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Iechyd Cyhoeddus  
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Public Health  
Wales

**Name of Meeting**  
Audit and Corporate  
Governance Committee  
**Date of Meeting**  
16 March 2022  
**Agenda item:**  
9

## Public Health Wales Information Governance Performance Report Q3 2021/2022

**Executive lead:** Rhiannon Beaumont-Wood, Executive Director of Quality, Nursing and Allied Health Professionals

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**Approval/Scrutiny route:** Rhiannon Beaumont-Wood, Executive Director of Quality, Nursing and Allied Health Professionals

**Purpose**

Receive the Information Governance Performance Report

**Recommendation:**

|                                     |   |                                       |                                   |  |
|-------------------------------------|---|---------------------------------------|-----------------------------------|--|
| APPROVE<br><input type="checkbox"/> | CONSIDER<br><input checked="" type="checkbox"/> | RECOMMEND<br><input type="checkbox"/> | ADOPT<br><input type="checkbox"/> | ASSURANCE<br><input checked="" type="checkbox"/> |
|-------------------------------------|---|---------------------------------------|-----------------------------------|--|

The Audit and Corporate Governance Committee is asked to:

- **Receive assurance** that the Information Governance Management System is working effectively.

**Link to Public Health Wales [Strategic Plan](#)**

Public Health Wales has an agreed strategic plan, which has identified seven strategic priorities and well-being objectives.

This report contributes to the following:

|  |  |
|--|--|
| <b>Strategic Priority/Well-being Objective</b> | All Strategic Priorities/Well-being Objectives |
| <b>Strategic Priority/Well-being Objective</b> | Choose an item.                                |
| <b>Strategic Priority/Well-being Objective</b> | Choose an item.                                |

**Summary impact analysis**

|  |  |
|--|--|
| <b>Equality and Health Impact Assessment</b> | No Equality and Health Impact Assessment is required.  |
| <b>Risk and Assurance</b>                    | This report will provide assurance that the Information Governance Management System is operating effectively. The performance report includes the latest version of the Information Governance Risk Register.   |
| <b>Health and Care Standards</b>             | This report supports and/or takes into account the <a href="#">Health and Care Standards for NHS Wales</a> Quality Themes<br><br>Governance, Leadership and Accountability<br>Choose an item.<br>Choose an item.   |
| <b>Financial implications</b>                | This performance report outlines concerns around the performance of the Information Governance Management System, that if not addressed will lead to further breaches of data protection legislation with the risk of significant fines and sanctions from the Information Commissioner. |
| <b>People implications</b>                   | No people implications   |

## **1. Purpose / situation**

The purpose of this paper is to introduce the Information Governance Performance Report.

## **2. Background**

In order to discharge its responsibilities with regards to ensuring the security and appropriate use of personal information, together with being able to demonstrate compliance with data protection legislation, Public Health Wales maintains an Information Governance Management System. As well as being able to report that the organisation is compliant or otherwise, it is essential to be able to report on whether the system is achieving its intended purpose or not. The Information Governance Performance Report fulfils this requirement.

Information Governance is also supported by an operational level organisation wide risk register which is available on request.

## **3. Description**

The areas currently reported on are as follows:

- Freedom of Information Act compliance

This section indicates compliance or otherwise with the requirements for releasing information under the Freedom of Information Act 2000. Chart 1 shows the length of time taken to respond to each request, together with the average time and the legislative requirement. Chart 2 shows the number of requests over time including the average time to respond and the number of non-compliances with the legislative requirement.

- Data Protection Act compliance

This section reports compliance or otherwise with the requirements of the General Data Protection Regulation 2016 (GDPR), in relation to the right of access of data subjects to the information which we hold about them. This may be service users or staff. The charts provide the same information as for Freedom of Information compliance.

- Personal Data Breaches

This is a requirement under the GDPR in which we are required to risk assess all personal data breaches and under certain circumstances to report them to the Information Commissioner's Office and the data subjects involved. The chart shows the number of breaches over time, along with those requiring reporting.

- Mandatory Information Governance Training

This section reports compliance or otherwise with targets for mandatory Information Governance Training. The chart shows compliance against the NHS Wales target of 85%. Figures are shown for the previous 12 months where available to indicate overall trends in compliance.

- The Information Governance Working Group (IGWG)

This section reports on key points and any outstanding actions from the meetings.

- Assurance

Finally, the report provides an overview of any assurance reports received over the reporting period.

The report summarises performance up to the end of Quarter 3 as the most up to date complete reporting period. Quarter 4 performance data will not be complete for reporting purposes until 6 weeks after March 31<sup>st</sup> which allows for closure against that quarters reporting deadlines, ie our response times for requests received at the end of March.

#### 4. Analysis

Freedom of Information Act (FOIA) requests whilst falling back towards pre-pandemic levels, remain significantly higher than at the start of the pandemic (300% higher than Q4 2019/2020) with 95 being received during the reporting period. The requests are almost exclusively attributable to information requests in relation to the pandemic. Not only do such requests carry a considerable administrative burden but there is a significant impact on the organisation, primarily the Health Protection team who are required to search out the information and then consider the appropriate response.

The average time to respond has increased, as has the number of missed deadlines, and these numbers themselves are artificially low as there is a request still outstanding. The reduction in performance is partly due to the complexity of the requests requiring time and resource in Health Protection. To help increase compliance and provide more support, the Information Governance Team is currently engaging temporary additional resource to help manage the process more efficiently and effectively. An investment bid has been submitted to the Business Executive Team to consider, an increase in the capacity of the Information Governance Team's capacity.

An improvement has been put in place, whereby requestors are contacted and encouraged to do their own research before submitting a formal request. In this reporting period, there were 22 requests dealt with in this way and whilst these still require processing by the Information Governance Team, the removal of the need for a formal response takes considerable pressure off the department involved. Responding to FOIA requests however is going to continue to place a significant burden on the organisation for some time to come.

During the reporting period several requests were appropriately refused for reasons as specified in the main report.

Subject Access Requests continue to rise, with 11 requests received during the reporting period, and in all but one case target times for response were met. There is a continued upward trend in requests although at present the data support no conclusions as to why.

Personal data breaches continue to occur and there were three incidents which required reporting to the Information Commissioner (ICO). In two of these cases the ICO response was that no further action would be taken, whilst a decision on the third has not yet been reached and is subject to an ongoing investigation.

Mandatory Information Governance Training remains a significant concern, with 2 directorates below the NHS target of 85%. Corporate has fallen to 68% during this reporting period and have been out of compliance now since 2019. Directorates are regularly being reminded to ensure that staff maintain complete and up to date Mandatory Information Governance Training.

The overall organisational compliance is 87% which is just above the NHS target of 85%. There is a risk that reportable data breaches may occur where staff are not compliant with their mandatory training.

The Information Governance Working Group met in September 2021. Further meetings have been scheduled for 2022.

Four of the five areas on which performance is reported are continuing to show a deterioration in performance compared to the previous quarter with a continuing downward trend (Mandatory Training shows a marginal improvement across the organisation from last quarter).

A further significant issue is the inability to release staff across the organisation to carry out investigations into data breaches and other Information Governance related incidents. Investigating Officers have had to be sourced externally for recent incidents to ensure appropriate investigations are being completed. The lack of available staff internally to undertake investigations impacts the timeliness of the learning available to inform improvement and enable the organisation to better deliver on its objectives.

An Information Governance plan is also being developed with the aim of delivering a more effective service to the organisation.

### **Recommendation**

The Audit and Corporate Governance Committee is asked to:

- **Receive assurance** that the Information Governance Management System is working effectively.