


DIGITAL GOVERNANCE AND SAFETY COMMITTEE MEETING - PUBLIC
MINUTES, DECISIONS & ACTIONS TO BE TAKEN

 13:00 –15:15

 21 August 2025

 MS Teams

| Present (Members) | Initials | Title | Organisation |
|--------------------------|----------|--|--------------|
| Rowan Gardner (Chair) | RG | Independent Member, Chair of the Digital Governance and Safety Committee | DHCW |
| Alistair Klaas Neill | AKN | Independent Member | DHCW |
| Marilyn Bryan Jones | MBJ | Independent Member | DHCW |
| In Attendance | Initials | Title | Organisation |
| Laura Beddoe | LB | Quality Manager, (Regulatory Compliance) | DHCW |
| Chris Collis | CC | Chief Digital Architect | DHCW |
| Chris Darling | CD | Director of Corporate Affairs/Board Secretary | DHCW |
| Mark Edwards | ME | Chief Information Security Officer | DHCW |
| Rhidian Hurle | RH | Executive Medical Director | DHCW |
| Darren Lloyd | DL | Associate Director for Information Governance and Patient Safety | DHCW |
| Jamie Manning | JM | Quality Manager, (Regulatory Compliance) | DHCW |
| Rachael Powell | RP | Associate Director of Information, Intelligence and Research | DHCW |
| Keith Reeves | KR | Service Management Team Manager | DHCW |
| Julie Robinson | JR | Corporate Governance Co-Ordinator (Meeting Secretariat) | DHCW |
| Michelle Sell | MS | Director of Programmes and Engagement | DHCW |

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| Apologies | Title | Organisation |
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| David Selway | Independent Member | DHCW |
| Laura Tolley | Head of Corporate Governance/ Deputy Board Secretary | DHCW |
| Carwyn Lloyd-Jones | Chief Cloud Officer | DHCW |
| Sam Lloyd | Executive Director of Operations | DHCW |

| Acronyms | | | |
|-----------------|--|-------|---|
| SHA | Special Health Authority | DG&S | Digital Governance and Safety |
| NDR | National Data Resources | ADS | Application, Design & Support |
| R&I | Research & Innovation | SRO | Senior Responsible Officer |
| DSPP | Digital Services for Patients and the Public | WIAG | Wales Informatics Assurance Group |
| WICIS | Welsh Intensive Care Information System | WASPI | Wales Accord on the Sharing of Personal Information |
| NHS | National Health Service | WPAS | Welsh Patient Administrative System |
| DHCW | Digital Health and Care Wales | EMIS | GP System Supplier |
| SBU | Swansea Bay University Health Board | DPIF | Digital Priorities Investment Fund |
| WCCG | Welsh Clinical Communications Gateway | VPAG | Voluntary Scheme for Branded Medicines Pricing, Access and Growth |
| SIRO | Senior Information Risk Owner | TDA | Technical Design Authority |
| DCB | Digital Change Board | DPIA | Data Protection Impact Assessments |
| ISD | Information Services Department | ISDAG | Information Services Department Assurance Group |
| IMTP | Integrated Medium Term Plan | EOI | Expression of Interest |
| AQP | Assurance Quality Plans | | |

| Item No | Item | Outcome | Action to Log |
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| PART 1 – PRELIMINARY MATTERS | | | |
| 1.1 | Welcome and Introductions The Chair welcomed everyone to the meeting. | Noted | None to note |
| 1.2 | Apologies for Absence Apologies for absence were noted from: <ul style="list-style-type: none"> • David Selway, Independent Member • Laura Tolley, Head of Corporate Governance/Deputy Board Secretary • Carwyn Lloyd-Jones, Chief Cloud Officer • Sam Lloyd, Executive Director of Operations | Noted | None to note |
| 1.3 | Declarations of Interest It was noted there were no Declarations of Interest. | Noted | None to note |
| 1.4 | Matters arising There were no matters raised. | Noted | None to note |
| PART 2 – CONSENT AGENDA Items on the consent agenda were circulated prior to the meeting and it was noted that there were no comments received by the Chair beforehand. | | | |
| 2.1 | Minutes of the Last Meeting The Digital Governance and Safety Committee resolved to: APPROVE the Public and Private Abridged Minutes of the last meeting on 22 May 2025 | Approved | None to note |
| 2.2 | Forward Workplan The Digital Governance and Safety Committee resolved to: NOTE the Forward Workplan | Noted | None to note |
| PART 3 – MAIN AGENDA | | | |
| 3.1 | Action Log The Committee NOTED there were two actions on the Action Log, one was complete and one underway. | Noted | None to note |
| 3.2 | Corporate Risk Register Chris Darling, Director of Corporate Affairs/Board Secretary noted there were currently 20 risks on the Corporate Risk Register, of which nine were for the consideration of this Committee, six subject to discussion in this session and three of which were classified as private and would be taken in the private session. The following changes to public risks assigned to this Committee since the last meeting were noted as: DHCW0300 CANISC screening and palliative care risk – this risk remained on the register due to the legacy data and the | Discussed | None to note |

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transition needs, although cancer services from Velindre and colposcopy services had been successfully removed. Full mitigation requires removing user front end access while securing data on a separate platform.

DHCW0336 withdrawal of contracts – the risk had transferred to Sam Hall who is now the executive lead. However, an update was provided on the handover and transition of the risk. Assurance was provided that a solution would be provided by the end date.

DHCW0340 GP Services and systems -this risk will be removed from register.

NEW RISKS (1) PUBLIC

DHCW0350 Increased Cadence of GP Migrations will be updated with a plan in place and funding agreed. Michelle Sell, Director of Programmes and Engagement, Digital Strategy (MS) provided an update on the GP systems, confirming that the assets of the provider which went into administration had been acquired by a company known to the healthcare sector in Wales. This acquisition ensures continuity of service for GP practices, and the plan is to transition to a single supplier in a safe and robust manner.

The Independent Members have had regular updates on the situation since being informed of the insolvency of the supplier. The Chair thanked the Executive team for all of their work on this and the communications with Welsh Government.

Darren Lloyd, Associate Director for Information Governance and Patient Safety (DL) provided a Deep Dive into risks **DHCW0263** and **DHCW0320**.

The two risks are inextricably linked and involve DHCW statutory functions. The first risk **DHCW0263** concerns the ability to collect, process and disseminate patient data. The second risk **DHCW0320** involves transparency about the role of DHCW and the wider system in using that data. These risks have been spotlighted since 2021 with ongoing communications between DHCW and Welsh Government.

The challenges include the need for clear policies and guidance to support the collection and dissemination of patients' data. This is crucial for both direct and indirect care, as understanding patient journeys within NHS Wales and the broader health and social care system is essential. The role and responsibilities of organisations like DHCW are vital in this process and there is need for better direction and policy setting from the Welsh Government.

DL highlighted the importance of transparency and the need for better access to primary care data, including general practice and community pharmacy data. There were gaps in policy areas, such as the roles of the Caldicott Guardians and national approaches to patient data opt-out rights.

Addressing these challenges is essential for supporting patients through their NHS journeys and achieving the common goals of improving health outcomes.

- The public and NHS staff need to understand why information governance is crucial. The lack of clarity in policies adds extra work and slows down the process of agreeing on how information should flow within the law. This impacts the quality and speed of services provided to patients.
- The opportunity to learn from data and improve services is hindered by the lack of clarity. Regular discussions are held to keep these issues in the spotlight, but it can feel like different parts of the NHS are not in agreement. However, everyone is working together to protect patient data.
- Achieving clarity in policy would allow everyone to move faster together. There is a huge opportunity if this can be achieved.
- Rhidian Hurlle (DHCW - Executive Medical Director) emphasised the basic principles of collecting, storing, and sharing data. Storing data is pointless if it cannot be shared for direct care or analysed to understand service performance and impact on patients. The goal is to have all data in the right place and format to achieve a cost-efficient health service.

CD highlighted the risks associated with not exploiting opportunities. A combined letter from the Chief Executives of Wales to the Welsh Government (WG) had outlined the issues, including the need for clarity on DHCW's role. The response from WG indicated that they were looking into the matter and discussing it with their legal team.

DL confirmed that there was no clarity yet, but there was some assurance that DHCW are there to support WG in providing clarity.

There was no timescale to resolve the policy issue but the CEO had requested an update at the next DDaT Board meeting, specifically on this matter and the progress with the legal team.

Alistair Klaas Neil, Independent Member (AKN) emphasised that it was important that any the benefits of shared data were for residents as well as the system or NHS. It was important to highlight the direct connection between improved capabilities within the NHS and support for citizens. Additionally, the focus should not only be on patients but also on residents and citizens to minimise the number of people who become patients.

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| | <p>The Digital Governance and Safety Committee resolved to: DISCUSS and NOTE the Corporate Risk Register and the Deep Dives into two risks: DHCW0263 and DHCW0320</p> | | |
| PART 4 – ASSURANCE AGENDA | | | |
| 4.1 | <p>Incident Review and Organisational Learning Report Presented by Keith Reeves, Service Management Team Manager, who noted that the Qtr. 1 report covered period 1 April 2025 to 30 June 2025.</p> <p>The following highlights were provided:</p> <ul style="list-style-type: none"> • Early Warning Notifications: two early warning notifications were issued to Welsh Government relating to Clinical Safety and Cyber Security issues in Q1 with a total of two notifications issued across the year. New for 2025/26 is incidents reportable under Network and Information Systems Directive (NIS) for which there had been one incident reported. • Complaints, Concerns and Feedback: There were 21 complaints in relation to the NHS Wales App, these all related to a known issue and were in the process of being resolved. There were 16 complaints re the Dental Access Portal and the remainder were related to DHCW business or directed to other NHS Wales bodies. • Reviews: In Quarter 1 the IRLG received and reviewed four reports and presentation. • Learning: The report included a SWOT analysis undertaken as part of the annual review of effectiveness. This identified some improvements to be made in relation to the running of the group. The report highlighted a high-level summary of the project closure report for the Digital Change Delivery Network (DCDN). • Improvements: currently three programmes were being progressed, one is on hold and four are being monitored through the year. • The IRLG group undertook an in-person workshop in April which focused on the effectiveness of the group. <p>AKN raised a point about the importance of maintaining focus on the reasons behind the cybersecurity measures and suggested attaching a log of significant cyber attacks that have caused major disruptions, including those outside of the NHS and the UK. The log would help emphasise the importance of cybersecurity efforts and keep the focus on why these measures are crucial.</p> <p>Mark Edwards, Chief Information Security Officer (ME) agreed it was a good suggestion, however, any information related to NHS in Wales would need to be reviewed within the private session due to the sensitive nature of the attacks. The Cyber Resilience Unit tracks and monitors these attacks</p> | Discussed for Assurance | None to note |

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| | <p>and reports them to Welsh Government and service management. Additionally, there is regular collaboration with colleagues in the other three nations to keep track of external attacks and share experiences.</p> <p>The Digital Governance and Safety Committee resolved to: DISCUSS the Incident Review and Organisational Learning Report for ASSURANCE</p> | | |
| 4.2 | <p>Information Governance Assurance Report Darren Lloyd, Associate Director for Information Governance and Patient Safety and Data Protection Officer (DL) presented the Information Governance Assurance Report noting the work of the Information Governance team from this period.</p> <ul style="list-style-type: none"> • Appendix A: Areas for improvement and actions to increase awareness of information governance within the organisation. Work on external transparency elements related to the publication scheme requirements under the Freedom of Information Act and ICO responsibilities. • Appendix B: Currently work was being undertaken on 23 data protection impact assessments, with 71 completed and six recently signed off. Support from an assurance perspective to ensure privacy and confidentiality requirements are met. Monthly calls to the team range from 600-700, with an increase in the complexity of queries. • Appendix C Development of IG toolkit version seven. Feedback on the effectiveness of tools used to communicate with services, with positive responses to the E-alert summary. <p>The Committee discussed the increased complexity of the Data Protection Officer (DPO) as a service being offered to General Practices (GPs), Specifically whether the current fee that GPs are paying to cover staff was enough to handle these more complex issues. DL responded that the current fee rate was sufficient as the service was self-sustaining.</p> <p>The Digital Governance and Safety Committee resolved to: NOTE the Information Governance Assurance Report.</p> | Noted | None to note |
| 4.3 | <p>Information Services Assurance Report Rachael Powell, Associate Director of Information, Intelligence & Research (RP) presented the Information Services Assurance Report and highlighted some of the points of interest to the Committee:-</p> <ul style="list-style-type: none"> • Information and analytics strategy progress: the organisation had successfully met all milestones for the value from data portfolio in the last quarter, with | Noted | None to note |

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| | <p>ongoing reporting against the IMTP and annual reports covering research, innovation and value from data portfolios now publicly available and shared with stakeholders.</p> <ul style="list-style-type: none"> • Improved reporting and transparency: collaboration between the Information and Performance teams had led to enhanced reporting on the usage of information products through monthly performance reports to management, increasing transparency about data product utilisation. • The ISD Assurance Group (ISDAG) reviewed nine Assurance Quality Plans (AQPs), one Request for Change (RFC) and seven Safety Case and Readiness Reports (SCRR's) to consider the impact on Information Services. • Corporate Power BI Team: The team has introduced measures to ensure dashboards are developed and shared appropriately. • Projects: Highlights included the Data Warehouse geography dimension which was updated to include the 2021 Census and went live on 15 May. A cancer dashboard displaying colposcopy data was published using UAT data. A recruitment long listing tool was designed and developed by the Corporate PowerBI and Information Programmes Management (IPM) and shared with other teams/departments. The High Value Measures Dashboard was published. The Palliative Care WCP Visualisation was published. <p>Discussions took place on the transition from Corporate BI dashboards to the new policy compliant systems, noting that 81% of users had completed the required training. Assurance was provided that although there was no set timeline, efforts were ongoing to achieve 100% training compliance with teams actively identifying remaining users and managing licence arrangements. Additionally, there was consideration of the risks and opportunities associated with the broader suite of Microsoft tools in use, emphasising appropriate and standards-compliant usage, alongside plans to collaborate more closely with the Microsoft Office 365 team.</p> <p>RP was requested to reflect the discussions i.e. the maturity of data available, the NDR and other data sources.</p> <p>ACTION 21082025-A01 RP to reflect within the next report the development of the data available to DHCW.</p> <p>The Digital Governance and Safety Committee resolved to: NOTE the Information Services Assurance Report.</p> | | |
| 4.4 | <p>Research, Innovation and Knowledge Management Assurance Report</p> <p>RP presented the Research, Innovation and Knowledge Management Assurance Report with the following</p> | Noted | None to note |

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| | <p>highlights:</p> <ul style="list-style-type: none"> • The report had been expanded to include, research, innovation and knowledge management. • The E-Library and Knowledge Service and Research and Innovation are being aligned for better integration. • All research and innovation milestones have been delivered on time and as planned. • The E-Library milestones are on track and being delivered as scheduled. • Significant work is underway to refresh the research and innovation strategy. • The NHS Wales E-Library strategy was approved and launched at the first E-Library Conference in July. • The E-Library Annual report had been approved, noting good progress and delivering objectives. • The impact of the US administration on biomedical science was presented to the Management Board. • The Open Access repository had been established with 30 DHCW authored or co-authored papers published. • The Research and Innovation commercial partnership strategy had been published. • An AI policy for library and information research had been developed and was in the consultation period. <p>The Committee discussed the expected benefits from adding knowledge management and highlighted the need to support Open Access publishing to facilitate better opportunities for sharing valuable insights and expertise. Additionally, the significance of linking to publications demonstrates the value added by the work and using citation references as measures of academic success.</p> <p>The Digital Governance and Safety Committee resolved to: NOTE the Research, Innovation and Knowledge Management Assurance Report.</p> | | |
| 4.5 | <p>Wales Informatics Assurance Group Report Laura Beddoe, Quality Manager (Regulatory Compliance) (LB) presented the Wales Informatics Assurance Report and highlighted the following:-</p> <ul style="list-style-type: none"> • Go live compliance – four projects were approved during the reporting period. However, the Bridgend Transition Project lacked full testing assurance but proceeded with sign-off after senior leadership review, with no further testing planned. • Assurance Quality Plans WIAG are awaiting information on the CTM UHB project. • Safety Case and Readiness Reports – four reports | For Assurance | None to note |

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| | <p>were approved, with three pending awaiting further information.</p> <ul style="list-style-type: none"> • Power App – there are 19 projects on the PowerApp. <p>RH provided further details on the Bridgend Transition Project which had gone live without full assurance. Similar problems had been recurring, which emphasised a need for strong governance and direction to delivery efficient national programmes. The DHCW workforce were commended for their robust handling of the problems that arose during the project.</p> <p>Chris Collis, Chief Digital Architect (CC) reinforced RH’s points, acknowledging the significant effort required to address the challenges and praising the teams for their dedication and hard work. Additionally, the introduction of a new architectural decision record process to empower teams and individuals to make key decisions was discussed. The importance of transparency and public sharing of information to ensure good governance was further highlighted.</p> <p>The Digital Governance and Safety Committee resolved to: NOTE the Wales Informatics Assurance Group Report for ASSURANCE.</p> | | |
| 4.6 | <p>Technical Design Authority Assurance Report</p> <p>Chris Collis, Chief Digital Architect (CC) presented the report and provided the following highlights:-</p> <ul style="list-style-type: none"> • Open publication of architectural principles: The TDA has published its top-level architectural principles, digital product software engineering principles, and user-centered design principles on a public website to encourage transparency and feedback from the wider community. Clinical principles are currently under review and expected to be approved soon. This initiative also aims for national alignment across health boards and related organisations. • New architectural decision record process: A recently approved decision-making process introduces Architectural Decision Records (ADRs), which are lightweight records documenting technical decisions. The process supports different governance levels, from project-specific to national-impact decisions, ensuring proportionate oversight. • Empowerment and governance shift: The new decision process empowers teams to form expert groups to make and report decisions, shifting from prior models where the TDA made or approved decisions directly. Decisions by expert groups are assumed | Discussed | None to note |

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| | <p>approved and reported to the TDA for information only, promoting team responsibility and agility.</p> <ul style="list-style-type: none"> • Risk management and transparency: While the governance shift introduces potential risks such as rogue decisions, mitigation strategies are in place. Sensitive decisions may be withheld from public publication, but summaries or information about such decisions will still be shared to maintain openness. • Community engagement: An architectural community has been formed across several health boards and organisations to review and provide feedback on the published principles, fostering collaboration and consensus-building at a national level. • Public access to meeting highlights: The TDA has started publishing highlights from its meetings, including actions and ongoing work, to further enhance transparency and allow broader access to its activities. <p>The Committee discussed the transition from one system to another with DHCW and the inherent risks in both the old and new systems. There would be no risk-free position if the organisation aims to achieve its goals. The Committee were assured that the intention was to collaborate with colleagues across Health Boards. The site architecture and approach were designed to be transparent and collaborative, allowing Health Board partners to participate.</p> <p>The Committee provided its appreciation of the work done but suggested that future reports should include assurances that new risks were being monitored and measured.</p> <p>The Digital Governance and Safety Committee resolved to: DISCUSS the Technical Design Authority.</p> | | |
| 4.7 | <p>Digital and Information Standards – Verbal</p> <p>Rhidian Hurlle, Executive Medical Director provided a verbal update which focused on the challenges and considerations related to data standards and their implementation within the organisation. The key points discussed included:-</p> <ul style="list-style-type: none"> • Data Standards and Legacy Systems: The discussion highlighted the various data standards such as Welsh Health circulars, DSCN, SNOMED, and messaging standards like FHIR. The challenge lies in ensuring that the products and approaches adhere to these latest technical and information standards. The legacy systems, which have evolved over time, pose a | Noted | None to note |

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| | <p>significant challenge as changes to these systems can have far-reaching implications.</p> <ul style="list-style-type: none"> • Current Design Methodology: The organization employs different design methodologies across various departments. There are successful examples in primary care and mental health, such as the re-platforming of Choose Pharmacy and the Welsh Nursing Care Record. However, there are also legacy systems like PAS and WCP that need attention • AI and Data Quality: The excitement around AI was acknowledged, but it was emphasised that the quality of the underlying data is crucial for effective AI implementation. The importance of understanding what data can be safely exposed to AI to avoid unintended consequences was discussed. • User Experience and Workflow: Chris Collis shared insights from spending a day in the hospital, highlighting the fragmented user experience involving both digital and paper-based systems. The need for user research and understanding clinical pathways before creating or buying new systems was emphasised. • Future Considerations: The discussion concluded with the need to address connectivity, modern equipment, cybersecurity, and data safety before focusing on advanced technologies like AI. The importance of building systems based on robust standards and ensuring data quality was reiterated. <p>The Digital Governance and Safety Committee resolved to: NOTE the verbal update on Digital and Information Standards</p> | | |
| PART 5 – CLOSING MATTERS | | | |
| 5.1 | <p>Any Other Urgent Business</p> <p>There was no other urgent business to be noted.</p> | Noted | None to note. |
| 5.2 | <p>Items for Chair’s Highlight Report to the Board</p> <p>Items to be included in the Chair’s Highlight Report for SHA Board in September were noted as:</p> <ul style="list-style-type: none"> • All reports were good with no areas for escalation. • Listen and Learn session, suggested having a session at a future Board meeting to discuss the significance of the updates and changing governance approach in the Technical Design Authority Report. | Noted | None to note |
| 5.3 | <p>Date of next meeting</p> | Noted | None to note |



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Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

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| The date of the next Digital Governance and Safety Committee meeting was confirmed to take place on 20 November 2025 at 1.00pm. | | |
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