

CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD

**UNCONFIRMED MINUTES OF THE MEETING OF THE
DIGITAL & DATA COMMITTEE
HELD ON 12 JULY 2021
VIRTUALLY VIA TEAMS**

PRESENT:

Ian Wells	Independent Member (Committee Chair)
Jayne Sadgrove	Independent Member
James Hehir	Independent Member
Dilys Jouvenat	Independent Member

IN ATTENDANCE:

Kelechi Nnoaham	Director of Public Health/Caldicott Guardian
Georgina Galletly	Director of Corporate Governance/ Board Secretary
Andrew Nelson	Chief Information Officer / Senior Information Risk Owner
Rob Bleasdale	Chief Clinical Information Officer/ Consultant Cardiologist
John Ashford-Clark	4Cs Consulting (in-part)
Lee Rose	4Cs Consulting (in-part)
Paul Chilcott	Head of Server Management
Wendy Penrhyn-Jones	Head of Corporate Governance & Board Business
Kathrine Davies	Corporate Governance Manager

07/21/01 WELCOME & INTRODUCTIONS

Ian Wells welcomed everyone to the meeting. In particular, various colleagues who were attending for the first time.

07/21/02 APOLOGIES FOR ABSENCE

Apologies were **RECEIVED** from Christian Smith, Lead Informatics Nursing Specialist; Helen Thomas, Chief Executive, Digital Health & Care Wales; Karen Winder, Interim Assistant Director of Information Communication & Technology and Claire Northwell-Todd, Information Governance Manager/Data Protection Officer.

07/21/03 DECLARATIONS OF INTERESTS

There were none.

07/21/04 CONSENT AGENDA

No questions were received prior to the meeting.

07/21/05 ITEMS FOR APPROVAL

07/21/06 Minutes of the meeting held on 11 March 2021
The above minutes were **CONFIRMED** as an accurate record.

07/21/07 Minutes of the In-Committee meeting held on 11 March 2021
The above minutes were **CONFIRMED** as an accurate record.

07/21/08 Action Log
The action log was **RECEIVED**.

07/21/09 Draft Committee Annual Report 2020/21
The Committee Annual Report 2020-21 was **RECEIVED** and **APPROVED**.

07/21/10 Committee Self-Assessment Feedback & Action Plan 2020/21
The Committee Self-Assessment Feedback & Action Plan was **RECEIVED** and **APPROVED**.

07/21/11 Annual Review of Committee Terms of Reference
The Committee Terms of Reference was **RECEIVED** and **NOTED**.

07/21/12 Policy Approval

07/21/13 Records Management Policy & Procedure
The Records Management Policy and Procedure was **RECEIVED** and **APPROVED**.

07/21/14 MAIN AGENDA
The Chair advised the committee that agenda item 3.3 would be undertaken first enabling guest presenter Jon Ashford-Clarke to leave the meeting upon completion.

07/21/15 Presentation: Digital Infrastructure Review
Andrew Nelson introduced the item that was presented by Jon Ashford-Clark and L. Rose from 4C's Consulting who provided an update to the Committee on the findings from the Phase 1 of the IT Infrastructure Review.

Agenda Item 2.1.1

The Chair queried whether a detailed written report would be provided to the Committee and asked if the key risks highlighted in red were to be escalated onto the Risk Register. J. Ashford Clark advised that there had been no requirement at this stage to provide a detailed written report, however, he confirmed that they would be happy to provide one if so required. J. Ashford-Clark advised that with regard to the risks identified, the focus on Phase 1 had been to identify the risks and issues for consideration.

J. Sadgrove sought clarity as to whether the scope of the infrastructure included primary care community services such as district nurses, pharmacies, GP Practices as these were integral to the delivery of its strategic objectives. J. Ashford-Clark confirmed that the next phase of this work would be focussing on the community sites as well as the acute sites.

A. Nelson advised the Committee that GP Practices were fully supported by Digital Health & Care Wales (DHCW) and that their systems were refreshed every few years. In terms of Optometry, Members **NOTED** work was ongoing offering support in terms of connection to the NHS Wales network, however the primary focus was on ensuring that staff had the necessary infrastructure and connectivity to support their work.

The Chair thanked J. Ashford-Clark for the presentation. J. Ashford-Clark and his colleague L. Rose then left the meeting.

Resolution: The presentation was **NOTED**.

07/21/16 Matters Arising
There were none.

07/21/17 Organisational Risk Register
The Risk Register was **RECEIVED**.

G. Galletly presented the report and advised the Committee that the Risk Register which was due to be presented to the Board in July 2021. Members **NOTED** entries had been refreshed following a robust review process which was continuing.

Members **NOTED** that three new risks had been added, four risks had decreased and one had been closed and that an awareness session on Cyber Security was planned for Board Members in August 2021.

The Chair referenced risks 4564 and 4306 which were noted as de-escalated in terms of their status. I. Wells stated that the narrative suggested these issues had not yet been resolved and

Agenda Item 2.1.1

sought clarity as to the position. A. Nelson advised that the risk in relation to the holding of medical records had been downgraded because security arrangements had been increased to address a theoretical risk. In relation to the risk relating to cyber security A. Nelson stated that this would be further discussed under the in-committee agenda due to the sensitive nature of the topic.

Resolution: The Committee **NOTED** the report

07/21/18 Clinical Coding Improvement & Transformation Plan

Members **RECEIVED** the report.

A Nelson provided the Committee on an update as to the delivery of improvements around coding services.

The Chair asked for an update on the maternity system that was outlined on page three of the report. A. Nelson advised that there are inconsistencies between the paper record and the digital record, which manifest as a consequence of the maternity team following processes whereby the clinical record is recorded in four different places, as opposed to the information being captured once and made available from this primary record. Members **NOTED** that consideration was being given to the support required to address this which included a possible business case for the system to be upgraded as part of national programme of work.

A. Nelson advised the Committee that another potential new risk had emerged in terms of hybrid working due to the increase in digital service users following the pandemic. This issue would be further discussed later in the agenda as part of the Digital Programme Assurance Report.

In response to a question from the Chair, A. Nelson stated the Maternity Information System had recently been added to the Organisational Risk Register following discussion of the issues at the Digital Programme Board held the previous week.

In response to a point raised by J. Hehir around the information sharing with 3M, A. Nelson advised that a Data Privacy Impact Assessment had been completed and that there were no issues as the contract applied across Wales and was purely to support clinical coding.

J. Sadgrove advised the Committee that she had met with the Director of Nursing with regard to the issue of recording of placements in maternity and was advised that this was on the

agenda for the next Maternity Improvement Board which reported to the Quality and Safety Committee.

Resolution: The Committee **NOTED** the report

7/21/19 All-Wales Information Governance Toolkit Outcome Report

Members **RECEIVED** the report presented by G. Galletly providing the Committee with an update on the implementation and outcome of the Information Governance Toolkit self-assessment.

The Chair sought clarity as to the outcome of the self-assessment. G. Galletly confirmed that this had been positive with significant evidence having been submitted which included data on training.

J. Sadgrove referenced guidance in Appendix B and the scoring matrix which set out than an organisation would need to achieve 100 percent across all assessments to be considered as having achieved "Foundation Stage". CTMUHB had not achieved this. A. Nelson advised that he understood no Health Board had achieved the Privacy and Electronics Communications Regulations (PECR) requirements and that an all-Wales approach was subsequently being agreed to address this.

J. Sadgrove queried community and mental health services as areas where there was no score and also the system validation processes being in place for identification and checks, asking if there were plans to address those. G. Galletly advised that the areas for improvement were currently being worked through and suggested an update be provided at the next meeting.

Resolution: The Committee **NOTED** the report

Action: To provide a further update to the next meeting on the actions to mitigate the gaps identified by the Information Governance Toolkit Self-Assessment

07/21/20 ASSURANCE REPORTS

07/21/21 Digital Programme Assurance Report
The above report was **RECEIVED**.

A. Nelson presented the report.

Members were advised that the team was continuing to progress the recommendations made in the Channel 3 review of the

Agenda Item 2.1.1

Digital Target Operating Model. As the review had concluded in February 2020, immediately prior to Covid-19, it was agreed that A. Nelson would arrange for the review to be made available to members.

With regard to system alerts, R. Bleasdale confirmed that whilst there had been a backlog of 56,000 alerts and notifications which had not been acknowledged by the clinicians, and which had caused a significant deterioration in the performance of the Welsh Clinical Portal, a review of the access log had suggested that the results were being accessed, just not acknowledged.

The Chair thanked the team for the report and in particular, the citizen-facing services set out in paragraph 2.7 which was commended.

Resolution: The Committee **NOTED** the report

Action: Circulate the review of the Target Operating Model to members.

07/21/22 Information Governance Activity Highlight Report

Members **RECEIVED** the Highlight Reports of the Information Governance Group meetings that were held in April and June 2021.

Members **NOTED** the response rate relating to Freedom of Information data sharing had expedientially increased and **NOTED** the emerging risks associated with this had been escalated on the Risk Register.

Resolution: The Committee **NOTED** the report

07/21/23 AUDIT / OTHER REPORTS

07/21/24 Internal Audit Report – IT Service Management

Members **RECEIVED** the report that had been referred to the Committee from the Audit and Risk Committee.

A. Nelson advised that the report had been received at the previous meeting of the Committee in March 2021 and offered an oral update as to continuing progress in delivering actions to address the recommendation made in the report.

Resolution: The Committee **NOTED** the report.

07/21/25 Internal Audit Baseline Report – IT Assessment – Management Action Update Report

Agenda Item 2.1.1

Members **RECEIVED** the report that had previously been referred from Audit & Risk Committee to the Digital & Data Committee to seek assurances as to the robustness of the management response and delivery of actions to address the recommendations made in the report.

A. Nelson provided an update on the baseline review and progress being made.

In response to a request for clarity from K. Nnoaham, A. Nelson advised that the report made recommendations that the skills of both digital professionals and non-digital staff needed to be developed. This was accepted.

Resolution: The Committee **NOTED** the report

07/21/26 Internal Audit Report – Digital Response to Covid-19 Pandemic

Members **RECEIVED** the report that was presented by A. Nelson and provided the Committee on the outcome of the Internal Audit report in relation to the CTMUHB Digital Response to Covid-19. Members **NOTED** this had received a reasonable assurance rating.

R. Bleasdale extended his thanks to the ICT team in the organisation on how quickly the team had provided staff in the clinical community with the equipment and tools required to work from home.

The Chair asked that these thanks be formally recorded from the Committee.

Resolution: The Committee **NOTED** the report

07/21/27 OTHER ITEMS

07/21/28 Future Work Programme

The Chair invited members to relay any suggested future topics to himself or to Kathrine Davies, Committee Secretariat.

07/21/29 Committee Highlight Report to Board

The Chair suggested that this be completed by the Governance Team outside of this meeting and shared with Lead Directors and the Chair for approval prior to its presentation at the next Health Board meeting.

07/21/30 ANY OTHER BUSINESS

There was none.

07/21/31 DATE OF NEXT MEETING

This was due to take place on 14th October 2021.

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