Risk Management Group, which had been positively received.

The Committee acknowledged the updates to the following risks since the last report, and further debate and discussion took place;

- **CRR10a National Infrastructure and Products.** It was recorded that the risk had been updated in line with the feedback from the Audit Committee, including the update to the controls and further actions; however a review of the risk had been undertaken at the recent Risk Management Group with further updates to be reflected within the risk for the next submission to the Committee. Discussion also ensued in relation to delays, communication failures in relation to performance and future priorities. The Chief Information Officer stated further discussions would take place with Mental Health Leads and the Local Areas regarding material risks. The Executive Medical Director also informed the Committee of the similar Abertawe Bro Morgannwg University Health Board Risk; which reflected the Committees discussion. It was noted that future discussions regarding the risk would take place within the Executive Team for scrutiny along with Area Directors. The Executive Medical Director agreed to share the ABMU related Risk with the Chief Information Officer to note.

- **CRR10b Informatics - Acute and Community Health Records.** It was noted that the risk title had been updated following an action from the last meeting. It was also proposed to increase the current score to 20. The Committee discussed that the previous name change action had been to revert to its original title of solely “Health Records” and requested that this again was considered so not exclude any areas where of health records are maintained. The Assistant Director of Information Governance and Risk clarified that the scoring had been updated to reflect an increase in the likelihood scoring. The Committee agreed with the scoring update.

- **CRR10c Informatics infrastructure capacity, resource and demand.** Controls had been updated to remove an action which was not a control, the target risk date had also been amended to reflect the realistic date to implement the further actions required to achieve the target risk score. Following the in depth review at the Risk Management Group, it was noted that the further updates would be reflected.

The Assistant Director of Information Governance and Risk agreed to feedback the comments to the presented risks to the Risk Manager.

RESOLVED - The Digital and Information Governance Committee considered the relevance of the current controls; and reviewed the actions in place and considered the risk scores. The Committee also noted the further
updates being undertaken following the scrutiny at the Risk Management Group and approved the increase in the current risk score for 10b.
### DIG20/54  Draft Committee Annual Report 2019/2020 - Dr David Fearnley, Executive Medical Director

**DIG20/54.1** The Committee reviewed the draft Annual Report for year 2019 to 2020, and debated the further comments for collation. The Committee also reviewed the overall Red, Amber and Green (RAG) Status for the year end as **Amber**.

**DIG20/54.2** The focus for the year ahead was also discussed. It was agreed to realign the Agenda for some future meetings; in relation to Information Governance and Digital, therefore the Assistant Director and the Chief Information Officer agreed to update the Cycle of Business accordingly. The Chief Information Officer had also agreed to suggest the narrative in relation to the Committees Risks, in order to address the focus for the year ahead.

**DIG20/54.3** The Corporate Governance Officer agreed to re-circulate the draft report for further updates from the Committee.

**RESOLVED** – The Committee Chair to agree final version prior to submission to the Audit Committee.

### DIG20/55  Approval of Informatics – Draft Operational Plan

**DIG20/55.1** The Chief Information Officer presented the Draft Operational Plan.

**DIG20/55.2** The Chief Information Officer invited comments and requested that the Committee scrutinise the content to gain assurance on progress against the operational plan. Discussion ensued and it was recognised that the plan was in draft due to the financial aspects requiring completion. The 3 year ambitions had been noted within the report along with the long term rolling projects. The Chief Information Officer agreed to amend the item referred to on page 3, in relation to a typographical error. The Committee also commented upon the reports terminology, in terms of being reader friendly to enable strong public engagement.

**DIG20/55.3** The Executive Medical Director commended the presentation of the report and commented upon links to investments, improvements and savings being aligned. The Committee also commented upon the prioritisation and capacity of the plans, it was confirmed that the actions are being captured and dealt within an improvement group. It was made clear that once the prioritisation had been paved within the executive sphere, then the objections would then link with the objections of the organisation. It was agreed to further refer the Corporate Risks related within the report along with the rolling program of work as a regular digital perspective.

**RESOLVED**: It had been therefore agreed to approve the plan pending further updates.
**DIG20.56 Digital Annual Operational Plan Update**
The Chief Information Officer presented the report whilst highlighting the reporting remit in receipting and gaining of assurances against the delivery of the Informatics Operational plan. The Committee received the report and scrutinised its content whilst gaining assurance on progress against the operational planning content.

The Committee agreed to provide assurance to the Board that the summary data provided was justified, along with the noting of the financial implications highlighted.

**RESOLVED:** It had been agreed to note and approve the update.

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**DIG20/57 Informatics Quarterly Assurance Report**

**DIG20/57.1** The Chief Information Officer presented the report and the overview of the content was given.

**DIG20/57.2** Positivity had been noted by the Committee around Clinical Coding and the achievements of targets to date. Access to health records had also been recognised as a strong centralised process, with few challenges for consideration. A discussion ensued with regards to Windows 7 and it was confirmed that the BCUHB are on track to update and replace. A discussion also took place regarding Cyber Security Essentials and Business Continuity in relation to dedicated staffing. Further to the discussion it was clarified that The Chief Information Officer would meet with the BCUHB Turnaround Director, in order to discuss options in relation to savings and targets.

**RESOLVED:** The Committee noted the compliance relating to the assurances of the report presented.
DIG20/58 NWIS update report
- Helen Thomas, NWIS Interim Director in attendance
Recommendation - Helen Thomas to update the Committee via skype.

DIG20/58.1 The Committee Chair welcomed the Interim Director (NWIS) to the Committee meeting via Skype and introductions were made around the table.

DIG20/58.2 The Interim Director provided the verbal update regarding the National Updates and the detail of progress and planning in relation to how NWIS had been reviewing existing systems and approaches following the recommendations of the Governance and Architecture Reviews.

DIG20/58.3 The Interim Director informed the Committee of the introduction of the Transitional Program Board of which Mr Simon Goodall – NHS Wales would Chair. The Interim Director also informed the Committee that the 1st meeting would take place on the 14th February 2020. The overview of the terms of reference was noted and it was confirmed that the name of the Program Board would be determined and would likely be titled the “Digital Health and Care Wales Board”.

DIG20/58.4 The Interim Director further commented upon the transitional plan of the organisation name change and confirmed there would be a wider structure and clear ways of thinking, in order to forward progress and collaborate. A discussion then ensued in relation to governance and architecture in relation to taking forward the wider strategic overview. The Committee discussed how NWIS would require action to be taken from the BCUHB going forward. It was confirmed that there would in future be a Joint Workshop and an overall plan in place. It was also confirmed that the development of the IMTP plan moving forward would capture and engagement collaborative working with a future facilitated workshop in March 2020.

RESOLVED: The Committee noted the NWIS update.

DIG20/59 Chair Assurance report : Digital Transformation Group/Improvement Group

The Chief Information Officer provided the Chairs Assurance report to the Committee of the meetings held on 31st January 2020 and 3rd February 2020.

RESOLVED: The Committee noted the report and the verbal update provided.
### DIG20/61 Chair Assurance report - Information Governance Group
- Justine Parry, Assistant Director: Information Governance and Risk / Data Protection Officer (IGG Vice-Chair.) JP provided the Chairs Assurance report to the Committee of the meeting held on 23rd January 2020.

**DIG20/61.1** Particular attention and discussion ensued regarding the CCTV compliance and security within the Health Board. It was confirmed that the Head of Information Governance had scheduled to meet with the Head of Security, in order to review the current and future management of the systems.

**DIG20/61.2** In relation to incidents reported, it was noted that there would be a full compliance audit undertaken with the service leads within BCUHB and tracking of notes was discussed. Legacy documentation and compliance checks was also raised. It was then discussed to consider the increasing of the risk ratings, due to the implications of the financial risks of possibly being fined as a health board.

**DIG20/61.3** The Transfer system of records via taxis was also raised and it had been confirmed that Procurement were reviewing the core set of companies to be called upon. Through discussion; it was agreed for JP to contact the Head of Quality & Governance, Radiology, to discuss logistics of future planning of agreed systems of work.

**RESOLVED:** The Committee noted the report and the verbal update provided.

### DIG20/62 Summary of InCommittee business to be reported in public
- Dr David Fearnley, Executive Medical Director

**DIG20/62.1** The Committee noted the report.

**RESOLVED:** The Committee noted the Summary of Business reported in public.

### DIG20/63 Issues to inform the Chair’s Assurance report
John Cunliffe, Chair - Recommendation - To agree the Issues.

### DIG20/64 Date of next meeting
**DIG20/64.1** It was reported that the meeting due to be on the 29th May had been cancelled.

**DIG20/64.2** The date of the next meeting was noted as: 19th June, 2020