

**Information Governance Management System
Performance and Assurance Report Quarter 1 – 2022/2023**

Compliance

	Freedom of Information	DPA (Subject Access)	Data Breaches	Mandatory Training
This quarter				
Prev. quarter				

(For explanation of colour coding please refer to the subject specific pages)

Key risk indicators (KRI)

	Freedom of Information	DPA (Subject Access)	Data Breaches	Mandatory Training	IGWG	TBC	TBC
KRI1							
KRI2							
KRI3							

Code		KRI - Normal		KRI - Triggered
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Headlines

There was a decrease in Freedom of Information requests with 43 received in the reporting period. All key risk indicators are currently at green as FOI requests have dropped below 50 for this first time since the January 2020.

There were eight Subject Access Requests received in the reporting period. No deadlines were missed and all were responded to within the 31 days. Key risk indicators remain green.

One data breach was reported to the ICO and was data subject reportable. Key risk indicator three is triggered due to data breaches being reported to the ICO for three consecutive quarters.

Four significant data breaches have occurred between August 2020 and March 2022. Investigations into three of these incidents is complete, with draft reports and action plans being considered. Full details of these data breaches and the ongoing investigation is available in the supporting cover paper.

Mandatory training remains a concern and one key risk indicator remaining red as one Directorate (Corporate) has now been below the compliance level required for over three years.

Investment bids have now been approved for additional resources within the Information Governance Team and recruitment will commence shortly.

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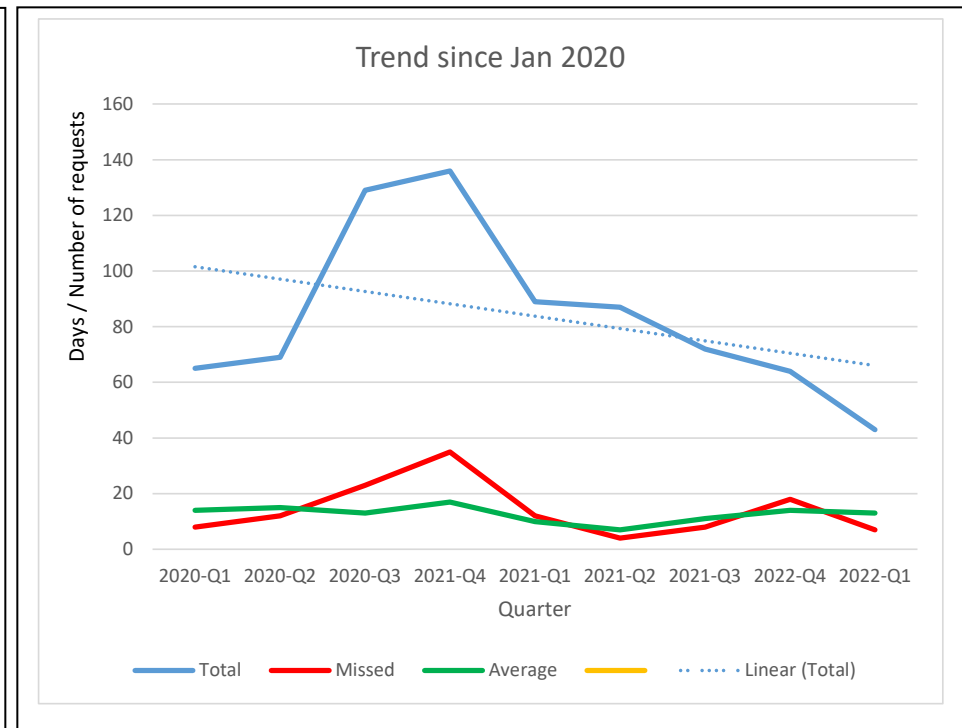
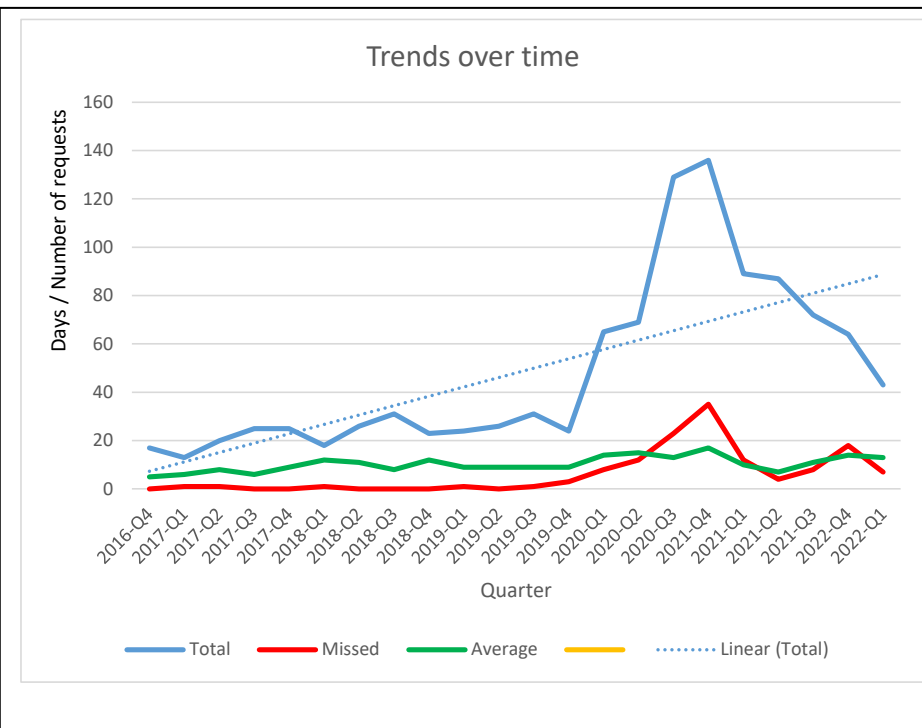
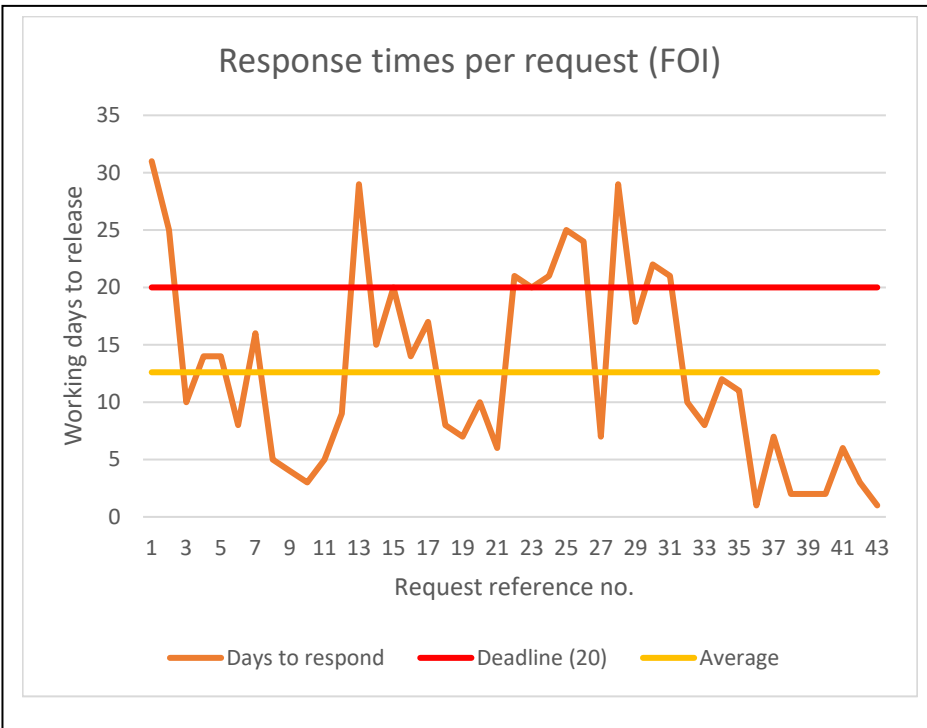
Glossary

DPA	Data Protection Act 2018	KRI	Key Risk Indicator		
DPO	Data Protection Officer	RIGM	Risk and Information Governance Manager		
FOIA	Freedom of Information Act 2000	SAR	Subject Access Request		
GDPR	General Data Protection Regulation 2016	SIRO	Senior Information Risk Officer.		
ICO	Information Commissioner’s Office				
IGWG	Information Governance Working Group				
KPI	Key Performance Indicator				

Freedom of Information Requests

Compliance Status

	2 or more legislative non-compliances	
	Single legislative non-compliance	
	Fully compliant	X



Narrative

The quantity of Covid-19 related requests has now reduced considerably, resulting in a further fall in numbers of requests received on the previous quarter. The long term trend continues upwards for the time being as we have still not fully returned to pre pandemic quantities.

The average time to respond to requests was 13 days, under the KRI threshold of 15 days. Seven responses during Q4 went over the 20 day period, with these delays due to resourcing and the complex nature of the requests.

Seven exemptions were engaged under Section 22 (information scheduled for future publication) and Section 21 (readily accessible to the requestor by other means). One refusal notice was issued as Section 12 the cost of compliance exceeds the appropriate limit. The requestor narrowed down that request and a report has now been issued.

All key risk indicators have returned to green for the first time since the pandemic.

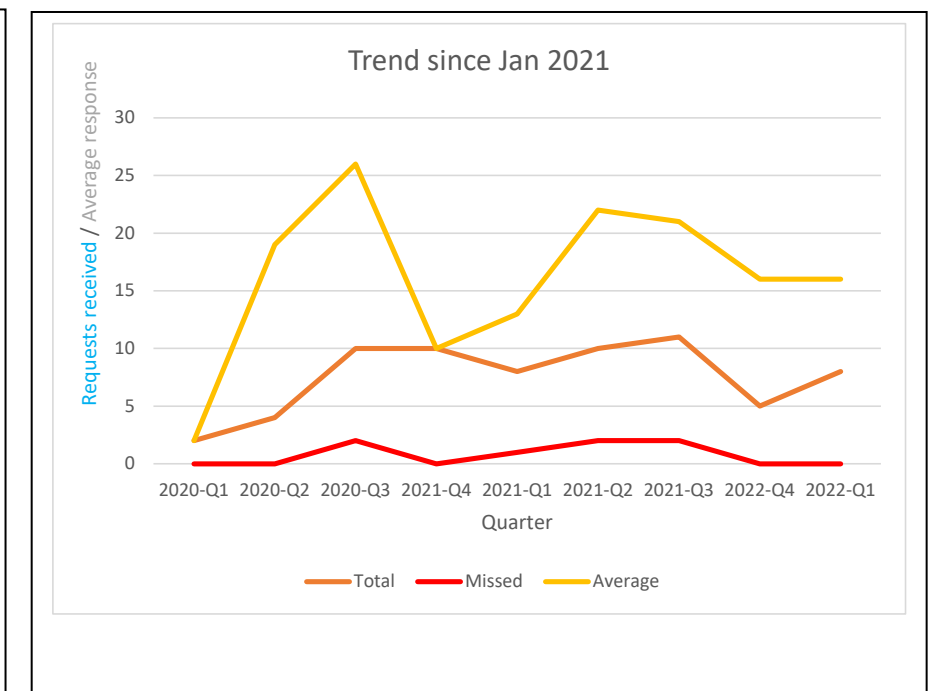
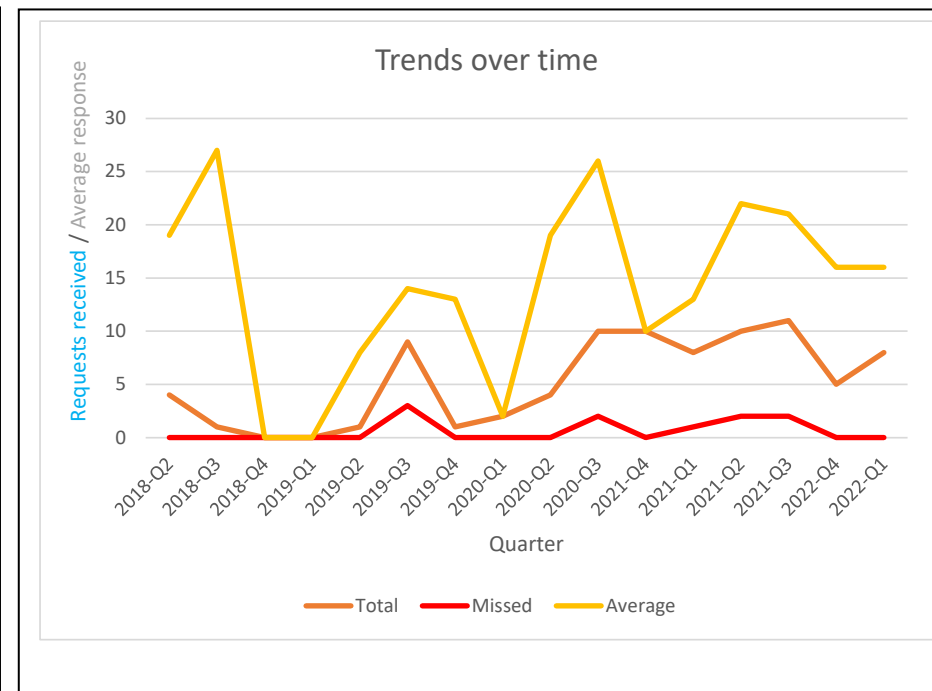
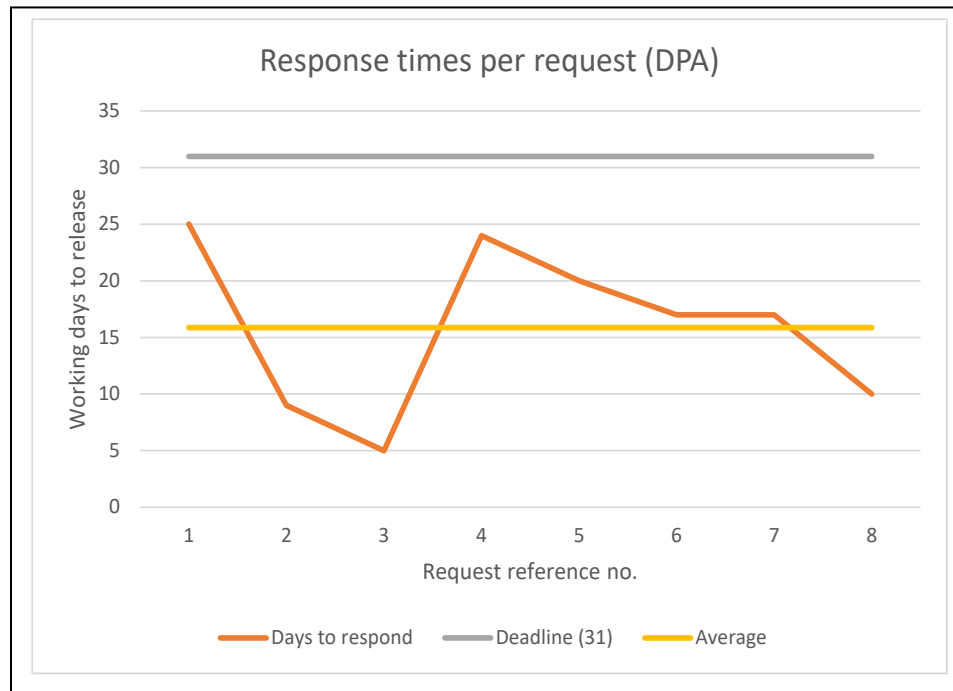
Performance Indicator		No	Target	Remarks
Total Requests Received		43	N/A	
Requests not requiring a response		0	N/A	
Full Release		15	N/A	
Partial release with exemptions		1	N/A	Personal data redacted.
Release declined – Exemptions engaged		7	N/A	Section 21 – information already accessible, Section 22 – future publication, Section 12 - Exceeds Time/Cost
Release declined – Information not held		20	N/A	
Deadline not met*		7	0%	
Requests overdue for release and still outstanding*		0	0%	
Key Risk Indicators				Status
KRI1	Average time to release information >15 days for three consecutive quarters			
KRI2	Increase in requests for three consecutive quarters			
KRI3	Requests remain above 50 for three consecutive quarters			

*indicates legislative non-compliance

Data Protection (Subject Access) Requests

Compliance Status

	2 or more legislative non-compliances	
	Single legislative non-compliance	
	Fully compliant	X



Narrative

Eight Subject Access Requests were received during the reporting period. The requests were for Screening, Microbiology and Health Protection records. All requests were responded to within the timescale of one calendar month.

No exemptions were engaged but clarification was requested for one request, this response was not received and the request was closed.

There has been a decrease in requests received this quarter in comparison to 2020 where the increase in requests occurred.

The centre chart shows the rising trend in the number of requests over time since the start of these reports in 2017. For comparison, the right hand chart shows the number since the start of the pandemic in Q4 2019/2020. Whilst the data is not conclusive the much gentler upward trend over the last two years would suggest that although some requests are for Covid-19 related personal data, the rise in requests is probably not directly related to the pandemic and is more likely to be connected with a growing awareness of data subjects' rights following implementation of the General Data Protection Regulation.

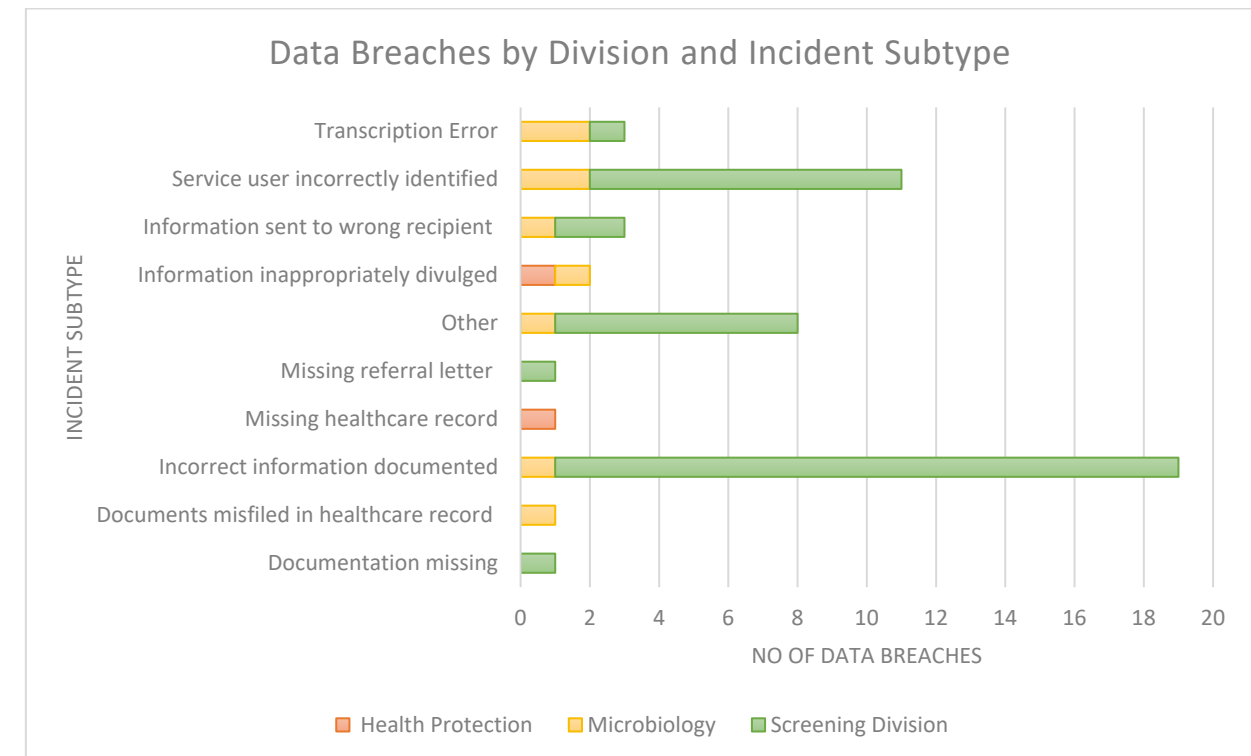
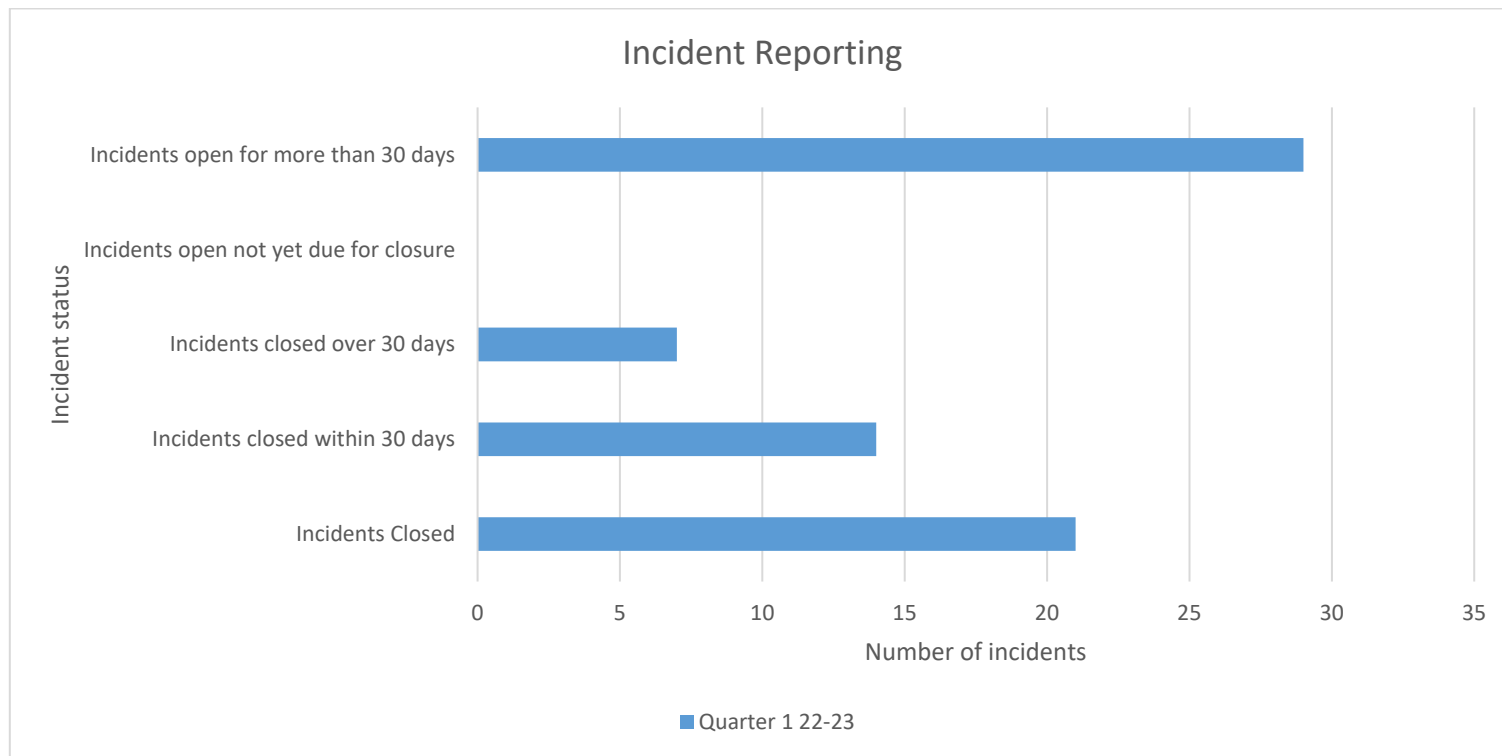
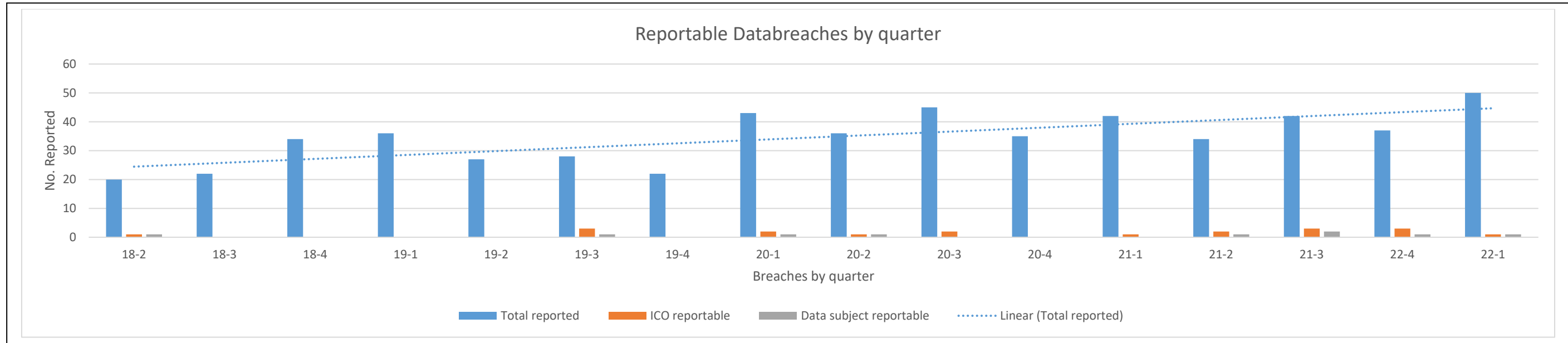
Performance Indicator		No	Target	Remarks
Total Requests Received		8	N/A	
Full Release		7	N/A	
Release declined – Exemptions engaged		0	N/A	
Deadline not met*		0	0%	
Key Risk Indicators				Status
KRI1	Average time to release information >25 days for three consecutive quarters			
KRI2	Increase in requests for three consecutive quarters			
KRI3	Requests remain above 10 for three consecutive quarters			

*indicates legislative non-compliance

Reported Data Breaches

Compliance Status

	2 or more legislative non-compliances	
	Single legislative non-compliance	X
	Fully compliant	



Narrative

There was a total of 50 data breaches reported during the period, one of which required reporting to the Information Commissioner. The ICO reportable data breach occurred when an attachment containing the personal data of a number of people were sent to a member of the public in error. The internal risk assessment also determined that this was reportable to the data subjects involved, and letters were sent out to all.

There has been a steady increase in data breaches since reporting started in 2018. The vast majority are very low risk breaches of GDPR provisions, which present little or no risk to the data subjects. Examples are where data are entered inaccurately on a person's record but the error is noticed and corrected quickly, or misfiling of documents in a record.

Two additional charts are provided on this report to show the breakdown of incidents by sub-type and time taken to manage. These must be read with due consideration for the limitations of the Datix reporting system, and the known issue of data quality within Datix. These issues mean that without going into every individual incident that is reported which at this time is not manageable, it is difficult to provide greater clarity on the nature of the incidents. Whilst data breaches such as these are almost inevitable, given the amount of personal data that the organisation handles on a daily basis, there is clearly a need for further work to try and reverse the continuing upward trend. A piece of work was started in January to analyse the data on this issue, with a view to putting a quality improvement programme in place. However, this work has stalled due to resource pressures in the IG team who are currently focused on achieving compliance. It is anticipated that this work can recommence later in the year utilising recurrent investment posts.

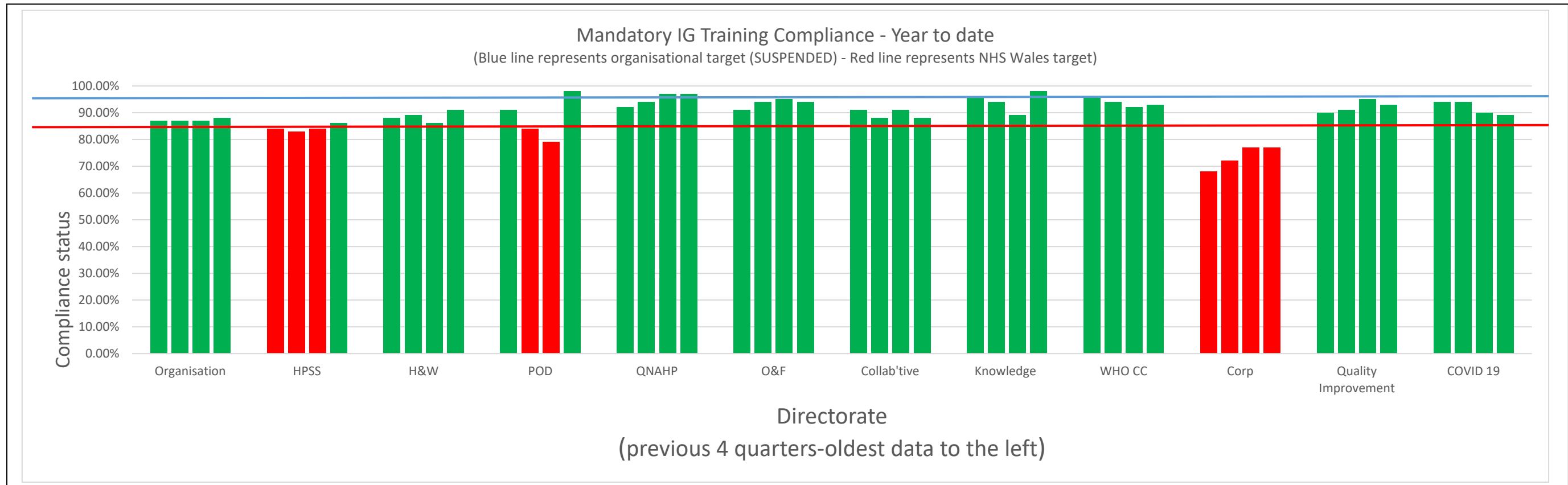
In addition, the Executive team is in the process of analysing organisational information risks and information assets to better understand how a more strategic approach to the management of data and information handling can be identified.

Performance Indicator		No	Target	Remarks
Total no. of databreaches reported*		50		
Databreaches reported internally after > 48hours*		0		
Databreaches reported to ICO <72hours		1		
Databreaches reported to ICO >72hours		0		
Databreaches reported to Data Subject		1		
Key Risk Indicators				Status
KRI1	Increase in reported data breaches for three consecutive quarters			
KRI2	Increase in data breaches reported >48hrs for three consecutive quarters			
KRI3	Data breaches reported to the ICO for three consecutive quarters			

*indicates legislative non-compliance

Mandatory Training Compliance

	2 or more Directorates non-compliance with NHS Wales target	
	Single Directorate non-compliance with NHS Wales target	X
	Fully compliant	



Narrative

There has been a slight improvement in overall compliance across the organisation. Corporate which includes the Board, Board Business Unit and the Executive Team remains below 85% compliance where it has been since Q3 2018/2019. It should be noted that when the figure for Corporate is adjusted to account for people not currently working in the organisation, the compliance rate rises slightly to 83% (Correct as of 10/08/2022)

Organisational compliance has increased slightly to 88%.

One of the first questions raised by the Information Commissioner when investigating a data breach is to confirm mandatory training status of people involved.

Work has commenced on a fully revised Training Needs Analysis for Information Governance in an effort to determine the efficacy of the existing all Wales training that is currently mandated.

Performance Indicator		No	Remarks
Directorates compliant with Public Health Wales target		0	Target currently suspended
Directorates compliant with NHS Wales target		10	
Directorates below 85% compliance		1	Corporate 77%
Key Risk Indicators			Status
KRI1	3 or more Directorates below 85% compliance for 1 reporting period		
KRI2	2 or more Directorates below 85% compliance for 2 reporting periods		
KRI3	1 or more Directorates below 85% compliance for 3 reporting periods		

Information Governance Working Group

Date of last meeting – 1st September 2021

Key points

- An update and discussion on the Artificial Intelligence project underway within Breast Test Wales took place.
- There was a discussion on the use of the Caldicott Issues log.
- The impact on other departments, including IG of the removal of the General Enquiries mailbox was highlighted.
- The revised Terms of Reference were produced and agreed
- The CCTV procedure was presented for consultation
- It was agreed that there was a need for an Information Governance risk workshop to refresh the IG risk register

Assurance report

Internal audit reports

There was one internal audit report received during the reporting period, which related to the submission of evidence for the Information Governance Toolkit. This reported Reasonable Assurance.

External audit reports

None received during the reporting period

Self-inspection reports

None received during the reporting period