



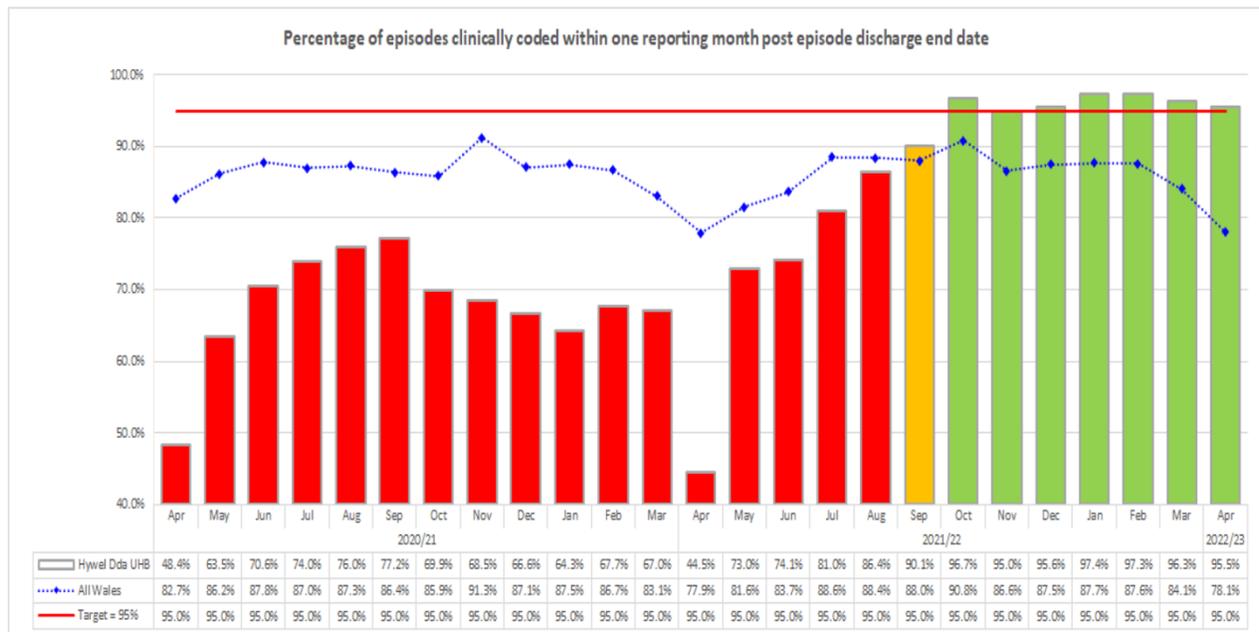
Enw y Grŵp/Is-Bwyllgor: Name of Group:	Information Governance Sub-Committee (IGSC)
Cadeirydd y Grŵp/Is-Bwyllgor: Chair of Group:	Huw Thomas, Director of Finance
Cyfnod Adrodd: Reporting Period:	3rd August 2022

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

- Summary of key actions and discussion from internal and national meetings was presented to IGSC:
 - All Wales - Information Governance Management Assurance Group (IGMAG) (27th July 2022)
 - All Wales - Operational Security Service Management Board (OSSMB) (24th March 2022 and 26th May 2022)
 - Caldicott Guardian Group Meeting (12th July 2022)
 - Information Asset Owners Group (IAOG) (5th July 2022)
 - Cyber Security Assurance Group (27th July 2022)

2) Clinical Coding

The team finished the financial year at 98.1% completeness. It has been reported that Hywel Dda University Health Board (HDDdUHB) performance for April 2022 activity has achieved the 95% target again with performance at 95.5%, this is the 7th month in a row where the Health Board has achieved the target.



The Sub-Committee noted that the Health Board had met the national audit targets set by Digital Health and Care Wales (DCHW) on the quality of the coding.

3) The Health Board has four Managed Practices and has reviewed their submissions for the Information Governance (IG) Toolkit for 2020/21. The IG team has identified that the Managed Practices have relied heavily on Health Board processes and there is a lack of processes at Practice level. The IG Team has completed an Improvement Plan for each of the Managed Practices which were included in the papers. The IG team will be meeting with the Practices to review their respective Improvement Plans and will assist the Managed Practices in their 2021/2022 Toolkit submissions and advise how to implement the improvements identified. To further assist the Practices, the IG team has started to develop a SharePoint Teams site full of resources for their use.

4) Information Governance Activity Report:

The Sub-Committee received the Quarter 1 report of 2022/23, noting the following highlights:

- **Enquiries on Data Protection Framework** – the number of enquiries (58) received during Q1 remains significantly lower than the same period of the previous year 2021/22 (95).
- **Information Sharing** – the number of information sharing requests (47) received during Q1 increased in comparison with the previous quarter (20 requests), with increased activity (31.25%) compared to the same period of Q1 of the previous year 2021/22 (32).
- **Personal Data Breaches** – the number of personal data breaches reported to IG during Q1 equated to 99, compared to Q4 (39). It is important to note that of these 39 breaches, 12 were Near Misses. Most of the incidents fall within the following categories:
 - Lost or stolen paperwork / hardware (9);
 - Disclosed in error (36); and
 - Unauthorised Access/Disclosure (12)
 - Other (generally misfiling etc) (38)
 - Since April 2022, there have been 4 occurrences when a notification to the Information Commissioner’s Office (ICO) has been required. The following table highlights the current notifications:

Breaches reported to the ICO in the Financial Year 2022/2023

Personal Data Breach (Reported to ICO)	Apr 22	May 22	Jun 22	Jul 22	Aug 22	Sep 22	Oct 22	Nov 22	Dec 22	Jan 23	Feb 23	Mar 23
	1	0	2	-	-	-	-	-	-	-	-	-

- **Data Subject Requests** –These requests are being authorised by the IG team to ensure that the Health Board complies with the Data Protection Act (DPA) 2018 / UK General Data Protection Regulations (GDPR) and include the third party requests made by solicitors, insurance companies, Legal Power of Attorney’s etc. on behalf of the patients. The number of Health Subject Access Requests (SAR) received totalled at 262 during Q1, whereas the number of Data Subject Rights: Subject Access Requests equated to 277. The data collated shows that almost half of the enquiries to Access to Health Records Team are now validated by the IG team.

There were 10 Corporate Subject Access Requests (SAR) received in Q1, an increase compared with Q1 of the previous year 2021/22 (5).

- **Requests for Information (Third Party)** – there has been a further increase in requests from third parties during **Q1 (190)** since the earlier quarter (**178** requests during **Q4**) demonstrating a further slight increase in requests compared to the **Q1** of the previous year 2021/22 (**110**). These numbers **represent the number of requests received during Q1** of Schedule 2(1)(2) Police requests in **Q1 2022/2023 (59)** increased in comparison with the previous quarter (**36**). The number of Police Requests with patient consent increased during **Q1 (49)** a slight decrease compared to **Q4 (53)**. The number of Schedule 2(5)(2) Required by Law requests in **Q1 2022/23 (70)** increased compared to **Q4 (61)**. The number of Access to Deceased Patient Records requests decreased in **Q1 (11)** compared to **Q4 (26)**.
- **Freedom of Information** – there has been a decrease in FOI requests during **Q1 (114)** since the earlier quarter (**164** requests during **Q4**) however similar in number to the same period of the previous year 2021/22 (**120**). The % of requests received during June 2022 that were responded to within the 30 days and compliant will be reported at the next IGSC.
- **Training Compliance** – The IG training compliance has decreased slightly during **Q1** recording on average **76.65%** in comparison to the previous quarter (on average **77.94%**).
- **National Intelligent Integrated Audit Solution (NIIAS) Monitoring** – Alerts received; During **Q1, 28** Own Access Notifications were received, in comparison to the previous **Q4 (36)**. The numbers reported relate to the number of staff triggered during the months with a number of staff having more than one NIIAS trigger (including accessing on more than one date within the calendar month).

During **Q1, 18** Potential Family Access Notifications although there was **1** notification found not to be a relation. **2** of the triggers have been confirmed as legitimate accesses, and these accesses have been verified as legitimate by the Line Manager of the Service. Of the **16 remaining** triggers **3** Staff have attended the Virtual Training, **1** has booked onto a future training session, **3** staff were incorrectly triggered to HDdUHB and **9** staff members notifications remain outstanding (of which 6 are with managers). Some staff had more than one NIIAS trigger.

The above figures have increased as NIIAS is now monitoring additional systems and capturing information.

- 5) Information Asset Registers (IAR): Three Information Asset Registers (IARs) were presented to IGSC for assurance, as these were assured by the IAOG meeting and the Service Directors.
 - Digital Services IT IAR – No Risks identified, No Processing outside UK;
 - Public Health TTP IAR – No Risks identified, No Processing outside UK;
 - Public health Addiction Services IAR – No Risks identified, No Processing outside UK;
- 6) **Your Privacy Your Rights – NHS Wales Privacy Notices**
 IG was recently provided with an updated leaflet/poster, which has now been uploaded to the HDdUHB website. The Your Privacy Your Rights' leaflet and an accompanying poster are provided by DHCW and will be available in English & Welsh for services to use.

7) Welsh Control Standard for Electronic Health and Care Records update 2022
HDdUHB signed up to the Standard in 2017. The Control Standard documentation has been reviewed and updated recently. HDdUHB was asked to re-commit to its principles and indicate a commitment to the safe application of sharing data, when utilising national systems, within the controls described within the Control Standard. The Health Board has signed the agreement and a list of other Health Boards who have signed up is available on the DHCW website. HDdUHB is compliant with the majority of the requirements, but there are some items to progress in terms of compliance, which are included in IG improvement plans.

**Materion y Mae Angen Ystyriaeth neu Gymeradwyaeth Lefel y Pwyllgor Adnoddau Cynaliadwy:
Matters Requiring Sustainable Resources Committee Level Consideration or Approval:**

No matters requiring consideration or approval.

**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
- 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:**

11th October 2022