

## Confirmed Minutes of the Public Digital & Health Intelligence Committee Meeting Held On 3 October 2023 Via MS Teams

<b>Chair:</b>		
David Edwards	DE	Independent Member – Information Communication & Technology (IM-ICT)
<b>Present:</b>		
Akmal Hanuk	AH	Independent Member – Local Community (IM-LC)
<b>In Attendance:</b>		
Fiona Jenkins	FJ	Executive Director of Therapies & Health Sciences (EDTHS)
Bruce Johnson	BJ	Digital Service Delivery Architect (DSDA)
Angela Parratt	AP	Director of Digital Transformation (DDT)
Matt Phillips	MP	Director of Corporate Governance (DCG)
David Thomas	DT	Director of Digital and Health Intelligence (DDHI)
Francesca Thomas	FT	Head of Corporate Governance (HCG)
Mark Wardle	MW	Consultant Neurologist
James Webb	JW	Head of Information Governance and Cyber Security (HIGCS)
<b>Observers:</b>		
<b>Secretariat</b>		
Rachel Chilcott	RC	Corporate Governance Officer
<b>Apologies:</b>		
Keith Harding	KH	Independent Member – University (IM-U)
Meriel Jenney	MJ	Executive Medical Director (EMD)
Suzanne Rankin	SR	Chief Executive Officer (CEO)

Item No	Agenda Item	Action
DHIC 23/10/001	<b>Welcome &amp; Introduction</b>  The Committee Chair (CC) welcomed everyone to the Public meeting and confirmed the meeting was quorate.	
DHIC 23/10/002	<b>Apologies for Absence</b>  Apologies for absences were noted.  <b>The Committee resolved that:</b> a) The apologies were noted.	
DHIC 23/10/003	<b>Declarations of Interest</b>  <b>The Committee resolved that:</b> a) No Declaration of Interest were noted.	
DHIC 23/10/004	<b>Minutes of the Meeting Held 15 August 2023</b>  <b>The Committee Resolved that:</b> a) The Minutes of the Meeting held on the 15 August 2023 were confirmed as a true and accurate record.	

<p><b>DHIC 23/10/005</b></p>	<p><b>Action Log – Following the Meeting held on 15 August 2023</b></p> <p>The Action Log was received.</p> <p><b>The Committee Resolved that:</b></p> <p>a) The Action Log was discussed and noted.</p>	
<p><b>DHIC 23/10/006</b></p>	<p><b>Chair’s Action taken since the last Committee Meeting</b></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</b>		
<p><b>DHIC 23/10/007</b></p>	<p><b>Digital Transformation Progress Report</b></p> <p>It was noted that progress had not been significant due to a recent meeting in August.</p> <p>The DDT presented and summarised the Digital Transformation Progress Report. The report is available to view in detail alongside the papers received for the Public DHIC Committee on the 03/10/2023 for Agenda item 2.1.</p> <p>The DDHI added that the vacancy scrutiny had been applied across the organisation, and digital should not be any different, and this involved reshaping their services to achieve savings in the long-term.</p> <p>The IM-LC asked whether enough money had been put into digital throughout the current financial year, or whether the money had not been forthcoming.</p> <p>The DDHI responded that the digital budget was small, but that there was an opportunity to inform the organisation’s long-term financial modelling.</p> <p>The EDTHS asked if the recent regulations in place around scrutinising vacancies had impeded on the team’s ability to deliver digital schemes.</p> <p>The DDHI stated that he hoped to explain to the scrutiny panel that digital would not be able to move forward with a large number of vacancies, as they were fundamental to deliver their digital roadmap. He added that part of the problem was that they did not have interim staff to fill posts.</p> <p>The DDHI commented further that needed to get the message across that the more investment there was in digital, the more efficient the organisation could become – which would only have a positive impact on finances.</p> <p>The DDT noted that regarding recruitment, there were national pressures and competition for certain skillsets. In</p>	

	<p>addition, if they were unable to offer fully remote posts, they had been unable to fill a vacancy.</p> <p>The IM-ICT asked what England were doing differently to be able to invest in digital, and if there had been a deeper dive into the benchmark figures.</p> <p>The DDHI added that many Trusts in England had better infrastructure which made a big difference on spend. He stated that they had undertaken some benchmarking with other Health Boards in Wales, however some organisations had procured more services from Digital Health Care Wales (DHCW) than others. Their overall digital maturity was not comparable to England currently.</p> <p><b>The Committee Resolved that:</b></p> <p>a) The Committee reviewed the progress report and noted the planned investment case being developed.</p>	
<p><b>DHIC 23/10/008</b></p>	<p><b>Joint IMT &amp; IG Corporate Risk Register</b></p> <p>The Joint IMT and IG Corporate Risk Register Paper was presented and the following was highlighted:</p> <ul style="list-style-type: none"> <li>- The top risks remained unchanged since the August meeting – their top risk remained as cyber security;</li> <li>- Effective Resource Utilisation was at a lower risk due to the Health Board having found a better way forward on how they utilised existing resources;</li> <li>- They had removed the NWIS Governance Arrangements from the Risk Register since the August meeting.</li> </ul> <p>The DCG stated that the DDHI had briefed the September Board on the Board Assurance Framework for Digital.</p> <p><b>The Committee Resolved that:</b></p> <p>a) The Committee noted the progress and updates to the Risk Register report.</p>	
<p><b>DHIC 23/10/009</b></p>	<p><b>IG Data &amp; Compliance (Sis, Data Protection, GDPR, FOI, SARs, Staffing &amp; Mandatory Training)</b></p> <p>The HIGCS presented and summarised the IG Data &amp; Compliance Report which considered key information governance issues. The report is available to view in detail alongside the papers received for the Public DHIC Committee on the 03.10.2023 for Agenda item 2.3.</p> <p>The IM-ICT asked why the requests for medical records had increased. The HIGCS responded that he was unsure.</p> <p>The IM-ICT asked that if the number of requests sustained at this level, if there would be a challenge to meet compliance. The HIGCS responded that it would have to be raised with the operational management team responsible for that department to be resourced. However, he noted that the</p>	

	<p>single front door would improve compliance and make the process swifter.</p> <p><b>The Committee Resolved that:</b></p> <p>a) The Committee received and noted a series of updates relating to significant Information Governance issues.</p>	
<p><b>DHIC 23/10/010</b></p>	<p><b>Digital Services Key Performance Indicators</b></p> <p>The Digital Services Key Performance Indicators Report was presented. The slides provided stationary screenshots of the data being captured from Ivanti and displayed in Power BI for the reporting of Lag Key Performance Indicators within DH&amp;I.</p> <p>The DSDA highlighted that:</p> <ul style="list-style-type: none"> <li>- The numbers had increased since the previous year due to more digital teams coming on board. This would continue to increase;</li> <li>- The time taken to complete requests had reduced, which allowed staff more time to focus on further project related work;</li> <li>- The number of First Call Resolutions had increased, and less time was taken to close incidents;</li> <li>- There was some concern over incidents that had remained open for around a year – one of their biggest challenges was getting hold of users who were frontline workers.</li> </ul> <p>The DDT asked how far along were they in being able to automate some of the high-volume low complexity requests.</p> <p>The DSDA responded that the most significant was the new starters, which was a fully automated process. They hoped to have further automation processes implemented within the following few weeks.</p> <p>The DSDA continued:</p> <ul style="list-style-type: none"> <li>- Understanding of ‘requests’ had improved as the team had received fewer general requests – this was potentially due to the deployment of the new source service portal which enabled a search functionality, and the updated FAQ area for users to find self-help to software resolutions;</li> <li>- Change requests were heavily dominated by PARIS changes;</li> <li>- Change Management had gone live the previous week, which would soon be rolled out - this would allow other digital teams to be aware of changes;</li> <li>- The following week, The DSDA would set up a Problem Management Board to start logging problems.</li> </ul> <p>The IM-LC queried if there was a way to understand where people were struggling. He suggested that the requests received related to the hardware and software systems within the Health Board, and asked for the team’s general take on the system.</p>	

	<p>The DSDA responded that the team were working on a Configuration Management Database (CMDB) which tracked all of their devices and incidents logged against particular items.</p> <p>The DDHI added that:</p> <ul style="list-style-type: none"> <li>- Teams were undertaking an analysis piece to understand the implications of not adequately investing in modern devices;</li> <li>- They only had a small team of 3 or 4 people that undertook training, which was inadequate when looking at an organisation of this size;</li> <li>- He wished to reach out to the Executive Director of People &amp; Culture to understand levels of competence amongst staff;</li> <li>- They should consider publishing some of their performance outside of this Committee;</li> <li>- They would set some SLAs around what users could expect in terms of response times to their calls, so that they could monitor whether they were performing against the agreed internal standards.</li> </ul> <p>The IM-LC asked whether there would be merit in undertaking a digital survey to understand people's competence levels.</p> <p>The DDT responded that a survey would be undertaken for Electronic Prescribing Medicines Administration (EPMA), and that HR and HEIW colleagues had pulled together information on digital competence. He added that an all-encompassing digital strategy was needed for the whole organisation, which would be complex in an organisation with multiple domains and differing competence levels.</p> <p>The IM-ICT asked whether the team had looked into online learning (e.g. LinkedIn learning) for staff. The DDT responded that their online learning was not all-encompassing.</p> <p><u>Actions:</u></p> <ol style="list-style-type: none"> <li>1. To liaise with the Executive Director of People &amp; Culture (EDPC) to get an idea of the digital competence levels across staff in the organisation and potential options regarding training (DH).</li> </ol> <p><b>The Committee Resolved that:</b></p> <ol style="list-style-type: none"> <li>a) The Committee reviewed and noted the progress since the last update on the Ivanti service desk tool in relation to KPIs.</li> </ol>	
<p><b>DHIC 23/10/011</b></p>	<p><b>Framework Policies, Procedures &amp; Controls Update</b></p> <p>The DDHI highlighted that:</p> <ul style="list-style-type: none"> <li>- The IG Policy – the proposal was to bring this back to DHIC for review and approval as a substantive policy;</li> <li>- The IG Corporate Training Policy – this was being finalised and would be brought back to the following DHIC committee meeting;</li> </ul>	

	<ul style="list-style-type: none"> <li>- The IT Security Incidents Breach Guidance had been replaced by a Standard Operating Procedure (SOP) and would be deployed across the organisation.</li> </ul> <p><b>The Committee Resolved that:</b></p> <ul style="list-style-type: none"> <li>a) The Committee noted progress.</li> </ul>	
	<b>Items for Noting and Information</b>	
<b>DHIC 23/10/012</b>	<p><b>Minutes: Digital Directors Peer Group</b></p> <p>The DDHI highlighted that:</p> <ul style="list-style-type: none"> <li>- There had been further discussions on the RISP programme across Wales in terms of the go-live dates for individual organisations, due to the reliance on the expiry of the existing Fuji contract for some Health Boards. This had now been resolved;</li> <li>- The next meeting of the Digital Directors was that afternoon; and</li> <li>- They held a Regional Digital Summit around 3-4 weeks previously, which was well attended with ABUHB and CTUHB colleagues. They identified common areas of opportunity which they were keen to explore.</li> </ul> <p><u>Action:</u></p> <ol style="list-style-type: none"> <li>1. For a substantive piece of work to be brought back to DHIC which summarised how the regional work with ABUHB and CTMUHB was progressing, following discussions held at the recent Regional Digital Summit around common areas of opportunity (DH)</li> </ol> <p><b>The Committee Resolved that:</b></p> <ul style="list-style-type: none"> <li>a) The Committee noted the minutes of the 08.08.2023 and 05.09.2023 Digital Directors Peer Group meetings.</li> </ul>	
	<b>Agenda for Private Digital &amp; Health Intelligence Meeting</b>	
	<ul style="list-style-type: none"> <li>(i) <i>Minutes from the Private DHIC Meeting held on 15 August 2023</i></li> <li>(ii) Digital Budget and Investment and Digital Strategy Case for Investment (confidential paper)</li> <li>(iii) <i>Caldicott Guardian Requirements (Confidential paper – contains personal data)</i></li> <li>(iv) <i>Cyber Report including: Performance Measures (confidential paper)</i></li> </ul>	
<b>DHIC 23/10/013</b>	<p><b>Any Other Business</b></p> <p>No Other Business was discussed.</p>	
<b>DHIC 23/10/014</b>	<p><b>Items to bring to the attention of the Board / Committee</b></p> <p>No Items were brought to the attention of the Board / Committee.</p>	
	<b>Date &amp; Time of next Meeting:</b>	

	Tuesday 20 <sup>th</sup> February 2024 at 9am via MS Teams	
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