



AGENDA ITEM

3.2.6

DIGITAL AND DATA COMMITTEE

ICO DATA PROTECTION AUDIT 2022 – REPORT AND ACTION PLAN

Date of meeting	23/03/2022
FOI Status	Open/Public
If closed please indicate reason	Not Applicable - Public Report
Prepared by	Claire Northwell Head of Information Governance
Presented by	Georgina Galletly Director of Corporate Governance
Approving Executive Sponsor	Georgina Galletly Director of Corporate Governance
Report purpose	FOR DISCUSSION / REVIEW

Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)

Committee/Group/Individuals	Date	Outcome
Executive Leads / SIRO / Caldicott Guardian	Via Email February 2022	SUPPORTED
Information Governance Group	08/03/2022	NOTED

ACRONYMS

ICO	Information Commissioner's Office
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1. SITUATION/BACKGROUND

- 1.1 The ICO Audit took place remotely in January 2022 with evidence gathering taking place from November 2021. The purpose of the audit was to provide the Information Commissioner and the Health Board with an independent assurance of the extent to which the Health Board, within the scope of this agreed audit, is complying with data protection legislation. The scope of the audit was 'Governance and Accountability' and 'Data Sharing'.
- 1.2 The outcome of the audit was that the Health Board was given a 'Reasonable assurance' rating and the recommendations were made in the scope areas as below:
 - Governance and Accountability has 1 urgent, 9 high, 10 medium and 1 low priority recommendations
 - Data Sharing has 9 high and 5 medium priority recommendations.
- 1.3 The full details of the recommendations can be found in **Appendices 1 and 2.**

2. SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)

- 2.1 The Health Board has the opportunity to consider in its response whether it accepted, partially accepted, or rejected the recommendations. The outcome of which is detailed in the ICO Action Plan at **Appendix 2.**
- 2.2 The Health Board returned the management response to the recommendations on the 2 March 2022.

3. KEY RISKS/MATTERS FOR ESCALATION TO BOARD/COMMITTEE

- 3.1 The risks identified within the recommendations around the current capacity within the Information Governance Function has already been escalated to the Organisational Risk Register under Datix Risk ID 4699.
- 3.2 Once the report is finalised any further challenges and risks that might require escalation will be submitted to the IG Group and the Digital & Data Committee as appropriate.



4. IMPACT ASSESSMENT

Quality/Safety/Patient Experience implications	There are no specific quality and safety implications related to the activity outlined in this report.
Related Health and Care standard(s)	Governance, Leadership and Accountability If more than one Healthcare Standard applies please list below:
Equality Impact Assessment (EIA) completed - Please note EIAs are required for <u>all</u> new, changed or withdrawn policies and services.	No (Include further detail below) If yes, please provide a hyperlink to the location of the completed EIA or who it would be available from in the box below. If no, please provide reasons why an EIA was not considered to be required in the box below.
Legal implications / impact	There are no specific legal implications related to the activity outlined in this report.
Resource (Capital/Revenue £/Workforce) implications / Impact	There is no direct impact on resources as a result of the activity outlined in this report.
Link to Strategic Goals	Improving Care

5. RECOMMENDATION

- 5.1 The **COMMITTEE** is asked to **NOTE** the content of audit report and action plan.