



<b>Enw y Grŵp/Is-Bwyllgor:</b> <b>Name of Group:</b>	<b>Information Governance Sub-Committee (IGSC)</b>
<b>Cadeirydd y Grŵp/Is-Bwyllgor:</b> <b>Chair of Group:</b>	<b>Huw Thomas, Director of Finance</b>
<b>Cyfnod Adrodd:</b> <b>Reporting Period:</b>	<b>24<sup>th</sup> October 2022</b>

**Y Penderfyniadau a'r Materion a Ystyriodd y Grŵp/Is-Bwyllgor:**  
**Key Decisions and Matters Considered by the Group:**

**Information Governance Sub-Committee – Terms of Reference**

A revised set of terms of reference (ToR) was considered by the Sub-Committee. Members requested minor amendments, which will be actioned and returned to the November 2022 meeting for approval, prior to onward submission to the Committee for approval at its meeting on 20<sup>th</sup> December 2022.

**Policies and Procedures:**

The Sub-Committee received 4 policies and procedures for approval;

- 301 – User Account Management Policy – approved, subject to completion of the Equality Impact Assessment documentation. Expected to be submitted to the Sustainable Resources Committee for approval at its December meeting.
- 281 - Mobile Working Policy (Review) - approved, subject to completion of the Equality Impact Assessment documentation. Expected to be submitted to the Sustainable Resources Committee for approval at its December meeting.
- Information Rights Procedure – approved by the Sub-Committee
- Unauthorised Access Procedure – approved by the Sub-Committee

The Sub-Committee was also asked to approve the extension of a number of outstanding policies that required review and updating. Members requested that the timelines be reviewed urgently, as they were not content extending all policies until March 2023, and that a number of the outstanding policies are staggered and submitted to forthcoming meetings.

**Clinical Coding Update**

The Sub-Committee received a verbal update on the potential use of clinical coding within the Health Board. The reporting officers apologised for the miscommunication with the paper not being released with the agenda pack, however the Sub-Committee was briefed on the highlights and the Chair requested that the paper be considered at the November 2022 meeting.

**Information Quality Assurance (IQA) Data Quality**

The Sub-Committee received an update on data quality within the Health Board. They were informed that the predominant focus area of work is the Welsh Patient Administration System (WPAS) and received a list of the “data quality” checks undertaken. The Sub-Committee felt assured that there were extensive checks and feedback to users around WPAS, but requested that a plan is developed for other data sets outlined within the paper, such as:

- WRIS - Welsh Radiology Information System
- LIMS - Laboratory information management system (Pathology)
- WNCR – Welsh Nursing Care Record

- WIS – Welsh Immunisation System
- Lille – Sexual Health
- CarePartner – Mental Health
- ESR – Electronic Staff Record
- DATIX – Incident Reporting
- WCCIS – Welsh Community Care Information System

The Sub-Committee requested that data quality becomes a standard agenda item, and updates are provided at each meeting.

### **IG Toolkit Submission: HDdUHB Managed Practices**

The Sub-Committee was notified that all four Managed Practices have confirmed that they have submitted their responses to the IG Toolkit 2021 – 2022 by 30th September 2022, as requested by Digital Health and Care Wales (DHCW).

### **Corporate and Medical Records Storage Assurance Report – Update**

The Sub-Committee welcomed the update on the records storage, and noted the following:

- Contact has been made with South Pembrokeshire Hospital and Bro Cerwyn Mental Health Unit to undertake an audit of storage areas.
- A full audit has been undertaken of the internal Medical Records storage sites in Llangennech, Llanelli

### **Information Governance Activity Report**

The Sub-Committee received the Quarter 2 report of 2022/2023, noting the following highlights:

- **Enquiries on Data Protection Framework** – the number of enquiries (**97**) received during **Q2** has increased compared to **Q1 (75)** and very similar to that of the same period of the previous year 2021/22 (**95**).
- **Information Sharing** – the number of information sharing requests (**17**) received during **Q2** decreased significantly in comparison with the previous quarter (**31** requests), with decreased activity (37%) compared **to the same period of Q2** of the previous year 2021/22 (**27**).
- **Personal Data Breaches** – the number of personal data breaches reported to IG during **Q2** equated to **129**, compared to **Q1 (102)**. It is important to note that of these **129** breaches, **29** were Near Misses.  
Most of the incidents fall within the following categories:
  - Lost or stolen paperwork / hardware (6);
  - Disclosed in error (26); and
  - Unauthorised Access/Disclosure (14)
  - Other (generally misfiling etc) (52)
- **Data Subject Requests** –The number of third-party requests made by i.e. solicitors, insurance companies, Legal Power of Attorney’s etc. on behalf of the patients increased significantly during **Q2 (471)** compared to **Q1 (278)**. The number of Health Subject Access Requests (SAR) received totaled at **292 during Q2** again showing a small increase compared to **Q1 (262)**. There were 19 Corporate Subject Access Requests (SAR) received in **Q2**, a significant increase compared with the previous Q1 2021/22 (**10**).

- **Training Compliance** – The IG training compliance has increased slightly during **Q2**, recording on average **77.4%** in comparison to the previous quarter (on average **76.7%**).

There are approximately 2,500 staff identified as not having their Mandatory IG training compliance in place on ESR. Education and Compliance have offered to release weekly/monthly emails with a link to complete the e-learning or attend one of the IG Virtual Teams Sessions offered fortnightly. Information Governance have previously shared 3 IG Newsletters to encourage staff to update their compliance on ESR and will continue to include within the next Newsletter.

- **National Intelligent Integrated Audit Solution (NIIAS) Monitoring** – Alerts received; During **Q2**, **24** Own Access Notifications were received, in comparison to the previous **Q1** (28).

During **Q2**, **28** Potential Family Access Notifications received. **9** of the triggers have been confirmed as legitimate accesses, and these have been verified as legitimate by the Line Manager of the service. Of the **19 remaining** triggers, **1** Staff have attended the Virtual Training, **6** have booked onto future training sessions, **5** staff were incorrectly triggered to HDdUHB and **12** staff member notifications remain outstanding (of which 7 are with managers). Some staff had more than one NIIAS trigger. The above figures have increased as a result of NIIAS now monitoring additional systems.

#### Information Commissioner Office (ICO) Notifications

Since April 2022, there have been 4 occurrences when a notification to the ICO has been required. The following table highlights the current notifications:

	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Total
Open	1	0	2	0	1	0	-	-	-	-	-	-	4
Closed	-	-	-	-	-	-	-	-	-	-	-	-	0
<b>Total</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>4</b>

#### Cyber Security and Network and Information Systems (NIS) Directive Update

A separate report has been prepared for presentation to the In-Committee meeting of the Sustainable Resources Committee to provide an update on progress of Cyber Security.

#### Materion y Mae Angen Ystyriaeth neu Gymeradwyaeth Lefel y Pwyllgor Adnoddau Cynaliadwy:

##### Matters Requiring Sustainable Resources Committee Level Consideration or Approval:

- None

#### Risgiau Allweddol a Materion Pryder:

##### Key Risks and Issues / Matters of Concern:

- The wider strategic issue of the storage of records and boxes within external storage companies.

#### Busnes Cynlluniedig y Grŵp/Is-Bwyllgor ar Gyfer y Cyfnod Adrodd Nesaf:

##### Planned Group/Sub-Committee Business for the Next Reporting Period:

#### Adrodd yn y Dyfodol:

##### Future Reporting:

- Information Asset Owners and Information Asset Mapping Update

- Data Quality and Clinical Coding
- Information Governance Risk Register
- Information Governance Toolkit improvement plan
- Update on Cyber Security / NISR
- Caldicott Register to be returned to the IGSC meetings
- Digital / IG Policies and Procedures

**Dyddiad y Cyfarfod Nesaf:**

**Date of Next Meeting:**

29<sup>th</sup> November 2022