

**Information Governance Committee**  
**Monday 4 November 2019 at 10am**  
**Board Room, University Hospital Ayr**

- Present: Miss Lisa Tennant, Non-Executive Board Member (Chair)  
Mr Michael Breen, Non-Executive Board Member  
Mrs Margaret Anderson, Non-Executive Board Member  
Mr John Rainey, Non-Executive Board Member
- Ex-officio: Dr Martin Cheyne, Chairman, NHS Ayrshire & Arran  
Dr Alison Graham, Joint Medical Director  
Mr Derek Lindsay, Senior Information Risk Owner  
Mrs Jillian Neilson, Head of Information Governance/Data Protection Officer  
Mr John Wright, Director for Corporate Support Services
- In attendance: Mr Robert Bryden, Health Records Manager  
Mr Andy Grayer, Assistant Director, Digital Services  
Mrs Angela O'Mahony, Committee Secretary (minutes)

Miss Tennant welcomed everyone to the meeting and introductions followed.

**1. Apologies for absence**

Apologies were noted from Cllr Joe Cullinane and Mr John Burns.

**2. Declaration of any Conflicts of Interest**

There were no conflicts of interest declared.

**3. Draft Minutes of the Meeting held on 2 September 2019**

The minutes of the meeting held on 2 September 2019 were approved as an accurate record of discussions.

**4. Matters Arising**

- 4.1 The action log had previously been circulated and members received the following update:
- **Item 9.1.2, Information Security Breach** - Committee discussed the lack of progress in agreeing a Once for Scotland-data processing agreement (DPA) with Landauer to support information processing activity. Members considered the current position and there was concern at the lack of progress in agreeing a national position. Members suggested that it would be preferable for NHS Ayrshire & Arran to adopt the DPA proposed by Landauer if legally appropriate to do so. Mrs Neilson would review Landauer's DPA and provide feedback at the next meeting to enable members to consider

next steps.

- **Item 6.5.1, Data Sharing Partnership** – Dr Graham to provide an update at the next meeting.
- **Item 4.1, Corporate Records Management Learnpro** – Action complete.

All other matters arising were either on the agenda, the item was scheduled for discussion or had been completed.

## **5. For Assurance**

### **5.1 Public Records (Scotland) Act 2011**

- 5.1.1 The Head of Information Governance and DPO, Mrs Jillian Neilson, provided an update on progress to fulfil the requirements of the Public Records (Scotland) Act 2011.

Mrs Neilson advised that NHS Ayrshire & Arran had been asked to submit a Progress Update Review to the National Records of Scotland by January 2020 and work was ongoing to provide the report.

Mrs Neilson informed members that the implementation plan had been updated to reflect discussion at the last meeting. She highlighted that 12 Corporate Records Management – The Basics training sessions had taken place over the past few months attended by 128 members of staff and monthly sessions had been arranged until the end of 2020. A short life working group had been set up to produce a draft Employee Record Guideline for line managers to ensure a consistent approach.

Committee members received an update on progress in the completion of Information Asset Registers by Directorates. Mrs Neilson reported that progress was being made and further discussion was scheduled at Corporate Management Team in December 2019 to consider areas requiring greater focus. The Director of Finance gave assurance that Senior Finance Officers had met to consider progress in registering assets within Finance and as Board also held assets relating to the provision of national financial services, consideration was being given to providing guidance on assets that should be registered.

**Outcome: Committee members noted progress to fulfil the requirements of the Public Records (Scotland) Act 2011. Members welcomed the positive progress made to encourage completion of information asset registers.**

### **5.1.2 Health Records Management Plan Update**

The Health Records Manager, Mr Robert Bryden, provided a presentation on progress in taking forward the Health Records Management Plan, specifically in relation to Personal Health Records and the move to Paperlite working.

Mr Bryden explained that in NHS Ayrshire & Arran patient clinical data was hosted on the Clinical Portal (CP) and clinical records from across

the West of Scotland could be viewed. Since May 2019, Paperlite working had been rolled out across 16 Acute Outpatient specialties and a review of clinical administration processes was ongoing. The Digital Services team was exploring further opportunities for use of the CP. The work would move to phase two in 2020 with plans to roll out Paperlite to Inpatient and Day cases over the next two years. Consideration would then be given to extending the CP to the Health and Social Care Partnerships.

Mr Bryden outlined arrangements for storage of existing paper records. He explained that efforts were being made to co-locate as many records as possible in an appropriate physical storage environment so that they were easy to review, cull and destroy once they had reached the appropriate retention period, in accordance with the NHS Scotland Records Management Code of Practice and the General Data Protection Regulation (GDPR).

Mr Bryden described, in response to a question from a member, the approach being taken to upload rich data to the CP. Clinicians could also be provided with historical paper patient records if required. A short life working group had been set up to take forward Paperlite working and background business process tests of change were carried out prior to the roll out of Paperlite. Paper based Outpatient records had been paused in May 2019 and new information was being generated on the digital system and any hand written notes scanned and uploaded to CP.

Mr Bryden described the type of data hosted on CP from other systems, including Emergency Department records and digital correspondence and the benefits. He outlined the arrangements in place once a clinician had actioned and signed off clinical actions on the EPR, to enable Health Records to review patient records if required. Mr Bryden reported plans to enable clinicians to order laboratory investigations direct through Trakcare and receive and review electronic results and sign them off electronically. Dr Graham anticipated that implementation of the investigation module of Trakcare should begin in December 2019 and Digital Services would work closely with clinicians to roll this out in a carefully managed way.

Mr Bryden gave assurance, in response to a question from a member, that there were robust and secure arrangements in place for staff to gain appropriate access to the local and regional CP to enable them to fulfil their role.

Committee discussed the report and members were encouraged by the positive progress being made and the iterative approach being adopted working closely with clinicians to roll out Paperlite working. Members considered the risk to business continuity should clinicians be unable to access the electronic system. Mr Bryden gave assurance that Digital Services had robust back-up and emergency down-time processes in place and in the event of an unplanned outage the Health Records team would still be able to access electronic data.

**Outcome: Members noted the work carried out to date to**

**implement the Health Records Management Plan and the positive progress in the roll out of Paperlite arrangements.**

## **5.2 Information Governance update**

- 5.2.1 The Head of Information Governance and DPO, Mrs Jillian Neilson, presented the current position in relation to Information Governance.

Mrs Neilson outlined plans to transfer outstanding actions from Phase 2 GDPR/DPA 2018 Action Plan to a wider IG action plan. The updated plan would be provided at the next meeting on 17 February 2020. Mrs Neilson gave assurance that the fundamental requirement to promote compliance with the updated DP legislation had been completed, with the exception of the completion of Information Asset Registers, and the ongoing maintenance of this work was considered business as usual.

Mrs Neilson highlighted plans to improve the frequency of IG MAST training and review IG related policies and the IG Operational Delivery Group's terms of reference. Members supported the re-introduction of IG training to Corporate Induction to raise awareness and promote understanding about IG issues among new staff members. Mrs Neilson would discuss this with HR colleagues.

**JN**

Mrs Neilson outlined the members of the IG team. She explained that a recruitment process was underway for the Deputy Data Protection Officer role.

Mrs Neilson provided an update on national work taking place to develop joint DP controller arrangements with GP practices. The British Medical Association had agreed a joint controller information sharing agreement and a template had been agreed but not yet issued. Next steps would include discussion with the Head of Primary Care and GP Sub Committee. Boards and GP practices would be required to update their privacy notices stating that they were joint DP controllers. Mrs Neilson clarified that should a GP practice choose not to participate in joint DPO arrangements, the practice would be required to employ a DPO at its own expense and work in line with the rest of the organisation.

Committee members were advised that an IG week would take place during week commencing 4 November 2019 to raise the profile of IG and 10 interactive sessions had been arranged across hospital sites to which all staff had been invited. Members welcomed this awareness raising about the importance of IG.

**Outcome: Committee members noted the current position in relation to Information Governance and the proposed work programme. Members looked forward to receiving the updated Information Governance action plan, with timescales, at the next meeting on 17 February 2020.**

## 6. Information Security Policy Framework

- 6.1 The Assistant Director, Digital Services, Mr Andy Grayer and the Head of Information Governance and Data Protection Officer, Mrs Jillian Neilson provided a presentation on the NHS Scotland Information Security Policy Framework (ISPF). The Framework encompassed control measures to support compliance with ISO27001, Network and Information System Regulations 2018, GDPR, Public Sector Action Plan and Cyber Essentials. The Framework covered 41 areas with 223 controls. An audit process was planned to come into effect nationally in early 2020.

Mrs Neilson highlighted that while Board was already doing work in many of the areas outlined, given the nature of the Framework and the way that questions were posed, there were challenges in demonstrating that Board fully achieved the requirements and that there was a consistent approach across the organisation. Dr Graham reiterated these challenges due to the Framework's prescriptive nature and Board's inability to provide comments and feedback to Scottish Government.

Committee discussed progress to date in the implementation of the Framework. Members suggested that narrative be provided against the activities not yet undertaken to promote understanding in preparation for audit and to enable Committee to consider priorities and potential areas of organisational risk. Committee requested that a detailed report be submitted to the next meeting in relation to Governance, including a summary report outlining compliance and priorities against other areas of the Framework.

JN/AG

**Outcome: Committee members noted progress in the implementation of the Information Security Policy Framework. Members looked forward to receiving a detailed report on Governance and a summary of Board's overall compliance with the Framework at the next meeting on 17 February 2020.**

## 7. For Approval

### 7.1 Strategic Risk Register

- 7.1.1 The joint Medical Director, Dr Alison Graham, presented a progress report for the risk management arrangements and the Information Governance Strategic Risk Register.

Dr Graham informed members that the Risk Management Committee (RMC) terms of reference had been reviewed on 24 October and the Committee had been renamed as the Risk and Resilience Scrutiny and Assurance Group. A paper would be submitted to Audit Committee to formally approve this change. Dr Graham advised that the RMC had also discussed a draft model to measure the organisation's risk culture.

Committee members were advised that there was one very high IG

risk being treated, ID 603, relating to service/business interruption, exposure to malware via email and one high risk being treated ID 557, relating to compliance with IG. Review dates had been set for both of these risks.

Committee considered risk ID 557 and members queried whether this should remain a high risk given the mitigating actions being taken. Dr Graham advised that this risk was due for review in January 2020 and consideration would be given to mitigations and processes in place in reviewing the risk rating. Dr Graham explained that detailed risk templates were drawn up to define risk levels and she would make these available to members.

## **8. Papers to Note**

### **8.1 Information Security Breach report**

- 8.1.1 The Head of Information Governance and DPO, Mrs Jillian Neilson provided the Information Security Breach report for the period July to September 2019.

Mrs Neilson informed members that there were 33 information security breaches during the reporting period, mainly relating to information being sent to the wrong recipient or not being held securely. Mrs Neilson outlined the process for reporting and managing information security breaches and gave assurance that all information security breaches were actively managed by the IG team. She highlighted the remedial actions taken and lessons learned following information security breaches and clarified that while information security breaches were reported by Directorates, data did not necessarily reflect performance in that area as the breach may have been caused by another Directorate. The report also provided details of all information security breaches reported from 2014 until Q3 of 2019.

Committee members were advised that there were currently no information security breaches being investigated by the Information Commissioner's Office.

**Outcome: Committee members noted the Information Security Breach report.**

### **8.2 Freedom of Information report**

- 8.2.1 The joint Medical Director, Dr Alison Graham, presented the routine activity report for the Freedom of Information (Scotland) Act 2002 (FOISA) and the Environmental Information (Scotland) Regulations 2004 (EiRs) for the period July to August 2019.

Dr Graham reported that 121 FOI requests were received during the reporting period and 98.2% were responded to within the statutory timescale. This was rated as excellent performance by the Information Commissioner's Office and efforts would continue to maintain this performance. Dr Graham emphasised the significant effort required to

respond to FOI requests as they continued to be more complex and required to be answered by several Directorates.

Committee members were advised that one request for internal review was received during the reporting period and an appeal was ongoing with the Scottish Information Commissioner.

Dr Graham highlighted actions being taken through the FOI Action Plan in relation to review of national FOI LearnPro training and plans to improve the FOI/EIR processes across NHS Ayrshire & Arran.

**Outcome: Committee members noted the routine activity report for the Freedom of Information (Scotland) Act 2002 and the Environmental Information (Scotland) Regulations 2004 for the period July to August 2019.**

## **9. Integration**

- 9.1 Mrs Neilson advised that a recruitment process was underway for the Deputy Data Protection Officer with interviews scheduled for 22 November and it was hoped that the successful candidate would be in post in January 2020.

## **10. For Information**

### **10.1 Information Governance Pan Ayrshire Group, 25 September 2019**

Committee members noted the draft minutes of the meeting held on 25 September 2019.

### **10.2 Information Governance Operational Delivery Group, 4 October 2019**

The meeting scheduled to take place on 4 October 2019 was cancelled.

## **11. Any Other Competent Business**

- 11.1 Miss Tennant advised that this was Dr Martin Cheyne's last IGC meeting as he would be stepping down from his role as Chairman at the end of December 2019. Committee members thanked the Chairman for his participation and input at Committee meetings and wished him well for the future.

## **12. Date and Time of Next Meeting Monday 17 February 2020 at 10am, Room 1, Eglinton House, Ailsa Hospital, Ayr**

**Signed (Chair) ..... Date .....**