

Name of Sub-Committee:	Information Governance Sub-Committee (IGSC)
Chair of Sub-Committee:	Huw Thomas, Director of Finance
Reporting Period:	17 th December 2020
Key Decisions and Matters Considered by the Sub-Committee:	
Information Asset Owner Group (IAOG) Update	
The IAOG met on 20 th October 2020 and considered the work plan and outstanding work. An	
Information Governance consultant has been appointed to support the work to complete the	
Information Asset Registers (IAO). A list has been produced to highlight the outstanding areas,	
where no engagement has been made, and to complete the GDPR work plan update concentrating	
on those areas with a red RAG rating. Further engagement has been made, i.e. Unscheduled Care	
at Bronglais General Hospital (BGH) is now RAG rated green; Planned Care have now engaged,	
Women and Children, Primary Care as well as Finance have all progressed and will be presented	

at the January 2021 IGSC meeting for assurance. Three Information Asset Registers (IARs) were presented to the IGSC - Speech and Language; Dietetics: and Podiatry - and were subsequently approved. A fourth IAR relating to Dental Services

Dietetics; and Podiatry - and were subsequently approved. A fourth IAR relating to Dental Services was presented, however this was not approved due to the number of risks highlighted within the report. This IAR will be re-presented at the January 2021 meeting. All service areas have been re-approached and are now engaging with the process.

Clinical Coding Update

The IGSC noted the clinical coding performance for July 2020 was 74%. Members also noted that a number of sites were above the recommended 95%, whereas others were below and requested a specific update at the next meeting to ensure that progress can be made. Members were informed that the four trainee staff recently appointed to the Clinical Coding Team are settling in to their roles, and their training has been fast tracked and will be completed in January 2021. They will then be able to assist with coding at the sites. However, they are required to undertake a further 12-month training programme until they are fully trained and qualified.

Clinical Coding Development Plan

The IGSC was presented with a draft clinical coding plan, which has been created with two phases. The first phase is a catch-up plan, detailing how to improve and meet targets set by HDdUHB and how to improve accuracy of coding, i.e. by engaging with clinicians to improve documentation, and reviewing case notes. Phase two will review the modernisation of the service, with a view to using a fully electronic single patient record. It was agreed for updates on the progress of the plan to be presented to the IGSC for information and assurance.

Cyber Essentials Update

The Chair reported that the Information & Communication Technology (ICT)/Information Governance (IG) Teams completed the self-assessment of approximately 300 questions, to establish HDdUHB's position against achieving Cyber Essential Plus certification. The IGSC noted that HDdUHB did not achieve full compliance in two areas which were associated with legacy systems and were also highlighted within the Stratia Report. HDdUHB is not an outlier in this area as all Health Boards/Trusts in Wales have similar issues.

Information Governance Toolkit – Compliance Update

The IGSC was informed of progress and noted a more detailed report will be presented at the January 2021 meeting, in order to comply with the submission deadline of 31st March 2021.

Information Asset Register

The IGSC was asked to approve three Information Asset Registers (IARs), as these had been assured by the Information Asset Owners Group (IAOG) meeting and the services' Directors:

- Nursing, Workforce and Professional Practice no risk identified.
- Radiology one risk identified relating to the contract.
- Cancer Services one risk highlighted and recommendation for password protection to be placed on a spreadsheet.

Data Protection Impact Assessments (DPIA)

The IGSC noted that five recently developed DPIAs were presented for assurance purposes, as they had been previously approved by the Acting Senior Information Risk Owner (SIRO). The DPIAs approved were:

- Antibody tests App.
- Antigen testing App.
- Physio Now.
- Malinko Scheduling System.
- Lightfoot Solution.

IG Activity Report

The IGSC received the IG Activity Report, noting the following:

- **Training Compliance** The IG training compliance continues to plateau at approximately 77%. Quarter 2 (Q2) indicates a compliance of 76.2%, which is a decrease to the previous quarter (78.2%), and when compared to the end of Q2 of the previous year 2019/2020 (80.67%). It was noted that there has been an increase with students attaining the highest percentage over 18 months (69.44%).
- **Personal Data Breaches** the number of personal data breaches reported to IG during Q2 equals 53, which is an increase to Q1 (39).
- **Data Subject Requests** The number of Health Subject Access Requests (SAR) received were 697 during Q2, showing an increase in comparison to the previous quarter (530).
- National Intelligent Integrated Auditing Solution (NIIAS) Monitoring During Q2, 41 Own Access Notifications were received, in comparison to the previous quarter (20). During Q2, 16 Potential Family Access Notifications were recorded.

The IGSC also noted that the IG Team has been delivering Information Governance Level 1 virtual training sessions via Microsoft Teams since 3rd August 2020, and a new virtual training video is being developed.

Risk Register

The IGSC was provided with a summary of the current IGSC Risk Register. There were three mains risks associated with IGSC which were discussed in detail:

• Risk 343 (GDPR Compliance): Work is in progress and the risk will be mitigated when the GDPR Compliance Action Plan has been completed (December 2020 – March 2021).

- Risk 225 (Duplicate Records): Meetings have been arranged within the Digital Team to discuss how to proceed with a mitigation plan to decrease the risk score and an update will be provided at the next meeting.
- Risk 71 (Out of Hours): An email has been sent to the Out of Hours lead requesting an update on the mitigations and once a response has been received an update will be provided.

Information Governance Audits

The IGSC was updated on a number of audits as a result of visits to the field hospitals that have been decommissioned or stood down. The audits undertaken were:

- Carmarthen Field Hospital at Carmarthen Leisure Centre the following recommendations were documented: 1) to remove staff files from the main storage room and place in a locked cupboard, 2) The yellow ring binders containing staff information that were stored in the locked storage room are available only to HDdUHB staff, however there was a lockable cupboard available. 3) The ICT equipment and personal computers to be moved and locked away and there were bags of confidential waste which required removal. Confirmation that all actions have been completed has been received.
- Llanelli Field Hospital at the Llanelli Leisure Centre there were no personal identifiable information (PII) or HDdUHB assets, therefore there were no recommendations.
- Parc y Scarlets there were no PII or HDdUHB assets and therefore there were no recommendations.

Records Management Follow Up – Internal Audit Report

The IGSC received a report covering the Records Management Audit undertaken at the end of 2018, which had been presented to the Audit Risk and Assurance Committee in February 2019. Both audits have received limited assurance. There were originally ten recommendations, four have now been fully completed, four partially completed mainly due to COVID-19, with two remaining outstanding. The IGSC requested an update and action plan be provided at the January 2021 meeting.

Matters Requiring People Planning and Performance Assurance Committee Level Consideration or Approval:

• No matters to be considered or approved.

Risks / Matters of Concern:

• No matters of concerns or risk were raised.

Planned Sub-Committee Business for the Next Reporting Period:

Future Reporting:

- Information Asset Owners and Information Asset Mapping update
- Data Quality and Clinical Coding
- Information Governance Risk Register
- Information Governance Toolkit
- IG Training Strategy
- Clinical Coding Plan
- Update on Cyber Security
- Caldicott Register to be returned to the IGSC meetings

Date of Next Meeting:

Wednesday 6th January 2021 at 09:00 a.m. – 12:00 noon