

Approved by Committee on 23 February 2026

## Information Governance Committee

### Monday 17 November 2025 at 9.30am

### MS Teams meeting

- Present: Mr Marc Mazzucco, Non-Executive Board Member (Chair)  
Ms Sheila Cowan, Non-Executive Board Member (Vice Chair)  
Mrs Sharon Morrow, Non-Executive Board Member  
Mrs Jean Ford, Non-Executive Board Member  
Cllr Douglas Reid, Non-Executive Board Member
- Ex-officio: Prof Gordon James, Interim Chief Executive and Senior Information Risk Owner  
Ms Marie Lynch, interim Head of Information Governance and Data Protection Officer (DPO)
- In attendance: Ms Marie Richmond, Assistant Director of Digital Services (Item 6.1)  
Mr Martin Duggan, Cyber Security Manager (Item 6.2.1)  
Miss Ashleigh Kennedy, Corporate Secretary (Minutes)

#### 1. Apologies for absence

- 1.1 Apologies were noted from Mrs Nicola Graham, Dr Crawford McGuffie and Mrs Lesley Bowie.

#### 2. Declaration of any Conflicts of Interest

- 2.1 There were no conflicts of interest declared.

#### 3. Draft Minute of the Meeting held on 1 September 2025

The minute of the meeting held on 1 September 2025 was approved as an accurate record of the discussion. The Chair commended the comprehensive nature of the previous minutes.

#### 4. Matters Arising

- 4.1 The action log had previously been circulated to Committee members. The following items were noted:
- Several items remain open due to staffing constraints within the Information Governance team.
  - Recruitment updates: Permanent Head of Information Governance and Corporate Records Manager appointed; backfill recruitment underway.
  - Committee requested indicative completion dates for outstanding actions by the next meeting.
  - Ms Sheila Cowan requested inclusion of comparative analysis against other West of Scotland boards for Cyber Risk ID 603.
  - Update action log to remove references to retired staff (e.g., Anne Wilson)

4.2 **IGC Work Plan 2025/26** – Committee members noted the work plan.

## 5. Risk

### 5.1 Information Governance Strategic Risk Register

The Interim Head of Information Governance and Data Protection Officer, Marie Lynch, presented the Risk Register report and advised that Risk ID 603 score increased to 15. Risk ID 557 removed and replaced by three new risks: Data Protection, FOI, Corporate Records Management.

Members discussed the following:

- Members agreed splitting Risk 557 improves clarity.
- Debate on FOI Risk (ID 936): consensus to retain as strategic for now, with review at next cycle.
- Committee requested inclusion of: Risk grid summaries, Review dates and Commentary on effectiveness of controls.

**Outcome: Committee members noted the report approved the removal of Risk 557 and addition of three new risks. FOI risk to remain strategic pending further monitoring.**

5.2 **Risk issues to report to the Risk and Resilience Scrutiny and Assurance Group** – The Chair has requested that the Risk and Resilience Group provide an updated report. The current approach should continue with the established target score.

## 6. Information Governance

### 6.1 Cyber Security update

The Assistant Director of Digital Services, Marie Richmond provided an update on the following key areas of activity undertaken by the Cyber Security team.

- Risk score for Cyber remains stable; comparison shows alignment with other boards.
- Recent phishing incident involving M365 account detected and contained within seven minutes and 18 seconds; no data accessed.
- Scottish Government requested additional 360° Cyber Assurance Audit by March 2026.
- Implementation of SILERA technology underway to monitor medical devices and IoT risks.

**Outcome: Committee noted positive performance of Microsoft Defender and requested progress updates on SILERA implementation.** MR

6.2 **Information Governance Update report**

6.2.1 **Information Security Incident Report**

Ms Lynch presented the Information Security Incident Report for the period July–September. She advised that 36 breaches were reported, which is above the quarterly average, including one ICO-notifiable breach. Table 1 shows the breakdown of incidents per directorate; notable increase within North HSCP from 2 to 10 incidents. Staff involved have received training. Ms Lynch confirmed she will review the two-year information handling issue and report back to NA HSCP. Overall, numbers remain low for a directorate of this size. ML

Mr Martin Duggan, Cyber Security Manager reported a phishing email referencing NHS Scotland. A staff member clicked the link and entered details. The account was compromised for seven minutes and 18 seconds before being disabled. No data was accessed. The Incident was managed with the Cyber Security Team in Dundee.

The following key items were discussed:

- Mr Douglas Reid shared insights from a recent conference on AI and counter-fraud, highlighting emerging risks and potential new harms.
- Ms Jean Ford commended the system’s effectiveness in detecting and mitigating issues.
- Professor Gordon James requested an update on Cylera implementation and its potential impact. Mr Duggan explained that Cylera will provide oversight of medical devices connected to the network, addressing challenges in device visibility. The implementation date is awaited, and installation will be managed by the infrastructure team.

#### 6.2.2 IG work programme update

Ms Lynch provided an update on the IG work programme, including actions under the Public Records (Scotland) Act, FOISA, GDPR, and audit recommendations. The following key points were noted:

- Work Plan Review: Actions under relevant legislation and audit recommendations have been reviewed.
- Recruitment: Recruitment is underway for a Deputy Data Protection Officer (DPO) and an IG Assurance Officer. Target is to have staff in post by end of March 2026.
- Deadlines: Some deadlines have been extended to March 2026 due to resource constraints.
- Risks: Staffing shortages pose a significant risk. It was agreed to escalate this to the Board with examples (e.g., FOI compliance pressures, delays in Records of Processing Activities).
- Destruction arrangements and improvement plans are monitored quarterly.
- Compliance actions include ensuring adequate cover for FOI Officer during leave periods.
- A paper was submitted to CMT in October requesting Directors to assign deputies for sign-off.
- Work continues on health records access compliance under UK GDPR.

## Approved by Committee on 23 February 2026

- Short-life working group (SLWG) established; meetings with suppliers underway.
- Office 365 impact assessments ongoing.
- Awaiting controlled document policy; timelines have been pushed back.
- Action A06: Data process log with RAG status in progress.

The following key items were discussed:

- Escalate staffing risk and associated examples to the Board.
- Continue recruitment for Deputy DPO and IG Assurance Officer, aiming for completion by March 2026.
- Develop and present a prioritised action plan with timelines at the next meeting.
- Maintain quarterly monitoring of destruction arrangements and compliance improvement plans.
- Progress supplier audits and contract reviews on a two-year cycle.

**Outcome: Committee members noted the update on the IG work programme 2025/26.**

### 6.2.3 Ropa Information asset register 6 month report

Ms Lynch provided an update on Ropa Information asset register 6-month report and highlighted the following key points:

- The ROPA is currently maintained in Excel, with migration to an M365 solution planned for early 2026.
- Compliance with Article 30 remains a priority. NHSAA previously adopted a single-trust approach, which involved significant manual work and slow progress. The contract for the current solution has not been extended.
- NHSAA will not move to the new platform immediately and will explore NHS 360 as an alternative. The NHS Information Governance team currently holds data within an Excel document.
- Legislative requirements will be prioritised, and assessments will be conducted to ensure personal information remains secure during system transitions.
- Recruitment is underway to backfill posts, and this work will be treated as a priority in the new year.

**Outcome: Committee members expressed concern regarding delays and requested a staged implementation plan with clear milestones. Ms Lynch to prepare a staged implementation plan with milestones and report back to the Committee, including progress tracking and escalation points.**

ML

## 7. Corporate Governance

### 7.1 Information Governance Operational Delivery Group

This item was deferred.

**8. Upcoming Internal Audit**

Ms Richmond advised of the upcoming audit on contracts and supplier management (Cyber focus) commencing November; final report expected March 2026.

**9. Key issues to report to NHS Board**

9.1 Committee members agreed that the following key issues be reported to the NHS Board meeting on 8 December 2025:

- Addition of three new strategic risks; removal of Risk 557.
- Cybersecurity assurance following phishing incident.
- Staffing constraints impacting delivery of IG obligations; risk of non-compliance highlighted.
- Need for prioritised action plan with clear milestones.

**10. Any Other Competent Business**

10.1 There was no other business.

**11. Date and Time of Next Meeting**

Monday 23 February at 9.30am, MS Teams meeting

Approved by the Chair, Marc Mazzucco

Date: 23 February 2026