

CWM TAF MORGANNWG UNIVERSITY HEALTH BOARD

**UNCONFIRMED MINUTES OF THE MEETING OF THE
DIGITAL & DATA COMMITTEE
HELD ON 28 SEPTEMBER 2022
VIRTUALLY VIA TEAMS**

PRESENT:

Ian Wells	Independent Member (Committee Chair)
Jayne Sadgrove	Vice Chair/Independent Member
Dilys Jouvenat	Independent Member

IN ATTENDANCE:

Emrys Elias	Health Board Chair/Independent Member (in part)
Kelechi Nnoaham	Executive Director of Public Health (Caldicott Guardian)
Stuart Morris	Director of Digital/Senior Information Risk Owner (SIRO)
Andrew Nelson	Chief Information Officer/Data Protection Officer
Cally Hamblyn	Assistant Director of Corporate Governance & Risk
Karen Winder	Assistant Director of ICT
Robert Bleasdale	Chief Clinical Information Officer
Paul Chilcott	Head of Cyber
Christian Smith	Specialist
Chris Ball	Head of IT Infrastructure
Lisa Cartwright	Clinical Coding Manager (in part)
Keiron O'Shea	Advanced Systems Analyst
Kathrine Davies	Information Systems (in part)
	Corporate Governance Manager (Secretariat)

09/22/01 1.1 WELCOME & INTRODUCTIONS

Ian Wells welcomed everyone to the meeting including Emrys Elias, Health Board Chair who was observing the Committee on this occasion and Lisa Cartwright and Keiron O'Shea, from the Clinical Coding Team for agenda item 5.3.

09/22/02 1.2 APOLOGIES FOR ABSENCE

Apologies were **RECEIVED** from Lynda Thomas, Independent Member.

09/22/03 1.3 DECLARATIONS OF INTERESTS

No declarations of interest were received.

09/22/04 2.0 CONSENT AGENDA
No questions were received prior to the meeting in relation to the consent agenda.

09/22/05 2.1 ITEMS FOR APPROVAL

09/22/06 2.1.1 Minutes of the meeting held on 22 June 2022
The above minutes were **CONFIRMED** as an accurate record.

09/22/07 2.1.2 Minutes of the In-Committee meeting held on 22 June 2022
The above minutes were **CONFIRMED** as an accurate record.

09/22/08 2.1.3 Committee Annual Report 2021-22
The Annual Report 2021-22 was **APPROVED**.

09/22/09 2.1.4 Amendment to the Standing Orders – Revised Terms of Reference
The Terms of Reference were **APPROVED**.

09/22/10 2.1.5 Freedom of Information Policy
The Policy was **APPROVED**.

09/22/11 2.1.6 Live Streaming and Recording Policy
The Policy was **APPROVED**.

2.2 ITEMS FOR NOTING

09/22/12 2.2.1 Action Log
The Action Log was **NOTED**.

09/22/13 3. MAIN AGENDA

09/22/14 3.1 Matters Arising Otherwise Not Contained within the Action Log
No further matters were identified.

3.2 GOVERNANCE

09/22/15 3.2.1 Organisational Risk Register

C. Hamblyn presented the Organisational Risk Register that provided the Committee with the risks escalated to the register which are assigned to the Committee.

C Hamblyn drew attention to the potential impact to the Organisational Risk Register in the transition period to the New Care Group Model. She noted that "Guiding Principles: Quality

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Governance & Accountability during the Operating Model Transition" were agreed at the Executive Leadership Group on the 12th September 2022 where in terms of the Organisational Risk Register a Workshop approach to realign risks led by Nurse Directors was agreed.

For reference and assurance the digital risk from the Board Assurance Framework was shared with the Committee.

I Wells referred to the risks which were due to be updated by the 30th September 2022, and queried whether there was a further update available. C. Hamblyn advised that the report was produced at the end of August/early September to align with the pathway to approval via the Executive Leadership Group, hence some of the deadlines were now in need of review. Assurance was provided that every effort was still being made to ensure risk owners were aware of the need for timely review and to set appropriate and realistic review dates.

S. Morris provided further assurance by sharing the robust approach within the Digital & Data function in terms of the management and review of risks. It was noted that risks are reviewed and updated on a fortnightly basis.

I Wells referred to the Prince Charles Hospital Data Centre and queried if this was now operational, adding that the confirmation of funding from Welsh Government for the PAS system was welcome news. S. Morris advised that work continued and the system was not yet fully operational, however, it was anticipated that it would be within the next few weeks. With regard to the Wales Patient Administration System (WPAS) funding, S. Morris was pleased to advise that the Health Board had secured the full funding that had been requested and would now be going out for recruitment.

J. Sadgrove referred to risk 4699, 'Failure to deliver a robust and sustainable Information Governance function', which had been reviewed in the period with the risk score decreasing from a 20 to a 15. J Sadgrove expressed concerns on the sustainability of realigning Clinical Coding staff as a rationale for reducing the score, if the Health Board still needed to recruit suitably qualified Information Governance professionals. In response, A. Nelson advised that the Health Board had been out to advert for the Head of Information Governance position, however, that had been unsuccessful and the use of agency support was now being explored in terms of seeking a short term solution. A Nelson assured the Committee that the realignment of the Clinical Coding staff were in line with the skills that they could bring to support the Information Governance function.

S. Morris provided further assurance to the Committee in terms of the discipline followed by the function to ensure that existing processes and systems were maintained to continue to deliver a safe and effective Information Governance service. He also reiterated that all short and long term opportunities were being explored in terms of future sustainability and capacity.

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

09/22/16 3.3 Digital Risks

A Nelson presented the report that outlined the Digital Risks and the actions taken to mitigate them.

I Wells drew attention to the statement that 50% of medical records were being misfiled and expressed concern on the resulting impact this has on staff capacity and the transition to a digitised record. He also queried how lessons learned are being shared and any training available to staff. In response, S. Morris, recognised the delays around the preparation of the paper record and the quality that it was returned to the Medical Records Team. Assurance was provided that there was improvement activity underway to address the areas of concern and the need to recognise digital competency as a requirement for roles going forward.

R. Bleasdale commented that following a decision by the Health Board to reduce the number of administrative staff on wards, this in his view has led to the increase of misfiling, as clinical staff are now required to undertake their own filing whilst in busy clinical environments. He expressed concerns that these incidents of misfiling could translate directly to digital meta-tagging and filing if mitigation was not implemented. R Bleasdale concluded that this risk was recognised and mitigating actions were being considered.

S. Morris reflected that further work to support and strengthen the design of new and existing National systems was also needed to ensure that they are more user friendly.

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

09/22/17 3.4 Information Commissioner's Office (ICO) Audit Feedback and Information Governance Improvement Plan

S. Morris presented the report updating the Committee on the work carried out by the Health Board on improving the controls in place to mitigate any risk of non-compliance with information standards and the progress to date in taking forward the

recommendations the ICO made to the Health Board in January 2022.

The Committee noted that there would be a further informal follow up meeting with the ICO at the end of December 2022 with a view to sign off completed recommendations by the end of March 2023. S Morris reflected that the recent engagement with the ICO had been supportive and thanked the Information Governance team for their support in compiling the evidence submission whilst recognising the challenges in terms of existing capacity.

Resolution: The Committee **NOTED** the progress made in delivering the Information Governance Improvement Plan and the outcomes of the ICO's recent follow up meeting.

09/22/18 3.5 Update on progress made in taking forward recommendations made by NHS Wales Internal Audit and Audit Wales

A Nelson presented the report that provided the Committee with an update on the progress being made against outstanding recommendations from previous Internal and External Audit reviews. A Nelson expressed concerns that some of the original recommendations might no longer be applicable or align with the Digital Strategy resulting in recommendations remaining open for a significant period of time.

In response, C Hamblyn provided assurance that there was a workshop session scheduled for October 2022, with Internal and External Audit Colleagues and Executive Leads, to work through all remaining recommendations to ensure that they remain fit for purpose. This session would provide S Morris with the opportunity to suggest realignment and closure of any recommendations where appropriate in collaboration with Audit colleagues.

I Wells referred to the update in relation to the Data Quality recommendation referenced as 0.1 in the report, and queried the statement that the Health Board were unable to undertake any further work until the Jayex (patient self check in) system was procured. In response, K. Winder advised that the Health Board were exploring the installation of a new system as the support for Jayex system would expire (Summer 2023). It was further noted that the Jayex system currently takes off the two separate WPAS systems at the moment and they would be looking to consolidate the new system.

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Resolution: The Committee **NOTED** the present status of the recommendations and **APPROVED** the proposed course of action whereby the management team would seek to review the objectives and underlying rationale for the recommendations from a more tactical perspective and consider how digital processes can achieve similar outcomes to those advised and the opportunities that would arise from the joint workshop with the Executive Team and Audit colleagues.

09/22/19 3.6 Information Governance Highlight Report

C Hamblyn presented the report that provided detail on the key issues considered by the Information Governance Group at the meeting held in July 2022.

C. Hamblyn informed the Committee that the Information Governance function had now moved into the portfolio of the Director of Digital who would present this report as the new Chair of the group moving forward.

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

4. IMPROVING CARE

09/22/20 4.1 Digital Assurance Report

K Winder presented the report which provided the Committee with an update on the progress of the prioritised digital deliverables within the corporate Integrated Medium Term Plan (IMTP) across the eight strategic solutions and the challenges faced in the last quarter.

Members **NOTED** the following key highlights:

- ICT IMTP 39 programmes agreed and taken forward this year
- Welsh Nursing Care Record - Now live in Prince Charles Hospital, Royal Glamorgan Hospital, Ysbyty Cwm Rhondda and Ysbyty Cwm Cynon planning Princess of Wales Hospital in Quarter 4
- E Whiteboards – Scope expanded to include 6 goals programme requirements
- Welsh Emergency Department System (WEDS) and Welsh Community Care Information System (WCCIS) – on pause
- Hardware – Capital budget 20% of required amount impacting kit purchase
- Altnernity – Monitoring software live to help ICT proactively improve user experience
- Information team – Working with Health Board on waiting list validation and planning, improving QlikSense to provide real time dashboards
- Microsoft Enterprise Agreement (MSEA) – CTM reduced the cost by circa 1 million due to actively reviewing users and devices

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J. Sadgrove commented that she welcomed the establishment of the e-whiteboards as she had learned first hand from her visits to the acute sites what an immediate positive impact they make in being able to manage the ward.

J. Sadgrove queried the process with regard to Ophthalmology and the Open Eyes project. In response, K. Winder advised that the Health Board was going live with Glaucoma, however with other parts of the project National direction and funding arrangements are not yet confirmed.

J. Sadgrove referred to the WCCIS Implementation and in particular the implementation for Community Mental Health Services in light of the relation to Regulation 28 from the Coroner. J Sadgrove queried whether there was any progress and decisions on the way forward for the future. K. Winder, in response, advised that there were 300 plus staff working within the Health Board on WCCIS since they had gone live and would be working with mental health on how they would be taking WCCIS forward. She also noted that Aneurin Bevan University Health Board had also now gone live and the Health Board would be monitoring their progress.

In response, S Morris recognised that this was a risk which had been escalated for some time, however, from a Health Board perspective they needed to be aligned with the Local Authority and this was the current position. He added that a meeting was planned for October 2022 to work with each local authority to see how this could manifest. In the meantime the Health Board was exploring what could be maximised within some of the other systems such as the Welsh Clinical Portal in order to bridge the gap.

J. Sadgrove stressed the need for an agreed timeframe to be reached so that this could move to a transition stage and a longer term plan with the Local Authority. S. Morris advised that the Assistant Director ICT would be working with mental health colleagues over the coming months in terms of planning. S Morris agreed to provide a detailed paper on WCCIS to the next meeting.

S. Morris took the opportunity to extend his thanks and acknowledge the huge amount of work that had been undertaken by the team across the Health Board to deliver against the digital programme, in what continues to be challenging circumstances in light of capacity and resource constraints.

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Resolution: The Committee **NOTED** the report and the progress made and recognised the challenges in delivering the digital programme.

Actions: To bring an Assurance Report on WCCIS back to the next meeting.

09/22/21 4.2 Medical Records Assurance Report

S. Morris presented the report which outlined the current progress and issues regarding the Digitisation of Patient Notes Project and the current challenges faced by the Medical Records Department, including but not limited to record storage, management, and digitisation.

I Wells referred to the cost saving not being realised in the short term or even after the project had ended and queried whether the eventual outcome would result in savings. S. Morris advised that in terms of the timescale which was three years, it was originally anticipated that these would not be realised. Staff had been re-allocated and their roles had changed since that time. Longer term S Morris advised that success was dependent on how the Health Board was able to develop its digital solutions.

R. Bleasdale provided the Committee with the background to the procurement process and chosen provider and Mr Morris advised that the Programme Board had now been re-established and would be looking at this work, not only for remedial actions but, for the longer term benefit and reward.

R. Bleasdale added that it was the failure to deliver the open architecture which was presenting challenges and there was a real need to drive on the delivery of the architecture market nationally.

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

09/22/22 4.3 Digital Communication

S. Morris presented the report which provided an update on the digital engagement across the Health Board.

S. Morris outlined the key points as follows:

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- During this period the team supported the Induction of the Health Board's International Medical Graduates.
- A cyber awareness session for all staff planned for Friday 14 October 2022.
- The Strategic Digital Leadership team would design a new governance structure to complement the new CTMUHB Transformation Portfolio.
- During the autumn of 2022, a proposal would be submitted to increase the Strategic Digital Leadership team to support both the Transformation and day to day delivery activities across the Health Board.

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

5. SUSTAINING OUR FUTURE

09/22/23

5.1 ICT Major Schemes Update

K. Winder presented the report which updated the Committee on the progress of the approved ICT capital projects.

Following the presentation S Morris advised that due to the financial constraints there were significant challenges in terms of prioritisation of schemes with difficult decisions being made. S Morris also noted that this report was being received at the Executive Leadership Group on the 4th October 2022 to ensure visibility on the challenges that were being faced.

C Ball noted that the financial position in terms of allocation was challenging for the ICT Function with a number of concerns being received as service requests were not being met due to having to prioritise allocation.

I Wells queried if the leasing of software had been considered. In response A Nelson advised that this had been explored, however, it was not considered a viable option due to the revenue challenges it would present.

In concluding the item the Committee recognised the significant growth in the Digital Estate over the past couple of years and how the funding position impacted on the delivery of the digital programme if there was an inability to provide the most efficient and effective kit to meet service requirements.

Resolution: The Committee **AGREED** the adjustments described in section 4. **NOTED** the progress, status and continued work of each of the key Informatics Projects. **NOTED** The issues being identified at Princess of Wales Hospital (POW).

NOTED The request against the funding available for strategic schemes, including POW.

09/22/24 5.2 Developing the Digital Plan for Disaggregation of ICT Services from Swansea Bay UHB

K. Winder presented the report that outlined the approach and provided an update on the progression of the disaggregation of Digital Services within the Bridgend Integrated Locality Group (ILG) from Swansea Bay University Health Board, and repatriating those services to Cwm Taf Morgannwg University Health Board.

In concluding the item, the Committee commended the ICT Team on the scale of preparatory work it had undertaken in light of the funding constraints.

Resolution: The Committee **NOTED** the report and the progress made to date with the disaggregation and the recent confirmation received from Welsh Government of funding for c.£2m over the next 3 years, and **SUPPORTED** the continuation of disaggregation

09/22/25 5.3 Clinical Coding Strategy and Auto Coder Demonstration

L. Cartwright and K. O'Shea provided the Committee with an innovative demonstration on advanced clinical coding.

Following the presentation I Wells queried what the role of the Clinical Coder would be if activity currently within the role was mainstreamed. In response, R Bleasdale advised that the Clinical Coder would change to that of a curator and educator to provide an enhanced level of support to clinicians in relation to best practice in terms of data entry.

The Committee welcomed the presentation and the impressive progress being made and requested a further update in future to learn more on its implementation.

A Nelson expressed thanks to L Cartwright noting that she has been instrumental in creating and enabling an environment to implement the Auto Coder and for the Health Board to be in a position to use the system to submit year end data going forward.

Resolution: The Committee **NOTED** the presentation and demonstration.

6. OTHER MATTERS

09/22/26

6.1 Committee Highlight Report to Board

I Wells suggested that this be completed by Corporate Governance Function outside of this meeting and shared with the Executive Leads and himself for agreement prior to its presentation at the next Health Board meeting.

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6.2 Forward Work Plan

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

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6.3 ANY OTHER BUSINESS

No further areas of business were identified.

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6.4 HOW DID WE DO TODAY?

I Wells asked Committee Members and Attendees to provide feedback on the evaluation of the meeting to the Corporate Governance Team or directly to him as Chair of the Committee.

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DATE AND TIME OF NEXT MEETING

The next meeting is scheduled for the 19th December 2022 at 2:00 pm.

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