

TERMS OF REFERENCE AND OPERATING AGREEMENTS

DIGITAL GOVERNANCE AND SAFETY COMMITTEE

Document Version	1
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Status	Draft
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Document author:	Chris Darling, Board Secretary
Approved by	Rowan Gardner, Chair of Committee
Date approved:	2 February 2023
Review date:	February 2024

STRATEGIC OBJECTIVE	Delivering High Quality Digital Services
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WELL-BEING OF FUTURE GENERATIONS ACT	A healthier Wales
If more than one standard applies, please list below:	

DHCW QUALITY STANDARDS	ISO 9001
If more than one standard applies, please list below: ISO 20000-1:2011 ISO 27001:2013 BS 10008:2014	

HEALTH CARE STANDARD	Effective Care
If more than one standard applies, please list below: Governance Leadership and Accountability	

EQUALITY IMPACT ASSESSMENT STATEMENT	Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: No Impact
Statement: Not applicable	

APPROVAL/SCRUTINY ROUTE: Person/Committee/Group who have received or considered this		
COMMITTEE OR GROUP	DATE	OUTCOME
Digital Governance and Safety Committee	12 th May 2021	Approved
Digital Health and Care Wales SHA Board	27 th May 2021	Approved
Digital Governance and Safety Committee	18 th February 2022	Approved

IMPACT ASSESSMENT	
QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below
	Clear guidelines about assurance requirements on behalf of the board has a positive impact on the Organisation. The successful maintenance our Organisational accreditations ensures a consolidated approach to standards and quality which will be monitored by the Committees of the Board.
LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below
	Should the Organisation not follow the systems and processes in place to manage the areas within these Terms of Reference there could be potential legal ramifications.
FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below
	Should the Organisation not follow the systems and processes in place to manage the areas within these Terms of Reference there could be potential financial ramifications.
WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
SOCIO ECONOMIC IMPLICATION/IMPACT	No. there are no specific socio-economic implications related to the activity outlined in this report

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DOCUMENT LOCATION

Type	Location
Electronic	Integrated Management System / iPassport

1 DOCUMENT HISTORY

1.1 REVISION HISTORY

Date	Version	Author	Revision Summary
01.12.20	D0.1	Sophie Fuller	Initial Draft
24.03.21	D0.2	Sophie Fuller	Re-draft
10.04.21	D0.3	Sophie Fuller	Re-draft
18.02.22	D.04	Chris Darling	Revised draft
30.11.2022	D.05 4	Laura Tolley	Draft updated for annual review
<u>September 2023</u>	<u>D.06</u>	<u>Laura Tolley</u>	<u>Updated reflecting new governance arrangements and increased membership</u>

1.2 REVIEWERS


This document requires the following reviews:


Date	Version	Name	Position
19.04.21	D0.3	Rhidian Hurle	Medical Director
29.04.21	D0.3	Sian Doyle	Chair of Digital Governance and Safety Committee
18.02.22	D.04	Chris Darling	Board Secretary
18.02.22	D.04	Rowan Gardner	Chair of Digital Governance and Safety Committee
November 2022	D.05	Chris Darling	Board Secretary
<u>September 2023</u>	<u>D.06</u>	<u>Chris Darling</u>	<u>Board Secretary</u>

1.3 AUTHORISATION

Signing of this document indicates acceptance of its contents.

Author's Name:	Chris Darling
Role:	Board Secretary

Signature:	 <hr style="width: 30%; margin: 0 auto;"/> Author
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Approver's Name:	Rowan Gardner
Role:	Chair of Digital Governance and Safety Committee
Signature:	 <hr style="width: 30%; margin: 0 auto;"/> Approver Chair of Digital Governance and Safety Commit...

1.4 DOCUMENT LOCATION

Type	Location
Electronic	Integrated Management System / iPassport

2 INTRODUCTION

In line with Schedule 3 of the Standing Orders, the Board shall nominate annually a committee which covers oversight and scrutiny of quality, safety, information governance, data quality, security and risk. The remit of this Committee will be extended to include Organisational Learning in digital relation to health and care and will be known as the Digital Governance and Safety Committee.

The detailed terms of reference and operating arrangements set by the Board in respect of this Committee are detailed below.

These terms of reference and operating arrangements are to be read alongside the standard terms of reference and operating arrangements applicable to all committees which can be found in the Standing Orders.

The Board Secretary will ensure that all papers are distributed at least one calendar week in advance of the meeting and will determine the secretarial and support arrangements for the Committee.

These Terms of Reference adopted by the Digital Governance and Safety Committee at its first meeting, shall be subject to review at least on an annual basis.

3 PURPOSE OF THE COMMITTEE

The purpose of the Digital Governance and Safety Committee (“the Committee”) is to advise and assure the Board in discharging its responsibilities with regard to the quality and integrity; safety, security and appropriate use of information and data to support health and care delivery and service improvement and the provision of high quality digital health and care.

The Committee will seek assurance on behalf of the Board in relation to DHCW’s arrangements for appropriate and effective management and protection of information (including patient and personal information) in line with legislative and regulatory responsibilities.

The Committee will, in respect of its provision of advice and assurance:

- Assure the Board and the Chief Executive (who is the Accountable Officer) on whether effective arrangements are in place to discharge its responsibilities, with specific reference to;
 - Cyber Security
 - Information Governance
 - Informatics Assurance
 - Information Services
 - Health and Care standards relevant to the remit of the Committee
 - Incident Review and Organisational Learning
 - ~~Major national digital programmes and projects~~
 - Research and Innovation
- Advise, where appropriate, the Board and the Chief Executive on where, and how, its systems and assurance framework may be strengthened and developed further
- Approve on behalf of the Board policies, procedures and other written control documents
- Provide scrutiny and assurance on behalf of the board for the relevant standards and regulations within the remit of the list set out above in relation to quality and compliance.

4 OBJECTIVES OF THE GROUP AND DELEGATED POWERS

The Committee is an independent member committee of the Board and has no executive powers, other than those specifically delegated in these Terms of Reference.

The Digital Governance and Safety Committee has a key role in assisting the Special Health Authority Board to fulfil its oversight responsibilities.

The Committee will, in respect of its provision of advice and assurance:

- within the remit of the Committee consider implications arising from the development of the Special Health Authorities’ corporate strategies and plans or those of its stakeholders and partners
- within the remit of the Committee consider the implications for the Special Health Authority of internal and external reviews and reports
- review risks from the Organisational Risk Register that are assigned to the Committee by the Board and advise the Board on the appropriateness of the scoring and mitigating actions in place.
- complete an annual self-assessment exercise in respect of the effectiveness of the Committee
- Oversee the development of DHCW’s strategies and plans for maintaining the trust of patients and

public though arrangements for handling and using information, including personal information, safely and securely and any requirements and standards for DHCW and NHS bodies in Wales

- Oversee the development of the DHCW's strategies and plan for the safety and security of the application and infrastructure network
- Oversee new requirements from the market/externally and potential policy that could potentially impact the future work program of DHCW and provide guidance
- To achieve this, the Committee's programme of work will be designed to ensure that:
 - there is a clear, consistent strategic direction, strong leadership and transparent lines of accountability.
 - there is a citizen centred approach, striking an appropriate balance between openness and confidentiality in the management and use of information and technology.
 - there is effective collaboration with partner organisations and other stakeholders in relation to the sharing of information in a controlled manner, to provide the best possible outcomes for its citizens (in accordance with the Wales Accord for the Sharing of Personal Information (WASPI) and Caldicott requirements)
 - the Special Health Authority is meeting its responsibilities with regard to the UK General Data Protection Regulation, the Freedom of Information Act, Caldicott, Information Security, Records Management, Information Sharing, national Information Governance policies and the Information Commissioner's Office guidance.
 - the Special Health Authority is safeguarding its information, technology and networks through monitoring compliance with the Security of Network and Information Systems regulations and relevant standards
 - all reasonable steps are taken to prevent, detect and rectify irregularities or deficiencies in the safety, security and use of information, undertake appropriate levels of vulnerability testing on the NHS Wales network of applications and infrastructure, providing guidance risk assessments outlining corrective actions for implementations to reduce the risk to an acceptable level.
 - incidents are reviewed, and corrective actions are implemented in a timely manner to reduce risk of repetition. Where needed review cause, and review process, to ensure continuous improvement and safeguard for future occurrences.

The Committee will review and approve related policies for all of the above standards and management systems.

5 ACCESS

The Chair of the Digital Governance and Safety Committee shall have reasonable access to Executive Directors and other relevant senior staff.

6 MEETINGS

Meetings shall be held no less than four times a year, and otherwise as the Chair of the Committee deems necessary.

The Committee will arrange meetings to fit in with key statutory requirements during the year consistent with the DHCW's annual plan of Board Business.

6.1 Withdrawal of individuals in attendance

The Committee may ask any or all of those who normally attend but who are not members to withdraw to facilitate open and frank discussion of particular matters.

6.2 Circulation of Papers

The Board Secretary will ensure that all papers are distributed at least 5 working days 7 calendar days in advance of the meeting.

7 MEMBERSHIP, ATTENDEES AND QUORUM

7.1 Members

The Committee shall be appointed by the Board from amongst the Non-Officer Members of the Health Authority and shall consist of not less than 3 members, comprising:

Chair: Independent Member

Members: Independent Member x ~~3~~2

The Special Health Authority Chair shall appoint the Chair of the Committee.

Usual expected attendees:

Executive Medical Director (Caldicott Guardian)

Executive Director of Operations

Associate Director of Information, Intelligence and Research

Board Secretary

Associate Director for Information Governance and Patient Safety

Director of ICT

7.2 By Invitation

Other Directors / Special Health Authority Officers may be invited to attend when the Committee is discussing areas of risk or operation that are the responsibility of that Director

The Committee may also co-opt additional independent external members from outside the organisation to provide specialist skills, knowledge and experience.

7.3 Appointments

The membership of the Committee shall be determined by the Board, based on the recommendation of the DHCW Chair – taking account of the balance of skills and expertise necessary to deliver the Committee’s remit and subject to any specific requirements or directions made by the Welsh Government.

The Board shall ensure succession planning arrangements are in place.

7.4 Quorum

A quorum shall be two Independent Members one of whom must be the Chair or in the absence of the Chair, the Vice Chair or an Independent Member who will be nominated to Chair the Committee. In the interests of effective governance, it is expected that at least one Director listed above will also be in attendance.

8 GOVERNANCE

8.1 Relationships and accountabilities with the Board and it’s Committee/Groups

The Digital Governance and Safety Committee must have an effective relationship with other committees or sub-committees of the Board so that it can understand the systems in place governing standards of safety, security and use of data. It is very important that the Digital Governance and Safety Committee remains aware of its distinct role and does not seek to perform the role of other committees.

The Committee will arrange meetings to fit in with key statutory requirements during the year consistent with the DHCW’s annual plan of Board Business.

8.2 Reporting and Assurance Arrangements

The Committee shall provide a written, annual report to the Board and the Chief Executive on its work in support of the Annual Governance Statement specifically commenting on:

- The adequacy of the processes in place governing security, safety and the use of data across the organisation
- The extent to which the Digital Governance and Safety standards are comprehensively embedded throughout the organisation
- The appropriateness of self-assessment and assurance activity against relevant standards.

The report will record the results of the committee’s self-assessment and evaluation.

The Committee will also ensure appropriate escalation arrangements are in place to alert the DHCW Chair, Chief Executive or Chairs of other relevant committees of any urgent/critical matters that may affect the operation and/or reputation of the SHA.

The Committee will review DHCW’s compliance with the Quality Standards that fall under it’s remit.

8.3 Secretariat

The secretariat function will be provided by the Corporate Governance team in DHCW.

8.4 Applicability of standing orders to Committee Business

The requirements for the conduct of business as set out in the Special Health Authority's Standing Orders are equally applicable to the operation of the Committee.

9 REFERENCES

DOCUMENTS – Can be found in the Integrated Management System / iPassport
Welsh Informatics Assurance Group Terms of Reference
Welsh Information Standards Board Terms of Reference
Wales Information Governance Board Terms of Reference
Notifiable Events Assurance Group Terms of Reference
Incident Review and Learning Group Terms of Reference
Information Services Assurance Group Terms of Reference
Welsh Reference Data Assurance Group Terms of Reference
Health and Care Standards Group Terms of Reference
Applications Architecture Assurance Group (AAAG) Terms of Reference
Infrastructure Management Board Terms of Reference
Incident Review and Learning Group Terms of Reference

10 DEFINITIONS

TERM	DEFINITION
DHCW	Digital Health and Care Wales
SHA	Special Health Authority