



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



		Agenda Item	9.1
Freedom of Information Status		Open	
Reporting Committee	Information Governance Group (IGG)		
Author	Becs Wadley, Data Protection Officer		
Chaired by	Matt John, Director of Digital, SIRO		
Lead Executive Director (s)	Matt John, Director of Digital, SIRO		
Date of last meeting	24 March 2022		
Summary of key matters considered by the committee and any related decisions made.			
<p>Cybersecurity – The first NIS Assessment has been completed, and an assurance score of 83% has been achieved – an Improvement Plan is being produced in response. Internet Explorer will become end-of-life in June 2022, and the Edge browser has been made the default browser in preparation. Digital Services are collecting lists of services with a dependency on Internet Explorer to ensure options can be considered going forward.</p> <p>Mandatory IG Training Compliance – Training compliance reported to Mar 2022 IGG remains at 77% (details available in Appendix A). There is a requirement for compliance to be at 95%; work continues to further improve staff compliance figures. The issue has been escalated to the Executive Team for their support in achieving the 95% target.</p> <p>Welsh IG Toolkit – Submission of the all-Wales organisational IG self-assessment has taken place, and early indicators show there is an improvement on last year’s assessment due to more evidence being available in this financial year to enable improved scoring. DHCW will assess the evidence and their findings will be reported back to IGG when available</p> <p>Data Quality – A detailed Data Quality report was received, and in the next period there will be a focus on SBU’s key systems, resulting in a robust action plan, with an in-depth discussion to be held at the next IGG</p>			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none">• Organisational Cyber Issues/Risks – In response to the war in Ukraine, SBU has increased the Cyber Risk Score to 25 to reflect the increased global threat, and to reflect SBU’s use of Kaspersky Security Software. A tactical Command and Control Group has been established to manage and reduce the risk, initially working to replace Kaspersky with Microsoft Defender and Trend Micro Security Software, as quickly and safely as possible.• Organisational IG Issues/Risks – There has been a marked increase in the volume of complex Subject Access Requests (SARs) in the last 18 months. A number of these requests have also been extremely complicated to respond to. These two factors have resulted in a capacity/resource issue for a number of teams managing the SARs across the Health Board. All possible mitigating actions have been taken. A Task and Finish Group, chaired by the Data Protection Officer, is exploring the work required to improve the SAR situation across SB, but has been substantially delayed due to staff sickness. This is being held on the local Risk Register and is to be considered for escalation to the Health Board Risk Register• Data Protection Impact Assessments (DPIAs) – In the last 2 years there has been a 312% increase in the number of DPIAs being completed across SBU. This has resulted in the IG			

<p>Team being unable to adequately support this demand – 36% of DPIAs received were adequately supported in the last 3 months. Resource needs are being considered, and a new DPIA process is being piloted for the next 6 months. The situation is being closely managed and monitored by the Data Protection Officer and the SIRO.</p> <ul style="list-style-type: none"> • IG Team Capacity – Since GDPR the operational demands for IG support continues to increase exponentially (this includes the IG elements of the SAR and DPIA activities outlined previously). Whilst the IG staff complement has increased, it is still unable to adequately meet demand. All demands are prioritised on a risk basis, and all mitigating actions identified, taken, and regularly reviewed. The situation is closely monitored by IGG. The next step is for Board to assess their risk appetite for robust data protection compliance • IG Audit – The internal IG Audit programme prioritises areas that have had ICO reportable breaches, or several non-ICO reportable breaches, and also respond to invitations to audit. In the period there was one audit scored 'red', in MH&LD at The Parade in Cardiff. Actions will be carefully monitored and a repeat audit will take place before the next IGG • IG Breaches – One breach was reported to the ICO since the last IGG in October 2021, and has since been closed with no further action as the issue was resolved (lost records found). In the last period 328 IG related incidents and near misses were confirmed on Datix. This number evidences robust identification and reporting of all levels of IG incidents, and is in line with the size of the Organisation. All breaches are followed up by IG. • IGG Lead Updates – Following Internal Audit's recommendation, reports deemed required but not received are to be highlighted within this report: No report was received from W&OD 	
Delegated action by the committee:	
No delegated action was taken by the committee at this meeting.	
Main sources of information received:	
<ul style="list-style-type: none"> - IG Update Report - Data Quality Report - IG Key Performance Indicators - Cybersecurity Report 	
Highlights from sub-groups reporting into this committee:	
No sub-group reports to note	
Matters referred to other committees	
No matters were referred to other committees at this meeting.	
Date of next meeting	16 June 2022

Appendix A

The table below shows Mandatory IG Training compliance by SDG/Corporate Department:

Area	Number of staff in area @ 01.03.2022	Compliance % as it stands on 01.03.2022	Movement from last IGG Reported Compliance %
Corporate Departments			
Board Secretary	79	66	-12
Chief Operating Officer	1116	65	3
Clinical Medical School	19	47	-33
Clinical Research Unit	37	92	-3
Delivery Unit	51	90	-2
Director of Strategy	337	60	4
Director of Transformation	24	46	-33
EMRTS	72	83	4
Finance	84	90	-3
Digital Services	346	97	4
Medical Director	26	96	22
Nurse Director	59	90	7
Workforce & OD	217	74	-13
SDGs			
Mental Health & Learning Disabilities	1562	84	2
Morrison Hospital	3630	70	-1
NPTS	3081	81	0
Primary Care and Community	2076	86	-4
TOTAL			
Overall Health Board	12816	77	0