

## Minutes of the Public Digital & Infrastructure Committee Meeting Held On 27 May 2025 Via MS Teams

To view a recording of the meeting: <https://youtu.be/4Yy0nuIDEiE>

<b>Chair:</b>		
David Edwards	DE	Independent Member – Information Communication & Technology (IM-ICT)
<b>Present:</b>		
Susan Lloyd-Selby	SLS	Independent Member – Local Authority (IM-LA)
Rachna Upadhya	RU	Independent Member – General (IM-G)
<b>In Attendance:</b>		
Suzanne Rankin	SR	Chief Executive Officer
David Thomas	DT	Director of Digital & Health Intelligence
Matt Phillips	MP	Director of Corporate Governance
Catherine Phillips	CP	Executive Director of Finance
James Webb	JW	Head of Information Governance & Cyber Security
Angela Parratt	AP	Director of Digital Transformation
Gavin Evans	GE	Project Manager Electrical Discretionary Capital
Mark Wardle	MW	Chief Clinical Information Officer
Tony Ward	TW	Head of Discretionary Capital
Geraldine Johnston	GJ	Interim Director of Operations - Community Services
<b>Observers</b>		
Bevan Howells	BH	NHS Graduate Management Trainee
<b>Secretariat</b>		
Rachel Chilcott	RC	Corporate Governance Officer
<b>Apologies</b>		
Geoff Walsh	GW	Director of Capital, Estates & Facilities
Paul Bostock	PB	Chief Operating Officer

Item No	Agenda Item	Action
<b>D&amp;IC 27/05/001</b>	<b><u><a href="#">Welcomes &amp; Introductions</a></u></b>  The Committee Chair (CC) welcomed everyone to the Public meeting and confirmed the meeting was quorate.	
<b>D&amp;IC 27/05/002</b>	<b><u><a href="#">Apologies for Absence</a></u></b>  Apologies for absences were noted.  <b>The Committee resolved that:</b> a) The apologies were noted.	
<b>D&amp;IC 27/05/003</b>	<b><u><a href="#">Declarations of Interest</a></u></b>  <b>The Committee resolved that:</b> a) No Declaration of Interest were noted.	
<b>D&amp;IC 27/05/004</b>	<b><u><a href="#">Minutes of the Meeting Held 11<sup>th</sup> February 2025</a></u></b>  The committee accepted the minutes from 11 <sup>th</sup> February 2025 as a true and accurate record, pending a few amendments.  <b>The Committee Resolved that:</b>	

	a) Subject to the amendments, the Minutes of the Meeting held on the 11 <sup>th</sup> February 2025 were confirmed as a true and accurate record	
<b>D&amp;IC 27/05/005</b>	<p><a href="#"><u>Action Log – Following the Meeting held on 11th February 2025</u></a></p> <p>There were no actions at present.</p> <p><b>The Committee Resolved that:</b></p> <p>a) The Action Log was discussed and noted.</p>	
<b>D&amp;IC 27/05/006</b>	<p><a href="#"><u>Chair’s Action taken since the last Committee Meeting</u></a></p> <p>No chairs actions taken since the previous meeting.</p> <p><b>The Committee Resolved that:</b></p> <p>a) There were no Chair’s Actions taken since the last meeting.</p>	
<b>Items for Review and Assurance - Infrastructure</b>		
<b>D&amp;IC 27/05/007</b>	<p><a href="#"><u>Capital Programme Plan 2025/26</u></a></p> <p>The Head of Discretionary Capital (HDC) took the report as read and highlighted the following points:</p> <ul style="list-style-type: none"> <li>• <u>Capital Resource Limit and Amendments:</u> <ul style="list-style-type: none"> <li>○ The UHB benefitted from an additional £2.129m this year with a revised discretionary capital allocation of £17m.</li> <li>○ A Targeted Estates Investment Fund (TEF) was introduced as a continuation of the Estate Facilities Advisory Board (EFAB) scheme, which was a two-year scheme where discretionary capital funded 30% of the allocation.</li> <li>○ TEF funding was split into fire, infrastructure, decarbonisation, mental health, infection prevention and control, and decontamination.</li> <li>○ They were awarded a total of £11m - £3.3m from their contribution and £7.7m from the Welsh Government (WG).</li> </ul> </li> <li>• <u>WG All Wales Prioritisation Process:</u> <ul style="list-style-type: none"> <li>○ CAVUHB had submitted 23 bids for acute community and primary care projects – WG funded three business cases (ITU expansion and refurbishment, hybrid / major trauma theatres at UHW, and BMT review)</li> </ul> </li> <li>• <u>UHB Discretionary Capital Prioritisation Process:</u> <ul style="list-style-type: none"> <li>○ They underwent a rigorous selection process with strategic, operational, and capital planning</li> <li>○ The Capital Management Group (CMG) approved commitments highlighted in Table 3, including digital infrastructure, Windows 11, Wi-Fi upgrade, medical records, and CD&amp;T refurbishment at St Mary’s</li> <li>○ They had forecasted an overcommitment of £0.497m against the current available allocation, to be managed throughout the year.</li> </ul> </li> <li>• <u>Draft Capital Programme 2024/25:</u> <ul style="list-style-type: none"> <li>○ The draft programme was detailed in Table 4 – with UHW C1 cardiology relocation being a priority with a £3.14m commitment. The table included a £1m contingency and £100k for project initiation requests.</li> <li>○ The draft capital programme for 2025-26 was endorsed by the CMG and Senior Leadership Board (SLB). The CMG would monitor and develop schemes to ensure the statutory obligations were met.</li> </ul> </li> </ul> <p>The Executive Director of Finance (EDF) explained that the capital plan had also been reviewed by the Finance &amp; Performance (F&amp;P) Committee, which agreed on the plan and finances before going to the UHB Board.</p> <p>The EDF noted that it was important to understand elements like the</p>	

	<p>targeted estates funds and digital infrastructure backlog, and how they related to risks within the Board Assurance Framework (BAF).</p> <p>The CC asked whether the original selection process for prioritisation primarily focused on estates risks, or whether there were other criteria involved.</p> <p>The HDC responded that it covered strategic service planning, operational planning, and capital planning.</p> <p>The Independent Member – Local Authority (IM-LA) asked where the lead responsibility sat for monitoring the spend against these projects throughout the year.</p> <p>The EDF responded with the following:</p> <ul style="list-style-type: none"> <li>• The F&amp;P Committee managed the finances and monitored performance against the plan and reported it up to the Board.</li> <li>• The D&amp;I Committee focused on managing the infrastructure risks (both estates and digital) to prevent breakages or outages. Their role was to connect and report on these risks concisely to the Board.</li> <li>• They would continue to progress important schemes and address emerging risks with WG funding, either through business justification cases or by utilising slippage, which was nearly as much as their capital programme the previous year (£20-25m).</li> <li>• They had improved planning for slippage and determined the best use of funds with the CMG and SLB.</li> <li>• This Committee should balance service operational and risk priorities.</li> </ul> <p>The Independent Member – General (IM-G) asked about the risks of the £1m contingency within the plan and asked for more clarity on the £0.497m over commitment.</p> <p>The EDF responded with the following:</p> <ul style="list-style-type: none"> <li>• They anticipated accessing slippage later in the year to manage a small overcommitment. This approach ensured they did not underfund or underspend. If all planned money was spent, the overcommitment would come from contingency, which would be a concern.</li> <li>• Plan B involved more slippage from their programme or WG's, balancing the need to access slippage money for critical tasks.</li> <li>• The £1m contingency was for unforeseen estates issues, rather than digital. The contingency covered unexpected breakdowns due to the backlog of maintenance risks. If any contingency remained, it would be spent like slippage money.</li> </ul> <p><b>The Committee Resolved that:</b></p> <p>a) The content of the paper and in particular the prioritisation process undertaken for the 2025/26 draft capital plan was noted.</p>	
<p><b>D&amp;IC</b> <b>27/05/008</b></p>	<p><a href="#"><u>Estates Risk Register</u></a></p> <p>The HDC presented the report and highlighted the following:</p> <ul style="list-style-type: none"> <li>• They currently carried 59 risks rated 20+, 106 risks rated 15-20, and 65 risks rated between 12-15.</li> <li>• High-risk categories included high voltage load shedding equipment, roof deterioration on multi-story ward blocks, and fume cabinets with insufficient asset identification.</li> <li>• They had 19 risk registers across their service board and covered estates, capital and major infrastructure risks</li> <li>• They were working with the Corporate Governance team to utilise the AMaT system to consolidate and manage risks</li> <li>• Many high-level risks would be addressed this year, including ongoing internal drainage replacement</li> </ul>	

	<ul style="list-style-type: none"> <li>• Regular meetings were held with the compliance team to review and update risk registers</li> <li>• Backlog maintenance currently stood at £175m</li> <li>• WG funding provided for a comprehensive condition survey of the estate, which focused on condition and space utilisation, to be completed in the next few months.</li> </ul> <p>The Director of Corporate Governance (DCG) explained the following:</p> <ul style="list-style-type: none"> <li>• The corporate risk register would be presented at the following UHB Board, but CEF risks were included as a separate appendix due to the length compared to other clinical boards.</li> <li>• This highlighted the organisation’s situation and the thoroughness of CEF’s risk management.</li> <li>• The switch to the AMaT system would enable cross-referencing of risks between clinical boards and CEF.</li> </ul> <p>The IM-LA asked whether this was an improving or deteriorating situation compared to the previous year.</p> <p>The HDC responded that there were fewer risks due to EFAB funding over the past two years, which addressed several issues. However, due to the age of the infrastructure, new risks occasionally arise.</p> <p>The EDF suggested bringing the condition survey back to the D&amp;I Committee. They should start by reviewing the highest risks (rated 25) and work down and incorporate the BAF and risk register into these discussions. She suggested reviewing 15 risks at a time to manage the significant infrastructure risks effectively.</p> <p>The CC referred to the recent substation issue at Heathrow which caused a shutdown and asked whether there were any lessons the organisation could learn, specifically around substation closures and decision-making.</p> <p>The DCG responded that he had recently discussed a potential exercise between a cyber-attack and a power outage with Matt Temby who was responsible for emergency planning in the organisation.</p> <p>The HDC responded that they were unsure of the specifics around the Heathrow incident. However, when they did the Operation POET (the shutdown of all electrical systems and backup checks) in 2023, it highlighted many problems. One high risk identified was high voltage load shedding, which was now a priority with funding secured. Major shutdowns like POET helped to check system resilience and help to apply for government funding to address gaps.</p> <p>The CC asked whether they tested decision-making as part of these exercises.</p> <p>The EDF responded that Operation POET simulated an annual planned electricity shutdown which included decision-making processes. However, what the DCG described was an unplanned event which was simulated by the Emergency Planning group. They needed to combine both approaches to answer the question around decision-making.</p> <p><b>The Committee resolved that:</b></p> <ul style="list-style-type: none"> <li>A) The ongoing work being undertaken by CEF to establish all critical and high risks associated with the UHB estate was noted;</li> <li>B) The processes introduced by CEF for monitoring and managing the risks included on its departmental and Service Board risk registers were noted;</li> <li>C) The work undertaken through the ‘Critical Risk’ to further inform the estate and infrastructure risk register was noted.</li> </ul>	
<p>D&amp;IC 27/05/009</p>	<p><a href="#"><u>Pentyrch Transport Task &amp; Finish Group – Final Report</u></a></p>	

	<p>The Interim Director of Operations - Community Services (IDO-CS) took the report as read and presented slides to the Committee, and highlighted the following:</p> <ul style="list-style-type: none"> <li>• The Pentyrch Surgery, a branch of Llandaff surgery, was currently in a portacabin unsuitable for modern healthcare. A new site was identified at Rhydlafer Drive, about 2 miles from the current location.</li> <li>• Following concerns raised by residents and the Community Health Council / CHC (now Llais) around access, a Task &amp; Finish Group was set up in October 2023.</li> <li>• The group engaged with community representatives and the Community Transport Association to understand transport needs and explore options.</li> <li>• An independent survey was conducted at the request of the community groups and modelled the potential demand of those who would have difficulty accessing the services.</li> <li>• Nine transport options were considered, and two viable options were identified: a Community Transport Scheme relying on volunteers, and a taxi service.</li> <li>• Llais provided feedback on the report where they outlined that the relocation of the surgery was appropriate but acknowledged the concerns of the community.</li> <li>• The report was submitted to the Pentyrch Surgery Development Project Team, and the option supported was to provide a taxi service for a 12-month period to determine demand.</li> <li>• A Comms &amp; Engagement sub-group had been established to develop the process to access the taxi service, monitor, and evaluate.</li> </ul> <p>The CC suggested having both the volunteer service and the taxi service for when the volunteers were unavailable.</p> <p>The IDO-CS responded that to determine the need for the service, a taxi service would be introduced for 12 months. If there was not a significant demand, then progressing with a volunteer option may work.</p> <p>The Chief Executive Officer (CEO) thanked the team for their work.</p> <p>The EDF highlighted the importance of understanding the real demand for taxi services before implementing a more economical and community-integrated facility. This approach was a great test for modeling services on a viable and economic scale, whilst meeting the population's needs.</p> <p>The CC queried if they discovered early on that there was a broader demand for the taxi service than expected, then they would not need to wait the full 12 months.</p> <p>The IDO-CS responded that the subgroup would monitor the demand and make decisions accordingly.</p> <p><b>The Committee Resolved that:</b></p> <ul style="list-style-type: none"> <li>A) The report and recommendations were noted</li> <li>B) The approach to factoring in engagement into an Infrastructure Programme was noted.</li> </ul>	
<b>Items for Review &amp; Assurance – Digital</b>		
<p><b>D&amp;IC</b> <b>27/05/010</b></p>	<p><a href="#"><u>Digital Roadmap and Work Programme Update</u></a></p> <p>The Director of Digital Transformation (DDT) presented the report and slides, and highlighted the following:</p> <ul style="list-style-type: none"> <li>• Digital Foundations was a five-year programme with annual business justification cases submitted for WG funding.</li> </ul>	

- Current digital maturity was low, which required a pragmatic approach with a tight scope.
- Over 25 workshops were in progress which focused on developing the digital roadmap.
- The Year 1 Investment Cases agreed and the capabilities were highlighted – six business justification cases would be going in in the first year.
- Investments aimed to improve clinical outcomes, safety and quality, and attract top talent by creating a modern, technically able environment
- There was emphasis on quantifiable improvements such as reducing mortality, improving clinical safety, and driving quality improvement
- Timeline – they would write cases from July to September, internal socialisation from September to October, and then pursue acceptance and investment through prioritisation through the WG Infrastructure Investment Board
- A timeline of future capabilities anticipated was presented. They would be preparing for a national electronic health record solution by 2030.
- Additional highlights included - all staff were funded for Microsoft 365 licenses, significant investment in Wi-Fi over an 18-month programme, and the business case for Connecting Care.

It was agreed by the DDHI that future reports would include timelines to provide the Committee with assurance and updates on different programmes of work.

The DDHI explained that they would not wait to harness the benefits of existing systems whilst they prepared for the electronic health record implementation. Many initiatives were already in progress to enhance their digital maturity. They had finalised their digital foundations business case and were now identifying gaps in their workforce's digital literacy.

The DDT noted that their efforts aimed to resolve clinical frontline operational issues. This year's cases were being developed by a mixed group and were well received as they addressed real-life issues.

The IM-LA asked whether Electronic Prescribing and Medicines Administration (EPMA) had gone live in Q1 in wards B5 and T5, and how was progress going.

The Chief Clinical Information Officer (CCIO) noted that there were several issues related to network connectivity and clinical safety concerns with the application's performance, but they had been resolved. They were now in a two-week stability period to ensure everything worked correctly before going live. He was confident they would meet the plan for June.

**The Committee Resolved that:**

- The Digital Roadmap and Work Programme Update was noted.

<p><b>D&amp;IC</b> <b>27/05/011</b></p>	<p><a href="#"><u>Corporate Digital Risk Register</u></a></p> <p>The DDHI highlighted the following:</p> <ul style="list-style-type: none"> <li>• They were currently reviewing their risks as they transitioned to the AMaT system.</li> <li>• Some national programme risks such as those related to the laboratory system (LIMS) and radiology were not reflected in their local risk register but were being mitigated by Digital Health and Care Wales (DHCW).</li> <li>• Cybersecurity remained their top risk and required constant vigilance.</li> <li>• Another concern was the national business case for connecting care, which may not meet their needs for mental health and critical care solutions. This had been escalated for further discussion.</li> </ul> <p><b>The Committee resolved that:</b></p> <p>a) The progress and updates to the Risk Register report was noted.</p>	
<p><b>D&amp;IC</b> <b>27/05/012</b></p>	<p><a href="#"><u>Information Governance (IG) Data Compliance</u></a></p> <p>The HIGCS presented the report and highlighted the following:</p> <ul style="list-style-type: none"> <li>• The paper provided updates on key information governance performance indicators</li> <li>• The IG department remained short-staffed with five whole time equivalents (wtes).</li> <li>• From January 2025 – April 2025, 171 UHB IG-related incidents were reviewed, with two breaches reported to the ICO.</li> <li>• Freedom of Information compliance remained at 92% with 61 requests per month.</li> <li>• Medical record requests compliance had increased to 32%, though still below acceptable levels.</li> <li>• For non-health records, they were compliant with 44 out of 52 requests.</li> <li>• Through their National Intelligent Integrated Audit Solution (NIAS), they continued to monitor those accessing records inappropriately, working closely with People Services.</li> <li>• Training compliance had dropped to 70%.</li> </ul> <p>The DDHI explained that the target for IG mandatory training was 85%, and they were currently below that. This issue was being addressed at individual clinical board executive review meetings, with an emphasis on ensuring staff had adequate time for training. IG training impacted research applications and incident reporting to the ICO.</p> <p>It was suggested that future reports should include hotspots and trends within the organisation on where mandatory IG training was low.</p> <p>The CC asked whether there was a correlation between the areas of low uptake of training and the incidence of simulated phishing attacks.</p> <p>The HIGCS responded that he would look into whether there was a correlation.</p>	

	<p>The CC asked whether they were experiencing lengthy delays in processing the subject access requests, or whether they were only just missing the targets.</p> <p>The HIGCS responded that their backlog was not very large given the number of requests received. The average processing time was about 40 days against a target of one calendar month.</p> <p>The IM-G asked for more clarity about the issue of inappropriate access to notes, specifically how they were tracking this and the repercussions for those found to be accessing notes inappropriately.</p> <p>The HIGCS responded that accessing records inappropriately was a criminal offense and all allegations were treated seriously and quickly. The process starts with an initial assessment by the line manager to determine the severity. Some breaches caused minimal harm (e.g. accessing one's own records). If there was no legitimate purpose and evidence of disclosure to a third party, it led to a HR investigation, reporting to the Independent Commissioner, and potentially involving the police.</p> <p>The IM-G asked how they tracked these breaches.</p> <p>The HIGCS responded that they used BIAS monitoring software to identify potential suspicious activity. Due to the size of the organisation, there are many false positives, so they had to employ a targeted approach. Each month, several staff members were reviewed and spoken to regarding inappropriate access. They also received anonymous complaints about potential breaches.</p> <p><b>The Committee resolved that:</b></p> <p>a) The series of updates relating to significant IG issues were received and noted.</p>	
	<b>Items for Approval / Ratification</b>	
<b>D&amp;IC 27/05/013</b>	<i>No items</i>	
	<b>Items for Noting and Information</b>	
<b>D&amp;IC 27/05/014</b>	<p><a href="#">Minutes: Digital Directors Peer Group</a></p> <p>The minutes from the Digital Director Peer Group were noted.</p> <p><b>The Committee Resolved that:</b></p> <p>a) The minutes of the Digital Directors Peer Group from 4<sup>th</sup> February 2025 were noted.</p>	
<b>D&amp;IC 27/05/015</b>	<p><a href="#">Committee Annual Report 2024/25</a></p> <p>It was suggested that the Committee Annual Report be revisited to check accuracy for quoracy and attendance.</p> <p>The CC thanked everybody who had contributed over the year.</p> <p><b>The Committee Resolved that:</b></p> <p>A) The Committee Annual Report 2024/25 was noted, pending minor amendments.</p>	
<b>D&amp;IC 27/05/016</b>	<a href="#">C&amp;VUHB Digital Transformation Review - Final Project Brief Issue</a>	

	<p>The DDHI explained that the digital transformation review had not yet been given a start date. Although the draft output was expected by July 2025, this assumed an April start, which had not been confirmed by Audit Wales. The findings would potentially be presented at the following Committee.</p> <p><b>The Committee Resolved that:</b>  A) The update was noted.</p>	
	<b><u>Agenda for Private Meeting</u></b>	
<b>D&amp;IC 27/05/017</b>	<ul style="list-style-type: none"> <li>• Caldicott Guardian Update</li> <li>• Cyber Security Update</li> </ul>	
	<b><u>Any Other Business</u></b>	
<b>D&amp;IC 27/05/018</b>	<i>No Other Business was discussed.</i>	
	<b>Items to bring to the attention of the Committee</b>	
<b>D&amp;IC 27/05/019</b>	<b><u>Date &amp; Time of next Meeting:</u></b> <i>Tuesday 11<sup>th</sup> August 2025 at 9am via MS Teams</i>	