



GIG
CYMRU
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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



		Agenda Item	6.2
Freedom of Information Status		Open	
Reporting Committee	Information Governance Group (IGG)		
Author	Becs Wadley, Data Protection Officer		
Chaired by	Pam Wenger, Director of Corporate Governance, SIRO		
Lead Executive Director (s)	Pam Wenger, Director of Corporate Governance, SIRO		
Date of last meeting	13 October 2021		
Summary of key matters considered by the committee and any related decisions made.			
<p>Cybersecurity –work is ongoing to consider how to incorporate Cyber training with national IG mandatory training and an options paper will be brought to IGG in December. WG and the Cyber Resilience Unit have assessed SBU against the Network and Information Systems Regulation (NIS) and their report and subsequent gap analysis will be brought to the Dec IGG</p> <p>Mandatory IG Training Compliance – Training compliance reported to Oct IGG remains at 78% (details available in Appendix A). There is a requirement for compliance to be at 95%; work continues to further improve staff compliance figures. The SIRO/Chair/Dep Chair of IGG will write to SDGs/Corporate Depts who score in the lowest bracket for IG mandatory training compliance. Opportunities were identified by IGG for improving mandatory training compliance across all subject areas, including IG, and these will be discussed with W&OD</p>			
Key risks and issues/matters of concern of which the board needs to be made aware:			
<ul style="list-style-type: none"> • Organisational IG Issues/Risks – There has been a marked increase in the volume of complex Subject Access Requests (SARs) in the last 12 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 SBU which is expected to complete in early 2022. 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) – There has been a substantial increase in the number of DPIAs being completed across SBU, stretching the capacity to adequately support this demand. A backlog of 595 DPIA queries has been reduced to less than 200 through a series of decisions, reviews and actions, including; time since last contact, a RAG scoring exercise and devising a new level of DPIA form for Departments to self-complete without IG Support for those DPIAs identified as lower risk. The situation is being closely managed and monitored. • 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 Breaches** – Four breaches been reported to the ICO since the last IGG in June 2021, three of which have been closed with no further action beyond lessons learnt to be actioned. In the last period 159 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:

- IG Update Reports
- Health Records 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

15 December 2021

Appendix A

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

Area	Number of staff in area @ 01.09.2021	Compliance % as it stands on 01.09.2021	Movement from last IGG Reported Compliance %
Corporate Departments			
Board Secretary	72	78	0
Chief Operating Officer	1155	62	9
Clinical Medical School	20	80	4
Clinical Research Unit	38	95	5
Delivery Unit	40	92	3
Director of Strategy	318	56	2
Director of Transformation	24	79	-2
EMRTS	58	79	-7
Finance	82	93	-5
Digital Services	343	93	6
Medical Director	27	74	-22
Nurse Director	60	83	-2
Workforce & OD	171	87	5
SDGs			
Mental Health & Learning Disabilities	1557	82	-3
Morrison Hospital	3634	71	-2
NPTS	3092	81	-2
Primary Care and Community	2018	90	0
TOTAL			
Overall Health Board	12718	78	0