 <p> GIG CYMRU NHS WALES </p> <p> Iechyd Cyhoeddus Cymru Public Health Wales </p>	<p style="text-align: right;">Name of Meeting</p> <p style="text-align: right;">Audit and Corporate Governance Committee</p> <p style="text-align: right;">Date of Meeting</p> <p style="text-align: right;">30 September 2025</p> <p style="text-align: right;">Agenda item:</p> <p style="text-align: right;">8.2</p>
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<p>Integrated Governance Division: Information Governance Performance Report Q1 2025/2026</p>	
<p>Executive lead:</p>	<p>Claire Birchall, Executive Director of Nursing, Quality and Integrated Governance.</p>
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<p>Approval/Scrutiny route:</p>	<p>Stuart Silcox, Assistant Director, Integrated Governance Leadership Team.</p>
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<p>Purpose</p>
<p>To provide assurance and updates from the Integrated Governance Division for Q1 2025-2026, specifically the following:</p> <ul style="list-style-type: none"> • Information Governance Performance Report for Q1 2025-2026, including an update from the Information Governance Forum • Update on the progress of the Records Management SharePoint Implementation Programme

<p>Recommendation:</p>				
<p>APPROVE</p> <input type="checkbox"/>	<p>CONSIDER</p> <input checked="" type="checkbox"/>	<p>RECOMMEND</p> <input type="checkbox"/>	<p>ADOPT</p> <input type="checkbox"/>	<p>ASSURANCE</p> <input checked="" type="checkbox"/>
<p>The Committee is asked to:</p> <ul style="list-style-type: none"> • Receive and consider the Information Governance Performance Report. • Receive assurance that the Records Management SharePoint Implementation Programme is complete. 				

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:	
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 Impact Assessment	No Equality and Health Impact Assessment is required.
Risk and Assurance	<p>This report will provide assurance that:</p> <p>The Information Governance Management System is operating effectively. Risks around IG are known and highlighted in Directorate and Corporate (where necessary) Risk Registers, with clear mitigation.</p> <p>The Records Management SharePoint Implementation Programme is complete. Reference to: Datix Risk 1453 - There is a risk that PHW will run ineffective and inefficient services through poor record keeping. This will be caused by a lack of a coherent, organisation wide records management system and process.</p>
Health and Social Care (Quality and Engagement) (Wales) Act	This report supports and/or takes into account the <u>Health and Care Quality Standards for Wales.</u>
Financial implications	<p>The Information Governance Performance report outlines the performance of the Information Governance Management System to further reduce the risk of breaches of data protection legislation with the associated risk of significant fines and sanctions from the Information Commissioner.</p> <p>Progression of a corporate approach to Records Management has required financial investment.</p>
People implications	None

1. Purpose / situation

To provide assurance and progress updates from the Integrated Governance Division for Q1 2025-2026, specifically the following:

- Information Governance Performance Report for Q1 2025-2026
- Updates on the Records Management SharePoint Implementation Project Delivery.

2. Information Governance Update

Background

The Information Governance Performance Report provides assurance that Public Health Wales maintains an Information Governance System in order to:

- discharge its responsibilities to ensure the security and appropriate use of personal information; and
- demonstrate compliance with data protection legislation.

Executive Director accountability and greater assurance that information risks are addressed is provided by Public Health Wales's designated Senior Information Risk Owner (SIRO), the Director of Research, Data and Digital.

Freedom Of Information Act (FOI)

Under the Freedom of Information Act 2000, the organisation is required to comply with the appropriate release of information within the legislative timeframe. This is generally 20 working days from receipt of the request. However, this deadline is frequently extended legitimately, e.g. when there is a requirement to seek clarification from the requestor or where we are considering an exemption requiring a public interest test.

In quarter 1, 63 requests were received. Of these 63, 4 have been closed. Of the 59 completed requests the number of non-compliant requests has increased. Five responses (8%) during Q1 were non-compliant, an increase from 4 in Q4. The average number of days to respond in quarter 1 was 15 days, which is a decrease from 16 days in quarter 4, and so remains within the general 20-working day deadline. FOI compliance is closely tracked by a weekly SIRO meeting chaired by the two responsible Directors. Reasons behind the delays are understood and changes are made to prevent similar delays in the future.

The below table shows an overview of all non-compliant FOI requests from Quarter 1 so far.

FOI	Days out	Dept.	Comments on Response Delay
2025 084	38	Health Protection	Request sent out to third parties for concerns/comments on the release of the information that affected them. This took extra time. There were several documents to review and redact which were subsequently further reviewed further approval.
2025 100	1	NHSW P&I/RTSSS	Sent for approval on the due date. A process issue within NHSWP&I that has since been addressed.
2025 101	10	NHSW P&I	Awaiting confirmation that the information was not held. A process issue within NHSWP&I that has since been addressed.
2025 109	3	NHSW P&I/RTSSS	Awaiting confirmation that the information was not held. process matter within NHSWP&I that has since been addressed.
2025 112	9	IG/POD/IT	Extra time required to identify where the information was held by interpreting the request.

Failure to deliver timely response time for FOI is a key deliverable for PHW. Whilst some FOIs do become complex to deliver within the timeframes, most of the non-compliant requests were as a result of process failures within some Directorates and particularly within NHSWP&I. These failures have been subsequently reviewed and addressed.

Subject Access Requests (SAR)

The organisation has a responsibility to provide personal information if it is requested by an individual in the form of a SAR. The number of requests has increased since the previous quarter, with an average of 18 days taken to respond and within the target 30-day timescale. There were sixteen requests received and 12 were responded to within the 30-day timeframe.

1 request was treated as complex and the data subject was informed that the deadline would be extended a further 2 months. For 2 requests, clarification and proof of ID was not received from the respective subjects and both of these will be closed as no further contact has been received.

1 request went over the 30-day deadline (35 days) because it required with contact and searches with several individuals.

Personal data breaches

There is a requirement under the UK General Data Protection Regulation (UK GDPR), in which PHW is required to risk assess all personal data breaches and under certain circumstances to report them to the Information Commissioner's Office (ICO), and the data subjects involved.

All personal data breaches are reported on Datix and are automatically flagged to the Information Governance Service. A risk assessment is then carried out through a Standard Operating Procedure and if the risk assessment suggests that the breach is either ICO or data subject reportable, the breach is referred to the SIRO for a decision.

There were 6 data breaches reported, with 1 incident being reported to the ICO or data subjects during quarter 1.

Further detail on the data breaches has been provided to the Committee in the private session.

Mandatory Information Governance Training

Organisational wide compliance has improved slightly at 91% and above the NHS target of 85%.

Directorates are regularly reminded to ensure that staff maintain complete and up to date Mandatory Information Governance Training as there is a risk that reportable data breaches may occur where staff are not compliant with their mandatory training.

The Information Governance Group/Forum Update

PHW has established strong Information Governance assurance processes through the direction of the SIRO and the Executive Director of Nursing, Quality and Integrated Governance and the implementation of the Information Asset Owner (IAO) network across the organisation. Weekly meetings are chaired by the SIRO with the Executive Director of Quality Nursing and Integrated Governance, the Assistant Director of Integrated Governance (Deputy SIRO), the Head of Informatics, the Head of Information Governance and the Lead Cyber Security Manager to review IG performance across the organisation and to discuss current and emerging issues.

To improve assurance further and to ensure the efficient communication of IG matters with IAOs, the Information Governance Group continues its re-constitution

as an Information Governance Forum, chaired by the SIRO and attended by IAOs across both the wider PHW organisation and the NHS Wales Executive. The Forum meets quarterly and provides IG discussion and learning that complements formal IAO training provided by the Information Governance Service. The Information Governance Forum continues to develop its Terms of Reference and agenda, and the Digital and Data Design Authority (DDDA) has been identified as the body to formally consider and approve IG decisions on an organisation wide basis. We are working towards the Information Governance Forum Terms of Reference, agenda and formal reporting to the DDDA to be finalised in Quarter 1 2025/26.

Assurance can be taken that:

- The IG work of PHW continues to progress in line with the revised focus of the SIRO.
- That impactful remedial processes have been put in place in response to poor compliance with FOI response times.

3. Records Management Project update

The transition to SharePoint as a document store project has concluded, with all Directorates now moved over to SharePoint Online.

Work is continuing with all Directorates to continue to embed SharePoint into the normal working culture for Public Health Wales.

Training will continue to be available to staff if it is required, particularly for new starters and people returning to work after long term absence.

The Staff Records site is now available to use, and training sessions will be made available for those who need it over the coming weeks. Line Managers will also be able to transfer the files of any leavers, that they are still holding for their retention period of 6 years.

A Lessons Learned exercise has already started to allow the project team to reflect on any changes which should be made to running future projects or large cross organisational change. The lessons learned session has been completed with the Project Board to discuss any learning that can be taken forward. The next steps are to engage the Business Leads and those who took a lead role in coordinating the transition within their Directorate.

The project has also enabled successful data sharing with external partners, particularly within Health Protection where rather than using email, large amounts of information have been transferred to a secure SharePoint site and it is the vision of the Records Management Team that this will continue, to help reduce the risk of data breaches within Public Health Wales.

This project has also reduced the requirement for new Teams Channels being created. The Records Management Team are working with Digital as new requests come in and creating SharePoint Libraries in place of Teams Channels to help reduce content sprawl.

Continuing with business as usual, new sites will need to be created and developed alongside new projects and work programmes. The Records Management Team invite early contact from users requiring new sites to understand their needs and to enable efficient support from the Team.

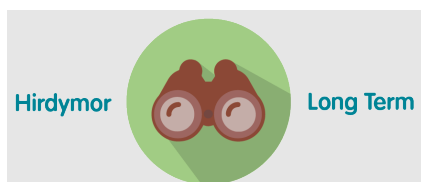
The work of the Records Management Team is continuing to develop our SharePoint estate, following updates and new features to the system itself, as well as the ever-changing structure of the organisation. The implementation of the Staff Records management is ongoing; however, we are seeing decreasing needs for training in that element of work.

The team are further developing training modules for staff to access, particularly aimed at new starters and long-term absence returnees.

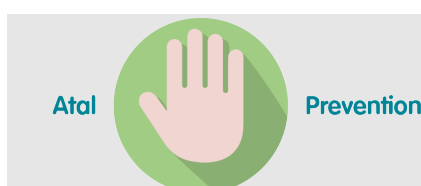
The Deep Dive which was presented to Audit Committee was well received and assurance was taken by the committee that we have developed a robust, accessible EDRMS for future proofing the Records Management requirements of the organisation.

The development of a Records Management Audit process has been delayed, due to the longer than expected implementation of the Staff Records element of work. However, work on this element of the Records Management service will commence shortly.

4. Well-being of Future Generations (Wales) Act 2015



Analysis of trends the Information Governance team deal with and a proactive approach to FOI administration alongside a streamlined Records Management is essential to ensure the long-term viability and effectiveness of the organisation.



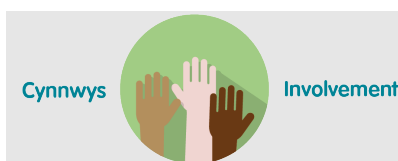
Training and guidance on best practice plus adherence to Records Management policies will proactively prevent the organisation from failing to comply with legislation including the requirements of the Freedom of Information Act 2000 and the Public Records Act 1958.



Integrated Governance's work is designed to integrate efficient processes and procedures for the benefit of all areas across the organisation.



Integrated Governance works regularly in collaboration with all PHW Directorates, and the Office for National Statistics have shared organisational learning from the recent implementation of a Records Management system.



All parts of the business will be involved in developing the Records Management system to ensure its proper integration across all business areas and all staff are encouraged to provide feedback on the Integrated Governance products they would like to see or any assistance needed.

5. Recommendation

The Committee is asked to:

- **Receive** and **Consider** the Information Governance Performance Report.
- **Receive assurance** that the Records Management SharePoint Implementation Programme is completed as per the project plan.