

Name of Meeting Audit and Corporate Governance Committee Date of Meeting 20 January 2022 Agenda item: 3.9

Public Health Wales Information Governance Performance Report Q2 2021/2022

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Approval/Scrutiny Business Executive Team		

Purpose

route:

Receive the Information Governance Performance Report

Recommendation:				
APPROVE	CONSIDER	RECOMMEND	ADOPT	ASSURANCE
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The Audit and Corporate Governance Committee is asked to:				
Receive assurance that the Information Governance Management System is working effectively.				

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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:

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Strategic Priority/Well-being Objective	All Strategic Priorities/Well-being Objectives	
Strategic Priority/Well-being Objective	Choose an item.	
Strategic Priority/Well-being Objective	Choose an item.	

Summary impact analysis		
Equality and Health	No Equality and Health Impact Assessment is	
Impact Assessment	required.	
Risk and Assurance	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.	
Health and Care Standards	This report supports and/or takes into account the <u>Health and Care Standards for</u> <u>NHS Wales</u> Quality Themes	
	Governance, Leadership and	
	Accountability	
	Choose an item.	
	Choose an item.	
Financial implications	No financial implications	
People implications	No people implications	

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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.

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• 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 with the NHS Wales target of 85% compliance. 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 2 as the most up to date complete reporting period. Quarter 3 performance data will not be complete for reporting purposes until 6 weeks after December 31st which allows for closure against that quarters reporting deadlines, ie our response times for requests received at the end of December.

Continuing remedial action to address the resource and compliance issues raised in the report should help to improve performance throughout the remainder of 2021/22.

4. Analysis

Freedom of Information Act (FOIA) requests remain significantly higher than at the start of the pandemic (400% higher than Q4 2019/2020) with 131 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

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Health Protection team who are required to search out the information and then consider the appropriate response.

Temporary additional resources have been engaged to assist with the IG Team workload and this will remain under review over the coming months.

The average time to respond appears to be an improvement on the previous quarter, however this must be seen in context as 5 requests are still outstanding and are considerably overdue. When finally reported this will push the average time to respond upwards. Four have already been reported as having delayed responses, going over the statutory time limit of 20 working days.

An improvement measure 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 39 requests dealt with in this way and whilst these still require processing by the IG 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 exemptions were engaged as the information was due to be published in the near future. These exemptions did require a public interest test to be carried out which upheld the exemption. There was one refusal notice issued under section 14[1] vexatious request. An assessment was made on the work involved in preparing the information for release and the unjustified level of disruption to the organisation.

Subject Access Requests continue to rise, 10 requests were 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 two incidents that required reporting to the Information Commissioner (ICO). In both cases the response was that no further action would be taken.

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.

5. Recommendation

The Audit and Corporate Governance Committee is asked to:

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

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