

DIGITAL GOVERNANCE AND SAFETY COMMITTEE MEETING - PUBLIC

MINUTES, DECISIONS & ACTIONS TO BE TAKEN

 13:00 –15:40

 3 November 2022

 MS Teams

Present (Members)	Initials	Title	Organisation
Rowan Gardner	RG	Independent Member, Chair of the Digital Governance and Safety Committee	DHCW
David Selway	DS	Independent Member, Vice Chair of the Digital Governance and Safety Committee	DHCW
Marilyn Bryan Jones	MJ	Independent Member	DHCW

In Attendance	Initials	Title	Organisation
Michelle Sell	MS	Director of Planning & Performance and Chief Commercial Officer	DHCW
Carwyn Lloyd Jones	CLJ	Interim Executive Director of Operations	DHCW
Chris Darling	CD	Board Secretary	DHCW
Keith Reeves	KR	Service Management Team Manager	DHCW
Rhidian Hurle	RH	Executive Medical Director	DHCW
Darren Lloyd	DL	Associate Director for Information Governance and Patient Safety	DHCW
Julie Ash	JA	Head of Corporate Services	DHCW

David Sheard	DSh	Assistant Director of Service Transformation (item 3.5 only)	DHCW
Carys Richards	CR	Corporate Governance Coordinator (Secretariat)	DHCW
Andrew Warburton	AW	Head of Information & Health Records Programmes	DHCW
Marcus Sandberg	MS	Senior Information Governance Officer	DHCW

Apologies	Title	Organisation
Ifan Evans	Executive Director of Strategy	DHCW
Rachael Powell	Associate Director of Information, Intelligence and Research	DHCW
Paul Evans	Interim Head of Quality and Regulatory	DHCW

Acronyms			
SHA	Special Health Authority	DG&S	Digital Governance and Safety
NDR	National Data Resources	DPIF	Digital Priority Investment Fund
R&I	Research & Innovation	ETR	Electronic Test Requesting
DSPP	Digital Services for Patients and the Public	WEDS	Welsh Emergency Dept System
WICIS	Welsh Intensive Care Information System	RISP	Radiology Informatics Solution Programme
WIAS	Welsh Imaging Archive Service	DMTP	Digital Medicines Transformation Portfolio
DHCW	Digital Health and Care Wales	IM	Independent Member
ISD	Information Services Directorate	NHS	National Health Service
BAU	Business as Usual	IRLG	Incident Review and Learning Group
MB	Management Board	LPF	Local Partnership Forum
MIU	Minor Injuries Unit		

Item No	Item	Outcome	Action to Log
PART 1 – PRELIMINARY MATTERS			
1.1	<p>Welcome and Introductions</p> <p>Rowan Gardner, Independent Member (RG) and Chair of the Digital Governance and Safety Committee (DG&S) welcomed everyone to the meeting.</p> <p>With an extended welcome to Marilyn Bryan Jones, Independent Member (MJ) who has recently joined DHCW and attending her first DG&S committee, gave a brief introduction into her own background in Equality and Diversity.</p> <p>Andrew Warburton, Head of Information & Health Records Programmes (AW) was welcomed as a member of Rachael Powell’s team to cover item 3.4 Information Services Assurance Report in her absence.</p>	Noted	None to note
1.2	<p>Apologies for Absence</p> <p>Apologies for absence were noted from:</p> <ul style="list-style-type: none"> • Ifan Evans, Executive Director of Strategy (IE) • Rachael Powell, Associate Director of Information, Intelligence and Research (RP) • Paul Evans, Interim Head of Quality and Regulatory (PE) 	Noted	None to note
1.3	<p>Declarations of Interest</p> <p>RG declared that she was a cofounder of Precision Life, who deal with patient information for secondary purposes such as research.</p> <p>She also noted that the Precision Life CEO was on an event panel this week with members of SAIL, who are a third party supplier of DHCW.</p> <p>Additionally, she noted the current topical status of health care data with the UK government recently publishing policies with regards to the use of data for secondary purposes, adding how DHCW ensures patient data is safeguarded within this realm specifically with item 3.6 on today’s agenda.</p> <p>It was raised that if at any time when not appropriate for RG to Chair, Vice Chair David Selway, Independent Member (DS) will</p>	Noted	None to note

	take over to manage any potential conflict.		
1.4	<p>Matters arising</p> <p>There were no matters raised.</p>	Noted	None to note
<p>PART 2 – CONSENT AGENDA</p> <p>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 to note.</p>			
2.1	<p>Minutes of the Last Meeting</p> <ul style="list-style-type: none"> Public Private abridged <p>Carwyn Lloyd-Jones, Interim Executive Director of Operations (CLJ) sent amendments to the text used in describing risk DHCW0291 Network Equipment delays in relation to Data Centre move, which were implemented.</p> <p>RG queried the translation process when amendments are made with CLJ, as a Welsh speaker offering to proofread any changes for accuracy before publication.</p> <p>The Digital Governance and Safety Committee resolved to: Approved the Minutes of the last meeting.</p>	Approved	None to note
2.2	<p>Forward Workplan</p> <p>The Digital Governance and Safety Committee resolved to: Note Forward Workplan</p>	Noted	None to note
<p>PART 3 – MAIN AGENDA</p>			
3.1	<p>Action Log</p> <p>Led by Chris Darling, Board Secretary (CD) who noted that 2 actions have been closed since the last meeting on 4 August and 2 are marked as underway, with no further discussion as the Committee were satisfied with the progress made.</p> <p>The Digital Governance and Safety Committee resolved to: Discuss the Action Log</p>	Discussed	None to note
3.2	<p>Corporate Risk Register</p> <p>CD informed the Committee, there were currently 28 risks on</p>	Discussed	None to note

the Corporate Risk Register, of which 20 are for the consideration of this Committee, with 11 public risks and the further 9 classified as private due to their sensitivity that will be received in the private session of the Committee.

NEW RISKS (3) – 3 public, 0 Private

- DHCW0294 - DHCW Service Ownership and resource commitment not agreed for the NHS Wales App – risk has been de-escalated since the paper was produced, following agreement of service model leading up to GO Live, the risk will continue to be monitored at Directorate level
- DHCW0295 - Lack of resources to implement key IMTP Milestones – Score had been reduced
- DHCW0296 - Allergies/Adverse Reactions - Single Source – Rhidian Hurle, Executive Medical Director (RH) noted the risk needed to be made visible, as it was affecting Welsh Clinical Portal and Digital Medicine Transformation Portfolio

RISKS REDUCED (2) – 2 public, 0 private

- DHCW0291 - Network Equipment delays in relation Data Centre 2 move
- DHCW0295 - Lack of resources to implement key IMTP Milestones

RISKS REMOVED (1)

- DHCW0293 - DPIF Funding Letters

Deep dives into all corporate risks assigned to the DG&S Committee that have remained on the corporate risk register since 1 April 2021 have been undertaken, one of which was included for discussion in the public session.

- DHCW0237 - New requirements impact on resource and plan

It was noted that the risk has morphed, from specific impact of planning for covid to include recovery now. It was noted that, in general terms, the Digital Medicine Transformation Portfolio had also been absorbed but that both LINC and RISP

requirements would have an impact on resource now also.

Michelle Sell, Director of Planning & Performance and Chief Commercial Officer (MS) highlighted that the risk continued to be a challenge for DHCW, in terms of planning capacity, with a degree of uncertainty still remaining in the covid response. DHCW successfully moved resources to stand up to support the initial response, but it did have an impact on business elsewhere. MS noted that next year's IMTP would have capacity built in in order for DHCW to be more agile, however this will potentially mean the ability to be less ambitious up front in the plan. The risk remained for DHCW but will be managed going forward in collaboration with stakeholders.

DS queried risk DHCW0295 - Lack of resources to implement key IMTP Milestones, which, as stated above, was new but also had been reduced. CD clarified that it was added and reduced in the quarter since the last committee meeting in August.

DS noted that there were now 3 separate risks due to resource capability and asked whether this was the right way to present them, or should they be consolidated? CD added that it is to ensure all areas get the additional resource before the risk is reduced as the mitigation against all 3 was slightly different.

With regards to the Data Promise risk Darren Lloyd, Associate Director for Information Governance and Patient Safety (DL) noted that Helen Thomas, Chief Executive has received a letter from Welsh Government setting out responsibilities and proposing where DHCW can assist, and a response will be returned in order to formalise a plan.

The Switching Service risk will be updated after the current Internal Audit concludes.

A discussion took place on the difference in the current risk level to target level and whether this would ever be achievable in some cases. It was agreed that the target level has to be in line with the risk appetite and that this is a challenge, especially with generic risks, for example Cyber will always have threats and therefore will always remain on the register. It was identified that milestones / metrics need to be agreed to meet target risk scores however the need to recognise the uncertainty in some areas should be reported.

The Digital Governance and Safety Committee resolved to:
Discuss the Corporate Risk Register

<p>3.3</p>	<p>Incident Review and Organisational Learning Report</p> <p>MS delivered the Q2 report, noting the following items for attention:</p> <ul style="list-style-type: none"> • 4 early warning notifications, detailed investigations are underway or have been completed, and learnings will be shared through the IRLG. • There had been an increase in number of reviews, with the team looking to broaden considerations of performance delivery. • The high number of recommendations / actions completed for September 2022 related to the improvements that were identified and implemented for Major IT Incident Management. • Common Themes from reviews would be used to inform wider analysis and learnings. <p>The Committee noted the good work in the last period in dealing with the backlog in September.</p> <ul style="list-style-type: none"> • IRLG Workforce Learning <p>MS noted the importance of the themes in the report from the learnings since the historic singular incident of bullying and review as;</p> <ul style="list-style-type: none"> • workforce behaviors – the importance of our values and how we operate, • Staff surveys – to continue especially as we continue to grow as an organisation • Findings have been shared with LPF and MB • Leadership programme taken place, with further sessions to take forward the messaging to ensure a common view across the board. • IRLG will be revisiting in due course to ensure actions are taken forward and implemented. <p>MJ suggested, even though initial discussion and statutory training is positive, that maybe more situational training, options that take a look at alternative remedies, could inform sessions around the values. MJ/MS to continue discussions offline around role modelling.</p> <p>Julie Ash, Head of Corporate Services (JA) assured the committee that the response was positive, and they received a large number of volunteers who were happy to come forward and take part in the work.</p>	<p>Discussed for Assurance</p>	<p>None to note</p>
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	<p>The Digital Governance and Safety Committee resolved to: Discuss the Incident Review and Organisational Learning Report for Assurance</p>		
<p>3.4</p>	<p>Assurance Reports</p> <p>I. Information Governance Assurance Report</p> <p>DL presented the report, noting the highlights as follows;</p> <ul style="list-style-type: none"> • Work underway on developing an IG strategy, whereby components have been split to understand what is achievable. • Section 255 – work to be done in respect of DSPP, however formal request from the English only act had been received. • Number of Data Protection Impact Assessments ongoing with a higher level of complexity, working on a robust method to ensure privacy through the analysis • 1 incident logged since the last meeting which related to office 365 this had been mitigated against. <p>A discussion took place on the welcome appointment for an IG lead into the NDR Programme, plus existing staff lending some resource into the programme.</p> <p>II. Informatics Assurance Report</p> <p>RH gave a brief update noting that all statuses are amber and that a date for CANISC Go Live has been agreed since the paper was published.</p> <p>III. Information Services Assurance Report</p> <p>AW presented the report in the absence of RP, noting the work on the development of:</p> <ul style="list-style-type: none"> • an automated tool, progress against IMTP and annual deliverables, allows RP to report on current statuses for deliverables very readily • one channel to merge all mailboxes and triage responses quicker. NDR requests can be actioned more collaboratively, with additional joint meetings with NDR to review work requests. • ISD assurance group – Welsh informatics assurance group work was presented at the ISD group for consideration. • Service Portfolio was slightly out of date due to covid response, service management made progress last 12 	<p>Noted for Assurance</p>	<p>None to note</p>

	<p>months and were fully integrated into the catalogue. The team were looking to refresh the remaining programmes in the portfolio and recategorize them as appropriate. A paper on this work would be presented to DHCW's Management Board.</p> <ul style="list-style-type: none"> • Internal audit of Switching Service – A management response had been drafted responding to the draft Internal Audit Report. • Assurance framework being developed with the use of power BI dashboards. The framework would ensure DHCW were only publishing appropriate information in the public domain. The process for publication was being improved with a pilot being undertaken within the Operations Directorate. • Risks – service management resource. There was outstanding work to complete on this with the nature of the risk being misalignment in reporting within the IOPR <p>The Digital Governance and Safety Committee resolved to: Note the reports for Assurance.</p>		
3.5	<p>Digital Programme Overview Update</p> <p>RG informed the Committee that a meeting had been held with herself DS, IE, CD and Rebecca Cook, NDR Programme Director to discuss the NDR programme which resulted in a really positive outcome which provided IM's with assurance around the programme of work.</p> <p>David Sheard, Assistant Director of Service Transformation (DSh) highlighted the following to note against the Digital Programmes:</p> <ul style="list-style-type: none"> • The Welsh Emergency Department System (WEDS) project was rated as Red. The principal issue is continued system issues affecting Neath Port Talbot MIU. The supplier continues to work with SBU and DHCW to investigate and this had been escalated with the supplier and to the DHCW Executive Team. - DSh added that the issue was not the functionality of the app, but the way the app is delivered to the desktop, due to the contractual and legal obligations. An investigation was being undertaken with a proposal from the supplier expected before the RAG status can be updated. 	Noted for Assurance	None to note

	<ul style="list-style-type: none"> • The National Data Resource (NDR) programme is now rated Amber. Resources to support the data platform and API tooling need to be in place before the platform can go live. • The Welsh Information System for Diabetes Management (WISDM) was rated Amber. The delivery of the Paediatric form has been delayed due to issues in the test environment. The release of the form was scheduled for the new year. • Two additional projects have been added to the overview. These were explained as the Powys England Cross Border project and the Laboratory Information Network Cymru (LINC) Programme <ul style="list-style-type: none"> - Powys England Cross Border, funded by DPIF, trying to improve flows of patient data from across borders to support patients. <p>RH added that the issues were slightly more complex, however, a standard based approach across borders to conform to the International Patient Passport Standards. Patients Standards of take your record wherever you go, is needed.</p> <ul style="list-style-type: none"> - LINC will move over to DHCW from the NHW Health Collaborative, with an official transfer date of 1 January 2023. <p>The Digital Governance and Safety Committee resolved to: NOTE the Digital Programme Overview Update for ASSURANCE</p> 		
3.6	<p>Keeping Patient Data Safe</p> <p>An update was received by DL on Keeping Patient Data Safe, noting the responsibility of the DHCW IG team to help ensure that DHCW, NHS Wales and other stakeholders maintain the confidentiality of personal information, monitor, and improve their compliance with Information Governance related legislation to keep patient/personal data safe.</p> <p>RG noted this was an important area for the Committee to monitor as it developed and noted the benefits of the track</p>	Noted	None to note

	<p>and trace system utilised in Wales during the pandemic.</p> <p>RH provided assurance to the Committee that DHCW were able to monitor and manage the use of data as a collective responsibility. The IG and cyber teams ensure safe practice was maintained.</p> <p>The Digital Governance and Safety Committee resolved to: NOTE the Keeping Patient Data Safe update</p>		
3.7	<p>Research & Innovation Strategy</p> <p>RH noted that the DHCW R&I Strategy was formally approved by SHA Board in September 2022 with an action plan being developed to implement the work which will be fed back into the Committee at future meetings.</p> <p>The Digital Governance and Safety Committee resolved to: NOTE the Research & Innovation Strategy</p>	Noted	None to note
PART 4 – CLOSING MATTERS			
4.1	<p>Any Other Urgent Business</p> <p>There was no other business to note.</p>	Noted	None to note
4.2	<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 November were noted as;</p> <ul style="list-style-type: none"> - The analysis completed on the long standing corporate risks and the difference in the target risk score to the achievable target. - The Keeping Patient Data Safe report as a starting point for further work to come - The status of WEDS moving to red - The good work if the IRLG team in the last period in dealing with the backlog in September. - 	Noted	None to note
4.3	<p>Date of next meeting</p> <p>The date of the next Digital Governance and Safety Committee meeting was confirmed to take place on 2 February 2023 at 1.00pm.</p>	Noted	None to note