

Pwyllgor Llywodraethu A Diolgelwch Digidol - Cyfarfod Cyhoeddus

Mon 18 May 2026, 13:00 - 15:10

Agenda

13:00 - 13:05 1. MATERION RHAGARWEINIOL

5 min

1.1. Croeso a Chyflwyniadau

I'w Nodi Cadeirydd

1.2. Ymddiheuriadau am absenoldeb

I'w Nodi Cadeirydd

1.3. Datganiadau o Fuddiant

I'w Nodi Cadeirydd

13:05 - 13:10 2. AGENDA GYDSYNIO

5 min

2.1. Cofnodion heb eu cadarnhau o gyfarfodydd blaenorol

2.1.1. Cyhoeddus

I'w Chymeradwyo Cadeirydd

2.1 DGS DRAFT Minutes PUBLIC 050326v2-en-cy-C.pdf (11 pages)

2.1.2. Preifat - Crynodeb

I'w Chymeradwyo Cadeirydd

2.1.i DGS 05032026 PRIVATE ABRIDGED-en-cy-C.pdf (5 pages)

2.2. Blaengynllun Gwaith

I'w Nodi Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

2.2 DG&S Forward plan.pdf (5 pages)

2.3. Adroddiad Ymgynghori a Chymeradwyo Dogfennau

I'w Chymeradwyo Cyfarwyddwr Gweithredol Strategaeth

2.3 Digital Governance Safety Key Document Approval Report 05.05.2026.pdf (5 pages)

13:10 - 13:25 3. PRIF AGENDA

15 min

3.1. Cofnod Gweithredu

I'w Nodi Cadeirydd

3.1 Action log.pdf (1 pages)

3.2. Y Gofrestr Risg Gorfforaethol

13:25 - 15:00 4. AGENDA SICRWYDD

95 min

4.1. Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol

Er Sicrwydd Rheolwr Tim Rheoli Gwasanaethau

📄 4.1 -IRLG-Q4 DGS -2025-26.pdf (5 pages)

4.2. Adroddiad Sicrwydd Llywodraethu Gwybodaeth

Er Sicrwydd Cyfarwyddwr Cyswllt ar gyfer Llywodraethu Gwybodaeth a Diogelwch Cleifion

📄 4.2 Information Governance DGS Committee Report - May 2026.pdf (6 pages)

4.3. Adroddiad Sicrwydd Gwasanaethau Gwybodaeth

Er Sicrwydd Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd ac Ymchwil

📄 4.3 ISD DGandS Information Assurance Report for May 26 (003).pdf (6 pages)

4.3.1. Egwyl

4.4. Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth

I'w Nodi Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd ac Ymchwil

📄 4.4 DHCW-R I KM- DGS Committee Assurance Report 18th May 2026.pdf (9 pages)

4.5. Adroddiad Grŵp Sicrwydd Gwybodeg Cymru

Er Sicrwydd Rheolwr Ansawdd (Cydymffurfedd Rheoleiddiol)

📄 4.5 DGSC April 2026.pdf (5 pages)

4.6. Adroddiad Sicrwydd yr Awdurdod Dylunio Technegol

I'w Nodi Cyfarwyddwr Gweithredol Gweithrediadau

📄 4.6 DGS TDA Update - May 2026.pdf (6 pages)

4.7. Egwyddorion Deallusrwydd Artiffisial

I'w Nodi Pennaeth Strategaeth

15:00 - 15:10 5. MATERION I GLOI

10 min

5.1. Adroddiad Crynhoi Cynnydd y Pwyllgor i'r Bwrdd

I'w Thrafod Cadeirydd

5.2. Unrhyw Faterion Brys eraill

Er Sicrwydd Cadeirydd

5.3. Dyddiad y cyfarfod nesaf: Dydd Iau 20 Awst, 2026

I'w Thrafod Cadeirydd



CYFARFOD PWYLLGOR LLYWODRAETHU A DIOGELWCH DIGIDOL - CYHOEDDUS

COFNODION, PENDERFYNIADAU A CHAMAU GWEITHREDU I'W CYMRYD



13:00 -15:10



05 Mawrth 2026



MS Teams

Yn Bresennol (Aelodau)	Blaenlythrennau	Teitl	Sefydliad
Rowan Gardner (Cadeirydd)	RG	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru (DHCW)
David Selway	DS	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru (DHCW)
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (DHCW)

Yn bresennol	Blaenlythrennau	Teitl	Sefydliad
Chris Collis	CC	Prif Bensaer Digidol	Iechyd a Gofal Digidol Cymru (DHCW)
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (DHCW)
Mark Edwards	ME	Prif Swyddog Diogelwch Gwybodaeth	Iechyd a Gofal Digidol Cymru (IGDC)
Darren Lloyd	DL	Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion	Iechyd a Gofal Digidol Cymru (IGDC)
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru (IGDC)

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 05032026

Jamie Manning	JM	Rheolwr Ansawdd (Cydymffurfedd Rheoleiddiol)	Iechyd a Gofal Digidol Cymru (IGDC)
Rachael Powell	RP	Cyfarwyddwr Cyswilt Gwybodaeth, Deallusrwydd ac Ymchwil	Iechyd a Gofal Digidol Cymru (IGDC)
Keith Reeves	KR	Rheolwr Tîm Rheoli Gwasanaethau	Iechyd a Gofal Digidol Cymru (IGDC)
Julie Robinson	JR	Cydlynnydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth Cyfarfodydd)	Iechyd a Gofal Digidol Cymru (IGDC)
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol Dirprwy Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)

Ymddiheuriadau	Teitl	Sefydliad
Alastair Klaus Neil	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)
Rhidian Hurle	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru (IGDC)

Acronymau			
SHA	Awdurdod Iechyd Arbennig	DG&S	Llywodraethu a Diogelwch Digidol
NDR	Adnoddau Data Cenedlaethol	ADS	Cymhwyso, Dylunio a Chymorth
R&I	Ymchwil ac Arloesi	SRO	Uwch Swyddog Cyfrifol
DSPP	Gwasanaethau Digidol ar gyfer Cleifion a'r Cyhoedd	WIAG	Grŵp Sicrwydd Gwybodeg Cymru
WICIS	System Wybodaeth Gofal Dwys Cymru	WASPI	Cytundeb Rhannu Gwybodaeth Bersonol Cymru
GIG	Gwasanaeth Iechyd Gwladol	WPAS	System Gweinyddu Cleifion Cymru
Iechyd a Gofal Digidol Cymru (IGDC)	Iechyd a Gofal Digidol Cymru	EMIS	Cyflenwr System Meddygon Teulu
BIPBA	Bwrdd Iechyd Prifysgol Bae Abertawe	DPIF	Cronfa Fuddsoddi Blaenoriaethau Digidol
WCCG	Porth Cyfathrebu Clinigol Cymru	VPAG	Cynllun Gwirfoddol ar gyfer Prisio Meddyginiaethau wedi'u Brandio, Mynediad a Thwf
UBRG	Uwch-berchennog Risg Gwybodaeth	TDA	Awdurdod Dylunio Technegol
DCB	Bwrdd Newid Digidol	AEDD	Asesiadau o'r Effaith ar Ddiogelu Data
ISD	Adran Gwasanaethau Gwybodaeth	ISDAG	Grŵp Sicrwydd Adran Gwasanaethau Gwybodaeth
CTCI	Cynllun Tymor Canolig Integredig	EOI	Mynegiant o Ddiddordeb
AQP	Cynlluniau Sicrwydd Ansawdd	DAP	Porth Mynediad Deintyddion

Rhif yr Eitem	Eitem	Canlyniad	Cam Gweithredu i'w Gofnodi
RHAN 1 – MATERION RHAGARWEINIOL			
1.1	Croeso a Chyflwyniadau Croesawodd y Cadeirydd bawb i'r cyfarfod.	Nodwyd	Dim i'w nodi
1.2	Ymddiheuriadau absenoldeb Nodwyd ymddiheuriadau am absenoldeb gan: <ul style="list-style-type: none"> Rhidian Hurle, Cyfarwyddwr Meddygol Gweithredol Alistair Klaas Neil, Aelod Annibynnol 	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiant Nodwyd nad oedd unrhyw Ddatganiadau o Fuddiant.	Nodwyd	Dim i'w nodi
1.4	Materion sy'n codi Gofynnodd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd, am nodi ychwanegiad ffurfiol yr Awdurdod Dylunio Technegol at y Cylch Gorchwyl.	Nodwyd	Dim i'w nodi
RHAN 2 – AGENDA GYDSYNIO Dosbarthwyd eitemau ar yr agenda gydsynio cyn y cyfarfod a nodwyd nad oedd y Cadeirydd wedi derbyn unrhyw sylwadau ymlaen llaw.			
2.1	Cofnodion y Cyfarfod Diwethaf Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: GYMERADWYO Cofnodion Cyhoeddus a Phreifat Cryno y cyfarfod diwethaf ar 20 Tachwedd 2025	Cymeradwywyd	Dim i'w nodi
2.2	Blaengynllun Gwaith Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Blaengynllun Gwaith	Nodwyd	Dim i'w nodi
2.3	Adroddiad Blynyddol Llywodraethu a Diogelwch Digidol Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DDERBYN er ARNODIAD i'r Bwrdd AIA .	Cymeradwywyd	Dim i'w nodi
2.4	Hunanasesiad Effeithiolrwydd y Pwyllgor Llywodraethu a Diogelwch Digidol Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI Hunanasesiad Effeithiolrwydd y Pwyllgor Llywodraethu Digidol a Diogelwch	Nodwyd	Dim i'w nodi
2.5	Cylch Gorchwyl Llywodraethu a Diogelwch Digidol	Cymeradwywyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 05032026 – Cynorthwywyd gan y Copilot

	Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: CYMERADWYO'r Telerau Gorchwyl Llywodraethu Digidol a Diogelwch.		
2.6	Llywodraethu Digidol a Chylch Diogelwch Busnes Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: GYMERADWYO'R Cylch Llywodraethu Digidol a Diogelwch Busnes	Cymeradwywyd	Dim i'w nodi
RHAN 3 - PRIF AGENDA			
3.1	Cofnod Gweithredu NODODD y Pwyllgor nad oedd unrhyw gamau gweithredu ar y Cofnod Camau Gweithredu.	Nodwyd	Dim i'w nodi
3.2	Y Gofrestr Risg Gorfforaethol Nododd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd fod 17 o risgiau ar y Gofrestr Risg Gorfforaethol ar hyn o bryd, ac roedd pump ohonynt i'w hystyried gan y Pwyllgor hwn, dau ohonynt wedi'u dosbarthu fel rhai preifat a fyddai'n cael eu trafod yn y sesiwn breifat a thri yn destun trafodaeth yn y sesiwn hon:- <ul style="list-style-type: none"> • DHCW0263 Swyddogaethau Data IGDC / DHCW0320 Ymddiriedaeth Dinasyddion a Rhanddeiliaid mewn defnyddiau o ddata Iechyd a Gofal Cymdeithasol – rhoddodd Darren Lloyd, Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion (DL) y wybodaeth ddiweddaraf am risgiau'r IG. <ul style="list-style-type: none"> ○ Cynhaliwyd cyfarfod gyda'r Prif Swyddog Meddygol a Dirprwy Brif Swyddog Meddygol Cymru ynghylch rhannu data a materion rheoleiddio hirhoedlog. ○ Roedd pwyslais ar ymgysylltu â'r cyhoedd, tryloywder ac egluro cyfrifoldebau sefydliadol ledled Cymru. ○ Roedd cynlluniau'n dod i'r amlwg ar gyfer gweithgor ar lefel weithredol i wneud cynnydd ar broblemau rhannu data cymhleth. ○ Yr amserlen amcangyfrifedig ar gyfer cynnydd pendant oedd 6-12 mis, er y bydd elfennau deddfwriaethol yn cymryd mwy o amser oherwydd cyfnod o ansicrwydd yn y Senedd. <p>Croesawodd y Pwyllgor y cynnydd mewn datblygiad ac arweinyddiaeth gan y Prif Swyddog Marchnata a'r pwysigrwydd atgyfnerthedig o gydymffurfiaeth â GDPR ac ymddiriedaeth y cyhoedd mewn defnyddio data.</p> <ul style="list-style-type: none"> • DHCW0300 CaNISC (Sgrinio a Gofal Lliniarol) – Rhoddodd Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau (SL) y wybodaeth ddiweddaraf am y risg. Ychydig iawn o fynediad a gadwyd i'r system ar gyfer ceisiadau archwilio a cheisiadau am fynediad at ddata gan y testun. Roedd gwaith ar y gweill i echdynnu 	Trafodwyd	

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 05032026 – Cynorthwywyd gan y Copilot

	<p>data a'i wneud yn hygyrch drwy Power BI neu offer tebyg. Roedd disgwyl y gellid cau'r risg yn fuan ar ôl i'r gwaith mudo data gael ei gwblhau.</p> <p>CAMAU GWEITHREDU: 202060305-A01 CD i ddychwelyd i'r cyfarfod gyda chynllun yn amlinellu'r broses ddatgomiynu CANISC lawn, gan gynnwys cynlluniau wrth gefn cais am fynediad at ddata gan y testun.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: TRAFODWCH.</p>		<p>CAMAU GWEITHREDU: 202060305-A01</p>
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RHAN 4 – AGENDA SICRWYDD

<p>4.1</p>	<p>Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol Cyflwynwyd gan Keith Reeves, Rheolwr Tîm Rheoli Gwasanaeth, a nododd fod adroddiad Chwarter Roedd 3 adroddiad yn cwmpasu'r cyfnod rhwng 1 Hydref a 31 Rhagfyr 2025.</p> <p>Cyflwynwyd yr uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> • Un Hysbysiad Rhybudd Cynnar i Lywodraeth Cymru yn ymwneud â thoriad AWS ac effaith ar yr e-lyfrgell. • Dau ddigwyddiad wedi'u hadolygu o dan Gyfarwyddeb NIS – ni chyflawnodd y naill na'r llall y trothwyon adrodd. • Cwynion: roedd saith yn ymwneud ag Ap GIG Cymru, naw yn ymwneud â'r Porth Mynediad Deintyddol a chyfeiriwyd y gweddill at fusnes IGDC neu gyrff GIG eraill. Materion cyffredin sy'n ymwneud â swyddogaethau a alluogir gan bractisau, gwirio hunaniaeth (sydd bellach yn gwella) a disgwyliadau defnyddwyr ynghylch amserlenni dyrannu deintyddol. • Roedd cylch gwaith IRLG wedi ehangu o adolygu digwyddiadau adweithiol i ddysgu sefydliadol ehangach, wedi'i gefnogi gan fewnwelediadau o adroddiadau rhaglenni, adolygiadau thematig a gwaith gwella parhaus. • Mae themâu allweddol sy'n dod i'r amlwg ar draws nifer o adolygiadau yn cynnwys diffygion mewn asesu effaith, yr angen am brosesau rheoli newid cryfach a heriau parhaus gyda chymhwysedd, sgiliau a hyfforddiant staff. • Adolygwyd adroddiadau rhaglen diweddar:- <ul style="list-style-type: none"> ○ Mamolaeth Ddigidol ○ Dadagregu Pwerau Cymru (uno data CTM) ○ Ymarfer Pegasws (Cynllunio at Argyfyngau) ○ Archwiliad ISO 20000 – adolygiad blynyddol <p>Canolbwyntiodd trafodaeth y Pwyllgor ar y canlynol:-</p> <ul style="list-style-type: none"> • Natur cwynion y cyhoedd a gwelliannau posibl i 	<p>Trafodwyd er Sicrwydd</p>	
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	<p>eglurder a chyfeirio at y cyhoedd.</p> <ul style="list-style-type: none"> Gofynnodd y Pwyllgor am ddadansoddiad manwl yn y dyfodol o themâu cwynion – yn enwedig y Porth Mynediad Deintyddol. <p>CAM GWEITHREDU 20260305-A02 CD i ddod â dadansoddiad manwl o gwynion porth deintyddol i gyfarfod pwyllgor yn y dyfodol.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DRAFOD yr Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol er SICRWYDD</p>		<p>CAM GWEITHREDU 20260305-A02:</p>
<p>4.2</p>	<p>Adroddiad Sicrwydd Llywodraethu Gwybodaeth Cyflwynodd Darren Lloyd, Cyfarwyddwr Cyswllt ar gyfer Llywodraethu Gwybodaeth a Diogelwch Cleifion (DL) yr Adroddiad ar Sicrwydd Llywodraethu Gwybodaeth yn nodi gwaith y tîm Llywodraethu Gwybodaeth o'r cyfnod hwn. Amlygwyd y pwyntiau allweddol canlynol:</p> <ul style="list-style-type: none"> Roedd cydymffurfiaeth gref â Phecyn Cymorth Llywodraethu Gwybodaeth ar gyfer 2024-25, gyda chamau gwella parhaus. Bu cynnydd o 100% yn nifer y ceisiadau Rhyddid Gwybodaeth dros y 12 mis diwethaf. Roedd y rhain yn cynnwys Rhyddid Gwybodaeth a Cheisiadau am Fynediad at Ddata gan y Testun. Roedd y cynnydd wedi effeithio ar y tîm Llywodraethu Gwybodaeth a'r sefydliad ehangach oherwydd cymhlethdod a chyfaint. Roedd cynnydd mewn Ceisiadau am Fynediad at Ddata gan y Testun yn gysylltiedig yn bennaf â cheisiadau am wybodaeth yn ymwneud â chyflogaeth. Roedd 31 o Asesiadau o'r Effaith ar Ddiogelu Data wedi cael eu prosesu yn ystod y cyfnod adrodd. Mae'r nifer uchel o asesiadau'n dangos gweithgarwch sefydliadol helaeth a'r angen am sicrwydd cadarn. Roedd paratoadau ar y gweill i gydymffurfio â'r Ddeddf Defnyddio a Mynediad at Ddata newydd, yn enwedig o ran defnyddiau ymchwil. Cynnydd yn niferoedd y galwadau gwasanaeth i'r Swyddog Diogelu Data oherwydd penodi optometryddion a'r galw nodweddiadol ar ddiwedd y flwyddyn. Roedd llawer o alwadau'n ymwneud â chymorth Pecyn Cymorth Llywodraethu Gwybodaeth, yn enwedig wrth i'r dyddiad cau cwblhau ym mis Mawrth agosáu. Cymorth Pecyn Cymorth Llywodraethu Gwybodaeth (gwasanaeth allanol) – mae'r sefydliad yn cynnal y pecyn cymorth ar gyfer pob sefydliad GIG. Roedd galw cynyddol yn ystod y cyfnod cwblhau blynyddol. <p>Trafododd y Pwyllgor y canlynol:</p>	<p>Nodwyd</p>	<p>Dim i'w nodi</p>

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 05032026 – Cynorthwywyd gan y Copilot

	<p>Y sbardunau y tu ôl i'r llwyth gwaith Rhyddid Gwybodaeth cynyddol a'r effeithiau gweithredol cysylltiedig. Cydnabuwyd bod ceisiadau Rhyddid Gwybodaeth masnachol yn cynyddu.</p> <p>Nododd y Pwyllgor werth archwilio cyhoeddi gwybodaeth yn rhagweithiol i leihau baich Rhyddid Gwybodaeth dro ar ôl tro.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODER yr Adroddiad Sicrwydd Llywodraethu Gwybodaeth a'r Pecyn Cymorth Llywodraethu Gwybodaeth.</p>		
4.3	<p>Adroddiad Sicrwydd Gwasanaethau Gwybodaeth Cyflwynodd Rachael Powell (RP), Cyfarwyddwr Cyswllt Gwybodaeth, Dealluswydd ac Ymchwil, Adroddiad Sicrwydd Gwasanaethau Gwybodaeth a thynnodd sylw at rai o'r pwyntiau o ddiddordeb i'r Pwyllgor:</p> <ul style="list-style-type: none"> • Roedd naw adolygiad Sicrwydd Ansawdd wedi'u cynnal ers mis Tachwedd. • Cyflawnwyd pob carreg filltir Cynllun Tymor Canolig Integredig ar gyfer Ch3; mae 54 o garreg filltir yn weddill ar gyfer Ch4 gyda hyder uchel y cânt eu cwblhau. • Cynhaliwyd digwyddiad Kaizen mawr ar y broses mapio i wella llywodraethu a llwybro ceisiadau data. • Diweddarwyd y dangosfyrddau (defnydd Porth Clinigol Cymru, clefydau prin, gofal brys ac argyfwng). Dangosfwrdd UEC yw'r cynnyrch a ddefnyddir fwyaf ar hyn o bryd. • Llywodraethu ac archwilio parhaus o gyhoeddi Power BI Pro yn dilyn digwyddiadau blaenorol. <p>Trafododd y Pwyllgor y pwyntiau canlynol o'r adroddiad:-</p> <ul style="list-style-type: none"> • Gofynnodd yr aelodau am fewnwelediadau i ddefnydd dangosfwrdd a phatrymau rhannu ar draws Byrddau Iechyd. • Roedd y Pwyllgor yn gefnogol i gyflwyno dangosfyrddau perfformiad i fonitro defnydd ac effaith. • Gofynnodd yr aelodau a oedd y nifer o geisiadau a dderbyniwyd yn ystod y flwyddyn wedi'u hystyried yn y Cynllun Tymor Canolig Integredig ac a oedd rhywfaint o hyder y gellid ei gyflawni. <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd Gwasanaethau Gwybodaeth</p>	Nodwyd	Dim i'w nodi
4.4	<p>Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth Cyflwynodd RP yr Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth gyda'r uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> • Adnewyddu'r Strategaeth Ymchwil ac Arloesi (2026-2029) – pwysleisiwyd nad ailysgrifennu oedd hwn 	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 05032026 – Cynorthwywyd gan y Copilot

	<p>ond gwaith esblygu sy'n adlewyrchu mwy o aeddfedrwydd.</p> <ul style="list-style-type: none"> • Roedd gwaith ehangu capasiti'r tîm ar y gweill drwy broses newid sefydliadol (dyddiad targed gweithredu: Awst 2026) • Roedd gwaith yn mynd rhagddo ar adnewyddu achrediad Deddf yr Economi Ddigidol ac alinio tystiolaeth drwy iPassport. • Datblygiad System Rheoli Arloesi ar y gweill; gwaith archwiliadol ar ISO 56002 ac asesiad posibl y Nod Barcut. • Gweithgarwch nodedig: Arddangosfa Enghreifftiol Bevan, monitro newidiadau polisi'r Unol Daleithiau sy'n effeithio ar gynnwys e-lyfrgelloedd a datblygu polisi Mynediad Agored. • Cyngorodd yr Asiantaeth Trwyddedu Hawlfraint gynydd o 7% mewn cost ar gyfer ychwanegu deallusrwydd artiffisial cynhyrchiol at drwyddedau'r GIG. <p>Trafodwyd y meysydd canlynol ymhellach:-</p> <p>Roedd cefnogaeth gref gan y pwyllgor i ehangu'r capasiti Ymchwil ac Arloesi, yn enwedig gan ragweld mynediad cynyddol at ddata'r Adnodd Data Cenedlaethol.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth a CHYMERADWYO'R Strategaeth Tair Blynedd.</p>		
4.5	<p>Adroddiad Grŵp Sicrwydd Gwybodeg Cymru</p> <p>Cyflwynodd Jamie Manning, Rheolwr Sicrwydd Ansawdd a Chydymffurfiaeth Rheoleiddiol (JM), Adroddiad Sicrwydd Gwybodeg Cymru a thynnodd sylw at y canlynol:-</p> <ul style="list-style-type: none"> • Roedd sawl prosiect mawr wedi cyflawni cydymffurfiaeth a mynd yn fyw gan gynnwys cyflwyno ePMA, LIMS 2.0 (Cyfran 2) a mudo cwmwl AWS ar gyfer EMIS Web. • Roedd 26 o brosiectau gweithredol yn symud ymlaen trwy'r broses sicrwydd. • Un uwchgyfeiriad: Aeth prosiect brechu sengl yn fyw heb gymeradwyaeth derfynol y Cyfarwyddwr Meddygol Gweithredol oherwydd camddealltwriaeth yn y broses. Mae'r ddogfennaeth bellach wedi'i chywiro ac mae'r broses wedi'i hail-gyfathrebu. • Roedd rhaglen gwella Kaizen ar y gweill; yn gweithio gyda phartner allanol (Reply) i foderneiddio sicrwydd ar gyfer cyflawni ystwyth. • Symud i ddangosfyrdau sicrwydd sy'n seiliedig ar ddata wedi'i gynllunio. <p>Ceisiodd y Pwyllgor sicrwydd ynghylch atal 'mynd yn fyw' anghydfurfiol a chawsant sicrwydd yn yr achos hwn ei fod yn gamddealltwriaeth o'r broses a bod camau gweithredu ar</p>	Er Sicrwydd	

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 05032026 – Cynorthwywyd gan y Copilot

	<p>waith i atal hyn rhag digwydd eto e.e. edrych ar yr holl Weithdrefnau Gweithredu Sefydlog, canllawiau a rhoi cyflwyniad TenTalk perthnasol.</p> <p>Rhan o rôl y Cyfarwyddwr Meddygol Gweithredol oedd sicrhau diogelwch ar gyfer y system, felly o ystyried na ellid awtomeiddio na digideiddio'r maes hwn, pa sicrwydd y gellid ei ddarparu.</p> <p>Ychwanegodd Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau (SL) fod IGDC yn trosglwyddo i fodel gweithredu newydd a bod ffocws mawr ar hynny oedd gweithio mewn ffordd fwy ystwyth a chyflymu'r ddarpariaeth. Fel y trafodwyd yn flaenorol, y nod yn y pen draw oedd awtomeiddio'r broses sicrhau cymaint â phosibl a symud tuag at gynlluniau wedi'u diffinio ymlaen llaw fel bod llawer o'r sicrwydd wedi'i wneud ymlaen llaw.</p> <p>CAM GWEITHREDU 20260305-A03 Gofynnodd y Pwyllgor i JM ddod â diweddariad yn ôl i'r cyfarfod o'r hyn a drafodwyd yn y grŵp cymheiriaid Reply.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI Adroddiad Grŵp Sicrwydd Gwybodeg Cymru er SICRWYDD.</p>		<p>CAM GWEITHREDU 20260305- A03:</p>
<p>4.6</p>	<p>Adroddiad Sicrwydd yr Awdurdod Dylunio Technegol Cyflwynodd Chris Collis, Prif Bensaer a Swyddog Technoleg, adroddiad yr Awdurdod Dylunio Technegol a darparodd yr uchafbwyntiau canlynol:-</p> <ul style="list-style-type: none"> • Egwyddorion saerïol wedi'u cwblhau; tryloywder gwell drwy gyhoeddiadau cyhoeddus. • Symud tuag at gofnodion penderfyniadau saerïol sy'n eiddo i dimau a gwneud penderfyniadau grymus o fewn gwarchodreiliau. • Blaenoriaethau Allweddol ar gyfer 2026: <ol style="list-style-type: none"> 1. Egluro llywodraethu pensaerïaeth ac aliniad Cylch Gorchwyl ar draws TDA, TDAG, WIAG a llywodraethu rhaglenni. 2. Aliniad â'r Bwrdd Saerïaeth a Safonau Cenedlaethol newydd. 3. Datblygu glasbrintiau, patrymau a safonau ar gyfer peirianeg gyson. 4. Canolbwyntio ar feysydd saerïaeth strategol (hunaniaeth, demograffeg, integreiddio, data). 5. Sicrhau bod asesiad saerïol wedi'i ymgorffori'n gynnar yn natblygiad achos busnes <p>Roedd y trafodaethau'n seiliedig ar y pwyntiau canlynol:</p>	<p>Trafodwyd</p>	<p>Dim i'w nodi</p>

	<ul style="list-style-type: none"> Anogodd y Pwyllgor adnoddau i gefnogi'r TDA, gan gydnabod yr heriau recriwtio. Nodwyd bod aliniad cenedlaethol yn dal i gael ei ffurfio; roedd yn debygol y byddai glynu wrth safonau cenedlaethol yn dod yn fwy ffurfiol. Tynnwyd sylw at bwysigrwydd llywodraethu digidol a rheolaethau gwariant ar draws y system gyfan. <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DRAFOD yr Awdurdod Dylunio Technegol.</p>		
RHAN 5 – MATERION I GLOI			
5.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Diolchodd RG i bawb am eu parodrwydd di-baid i ymgysylltu â materion heriol mewn modd tryloyw.</p>	Nodwyd	Dim i'w nodi.
5.2	<p>Eitemau ar gyfer Adroddiad Crynhoi Cynnydd y Cadeirydd i'r Bwrdd</p> <p>Nodwyd yr eitemau i'w cynnwys yn Adroddiad Crynhoi Cynnydd y Cadeirydd ar gyfer Bwrdd yr Awdurdod Iechyd Arbennig ym mis Mawrth fel;</p> <ul style="list-style-type: none"> Adroddiadau o ansawdd uchel 	Nodwyd	Dim i'w nodi
5.3	<p>Dyddiad y cyfarfod nesaf</p> <p>Cadarnhawyd mai dyddiad cyfarfod nesaf y Pwyllgor Llywodraethu a Diogelwch Digidol fydd 18 Mai 2026 am 1.00pm.</p>	Nodwyd	Dim i'w nodi



CYFARFOD PWYLLGOR LLYWODRAETHU A DIOGELWCH DIGIDOL – CRYNODEB PREIFAT

COFNODION, PENDERFYNIADAU A CHAMAU GWEITHREDU I'W CYMRYD

🕒 15:20 –16:30

📅 05 Mawrth 2026

📍 MS Teams

Yn Bresennol (Aelodau)	Blaenlythrennau	Teitl	Sefydliad
Rowan Gardner (Cadeirydd)	RG	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru (IGDC)
David Selway	DS	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru (IGDC)
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)

Yn bresennol	Blaenlythrennau	Teitl	Sefydliad
Mark Edwards	ME	Prif Swyddog Diogelwch Gwybodaeth	Iechyd a Gofal Digidol Cymru (IGDC)
Carwyn Lloyd Jones	CLJ	Prif Swyddog Cwmwl	Iechyd a Gofal Digidol Cymru (IGDC)
Darren Lloyd	DL	Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion	Iechyd a Gofal Digidol Cymru

Cofnodion heb eu cadarnhau:
Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 05 Mawrth 2026

			(IGDC)
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol Cymru (IGDC)
Julie Robinson	JR	Cydlynnydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru (IGDC)
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol Dirprwy Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)

Ymddiheuriadau	Teitl	Sefydliad
Rhidian Hurle	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru (IGDC)
Alistair Klaas Neill	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)
Chris Darling	Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)

Acronymau			
SHA	Awdurdod Iechyd Arbennig	DG&S	Llywodraethu a Diogelwch Digidol
Iechyd a Gofal Digidol Cymru (IGDC)	Iechyd a Gofal Digidol Cymru	GIG	Gwasanaeth Iechyd Gwladol
IM	Aelod Annibynnol	CTCI	Cynllun Tymor Canolig Integredig
NDR	Adnodd Data Cenedlaethol	ICO	Swyddfa'r Comisiynydd Gwybodaeth
RISP	Caffael y System Gwybodeg Radioleg	WASPI	Cytundeb Rhannu Gwybodaeth Bersonol Cymru
NCSC	Y Ganolfan Seiberddiogelwch Genedlaethol	MFA	Dilysu aml-ffactor
DoD	Cyfarwyddwyr Digidol	NIIAS	Teclyn Archwilio Integredig Deallus Cenedlaethol

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 05 Mawrth 2026 – Cynorthwywyd gan CoPilot

DR	Adfer ar ôl Trychineb	WPAS	System Gweinyddu Cleifion Cymru
DDaT	Data, Digidol a Thechnoleg	AAS	Canolfan Gweithrediadau Diogelwch

Rhif yr Eitem	Eitem	Canlyniad	Cam Gweithredu
RHAN 1 – MATERION RHAGARWEINIOL			
1.1	Croeso a Chyflwyniadau Croesawodd Rowan Gardner (RG), Aelod Annibynnol a Chadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol, bawb i'r sesiwn breifat.	Nodwyd	Dim i'w nodi
1.2	Ymddiheuriadau am Absenoldeb Nodwyd yr ymddiheuriadau canlynol: <ul style="list-style-type: none"> • Rhidian Hurle, Cyfarwyddwr Meddygol Gweithredol • Alistair Klaas Neil, Aelod Annibynnol • Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd 	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiant Nid oedd unrhyw ddatganiadau o fuddiant i'w nodi.	Nodwyd	Dim i'w nodi
RHAN 2 – AGENDA GYDSYNIO Dosbarthwyd eitemau ar yr agenda gydsynio cyn y cyfarfod a nodwyd nad oedd y Cadeirydd wedi derbyn unrhyw sylwadau ymlaen llaw.			
2.1	Cofnodion y cyfarfod diwethaf Cymeradwywyd cofnodion cyfarfod diwethaf y pwyllgor a gynhaliwyd ar 20 Tachwedd 2025 fel cofnod cywir. Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: GYMERADWYO cofnodion y cyfarfod diwethaf	Cymeradwywyd	Dim i'w nodi
RHAN 3 – PRIF AGENDA			
3.1	Cofnod Gweithredu Roedd un weithred ar y cofnod gweithredu ac roedd hon ar y gweill.	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 05 Mawrth 2026 – Cynorthwywyd gan CoPilot

	<p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODI'R Cofnod Gweithredu.</p>		
3.2	<p>Adroddiad Sicrwydd Seiberddiogelwch i gynnwys y diweddariad Seiberddiogelwch Cenedlaethol</p> <p>Cyflwynodd Mark Edwards (ME), Prif Swyddog Diogelwch Gwybodaeth yr Adroddiad Sicrwydd Seiberddiogelwch gan dynnu sylw at y gwaith a gwblhawyd dros gyfnod Chwarter 3 yn y meysydd canlynol:</p> <p>Adroddiad Seiberddiogelwch</p> <p>Efelychiadau Gwe-rwydo</p> <p>Risgiau Corfforaethol yn DATIX</p> <p>Gofynion Cyllido (2026-2027)</p> <p>Adroddiad Archwilio Fframwaith Asesu Seiber (CAF)</p> <p>Canfyddiadau CAF Cymru Gyfan</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODI'R Adroddiad Sicrwydd Seiber</p>	Nodwyd	Dim i'w nodi
3.3	<p>Y Gofrestr Risg Gorfforaethol</p> <p>Trafodwyd dwy risg breifat y Gofrestr Risg Gorfforaethol yn yr adroddiad sicrwydd Seiberddiogelwch.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>Nodi'r Gofrestr Risg Gorfforaethol</p>	Trafodwyd	Dim i'w nodi
RHAN 4 - MATERION I GLOI			
4.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Nid oedd unrhyw faterion arall.</p>	Nodwyd	Dim i'w nodi
4.2	<p>Eitemau ar gyfer Adroddiad Crynhoi Cynnydd y Cadeirydd i'r Bwrdd</p> <p>Ychwanegwyd at yr Adroddiad Uchafbwyntiau</p>	Nodwyd	Dim i'w nodi
4.3	<p>Dyddiad y cyfarfod nesaf:</p> <p>Cadarnhawyd y byddai dyddiad cyfarfod nesaf y Pwyllgor Llywodraethu Digidol a Diogelwch yn cael ei gynnal ddydd Llun 18 Mai 2026 am 1.00pm.</p>	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 05 Mawrth 2026 – Cynorthwywyd gan CoPilot



GIG
CYMRU
NHS
WALES

Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

	Daeth y cyfarfod i ben am 4:35pm.		
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DRAFFT

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 05 Mawrth 2026 – Cynorthwywyd gan CoPilot

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES FORWARD WORKPLAN

Eitem ar yr Agenda: Agenda Item:	2.2
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Robinson, Corporate Governance Coordinator
Cyflwynwyd gan: Presented By:	Laura Tolley, Head of Corporate Governance/Deputy Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the report	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIAINT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Digital Governance and Safety Committee	March 2026	Initial workplan approved
Laura Tolley	May 2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The Digital Governance and Safety Committee has a Cycle of Business that is reviewed

on an annual basis. Additionally, there is a forward workplan which is used to identify any additional timely items for inclusion to ensure the Committee are reviewing and receiving all relevant matters in a timely manner.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The following items are due to be presented to the Committee meeting on 18 May 2026.

Item	Executive Lead
Action log	Chair
Audit Reports	Relevant Lead
Committee Highlight Report to SHA Board	Chair
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Cyber Resilience Unit Annual Report	Executive Director of Operations
Cyber Security Assurance Report inc Funding	Executive Director of Operations
Declarations of interest	Chair
Forward Work Programme	Director of Corporate Affairs/Board Secretary
Incident Review and Organisational Learning Report	Executive Medical Director
Information Governance Assurance Report	Executive Medical Director
Information Services Assurance Report	Executive Medical Director
Minutes	Chair
Policy Report	Executive Director of Strategy
Research, Innovation & Knowledge Management Assurance Report	Executive Medical Director
Technical Design Authority	Executive Director of Operations
Wales Informatics Assurance Group Report	Executive Medical Director

4.2 The items below have been identified for the following meeting on 20 August 2026

Item	Executive Lead
Action log	Chair
Audit Reports	Relevant Lead
Committee Highlight Report to SHA Board	Chair
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Cyber Security Assurance Report inc Funding	Executive Director of Operations
Declarations of interest	Chair
Forward Work Programme	Director of Corporate Affairs/Board Secretary
Incident Review and Organisational Learning Report	Executive Medical Director
Information Governance Assurance Report	Executive Medical Director
Information Services Assurance Report	Executive Medical Director
Minutes	Chair
Policy Report	Executive Director of Strategy
Research, Innovation & Knowledge Management Assurance Report	Executive Medical Director
SIRO Annual Report	Executive Director of Operations
Technical Design Authority	Executive Director of Operations
Wales Informatics Assurance Group Report	Executive Medical Director

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks / matters for escalation to Board / Committee.



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Iechyd a Gofal
Digidol Cymru
Digital Health
and Care Wales

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the report	

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES CONSULTATION AND DOCUMENT APPROVAL REPORT

Eitem ar yr Agenda: Agenda Item:	2.3
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Ifan Evans, Executive Director of Strategy
Paratowyd gan: Prepared By:	Alex Lawrence – Quality Management System Manager
Cyflwynwyd gan: Presented By:	Jamie Manning, Quality Manager (Regulatory Compliance)

Pwrpas yr Adroddiad: Purpose of the Report:	For Approval
Argymhelliaid: Recommendation:	The Committee is being asked to
NOTE the contents of the report, and the updates provided. APPROVE the key document(s) that have been through consultation and internal endorsement.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Deliver high quality digital products and services
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RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A

<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	

<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	

<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u>	Leadership
<u>PARTH ANSAWDD DOMAIN OF QUALITY</u>	Safe
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	

<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: This report does not require an EQIA.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Controlled documents underpin a quality approach to Organisational management.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Some Policies outline legal requirements which public bodies are required to adhere to.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below Controlled documents have roles and responsibilities outlined within them.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Executive Leads	As noted key document	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance and Safety Committee	A&A	Audit & Assurance Committee
POL	Policy	POD	People and Organisational Development
AW	All Wales	APD	Applications Design



COMMS	Communications		
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3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 DHCW have a number of key documents, procedures and processes that help manage the running of the Organisation by outlining responsibilities related to legislation, accreditation, and regulation.
- 3.2 The following [Strategy](#) has been approved by the Executive Sponsor, Strategy Assurance Group, AI Steering Group, DHCW Management Board and SHA Board:

Document Reference	Title	Executive Sponsor	Consultation Dates	Management Board Date
DHCW-STR-2	DHCW Artificial Intelligence Strategy	Ifan Evans	N/A	12 th March 2026

- 3.3 All key documents are shared with the Local Partnership Forum for discussion / review as part of the formal consultation process.
- 3.4 All key documents are approved by the assigned committee (per policy).

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The DHCW Artificial Intelligence Strategy is requested to be reviewed and approved by the committee prior to publication and use within DHCW. The Strategy:

- Sets out how DHCW will enable safe, accountable and future ready AI across health and care in Wales.
- Responds to AI adoption outpacing governance, standards and assurance, creating risk and inconsistency.
- Aims to establish a coherent, nationally aligned approach to AI use across Wales.
- Positions DHCW as the national steward for AI governance, standards, data and architecture.
- Prioritises robust governance, national standards, and safe, repeatable AI delivery.
- Seeks to deliver productivity gains and free up time for patient care.
- Supports systemwide capability uplift, reducing duplication across organisations.
- Intended benefits include greater transparency, reduced variation, and increased public and professional confidence in AI use.



5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no key risks and matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE the contents of the report, and the updates provided. **APPROVE** the key document(s) that have been through consultation and internal endorsement.

Reference	Date of Meeting	Action/Decision	Action Lead	Due Date	Status/Outcome Narrative	Status	Revised action	Revised due date	Session Type
A01-20260305	05/03/2026	CD to return to meeting with a plan outlining the full CANISC decommissioning process, including SAR contingencies.	Chris Darling (DHCW - Director of Corporate Affairs / Board Secretary)	18/05/2026	CANSIC plan is currently in draft and going through engagement with relevant stakeholders and will be brought to the next committee meeting.	Underway			Public
A02-20260305	05/03/2026	CD to bring a detailed analysis of dental portal complaints to a future committee meeting The Committee requested that JM bring back to the meeting an update of what was discussed at the	Chris Darling (DHCW - Director of Corporate Affairs / Board Secretary)	18/05/2026	The action is on the agenda for May Committee meeting. Analysis underway, majority of complaints are redirected to health boards as the providing organisation	Closed			Public
A03-20260305	05/03/2026	Peer group.[]	Jamie Manning (DHCW - QA & Regulatory Compliance)	18/05/2026	The action is on the agenda for May Committee meeting.	Closed			Public

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

CORPORATE RISK REGISTER

Eitem ar yr Agenda: Agenda Item:	3.2
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Bethan Walters, Corporate Governance and Risk Manager
Cyflwynwyd gan: Presented By:	Chris Darling, Director of Corporate Affairs / Board Secretary

Pwrpas yr Adroddiad: Purpose of the Report:	To Receive/Discuss
Argymhelliad: Recommendation:	The Committee is being asked to
DISCUSS the Corporate Risks assigned to the Digital Governance and Safety Committee.	
NOTE the status of the Corporate Risk Register	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Deliver high quality digital products and services
---	--

RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	All are relevant to the report
ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A

<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	

<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 14001 ISO20000 ISO 27001 BS10008	

<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENabler</u>	Leadership
<u>PARTH ANSAWDD DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: Safe Care Governance, Leadership and Accountability	

<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	

ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below Additional scrutiny and clear guidance as to how the organisation manages risk has a positive impact on quality and safety
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be legal implications
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Should effective risk management not take place, there could be financial implications
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report. The risk owners will be clear on the expectations of managing risks assigned to them.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Management Board	16 April 2026	Reviewed
Laura Tolley	May 2026	Reviewed

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
BAF	Board Assurance Framework	WG	Welsh Government
NI	National Insurance	DPIF	Digital Priorities Investment Fund
DSPP	Digital Services for Patients and the Public	WICIS	Welsh Intensive Care Information Service
WASPI	Wales Accord on the Sharing of Personal Information	NDR	National Data Resource



SLA	Service Level Agreement	IMTP	Integrated Medium Term Plan
IRAT	Integration and Reference Team	ICU	Intensive Care Unit
ISD	Information Services Directorate	HBs	Health Boards
WG	Welsh Government	FDU	Finance Delivery Unit
SAIL	Secure Anonymised Information Linkage	CAPEX	Capital Expenditures
OPEX	Operating Expenditures	DU	Delivery Unit
WPAS	Welsh Patient Administration System		

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The [DHCW Risk Management and Board Assurance Framework \(BAF\)](#) outlines the approach the organisation will take to managing risk and Board assurance.
- 3.2 Committee members are asked to consider risk, in the context of DHCW Digital Governance and Safety 'what could impact on the Organisation being successful in the short term (1 – 12 months) and in the longer term (12 – 36 months)'.
- 3.3 There are wider considerations regarding organisational factors which include, sector, stakeholder, and system factors, as well as National and International environmental factors.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 In terms of DHCW's Corporate Risk Register, there are currently 15 risks on the Corporate Risk Register, of which 5 are for the consideration of this Committee, with 3 of these 5 registered as public facing risks as noted in [3.2i Appendix A](#).
- 4.2 The risks assigned to the DG&S Committee are as follows:
 -
 - DHCW0263 DHCW Data Functions
 - DHCW0300 Canisc (Screening & Palliative Care)
 - DHCW0320 Citizen and stakeholder trust in uses of Health and Social Care data
 - DHCW0341**
 - DHCW0342**

NEW RISKS (0) – 0 public, 0 private
There were no new risks escalated during the period

RISKS WITH SCORE CHANGES (0) – 0 public, 0 private
There were no changes in score during the period.

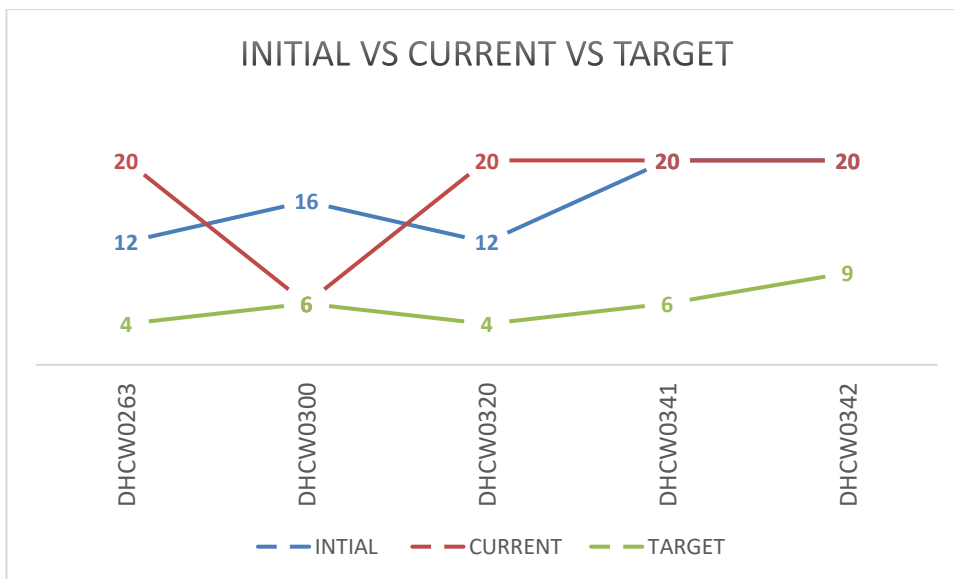
RISKS REMOVED (0) – 0 public, 0 private
There were no risks removed during the period

4.3 On the Corporate Risk Register there are eleven critical risks overall, of which four are assigned to the Digital Governance and Safety Committee.

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)					DHCW0298 – Delay in WLIMS implementation 2.0 →
	MAJOR (4)			DHCW0349 – RADIS Team Scaling Back 25/26 ↔	DHCW0337 Sustainable Digital Services and Development Funding Model ↔ **DHCW0341 ↔ **DHCW0342 ↔ DHCW0348 Transition to new data Architecture ↔ DHCW0354 DPIP Funding Pause and Review ★	DHCW0331 - Fixed term funding resource ↔ DHCW0333 - WICIS Implementation Delay ↔ DHCW0263: DHCW Functions ↔ DHCW0320 - Citizen and stakeholder trust in use of HSC data ↔
	MODERATE (3)		DHCW0300 – Canisc (Screening and Palliative Care) ↔		DHCW0347 National Target Architecture Roadmap ↔ DHCW0237 – New Requirements impact on resources and plan ↔	DHCW0351 - Changes in political landscape in Wales ↔
	MINOR (2)					
	NEGLIGIBLE (1)					

- ★ New Risk
- ↔ Non-Mover
- ↓ Reduced
- ↑ Increased

4.4 The Committee are asked to consider the overview of initial risk score versus target and risks that may be identified for further investigation and action.



Please note that DHCW0341 and 0342 are all tracking their initial score and therefore overlaid on the graph.

4.5 Committee members are asked to note the following changes to the Corporate Risk Register as a whole (new risks, risks removed and changes in risk scores):

NEW RISKS (0) – 0 public, 0 Private

There were no new risks escalated during the period

RISKS WITH SCORE CHANGES (0) – 0 public, 0 private

There were no changes in score during the period.

RISKS REMOVED (2) – 2 public, 0 private

There were two risks removed during the period

Reference	Name	Primary Risk Domain	Committee Assignment
DHCW0352	Delivery of 2025-2026 Milestones	Service Delivery	Programmes Delivery Committee
DHCW0353	Programme Funding - Connecting Care	Financial	Programmes Delivery Committee



5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 The Committee is asked to note the changes in the risk profile during the reporting period as a result of the changes to the Corporate Register.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
DISCUSS the Corporate Risks assigned to the Digital Governance and Safety Committee. NOTE the status of the Corporate Risk Register	

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES INCIDENT REVIEW AND ORGANISATIONAL LEARNING REPORT

Eitem ar yr Agenda: Agenda Item:	4.1
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Rhidian Hurle, Executive Medical Director
Paratowyd gan: Prepared By:	Keith Reeves – Service Management Team Manager
Cyflwynwyd gan: Presented By:	Rhidian Hurle, Executive Medical Director

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
RECEIVE the report for ASSURANCE	



1 ASESAD O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Resilient Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 20000 - IT Service Management Systems
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 20000, ISO 27001, ISO 9001, ISO 13485, SDI (Service Desk Institute Standard)	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Learning Improvement and Research
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: All Domains Apply	
<u>DATGANIAD ASESAD O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: Quarterly Assurance Report	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	<p>Yes, please see detail below</p> <p>The report provides a summary of all reportable incidents and any quality and safety activities undertaken as remediation.</p> <p>Should the remedial required action not be undertaken there could be a detrimental impact on quality and safety.</p>
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	<p>Yes, please see detail below</p> <p>The report provides a summary of all reportable incidents including any which meet our legal, regulatory, and statutory requirements.</p> <p>Should corrective and remedial action not be undertaken appropriately there could be a legal impact.</p>
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	<p>Yes, please see detail below</p> <p>The report contains a summary of any incidents where redress may be required.</p> <p>Some incidents may result in financial redress for the organisation.</p>
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	<p>No, there is no direct impact on resources as a result of the activity outlined in this report.</p>
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	<p>No, there are no specific socio-economic implications related to the activity outlined in this report.</p>
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	<p>No, there are no specific research and innovation implications relating to the activity outlined within this report.</p>

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Rhidian Hurle	05/05/26	Approved



Acronymau Acronyms			
CFF	Contributory Factors Framework	DHCW	Digital Health and Care Wales
eQMS	Electronic Quality Management System	IRLG	Incident Review & Learning Group
LHB	Local Health Board	MHRA	Medicines and Healthcare products Regulatory Agency
SHA	Special Health Authority	SLA	Service Level Agreement
CFF	Contributory Factors Framework	DHCW	Digital Health and Care Wales

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The purpose of the Incident Review and Learning Group (IRLG) is to have an organisational wide reporting group which covers all aspects of incident review and associated learning across the organisation, to maximise the opportunity for organisational learning and take forward recommendations for improvement.
- 3.2 This report includes specific information regarding Quarter 4 (covering the period **1st January to 31st March 2026**), as well as highlights through FY 2025/26.

This provides a review of activities to provide assurance to the Digital Governance and Safety Committee around Reporting, Reviewing, Learning, and Improving.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

- 4.1 The report included in [Appendix A](#) includes all Early Warning Notifications & National Reportable Incidents by Digital Health and Care Wales (DHCW), any additional reviews undertaken, identification of lessons learned, and recommendations made, feeding into improvements for the organisation to take forward, within the reporting period.
- 4.2 The outcome of reviews will support the work of the Board in the Shared Learning approach.
- 4.3 For governance purposes the IRLG reports to the Digital Governance and Safety Committee.
- 4.4 This report covers the reporting period **1st January to 31st March 2026** inclusive, as well as highlights through FY 2025/26.
- 4.5 Specific points to note in relation to this report.



- 4.6 There were three early warning notifications issued to Welsh Government in quarter 4, two were in relation to People & OD and one related to a potential Patient Safety incident. Over the year there has been a total of 9 notifications issued.
- 4.7 Of the Complaints, Concerns, and Feedback, a review of complaints in relation to NHS Wales App, and the Dental Access Portal is underway to identify what additional learning can be derived from them.
- 4.8 For lessons learned the report covers highlights from an NHS Wales App implementation, as well as the thematic review around Change as the cause of Incidents, as well as programme lessons learned related to the Bridgend Disaggregation and Digital Maternity Programmes.
- 4.9 Some elements of the report have been reformatted to improve ease of reading, notably the Contributory Factors Framework section moving from a table to quarterly comparison graphs. In relation to this section, there has been a noticeable drop in the number of incidents assessed as improvements identified and implemented throughout the year has reduced the total number of incidents.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

There are no matters for escalation, the paper is presented for assurance by the Digital Governance and Safety Committee.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
RECEIVE the report for ASSURANCE	

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

INFORMATION GOVERNANCE

ASSURANCE REPORT

Eitem ar yr Agenda: Agenda Item:	4.2
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Rhidian Hurle, Executive Medical Director
Paratowyd gan: Prepared By:	Siân Howson, Information Governance
Cyflwynwyd gan: Presented By:	Darren Lloyd, Associate Director for Information Governance and Patient Safety and Data Protection Officer

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE this report from the DHCW Information Governance team for ASSURANCE .	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	BS 10008 - Evidential Weight & Legally Admissible Information Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	Yes, please see detail below The report outlines methods by which Digital Health and Care Wales complies with Information Governance legislation, standards and good practice
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Rhidian Hurle	005/05/26	Approved

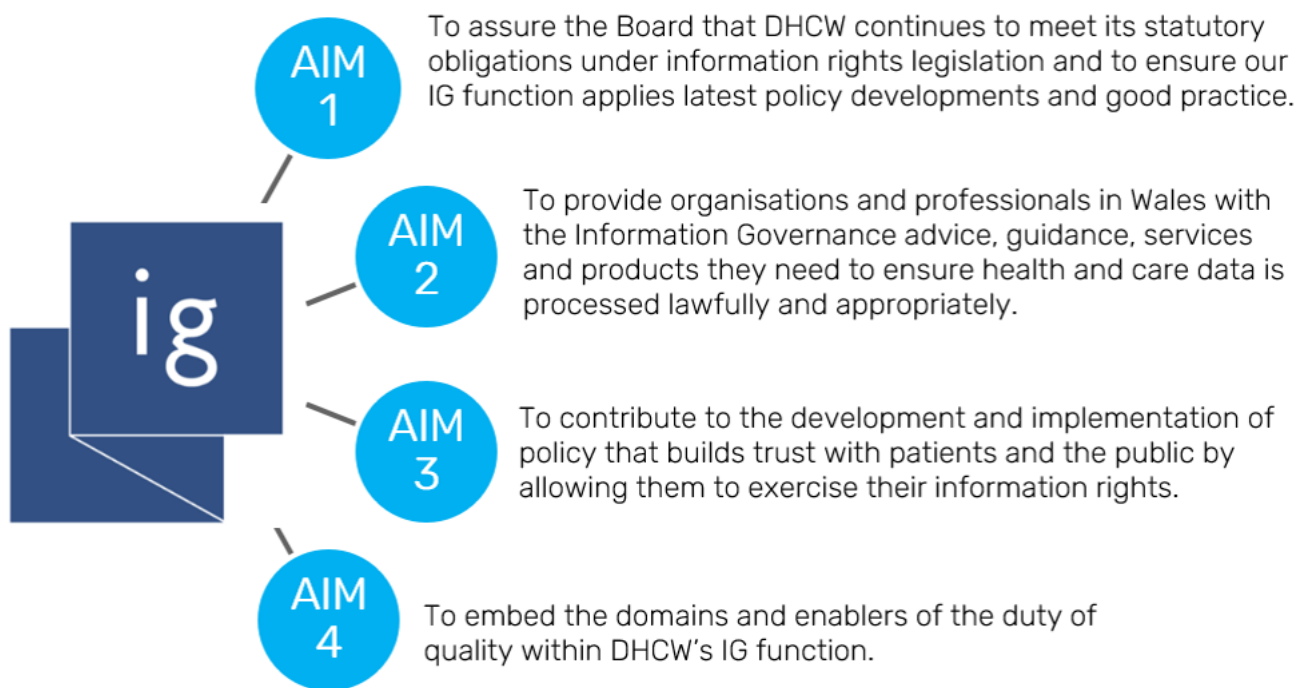
Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium-Term Plan	IG	Information Governance
WG	Welsh Government	WASPI	Wales Accord on the Sharing of Personal Information
FOIA	Freedom of Information Act	ICO	Information Commissioner's Office
WASPI	Wales Acord on the Sharing of Personal Information	DPIA	Data Protection Impact Assessment
GMP	General Medical Practitioners	DPO	Data Protection Officer



NDR	National Data Resource	CP	Community Pharmacies
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3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 This report is presented to the Committee to provide assurance about the way in which Digital Health and Care Wales (DHCW) manages its information about patients and staff, highlighting its compliance with Information Governance (IG) legislation, standards and good practice.
- 3.2 This report complements the DHCW three-year IG strategy, which sets out how the Information Governance team support the delivery of DHCW’s statutory functions and contributes to its Integrated Medium-Term Plan (IMTP) and associated business plans.
- 3.3 This report outlines key assurance activities to the Committee for the reporting period of 31st January 2026 to 26th April 2026. Relevant updates from this reporting period are provided based on the strategic aims of the Information Governance team, as set out in the DHCW IG three-year IG strategy:





4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 Corporate Information Governance Compliance (AIM 1)

Aim: To assure the Board that DHCW continues to meet its statutory obligations under information rights legislation and to ensure our IG function applies latest policy developments and good practice.

Relevant updates for this Committee period are:

- DHCW Welsh Information Governance Toolkit actions
- DHCW Information Governance incidents and complaints
- DHCW Information Governance access for information requests

Updates on these items are provided in [Appendix A](#).

4.2 National Information Governance Framework (AIM 2)

Aim: To provide organisations and professionals in Wales with the Information Governance advice, guidance, services and products they need to ensure health and care data is processed lawfully and appropriately.

Relevant updates for this Committee period are:

- DHCW Data Protection Impact Assessments (DPIAs)
- Number of calls into DHCW Information Governance ActionPoint System

Updates on these items are provided in [Appendix B](#).

4.3 Information Governance Policy (AIM 3)

Aim: To contribute to the development and implementation of policy that builds trust with patients and the public by allowing them to exercise their information rights.

Relevant updates for this Committee period are provided in [Appendix C](#).

4.4 Duty of Quality (AIM 4)

Aim: To embed the domains and enablers of the duty of quality within DHCW's IG function.

The Duty of Quality, as part of the Health and Social Care (Quality and Engagement) (Wales) Act 2020 applies to NHS bodies in Wales and has two overarching aims:

- To improve the quality of health services
- To improve outcomes for people in Wales

Relevant updates for this Committee period:

4.4.1 DHCW Information Governance attended a new group; National Health and Social Care Data Use and Sharing Group. This group is a short-term group Chaired by the Deputy Chief Medical Officer. The overarching purpose is to unlock progress on issues that have been historically challenging by defining clinical and care use cases, resolving misconceptions, clarifying the legal basis for data flows, understanding the opportunities and constraints of the current legal framework, aligning regulators and delivery partner understanding, and establishing foundations for a shared operating model for Wales.

4.4.2 Actions are ongoing towards the implementation of compliance activity for the Data Use and Access Act (2025). This piece of legislation is due to come into effect as a phased approach over the course of 2026, with some changes already having taken affect. Digital Health and Care Wales Information Governance team is working through a DUAA action plan to ensure the organisation meets the requirements of the legislation. Some of the relevant key themes in DUUA include:

- Changes to the Information Commissioners Office including a name change to the Information Commission and a change in powers such as requiring an organisation to pay for an independent report as part of an enforcement action
- Changes to legal basis in respect of research purposes
- Clarity around Subject Access Request processes
- Requirements around an organisation’s complaint process

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are no issues of escalation to Committee.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE this report from the DHCW Information Governance team for **ASSURANCE**.

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES INFORMATION SERVICES ASSURANCE REPORT

Eitem ar yr Agenda: Agenda Item:	4.3
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Rhidian Hurle, Executive Medical Director
Paratowyd gan: Prepared By:	Rhiannon Bines, ISD Information Planning Manager
Cyflwynwyd gan: Presented By:	Rachael Powell, AD for Information, Intelligence & Research

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE the current position in relation to the ongoing work to enhance the ASSURANCE around the management and reporting of data.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Drive better value and outcomes through innovation
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Information
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: EQIA is not applicable to the content of this report	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below The formalisation of internal assurance processes for information will have a positive impact on the organisation. The DEA accreditation ensures safe and secure management of information which will have a positive impact.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below ISD and NDR are developing an approach to operationalise the Secure Data Environment to further support R&I activities through safe, secure access to anonymised data.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Rhidian Hurlle	15/04/2026	Approved
Digital Governance & Safety Committee	18/05/2026	Noted

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium Term Plan	ISDAG	Information Services Department Assurance Group
AQP	Assurance Quality Plan	SCRR	Safety Case and Readiness Report



ISD	Information Services Department	API	Application Programming Interface
ViH	Value in Health	RFC	Request for Change
APC	Admitted Patient Care	SOP	Standard Operating Procedure
POD	People and Occupational Development	WG	Welsh Government
WISDM	Welsh Information Solution for Diabetes Management	DPO	Data Protection Officer
ICO	Information Commissioner's Office	WEDs	Welsh Emergency Department System
DCN	Diabetes Consultant Note	ED	Emergency Department
SRG	Strategic Resourcing Group	IG	Information Governance
UKSA	UK Stats Authority		

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 This report outlines the current position regarding some of the key priorities being progressed, in relation to internal assurance processes for the acquisition, management, reporting and sharing of data.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

4.1 The delivery of the Information and Analytics Strategy is supported by the implementation of detailed IMTP and Business Plan milestones. There was a total of 44 milestones in the Value from Data portfolio for 25/26 and 95% (42) were delivered by the end of the financial year with the remaining 5% (2) reforecast into 26/27. Delivery planning and assurance arrangements for Information Services continue to demonstrate maturity, with a total of 65 Information Services milestones achieved in 2025/26. All IMTP and Business Plan milestone planning for 2026/27 has been completed, with all associated resource requests acknowledged. There are 81 milestones planned for delivery in 2026/27, including 9 milestones scheduled for completion in Q1, providing early assurance on delivery readiness and capacity planning.

4.2 Since the beginning of February 2025, the ISD Assurance Group (ISDAG) has reviewed nine Assurance Quality Plans (AQP's), three Requests for Change (RFC), and have approved five projects as having completed their assurance activities in relation to their impact on Information Services.

4.3 The assurance of analytics published outside of DHCW continues to strengthen, with 100% of publicly available reports now processed through the Power BI Assurance Framework. This provides increased confidence that dashboards have undergone appropriate governance, quality and information governance checks prior to publication. Work remains a priority to increase assurance coverage for dashboards shared across NHS Wales.



- 4.4 Work to formalise and embed clear governance routes for data-sharing continues, building on the outcomes of the Data Governance Kaizen event. This has helped to clarify decision-making responsibilities, streamline the end-to-end data request process and further strengthen transparency, consistency and assurance around data sharing.
- 4.5 Assurance of data platform resilience and continuity has improved, demonstrated through successful failover testing between NDC and CDC environments. This provides increased confidence that data warehouse and analytics services can be maintained during incidents or planned outages, supported by clearer performance monitoring and escalation processes.
- 4.6 Access to population-level cancer intelligence has been expanded in a controlled and governed way, through the publication of a pseudonymised Patients Treated and Diagnosed dashboard. This enables wider visibility for executive and system users while ensuring appropriate protections for personal data.
- 4.7 The quality, consistency and coverage of national reporting continues to improve, through the consolidation and publication of key dashboards including benchmarking, unscheduled care and pre-operative anaemia products. These collectively strengthen assurance in the data used by Welsh Government and Health Boards to monitor system pressures and performance.
- 4.8 Assurance around the use of clinical data has been strengthened through the continued development and presentation of national dashboards, including teledermatology, radiotherapy analysis, pelvic fractures and rare diseases. These products bring together multiple datasets with appropriate access controls, improving confidence in the governance and quality of clinical reporting used to support service improvement.
- 4.9 Greater assurance has been provided over workforce and operational intelligence, through completion of the Strategic Workforce Planning App and asset utilisation dashboards. These enable more consistent, auditable reporting and improved oversight of key operational risks.
- 4.10 DHCW continues to meet national and international statistical obligations, with timely delivery of Wales' data to OECD publications. Through this participation, Wales not only contributes to a global understanding of health system performance but also benefits from internationally comparable data that informs national decision-making and service delivery.



5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 No key risks or matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
 Recommendation:

The Committee is being asked to

NOTE the current position in relation to the ongoing work to enhance the **ASSURANCE** around the management and reporting of data.

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES RESEARCH, INNOVATION & KNOWLEDGE MANAGEMENT ASSURANCE REPORT

Eitem ar yr Agenda: Agenda Item:	4.4
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Rhidian Hurle, Executive Medical Director
Paratowyd gan: Prepared By:	Louisa Dean, Research and Innovation Support Manager Rachel Sully, NHS Wales Research, Innovation, e-Library and Knowledge Services Manager
Cyflwynwyd gan: Presented By:	Rachael Powell, Associate Director of Information, Intelligence & Research

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE and REVIEW progress made in advancing the DHCW Research and Innovation and e-Library services.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Drive better value and outcomes through innovation
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Prosperous Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
A Prosperous Wales, A Resilient Wales, A Healthier Wales, A Wales of Cohesive Communities, A Globally Responsive Wales	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	More than one applies
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
Safe Care, Effective Care, Governance, Leadership and Accountability	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD DOMAIN OF QUALITY</u>	More than one domain applies
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
ISO27001, ISO20000, ISO90001, ISO 14001, ISO13845, BS10008	
<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: The Committee is requested to note and review progress made in advancing DHCW Research and Innovation and NHS Wales e-Library services.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below A key strategic objective is to improve the quality and impact of our research and innovation activities and to positively embed evidence-based practices across all of DHCW's business activities.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	Yes, please see detail below Committing to an R&I approach will require investment (core roles to be consumed within CD budget) and an understanding of funding opportunities and appropriate charging models for ongoing activities.
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	Yes, please see detail below As part of ongoing planning, the team will be assessing resource implications associated with new work (i.e. costing proposals and identifying required resource).
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	Yes, please detail below There are significant socio economic benefits linked to increased R&I activity.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below The R&I function is committed to driving the strategic mission, 'Drive better outcomes and value through innovation'.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Rachel Sully	05/05/26	Further drafting
Rachael Powell	05/05/26	Further drafting and approval
Rhidian Hurle		Approval



Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IIR	Information, Intelligence & Research	IMTP	Integrated Medium Term Plan
R&I	Research and Innovation	AI	Artificial Intelligence
O&E	Operational and Engagement	IG	Information Governance
DEA	Digital Economy Act	ISD	Information Services Directorate
WHELPF	Wales Higher Education Libraries Forum	WIDI	Wales Institute of Digital Information
OCP	Organisational Change Process	NHSWLKS	NHS Wales Library and Knowledge Services
SOP	Standard Operational Procedure		

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

Research, Innovation and Knowledge Management

- The Research and Innovation (R&I) function supports digital transformation in health and care by enabling high-quality research, strengthening collaboration, and promoting a culture of innovation underpinned by robust governance and assurance.
- Built on four core principles, strategic partnerships, impactful research, enabling resources, and innovation culture, R&I aligns activity with organisational and service priorities. This ensures that the use, management, and reporting of data is proportionate, transparent, and compliant with legislative and governance requirements.
- During the period February to May 2026, activity has focused on strengthening assurance around research governance, data access pathways, and audit readiness, alongside continued development of the R&I 'front door' to provide clear guidance and transparency on how potential users of the service can engage.
- The 2026–2029 Research and Innovation Strategy was approved by DHCW SHA Board and will be formally launched at the DHCW R&I and NHS Wales e-Library Conference 25th June 2026. The Strategy strengthens organisational focus on governance, assurance, and demonstrable impact from the use of data in research, innovation, and evaluation activity.

- The NHS Wales e-Library 2026-27 annual plan developed from the 2025-2028 three-year strategy was approved by the e-Library Service Board, setting a clear strategic direction for the governance, stewardship, and accessibility of digital knowledge and evidence resources across NHS Wales.
- During the reporting period, focus has remained on strengthening assurance over digital knowledge services, including operational resilience, information governance controls, and continuity of access to critical evidence systems.
- Ongoing monitoring of sector-wide developments affecting digital knowledge assets, including international policy and platform changes, has reinforced the importance of robust governance, preservation, and assurance arrangements for research and evidence resources.
- Progress in Open Access publishing continues to enhance transparency and accountability for research outputs using DHCW data, with a growing number of DHCW authored and co-authored papers now available through the Digital Health and Care Wales Research and Knowledge Repository.

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

Research and Innovation

BSI ISO 56001 Innovation Management Kitemark gap analysis

Completion of the gap analysis by the R&I and Quality Assurance and Regulatory Compliance team members has strengthened understanding of formal governance frameworks, assurance mechanisms, and performance measurement required for innovation activity. An options appraisal is currently underway to inform decision-making on whether to pursue certification.

Outcomes / Benefits to Practice:

- Strengthens governance and assurance for Innovation.
- Improves leadership oversight, accountability and decision-making.
- Supports more consistent measurement and reporting for Innovation.

Digital Economy Act (DEA) Accreditation

Engagement with the Quality Assurance and Regulatory Compliance team has strengthened DHCW's organisational approach to DEA audits. R&I will be utilising DHCW's Quality Management System (QMS) to collect, catalogue and manage evidence ensuring more consistent cross-team preparation. This represents a shift towards a more mature and

standardised assurance framework for data governance.

Outcomes / Benefits to Practice:

- Strengthens consistency in audit preparation and evidence management.
- Improves transparency and traceability through clearer assurance processes.
- Supports a more standardised organisational approach to data governance.

Research governance and data access pathways

R&I continues to strengthen its research governance arrangements to ensure a consistent and transparent approach. This includes the implementation of Standard Operating Procedures (SOPs), defined approval routes, and clarified roles and responsibilities with dependent departments across the organisation.

The team is also reinforcing its Research and Innovation (R&I) “front door” as a single, transparent entry point for all research and innovation requests. This approach improves accessibility while strengthening oversight of data access and usage decisions.

To support more timely decision-making, the R&I Board has increased the frequency of its meetings to a monthly schedule, enabling more efficient review and approval of proposals while maintaining robust governance standards.

Outcomes / Benefits to Practice:

- Strengthens assurance by clearly identifying who is accessing data, for what purpose, and under which approvals.
- Enables more consistent and timely decision-making for data access requests.
- Enhances organisational visibility and reporting of research activity involving DHCW-held data.

NHS Wales e-Library and Research and Innovation Conference

Planning and delivery of the NHS Wales e-Library and Research and Innovation Conference has progressed, establishing a forum focused on evidence and data, research governance, open access publishing and digital knowledge services.

The conference brings together stakeholders from across NHS Wales to promote good practice in research governance, the responsible use of data and evidence, open access, and assurance in digital information services.

Outcomes / Benefits to Practice:

- Strengthens a shared understanding of research governance, assurance, and reporting expectations across NHS Wales.
- Promotes the consistent application of standards for the use of data and evidence in

research and service improvement.

- Improves transparency and builds trust in how data and digital knowledge assets are managed and used.

E-Library

User Interface Development and Supplier Collaboration:

DHCW continues to engage closely with EBSCO on the development of its new user interface, contributing to ongoing refinement and improvement ahead of the planned transition in June 2026. This work includes the provision of subject matter expertise from specialists across NHS Wales, ensuring that system functionality is informed by real user needs and practical use cases.

The collaboration reflects a strong and constructive partnership with the supplier, with regular engagement supporting iterative development and usability enhancements. EBSCO has demonstrated a high level of responsiveness, incorporating feedback and working collaboratively to ensure the new interface delivers a more intuitive, accessible, and effective service for users across NHS Wales.

This joint approach is helping to ensure a smooth and well-supported transition, with a clear focus on delivering a user-centred digital knowledge service.

Outcomes / Benefits to Practice:

- Improves usability and user experience by ensuring the interface is shaped by real user needs across NHS Wales.
- Supports a smooth and well-managed transition through early engagement, testing, and supplier collaboration.
- Enhances the quality and accessibility of digital knowledge services for end users.

Open Access Feasibility Study

A national study on Open Access publishing in NHS Wales was completed and published on 31 March 2025 ([Making Healthcare Knowledge Visible](#), Research Consulting). The findings highlight significant gaps in the availability of Open Access (OA) outputs authored by NHS Wales staff, particularly where publications do not involve academic partners. Currently, fewer than half of these outputs are openly accessible, limiting their visibility and the ability to share learning across the wider system.

The study recommends prioritising the development of a national NHS Wales institutional repository as a scalable and cost-effective way to increase the visibility of both published research and grey literature. This work builds on existing progress within DHCW, where the introduction of an Open Access Policy and organisational repository has already led to a significant increase in openly accessible outputs.

As a next step, the NHS Wales e-Library intends to develop a formal business case to explore this recommendation further, using the 'Better Business Cases' Five Case Model. This will

involve engagement with key stakeholders across NHS Wales, including Library and Knowledge Services, Research and Development, Innovation teams, and academic partners. The business case will consider a range of delivery and funding options, including the use of existing resources and potential additional investment.

Outcomes / Benefits to Practice:

- Increases the visibility and accessibility of NHS Wales research outputs, supporting wider knowledge sharing and impact.
- Enables a more consistent and sustainable approach to managing and publishing both research and grey literature across the system.
- Supports evidence-informed practice by making NHS Wales knowledge assets easier to discover and use.

Library Linking Tool

Following completion of the procurement process, work has focused on configuring the LibKey platform to ensure full integration with the NHS Wales e-Library. This has included linking LibKey to individual databases and content platforms, as well as integrating with the Alma library management system. Close collaboration with Cardiff University has supported the configuration of Alma, ensuring the required two-way connectivity is in place. Final configuration steps are now being completed to enable full integration across the breadth of e-Library resources.

LibKey is a tool designed to improve access to full-text content including e-Journals and e-Books by providing seamless, one-click access to content available through library subscriptions and Open Access sources. Its associated browser extension, LibKey Nomad, allows users to identify and access available full text directly from publisher websites, databases, and platforms such as PubMed, without needing to navigate via the e-Library separately.

Subject to final technical confirmation, the service is scheduled to go live on 1 May 2026. Preparations for a managed rollout across NHS Wales are underway, including engagement with local IT contacts to support deployment. While the formal rollout will follow this process, the LibKey Nomad extension can be independently installed on personal devices and is expected to function ahead of full organisational deployment.

Outcomes / Benefits to Practice:

- Provides quicker and more seamless access to full-text research, supporting efficient evidence-based decision-making at the point of need.
- Improves utilisation of NHS Wales e-Library resources by surfacing available content directly within users' existing workflows increasing usage and decreasing cost per use.
- Enhances user experience and reduces access barriers, increasing engagement with

digital knowledge services across the organisation.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

Organisational Change Process (OCP) pause

The pause in the Organisational Change Process (OCP) presents a risk to both Research and Innovation (R&I) and the e-Library service by limiting the ability to progress planned structural and workforce developments. This may delay the implementation of key service improvements, including enhancements to research governance processes, digital knowledge services, and system-wide initiatives that rely on defined roles and capacity. In turn, this could impact the pace of delivery against strategic objectives, reduce organisational agility, and place additional pressure on existing staff to sustain operational demands alongside ongoing transformation activity.

Mitigation / Current Controls:

To mitigate the impact of the OCP pause, R&I and the e-Library are maintaining focus on business-as-usual delivery while prioritising critical activities aligned to organisational objectives. Existing roles and responsibilities have been optimised to sustain service continuity, with clear prioritisation of key programmes such as research governance improvements, digital service enhancements, and national initiatives. Temporary or flexible approaches to resourcing are being used where possible to address capacity pressures. In addition, regular review and internal governance arrangements remain in place to monitor risks, manage dependencies, and ensure readiness to progress planned changes once the OCP resumes.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE and **REVIEW** progress made in advancing the DHCW Research and Innovation and e-Library services.

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

WALES INFORMATICS ASSURANCE

GROUP REPORT

Eitem ar yr Agenda: Agenda Item:	4.5
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Rhidian Hurle, Executive Medical Director
Paratowyd gan: Prepared By:	Sian Jones, WIAG Facilitator
Cyflwynwyd gan: Presented By:	Jamie Manning, Quality Manager (Regulatory Compliance)

Pwrpas yr Adroddiad: Purpose of the Report:	For Assurance
Argymhelliad: Recommendation:	The Committee is being asked to
RECEIVE the report for ASSURANCE .	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIAENT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A More Equal Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Safe
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: EQIA is not applicable for the contents of this report.	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	Yes, please see detail below The WIAG process supports Quality and Safety by providing relevant assurance for new and changed developments
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Paul Evans, Head of Quality Assurance and Regulatory Compliance	28/04/2026	Approved
Rhidian Hurle, Medical Director	30/04/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WIAG	Wales Informatics Assurance Group	AQP	Assurance Quality Plan
SCRR	Safety Case and Readiness Report	ERS	Electronic Referral System
ePMA	Electronic Prescribing Medicines	DAP	Dental Access Portal



	Administration		
PROMS	Patient Reported Outcome Measures	LIMS	Laboratory Information Management System
ABUHB	Aneurin Bevan University Health Board	WCP	Welsh Clinical Portal
CTP	Cloud Transition Programme	WNCR	Welsh Nursing Care Record
ITSM	IT Service Management	MPI	Master Patient Index

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

The Wales Informatics Assurance Group (WIAG) will provide Digital Governance and Safety Committee assurance that where appropriate, services developed or procured by Digital Health and Care Wales have been proportionally assured. Where interfaces to the national architecture have been developed, they have been appropriately assured and that local hosted services have been risk assessed. The quarter 4 report can be found [here](#).

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

Go-live compliance within the reporting period

Status	Rating
In Progress / Completed	
Project/Programme Delay / No Confirmed Go-Live Date	
Overdue/Not completed prior to go-live	

Project	WIAG sign off	Medical Director sign off
Electronic Prescription Service (EPS) Tranche 4: EPS in Urgent Primary Care (UPC) settings	19/01/2026	Approved
Integration Hub	21/01/2026	Approved
Entra-Admin Cloud-Native Account Migration	21/01/2026	Approved
ABUHB electronic Prescribing & Medicines Administration (ePMA)	24/02/2026	Approved
Nominate Pharmacy Feature	18/03/2026	Approved
National Eyecare Electronic Referral System (ERS)	27/03/2026	Approved
DAP Enhancement	01/04/2026	Approved

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

Escalation / Risks

There are no key risks or matters for escalation to report this quarter.

For Information: WIAG Improvement

Quality Improvement Activity: Strengthening the integration of WIAG within DHCW by aligning assurance workflows with agile methodologies, ensuring a clear 'Definition of Ready' for all projects prior to live deployment.

Completed:

Kaizen - Successfully implemented a Kaizen event (Kaizen is a continuous improvement strategy that focuses on making changes that result in major improvements over time).

Stakeholder Consultation - Facilitated workshops with the following to refine the end-to-end process:

- WIAG Facilitator
- Project Management
- Assurance Leads
- Heads of Product families
- Head of Quality Assurance & Regulatory Compliance

Integrated Process Flow - Drafted a proposed flow where assurance is triggered at the Work Package stage, ensuring WIAG is an integrated delivery partner rather than a siloed process.

Risk-Mapped Requirements - Mapped all 20 assurance workstreams against a risk matrix (Low, Medium, High, Critical). This allows the required level of assurance to be driven directly by the risk profile of the work.

In-progress:

Self-Assessment Tool - Developing a prototype dashboard for Project Managers to assess work packages independently. This provides **upfront visibility** of the risk profile and assurance requirements before the project attends a WIAG meeting.

KPI Development - Establishing a suite of Key Performance Indicators to monitor process efficiency and report outcomes via a central dashboard.

Process Pilot - Volunteer project teams have been onboarded to trial the refined process and iron out operational issues prior to review to adopt.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:	The Committee is being asked to
Recommendation:	
RECEIVE the report for ASSURANCE .	

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES TECHNICAL DESIGN AUTHORITY UPDATE

Eitem ar yr Agenda: Agenda Item:	4.6
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Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	18 May 2026

Cyhoeddus neu Breifat: Public or Private:	Public
IF PRIVATE: please indicate reason: OS YW'N BREIFAT: Nodwch reswm:	N/A

Noddwr Gweithredol: Executive Sponsor:	Sam Lloyd, Executive Director of Operations
Paratowyd gan: Prepared By:	Chris Collis, Chief Product & Technology Officer
Cyflwynwyd gan: Presented By:	Sam Lloyd, Executive Director of Operations

Pwrpas yr Adroddiad: Purpose of the Report:	For Noting
Argymhelliad: Recommendation:	The Committee is being asked to
NOTE this update on the Technical Design Authority (TDA).	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAID O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIAINT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Efficient
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



ASESIAD O'R EFFAITH / IMPACT ASSESSMENT	
ANSAWDD A DIOGELWCH GOBLYGIADAU/EFFAITH QUALITY AND SAFETY IMPLICATIONS/IMPACT	No, there are no specific quality and safety implications related to the activity outlined in this report.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	No, there are no specific research and innovation implications relating to the activity outlined within this report.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Sam Lloyd	06/05/26	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
ADR	Architecture Decision Record	TDAG	Technical Design Assurance Group
TDA	Technical Design Authority	TDG	Temporary Decision Groups
WIAG	Wales Informatics Assurance Group	MPI	Master Patient Index
CDR	Clinical Data Repository		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The Technical Design Authority (TDA) remains a critical governance mechanism within DHCW, providing organisation-wide architectural oversight to support consistent, scalable and interoperable digital services. Established in 2023/24 and now a permanent body with representation from Welsh Government and Aneurin Bevan UHB, the TDA:

- Defines and maintains DHCW's enterprise architecture, including principles, standards, patterns and roadmaps.
- Commissions and oversees working groups to develop domain-specific architectural outputs.
- Works in partnership with the Technical Design Assurance Group (TDAG), which undertakes detailed technical assurance and escalates issues to the TDA where required.
- Ensures that major technology decisions align with strategic intent and national direction.

3.2 The last update to DG&S (February 2026) reported on the TDA Development Session in January and the subsequent TDA meeting, which confirmed five areas of focus for 2026/27. Since that update, the TDA has met once. The discussion covered technical debt, governance, national standards and principles, the emerging applications-layer Solution Architecture strategy, progress in the use of Architecture Decision Records (ADRs), and the National Target Architecture (NTA).

4 MATERION PENODOL I'W HYSTYRIED / SPECIFIC MATTERS FOR CONSIDERATION

Latest TDA Updates

4.1 There has been one TDA meeting since the previous DG&S update (17 April 2026). It covered the following topics, aligned to the focus areas agreed in February:

1. A more structured approach to technical debt oversight has been confirmed. Product teams will complete the initial assessment of technical debt within their own services, with TDA maintaining the organisation-wide view and TDAG assuring the future-state architecture needed to address material debt. This will support investment, prioritisation and future re-platforming decisions.
2. On governance, the TDA reinforced the need to clarify how TDA, TDAG and other assurance forums (e.g. WIAG) fit together across the wider operating model. The discussion highlighted that architecture assurance is only one part of the overall picture, and that questions such as user need, service design, and product readiness must be handled through the appropriate governance routes. Further work will therefore continue defining clearer boundaries, escalation points, and the role of TDA within the end-to-end governance flow.

3. There has been positive progress in the maturity of Architecture Decision Records (ADRs) and decision-making. A growing number of ADRs and Temporary Decision Groups are now being brought through TDAG, improving visibility, collaboration and the quality of architectural discussion. This is building a stronger library of decision records and increasing staff engagement.
4. The TDA received an early view of the emerging Solution Architecture strategy for the applications layer. The direction presented was to reduce unnecessary variation in engineering approaches by defining a more portable, standardised stack that can operate across a multi-cloud environment, while remaining proportionate rather than one-size-fits-all. The proposed approach centres on a small set of common building blocks for application delivery, with the intended benefits of lower technical debt, improved portability, simpler support and training, and faster delivery through greater self-service and embedded assurance. This represents part of the “Approved Blueprints” model that the TDA will be promoting, allowing teams to follow approved patterns with lighter-touch assurance.
5. The TDA received an update on the National Target Architecture (NTA) and the development of the strategic investment plan, informed by a broad programme of task-and-finish groups across Wales. The output brings together key lessons, capability requirements and indicative costs, and highlights the need for foundational investment in areas such as workforce modernisation, digital enablers, cloud capability, identity and access management, and wider national architecture components. The update also reinforced the scale of fragmentation and duplicated effort currently present across Wales, strengthening the case for a more co-ordinated national approach. The importance of linking digital investment to patient outcomes and service transformation was noted, with further work required to articulate benefits for government and public audiences.
6. The recently formed National Standards and Architecture Group endorsed (with minor amendments) the architecture principles previously developed through the DHCW TDA for use at national level. Each NHS Wales organisation is expected to review and adopt the principles. DHCW will align formally with the national position so that a single set of principles is used across Wales, while recognising that further work is still needed on visibility of the final changes and on how adoption will be encouraged in practice.

Key next steps for the DHCW TDA are:

- Agree which products or services should complete technical debt reviews and bring these to TDA for review.
- Continue work to clarify the role of TDA within the wider DHCW governance and assurance model.
- Continue development and review of the emerging applications-layer Solution Architecture strategy, with the intention of approving it as a blueprint for teams to follow.



- Review the final nationally endorsed architecture principles and formally adopt these within DHCW.
- Continue to strengthen ADR visibility and centralisation.

5 RISGIAU ALLWEDDOL & MATERION I'W HUWCHGYFEIRIO / KEY RISKS & MATTERS FOR ESCALATION

5.1 There are currently no matters for escalation. The Committee is asked to note the following dependencies:

- Delivering the 2026/27 work programme depends on dedicated capacity across architecture domains.
- Maintaining clear alignment with national structures will help avoid duplication and support coherence.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
NOTE this update on the Technical Design Authority (TDA).	