

Pwyllgor Llywodraethu A Diolgelwch

Thu 20 November 2025, 13:00 - 15:15

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'd 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 Gymeradwyo Cadeirydd

📄 2.1.1 DGS DRAFT Minutes PUBLIC 210825 v1-en-cy-C.pdf (13 pages)

2.1.2. Preifat - Crynodeb

I'w Gymeradwyo Cadeirydd

📄 2.1.2 DGS 21 August 25 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. Fframwaith Llywodraethu Gwybodaeth - Adolygiad Archwilio

Er Sicrwydd Cyfarwyddwr Meddygol Gweithredol

📄 2.3 IG Framework Audit Review.pdf (5 pages)

13:10 - 13:25 3. PRIF AGENDA 15 min

3.1. Cofnod Gweithredu

I'd Nodi Cadeirydd

📄 3.1 Action log.pdf (1 pages)

3.2. Cofrestrau Risg Gorfforaethol

- Dadansoddiad Tueddiadau Risgiau Corfforaethol


 3.2 Corporate Risk Register - Nov 25 DGS.pdf (8 pages)

13:25 - 15:10 **4. AGENDA SICRWYDD**

105 min

4.1. Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol

Er Sicrwydd *Rheolwr Tîm Rheoli Gwasanaethau*

 4.1 IRLG-DGS-Q2 -2025-26.pdf (5 pages)

4.2. Adroddiad Sicrwydd Llywodraethu Gwybodaeth

Er Sicrwydd *Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion*

 4.2 Information Governance Assurance Report - Nov 2025.pdf (6 pages)

4.3. Adroddiad Sicrwydd Gwasanaethau Gwybodaeth

Er Sicrwydd *Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd ac Ymchwil*

4.3.1. Egwyl

4.4. Adroddiad Sicrwydd ar Ymchwil, Arloesi a Rheoli Gwybodaeth

I'w Nodi *Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd ac Ymchwil*

 4.4 DGS Committee Assurance Report -Nov 2025.pdf (10 pages)


4.5. Adroddiad Grŵp Sicrwydd Gwybodeg Cymru

Er Sicrwydd *Rheolwr Ansawdd (Cydydffurfiaeth Reoleiddiol)*

 4.5 DGSC Oct 2025.pdf (5 pages)

4.6. Adroddiad Sicrwydd yr Awdurdod Dylunio Technegol

I'w Nodi *Prif Bensaer Digidol*

 4.6 DGS TDA Update - November 2025.pdf (5 pages)

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

5 min

5.1. Adroddiad ar Brif Bwyntiau'r Pwyllgor i'r Bwrdd

I'w Dra fod *Cadeirydd*

5.2. Unrhyw Faterion Brys eraill

I'w Dra fod *Cadeirydd*

5.3. Dyddiad y cyfarfod nesaf: 05 Mawrth 2026

I'w Nodi *Cadeirydd*

CYFARFOD PWYLLGOR LLYWODRAETHU A DIOGELWCH DIGIDOL - CYHOEDDUS
COFNODION, PENDERFYNIADAU A CHAMAU GWEITHREDU I'W CYMRYD

🕒 13:00 –15:15

📅 21 Awst 2025

📍 MS Teams

Yn Bresennol (Aelodau)	Blaenlythrennau	Teitl	Sefydliad
Rowan Gardner (Cadeirydd)	RG	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	IGDC
Alistair Klaas Neill	AKN	Aelod Annibynnol	IGDC
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	IGDC
Yn Bresennol	Blaenlythrennau	Teitl	Sefydliad
Laura Beddoe	LB	Rheolwr Ansawdd (Cydymffurfiaeth Reoleiddiol)	IGDC
Chris Collis	CC	Prif Bensaer Digidol	IGDC
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd	IGDC
Mark Edwards	ME	Prif Swyddog Diogelwch Gwybodaeth	IGDC
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	IGDC
Darren Lloyd	DL	Cyfarwyddwr Cyswilt Llywodraethu Gwybodaeth a Diogelwch Cleifion	IGDC
Jamie Manning	JM	Rheolwr Ansawdd (Cydymffurfiaeth Reoleiddiol)	IGDC
Rachael Powell	RP	Cyfarwyddwr Cyswilt Gwybodaeth, Deallusrwydd ac Ymchwil	IGDC
Keith Reeves	KR	Rheolwr Tîm Rheoli Gwasanaethau	IGDC
Julie Robinson	JR	Cydllynydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth Cyfarfodydd)	IGDC

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 2202025

Michelle Sell	MS	Cyfarwyddwr Rhaglenni ac Ymgysylltu	IGDC
---------------	----	-------------------------------------	------

Ymddiheuriadau	Teitl	Sefydliad
David Selway	Aelod Annibynnol	IGDC
Laura Tolley	Pennaeth Llywodraethu Corfforaethol / Dirprwy Ysgrifennydd y Bwrdd	IGDC
Carwyn Lloyd-Jones	Prif Swyddog Cwmwl	IGDC
Sam Lloyd	Cyfarwyddwr Gweithredol Gweithrediadau	IGDC

Acronymau

AIA	Awdurdod Iechyd Arbennig	DG&S	Llywodraethu a Diogelwch Digidol
NDR	Adnodd Data Cenedlaethol	ADS	Dylunio a Chymorth Cymwysiaid
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
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 Priso 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		

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 am Absenoldeb Nodwyd ymddiheuriadau am absenoldeb oddi wrth: <ul style="list-style-type: none"> • David Selway, Aelod Annibynnol • Laura Tolley, Pennaeth Llywodraethu Corfforaethol / Dirprwy Ysgrifennydd y Bwrdd • Carwyn Lloyd Jones, Prif Swyddog Cwmwl • Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau 	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 Ni chodwyd unrhyw faterion.	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: CYMERADWYO y Cofnodion Cryno Cyhoeddus a Phreifat y cyfarfod diwethaf ar 22 Mai 2025	Cymeradwyd	Dim i'w nodi
2.2	Blaengynllun Gwaith Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Blaengynllun Gwaith	Nodwyd	Dim i'w nodi
RHAN 3 – PRIF AGENDA			
3.1	Cofnod Gweithredu NODODD y Pwyllgor fod dau gam gweithredu ar y Cofnod Gweithredu. Cwblhawyd un ac roedd y llall yn mynd rhagddo.	Nodwyd	Dim i'w nodi
3.2	Y Gofrestr Risg Corfforaethol Nododd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd, fod 20 o risgiau ar y Gofrestr Risg Gorfforaethol ar hyn o bryd, gyda naw ohonynt i'w hystyried gan y Pwyllgor hwn. Roedd chwech o'r rheiny	Trafodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 22052025

i'w trafod yn y sesiwn hon, a thair yn rhai preifat a fyddai'n cael eu cymryd yn y sesiwn breifat.

Nodwyd y newidiadau canlynol i risgiau cyhoeddus a neilltuwyd i'r Pwyllgor hwn ers y cyfarfod diwethaf fel a ganlyn:

Risg sgrinio a gofal lliniarol CANISC **DHCW0300** – arhosodd y risg hon ar y gofrestr oherwydd y data etifeddol a'r anghenion pontio, er bod gwasanaethau canser o Felindre a gwasanaethau colposgopi wedi'u dileu'n llwyddiannus. Mae lliniaru llawn yn gofyn am ddileu mynediad pen blaen defnyddwyr wrth ddiogelu data ar blatfform ar wahân.

DHCW0336 tynnu contractau yn ôl – trosglwyddwyd y risg i Sam Hall sydd bellach yn arweinydd gweithredol. Fodd bynnag, rhoddwyd diweddariad ar drosglwyddo a phontio'r risg. Rhoddwyd sicrwydd y byddai datrysiad yn cael ei ddarparu erbyn y dyddiad gorffen.

DHCW0340 Gwasanaethau a systemau Meddygon Teulu - caiff y risg hon yn ei dileu o'r gofrestr.

RISIGAU NEWYDD (1) CYHOEDDUS

Bydd **DHCW0350 Cyflymder Cynyddol Mudo Practisiau Meddygon Teulu** yn cael ei ddiweddarau gyda chynllun ar waith a chyllid wedi'i gytuno. Rhoddodd Michelle Sell, Cyfarwyddwr Rhaglenni ac Ymgysylltu, Strategaeth Ddigidol (MS), y wybodaeth ddiweddaraf am systemau'r meddygon teulu, gan gadarnhau bod asedau'r darparwr a aeth i ddwylo'r gweinyddwyr wedi'u caffael gan gwmni sy'n adnabyddus i'r sector gofal iechyd yng Nghymru. Mae'r caffaeliad hwn yn sicrhau parhad gwasanaeth i bractisiau meddygon teulu, a'r cynllun yw trosglwyddo i un cyflenwr mewn modd diogel a chadarn.

Mae'r Aelodau Annibynnol wedi cael diweddariadau rheolaidd ar y sefyllfa ers cael gwybod am ansolfedd y cyflenwr. Diolchodd y Cadeirydd i'r tîm Gweithredol am eu holl waith ar hyn a'r cyfathrebu â Llywodraeth Cymru.

Rhoddodd Darren Lloyd (DL), Cyfarwyddwr Cyswllt dros Lywodraethu Gwybodaeth a Diogelwch Cleifion, adolygiad manwl o risgiau **DHCW0263** a **DHCW0320**.

Mae'r ddwy risg wedi'u cysylltu'n annatod ac yn cynnwys swyddogaethau statudol IGDC. Mae'r risg gyntaf **DHCW0263** yn ymwneud â'r gallu i gasglu, prosesu a lledaenu data cleifion. Mae'r ail risg **DHCW0320** yn ymwneud â thryloywder ynghylch rôl IGDC a'r system ehangach wrth ddefnyddio'r data hwnnw. Mae'r risgiau hyn wedi cael eu hamlygu ers 2021 gyda chyfathrebu parhaus rhwng IGDC a Llywodraeth Cymru.

Mae'r heriau'n cynnwys yr angen am bolisiau a chanllawiau clir i gefnogi casglu a lledaenu data cleifion. Mae hyn yn hanfodol ar gyfer gofal uniongyrchol ac anuniongyrchol, gan fod deall teithiau cleifion o fewn GIG Cymru a'r system

iechyd a gofal cymdeithasol ehangach yn hanfodol. Mae rôl a chyfrifoldebau sefydliadau fel IGDC yn hanfodol yn y broses hon ac mae angen gwell cyfeiriad a gosod polisi gan Lywodraeth Cymru.

Tynnodd DL sylw at bwysigrwydd tryloywder a'r angen am well mynediad at ddata gofal sylfaenol, gan gynnwys data ymarfer cyffredinol a fferyllfeydd cymunedol. Roedd bylchau mewn meysydd polisi, megis rolau Gwarcheidwaid Caldicott a dulliau cenedlaethol o ran hawliau optio allan o ddata cleifion. Mae mynd i'r afael â'r heriau hyn yn hanfodol er mwyn cefnogi cleifion trwy eu taith gyda'r GIG a chyflawni'r nodau cyffredin o wella canlyniadau iechyd.

- Mae angen i'r cyhoedd a staff y GIG ddeall pam mae llywodraethu gwybodaeth yn hanfodol. Mae'r diffyg eglurder mewn polisiau yn ychwanegu gwaith ychwanegol ac yn arafu'r broses o gytuno ar sut y dylai gwybodaeth lifo o fewn y gyfraith. Mae hyn yn effeithio ar ansawdd a chyflymder y gwasanaethau a ddarperir i gleifion.
- Mae'r cyfle i ddysgu o ddata a gwella gwasanaethau yn cael ei rwystro gan y diffyg eglurder. Cynhelir trafodaethau rheolaidd i gadw'r materion hyn o dan y chwyddwydr, ond gall deimlo fel nad yw gwahanol rannau o'r GIG yn cytuno. Fodd bynnag, mae pawb yn gweithio gyda'i gilydd i ddiogelu data cleifion.
- Byddai sicrhau eglurder mewn polisi yn caniatáu i bawb symud yn gyflymach gyda'i gilydd. Mae cyfle enfawr os gellir cyflawni hyn.
- Pwysleisiodd Rhidian Hurle (IGDC - Cyfarwyddwr Meddygol Gweithredol) egwyddorion sylfaenol casglu, storio a rhannu data. Mae storio data yn ddibwrpas os na ellir ei rannu ar gyfer gofal uniongyrchol na'i ddadansoddi i ddeall perfformiad gwasanaethau a'u heffaith ar gleifion. Y nod yw cael yr holl ddata yn y lle a'r fformat cywir er mwyn cyflawni gwasanaeth iechyd cost-effeithiol.

Tynnodd CD sylw at y risgiau sy'n gysylltiedig â pheidio â manteisio ar gyfleoedd. Roedd llythyr cyfunol gan Brif Weithredwyr Cymru at Lywodraeth Cymru (LIC) wedi amlinellu'r materion, gan gynnwys yr angen am eglurder ynghylch rôl IGDC. Roedd yr ymateb gan LIC yn dangos eu bod yn ymchwilio i'r mater ac yn ei drafod gyda'u tîm cyfreithiol.

Cadarnhaodd DL nad oedd unrhyw eglurder eto, ond roedd rhywfaint o sicrwydd bod IGDC yno i gefnogi Llywodraeth Cymru i ddarparu eglurder.

	<p>Nid oedd amserlen i ddatrys y mater polisi ond roedd y Prif Swyddog Gweithredol wedi gofyn am ddiweddariad yng nghyfarfod nesaf Bwrdd DDaT, yn benodol ar y mater hwn a'r cynnydd gyda'r tîm cyfreithiol.</p> <p>Pwysleisiodd Alistair Klaas Neil (AKN), Aelod Annibynnol, ei bod yn bwysig bod unrhyw fanteision o ddata a rennir ar gyfer trigolion yn ogystal â'r system neu'r GIG. Roedd yn bwysig tynnu sylw at y cysylltiad uniongyrchol rhwng galluoedd gwell o fewn y GIG a chefnogaeth i ddinasyddion. Yn ogystal, ni ddylai'r ffocws fod ar gleifion yn unig ond hefyd ar drigolion a dinasyddion er mwyn lleihau nifer y bobl sy'n dod yn gleifion.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DRAFOD a NODI'R Gofrestr Risg Gorfforaethol a'r Archwiliad Dwfn i ddwy risg: DHCW0263 a DHCW0320</p>		
RHAN 4 – AGENDA SICRWYDD			
4.1	<p>Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol Cyflwynwyd gan Keith Reeves, Rheolwr Tîm Rheoli Gwasanaethau, a nododd fod adroddiad Ch. 1 yn cwmpasu'r cyfnod 1 Ebrill 2025 i 30 Mehefin 2025.</p> <p>Cyflwynwyd yr uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> • Hysbysiadau Rhybudd Cynnar: Cyhoeddwyd dau hysbysiad rhybudd cynnar i Lywodraeth Cymru yn ymwneud â materion Diogelwch Clinigol a Seiberddiogelwch yn Ch1 gyda chyfanswm o ddau hysbysiad wedi'u cyhoeddi yn ystod y flwyddyn. Yn newydd ar gyfer 2025/26 yw digwyddiadau y mae'n rhaid eu hadrodd o dan y Gyfarwyddeb Rhwydwaith a Systemau Gwybodaeth (NIS) lle'r adroddwyd ar un digwyddiad. • Cwynion, Pryderon ac Adborth: Roedd 21 o gwynion mewn perthynas ag Ap GIG Cymru, ac roedd y rhain i gyd yn ymwneud â mater hysbys ac yn y broses o gael eu datrys. Roedd 16 o gwynion ynghylch y Porth Mynediad Deintyddol ac roedd y gweddill yn ymwneud â busnes IGDC neu wedi'u cyfeirio at gyrff eraill GIG Cymru. • Adolygiadau: Yn Chwarter 1 derbyniodd ac adolygodd yr IRLG bedwar adroddiad a chyflwyniad. • Dysgu: Roedd yr adroddiad yn cynnwys dadansoddiad SWOT a gynhaliwyd fel rhan o'r adolygiad blynyddol o effeithiolrwydd. Nododd hyn rai gwelliannau i'w gwneud mewn perthynas â rhedeg y grŵp. Roedd yr adroddiad yn tynnu sylw at grynodedd lefel uchel o adroddiad cau prosiect y Rhwydwaith Darparu Newid Digidol (DCDN). • Gwelliannau: ar hyn o bryd roedd tair rhaglen yn cael eu datblygu, mae un wedi'i gohirio ac mae pedair yn cael eu monitro drwy gydol y flwyddyn. 	Trafodwyd er Sicrwydd	Dim i'w nodi

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 22052025

	<ul style="list-style-type: none"> • Cynhaliodd grŵp IRLG weithdy wyneb yn wyneb ym mis Ebrill a oedd yn canolbwyntio ar effeithiolrwydd y grŵp. <p>Cododd AKN bwynt ynglŷn â phwysigrwydd cynnal ffocws ar y rhesymau y tu ôl i'r mesurau seiberddiogelwch ac awgrymodd atodi cofnod o ymosodiadau seiber sylweddol sydd wedi achosi aflonyddwch mawr, gan gynnwys y rhai y tu allan i'r GIG a'r DU. Byddai'r cofnod yn helpu i bwysleisio pwysigrwydd ymdrechion seiberddiogelwch a chadw'r ffocws ar pam mae'r mesurau hyn yn hanfodol.</p> <p>Cytunodd Mark Edwards (ME), Prif Swyddog Diogelwch Gwybodaeth, ei fod yn awgrym da, fodd bynnag, byddai angen adolygu unrhyw wybodaeth sy'n ymwneud â'r GIG yng Nghymru yn y sesiwn breifat oherwydd natur sensitif yr ymosodiadau. Mae'r Uned Seibergadernid yn olrhain ac yn monitro'r ymosodiadau hyn ac yn eu hadrodd i Lywodraeth Cymru a rheolwyr gwasanaethau. Yn ogystal, mae cydweithio rheolaidd â chydweithwyr yn y tair gwlad arall i gadw golwg ar ymosodiadau allanol a rhannu profiadau.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DRAFOD yr Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol er SICRWYDD</p>		
4.2	<p>Adroddiad Sicrwydd Llywodraethu Gwybodaeth Cyflwynodd Darren Lloyd (DL), Cyfarwyddwr Cyswllt ar gyfer Llywodraethu Gwybodaeth a Diogelwch Cleifion a Swyddog Diogelu Data, yr Adroddiad ar Sicrwydd Llywodraethu Gwybodaeth yn nodi gwaith y tîm Llywodraethu Gwybodaeth o'r cyfnod hwn.</p> <ul style="list-style-type: none"> • Atodiad A: Meysydd i'w gwella a chamau gweithredu i gynyddu ymwybyddiaeth o lywodraethu gwybodaeth o fewn y sefydliad. Gweithio ar elfennau tryloywder allanol sy'n gysylltiedig â gofynion y cynllun cyhoeddi o dan y Ddeddf Rhyddid Gwybodaeth a chyfrifoldebau Swyddfa'r Comisiynydd Gwybodaeth. • Atodiad B: Ar hyn o bryd roedd gwaith yn cael ei wneud ar 23 o asesiadau o'r effaith ar ddiogelu data, gyda 71 wedi'u cwblhau a chwech wedi'u llofnodi'n ddiweddar. Cymorth o safbwynt sicrwydd i sicrhau bod gofynion preifatrwydd a chyfrinachedd yn cael eu bodloni. Mae galwadau misol i'r tîm yn amrywio o 600-700, gyda chynnydd yng nghymhlethdod yr ymholiadau. • Atodiad C Datblygu pecyn cymorth IG fersiwn saith. Adborth ar effeithiolrwydd yr offer a ddefnyddir i gyfathrebu â gwasanaethau, gydag ymatebion 	Nodwyd	Dim i'w nodi

	<p>cadarnhaol i grynodedb yr E-rybudd.</p> <p>Trafododd y Pwyllgor gymhlethdod cynyddol y Swyddog Diogelu Data (DPO) fel gwasanaeth a gynigir i Feddygon Teulu, yn benodol a oedd y ffi bresennol y mae Meddygon Teulu yn ei thalu i dalu am staff yn ddigonol i ymdrin â'r materion mwy cymhleth hyn. Ymatebodd DL fod y gyfradd ffi bresennol yn ddigonol gan fod y gwasanaeth yn hunangynhaliol.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd Llywodraethu Gwybodaeth</p>		
4.3	<p>Adroddiad Sicrwydd Gwasanaethau Gwybodaeth</p> <p>Cyflwynodd Rachael Powell (RP), Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd 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"> • Cynnydd strategaeth gwybodaeth a dadansoddeg: roedd y sefydliad wedi cyrraedd pob carreg filltir yn llwyddiannus ar gyfer y gwerth o bortffolio data yn ystod y chwarter diwethaf, gydag adrodd parhaus yn erbyn y CTCL ac adroddiadau blynyddol sy'n ymdrin ag ymchwil, arloesedd a gwerth o bortffolios data bellach ar gael i'r cyhoedd ac yn cael eu rhannu â rhanddeiliaid. • Gwell adrodd a thryloywder: roedd cydweithio rhwng y timau Gwybodaeth a Pherfformiad wedi arwain at well adrodd ar y defnydd o gynhyrchion gwybodaeth drwy adroddiadau perfformiad misol i'r rheolwyr, gan gynyddu tryloywder ynghylch defnyddio cynhyrchion data. • Adolygodd y Grŵp Sicrwydd ISD (ISDAG) naw Cynllun Sicrwydd Ansawdd (AQP), un Cais Newid (RFC) a saith Adroddiad Achos Diogelwch a Pharoddrwydd (SCRR) i ystyried yr effaith ar Wasanaethau Gwybodaeth. • Tîm Power BI Corfforaethol: Mae'r tîm wedi cyflwyno mesurau i sicrhau bod dangosfyrddau'n cael eu datblygu a'u rhannu'n briodol. • Prosiectau: Ymhlith yr uchafbwyntiau roedd dimensiwn daearyddiaeth y Warws Data a gafodd ei ddiweddarau i gynnwys Cyfrifiad 2021 ac aeth yn fyw ar 15 Mai. Cyhoeddwyd dangosfwrdd canser yn arddangos data colposgopi gan ddefnyddio data UAT. Dyluniwyd a datblygwyd offeryn rhestr hir recriwtio gan Reolaeth PowerBI Corfforaethol a Rhaglenni Gwybodaeth (IPM) a'i rannu â thimau/adrannau eraill. Cyhoeddwyd y Dangosfwrdd Mesurau Gwerth Uchel. Cyhoeddwyd Delweddu Gofal Lliniarol Porth Clinigol Cymru. <p>Cynhaliwyd trafodaethau ar y newid o ddangosfyrddau BI Corfforaethol i'r systemau newydd sy'n cydymffurfio â pholisïau, gan nodi bod 81% o ddefnyddwyr wedi cwblhau'r hyfforddiant gofynnol. Rhoddwyd sicrwydd, er nad oedd amserlen benodol, fod ymdrechion yn parhau i gyflawni cydymffurfiaeth hyfforddiant 100% gyda thimau'n mynd ati</p>	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 22052025



	<p>i nodi'r defnyddwyr sy'n weddill ac yn rheoli trefniadau trwyddedu. Yn ogystal, ystyriwyd y risgiau a'r cyfleoedd sy'n gysylltiedig â'r gyfres ehangach o offer Microsoft sy'n cael eu defnyddio, gan bwysleisio defnydd priodol sy'n cydymffurfio â safonau, ochr yn ochr â chynlluniau i gydweithio'n agosach â thîm Microsoft Office 365.</p> <p>Gofynnwyd i RP adlewyrchu'r trafodaethau, h.y. aeddfedrwydd y data sydd ar gael, yr NDR a ffynonellau data eraill.</p> <p>CAM GWEITHREDU 21082025-A01 RP i adlewyrchu, yn yr adroddiad nesaf, ddatblygiad y data sydd ar gael i IGDC.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd Gwasanaethau Gwybodaeth</p>		
4.4	<p>Adroddiad Sicrwydd ar Ymchwil, Arloesi a Rheoli Gwybodaeth</p> <p>Cyflwynodd RP yr Adroddiad Sicrwydd ar Ymchwil, Arloesi a Rheoli Gwybodaeth gyda'r uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> • Roedd yr adroddiad wedi'i ehangu i gynnwys ymchwil, arloesi a rheoli gwybodaeth. • Mae'r E-Lyfrgell a'r Gwasanaeth Gwybodaeth ac Ymchwil ac Arloesi yn cael eu halinio er mwyn integreiddio'n well. • Mae pob carreg filltir ymchwil ac arloesi wedi'i chyflawni ar amser ac fel y cynlluniwyd. • Mae cerrig milltir yr E-Lyfrgell ar y trywydd iawn ac yn cael eu cyflawni yn ôl yr amserlen. • Mae gwaith sylweddol ar y gweill i adnewyddu'r strategaeth ymchwil ac arloesi. • Cymeradwywyd a lanswyd strategaeth E-Lyfrgell GIG Cymru yn y Gynhadledd E-Lyfrgell gyntaf ym mis Gorffennaf. • Roedd adroddiad blynyddol yr E-Lyfrgell wedi'i gymeradwyo, gan nodi cynnydd da a chyflawni amcanion. • Cyflwynwyd effaith gweinyddiaeth yr Unol Daleithiau ar wyddoniaeth fiofeddygol i'r Bwrdd Rheoli. • Roedd y storfa Mynediad Agored wedi'i sefydlu gyda 30 o bapurau wedi'u cyhoeddi gan awduron neu gyd-awduron IGDC. • Roedd strategaeth partneriaeth fasnachol Ymchwil ac Arloesi wedi'i chyhoeddi. • Roedd polisi deallusrwydd artiffisial ar gyfer ymchwil llyfrgelloedd a gwybodaeth wedi'i ddatblygu ac roedd yn y cyfnod ymgynghori. <p>Trafododd y Pwyllgor y manteision disgwylidig o ychwanegu rheoli gwybodaeth a thynnu sylw at yr angen i gefnogi cyhoeddi Mynediad Agored i hwyluso cyfleoedd gwell ar gyfer rhannu mewnwelediadau ac arbenigedd</p>	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 22052025

	<p>gwerthfawr. Yn ogystal, mae arwyddocâd cysylltu â chyhoeddiadau yn dangos y gwerth ychwanegol a ddefnyddir gan y gwaith a defnyddio cyfeiriadau dyfynnu fel mesurau o lwyddiant academaidd.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd ar Ymchwil, Arloesi a Rheoli Gwybodaeth.</p>		
4.5	<p>Adroddiad Grŵp Sicrwydd Gwybodeg Cymru Cyflwynodd Laura Beddoe (LB), Rheolwr Ansawdd (Cydymffurfiaeth Rheoleiddio), Adroddiad Sicrwydd Gwybodeg Cymru a thynnodd sylw at y canlynol:</p> <ul style="list-style-type: none"> • Cydymffurfiaeth mynd yn fyw – cymeradwywyd pedwar prosiect yn ystod y cyfnod adrodd. Fodd bynnag, nid oedd gan Brosiect Pontio Pen-y-bont ar Ogwr sicrwydd profi llawn ond aeth ymlaen i gael ei gymeradwyo ar ôl adolygiad o'r uwch arweinyddiaeth, heb unrhyw brofion pellach wedi'u cynllunio. • Cynlluniau Sicrwydd Ansawdd Mae WIAG yn aros am wybodaeth am brosiect BIPCTM. • Adroddiadau Achos Diogelwch a Pharoddrwydd – cymeradwywyd pedwar adroddiad, gyda thri yn yr arfaeth yn disgwyl rhagor o wybodaeth. • PowerApp – mae 19 o brosiectau ar y PowerApp. <p>Rhoddodd RH fanylion pellach am Brosiect Pontio Pen-y-bont ar Ogwr a oedd wedi mynd ar waith heb sicrwydd llawn. Roedd problemau tebyg wedi bod yn digwydd dro ar ôl tro, a oedd yn pwysleisio'r angen am lywodraethu a chyfeiriad cryf i gyflawni rhaglenni cenedlaethol effeithlon. Cafodd gweithlu IGDC ganmoliaeth am eu hymdriniaeth gadarn o'r problemau a gododd yn ystod y prosiect.</p> <p>Atgyfnerthodd Chris Collis (CC), Prif Bensaer Digidol, bwyntiau RH, gan gydnabod yr ymdrech sylweddol sydd ei hangen i fynd i'r afael â'r heriau a chanmol y timau am eu hymroddiad a'u gwaith caled. Yn ogystal, trafodwyd cyflwyno proses cofnodi penderfyniadau saerïol newydd i rymuso timau ac unigolion i wneud penderfyniadau allweddol. Tynnwyd sylw ymhellach at bwysigrwydd tryloywder a rhannu gwybodaeth â'r cyhoedd i sicrhau llywodraethu da.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI Adroddiad Grŵp Sicrwydd Gwybodeg Cymru er SICRWYDD.</p>	Er Sicrwydd	Dim i'w nodi
4.6	<p>Adroddiad Sicrwydd yr Awdurdod Dylunio Technegol Cyflwynodd Chris Collis (CC), Prif Bensaer Digidol, yr adroddiad a rhoddodd yr uchafbwyntiau canlynol:-</p> <ul style="list-style-type: none"> • Cyhoeddi egwyddorion saerïol yn agored: Mae'r Awdurdod Dylunio Technegol wedi cyhoeddi ei 	Trafodwyd	Dim i'w nodi

egwyddorion saerïol lefel uchaf, egwyddorion peirianeg meddalwedd cynnyrch digidol, ac egwyddorion dylunio sy'n canolbwyntio ar y defnyddiwr ar wefan gyhoeddus i annog tryloywder ac adborth gan y gymuned ehangach. Mae egwyddorion clinigol yn cael eu hadolygu ar hyn o bryd a disgwylir iddynt gael eu cymeradwyo cyn bo hir. Mae'r fenter hon hefyd yn anelu at aliniad cenedlaethol ar draws byrddau iechyd a sefydliadau cysylltiedig.

- **Proses cofnodi penderfyniadau saerïol newydd:** Mae proses gwneud penderfyniadau a gymeradwywyd yn ddiweddar yn cyflwyno Cofnodion Penderfyniadau Saerïol (ADRs), sef cofnodion ysgafn sy'n dogfennu penderfyniadau technegol. Mae'r broses yn cefnogi gwahanol lefelau llywodraethu, o benderfyniadau sy'n benodol i brosiectau i benderfyniadau sy'n cael effaith genedlaethol, gan sicrhau goruchwyliaeth gymesur.
- **Newid grymuso a llywodraethu:** Mae'r broses benderfynu newydd yn grymuso timau i ffurfio grwpiau arbenigol i wneud ac adrodd ar benderfyniadau, gan symud o fodolau blaenorol lle'r oedd yr Awdurdod Dylunio Technegol yn gwneud neu'n cymeradwyo penderfyniadau'n uniongyrchol. Tybir bod penderfyniadau gan grwpiau arbenigol wedi'u cymeradwyo a'u hadrodd i'r Awdurdod Dylunio Technegol er gwybodaeth yn unig, gan hyrwyddo cyfrifoldeb a hyblygrwydd tîm.
- **Rheoli risg a thryloywder:** Er bod y newid llywodraethu yn cyflwyno risgiau posibl fel penderfyniadau twyllodrus, mae strategaethau lliniaru ar waith. Gall penderfyniadau sensitif gael eu hatal rhag cael eu cyhoeddi'n gyhoeddus, ond bydd crynodebau neu wybodaeth am benderfyniadau o'r fath yn dal i gael eu rhannu er mwyn cynnal tryloywder.
- **Ymgysylltu â'r gymuned:** Mae cymuned saerïol wedi'i ffurfio ar draws sawl bwrdd iechyd a sefydliad i adolygu a rhoi adborth ar yr egwyddorion cyhoeddus, gan feithrin cydweithio ac adeiladu consensws ar lefel genedlaethol.
- **Mynediad cyhoeddus i uchafbwyntiau'r cyfarfod:** Mae'r Awdurdod Dylunio Technegol wedi dechrau cyhoeddi uchafbwyntiau o'i gyfarfodydd, gan gynnwys camau gweithredu a gwaith parhaus, er mwyn gwella tryloywder ymhellach a chaniatáu mynediad ehangach i'w weithgareddau.


	<p>Trafododd y Pwyllgor y newid o un system i'r llall gydag IGDC a'r risgiau cynhenid yn yr hen systemau a'r rhai newydd. Ni fyddai unrhyw sefyllfa ddi-risg pe bai'r sefydliad yn anelu at gyflawni ei nodau. Sicrhawyd y Pwyllgor mai'r bwriad oedd cydweithio â chydweithwyr ar draws Byrddau Iechyd. Dyluniwyd saerñaeth a dull y safle i fod yn dryloyw ac yn gydweithredol, gan ganiatáu i bartneriaid y Bwrdd Iechyd gymryd rhan.</p> <p>Mynegodd y Pwyllgor ei werthfawrogiad o'r gwaith a wnaed ond awgrymodd y dylai adroddiadau yn y dyfodol gynnwys sicrwydd bod risgiau newydd yn cael eu monitro a'u mesur.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DRAFOD yr Awdurdod Dylunio Technegol.</p>		
4.7	<p>Safonau Digidol a Gwybodaeth - Ar Lafar</p> <p>Rhoddodd Rhidian Hurle, Cyfarwyddwr Meddygol Gweithredol, ddiweddiariad llafar a oedd yn canolbwyntio ar yr heriau a'r ystyriaethau sy'n gysylltiedig â safonau data a'u gweithrediad o fewn y sefydliad. Roedd y pwyntiau allweddol a drafodwyd yn cynnwys:-</p> <ul style="list-style-type: none"> • Safonau Data a Systemau Etifeddiaeth: Tynnodd y drafodaeth sylw at y gwahanol safonau data megis cylchlythyrau Iechyd Cymru, DSCN, SNOMED, a safonau negeseuon fel FHIR. Yr her yw sicrhau bod y cynhyrchion a'r dulliau'n cydymffurfio â'r wybodaeth a'r safonau technegol diweddaraf hyn. Mae'r systemau etifeddol, sydd wedi esblygu dros amser, yn peri her sylweddol gan y gall newidiadau i'r systemau hyn gael goblygiadau pellgyrhaeddol. • Methodoleg Ddylunio Gyfredol: Mae'r sefydliad yn defnyddio gwahanol ddulliau dylunio ar draws gwahanol adrannau. Mae enghreifftiau llwyddiannus mewn gofal sylfaenol ac iechyd meddwl, fel ail-lwyfannu Dewis Fferyllfa a Chofnod Gofal Nyrsio Cymru. Fodd bynnag, mae yna systemau etifeddol fel PAS a Phorth Clinigol Cymru sydd angen sylw hefyd. • Deallusrwydd Artiffisial ac Ansawdd Data: Cydnabuwyd y cyffro ynghylch deallusrwydd artiffisial, ond pwysleisiwyd bod ansawdd y data sylfaenol yn hanfodol ar gyfer gweithredu deallusrwydd artiffisial yn effeithiol. Trafodwyd pwysigrwydd deall pa ddata y gellir ei ddatgelu'n ddiogel i ddeallusrwydd artiffisial er mwyn osgoi canlyniadau anfwriadol. • Profiad Defnyddiwr a Llif Gwaith: Rhannodd Chris Collis fewnwelediadau o dreulio diwrnod yn yr ysbyty, 	Nodwyd	Dim i'w nodi



	<p>gan dynnu sylw at y profiad defnyddiwr dameidiog sy'n cynnwys systemau digidol a systemau papur. Pwysleisiwyd yr angen am ymchwil defnyddwyr a deall llwybrau clinigol cyn creu neu brynu systemau newydd.</p> <ul style="list-style-type: none"> • Ystyriaethau yn y Dyfodol: Daeth y drafodaeth i ben gyda'r angen i fynd i'r afael â chysylltedd, offer modern, seiberddiogelwch, a diogelwch data cyn canolbwyntio ar dechnolegau uwch fel deallusrwydd artiffisial. Ailadroddwyd pwysigrwydd adeiladu systemau yn seiliedig ar safonau cadarn a sicrhau ansawdd data. <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R diweddariad ar lafar ar Safonau Digidol a Gwybodaeth</p>		
RHAN 5 – MATERION I GLOI			
5.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Ni chodwyd unrhyw faterion brys eraill i'w nodi.</p>	Nodwyd	Dim i'w nodi.
5.2	<p>Eitemau ar gyfer Adroddiad ar Brif Bwyntiau'r Cadeirydd i'r Bwrdd</p> <p>Nodwyd yr eitemau i'w cynnwys yn Adroddiad Crynhoi Cynnydd y Cadeirydd i Fwrdd yr Awdurdod Iechyd Arbennig ym mis Medi fel a ganlyn;</p> <ul style="list-style-type: none"> • Roedd yr holl adroddiadau'n dda heb unrhyw feysydd i'w huwchgyfeirio. • Sesiwn Gwrando a Dysgu, awgrymwyd cynnal sesiwn mewn cyfarfod o'r Bwrdd yn y dyfodol i drafod arwyddocâd y diweddariadau a'r dull llywodraethu newidiol yn Adroddiad yr Awdurdod Dylunio Technegol. 	Nodwyd	Dim i'w nodi
5.3	<p>Dyddiad y cyfarfod nesaf</p> <p>Cadarnhawyd y bydd cyfarfod nesaf y Pwyllgor Llywodraethu a Diogelwch Digidol yn cael ei gynnal ar 20 Tachwedd 2025 am 1.00pm.</p>	Nodwyd	Dim i'w nodi

CYFARFOD PWYLLGOR LLYWODRAETHU A DIOGELWCH DIGIDOL - PREIFAT

COFNODION, PENDERFYNIADAU A CHAMAU GWEITHREDU I'W CYMRYD

 15:30 – 16:30

 21 Awst 2025

 MS Teams

Yn Bresennol (Aelodau)	Blaenlythrennau	Teitl	Sefydliad
Rowan Gardner (Cadeirydd)	RG	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	IGDC
Alistair Klaas Neill	AKN	Aelod Annibynnol	IGDC
Marilyn Bryan Jones	MBJ	Aelod Annibynnol	IGDC

Yn Bresennol	Blaenlythrennau	Teitl	Sefydliad
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd	IGDC
Mark Edwards	ME	Prif Swyddog Diogelwch Gwybodaeth Seiber	IGDC
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	IGDC
Julian Jones	JJ	Pennaeth Seiberddiogelwch	IGDC
Darren Lloyd	DL	Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion	IGDC
Carwyn Lloyd Jones	CLJ	Prif Swyddog Cwmwl	IGDC
Julie Robinson	JR	Cydllynydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	IGDC

Ymddiheuriadau	Teitl	Sefydliad
David Selway	Aelod Annibynnol	IGDC

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Preifat Llywodraethu a Diogelwch Digidol 22 Mai 2025

Laura Tolley	Pennaeth Llywodraethu Corfforaethol / Dirprwy Ysgrifennydd y Bwrdd	IGDC
Sam Lloyd	Cyfarwyddwr Gweithredol Gweithrediadau	IGDC

Acronymau			
AIA	Awdurdod Iechyd Arbennig	DG&S	Llywodraethu a Diogelwch Digidol
IGDC	Iechyd a Gofal Digidol Cymru	GIG	Gwasanaeth Iechyd Gwladol
AA	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
DR	Adfer ar ôl Trychineb	WPAS	System Gweinyddu Cleifion Cymru

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"> • David Selway, Aelod Annibynnol • Laura Tolley, Pennaeth Llywodraethu Corfforaethol / Dirprwy Ysgrifennydd y Bwrdd • Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau 	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			

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Preifat Llywodraethu a Diogelwch Digidol 22 Mai 2025

Dosbarthwyd eitemau ar yr agenda gydsynio cyn y cyfarfod a nodwyd nad oedd y Cadeirydd wedi derbyn unrhyw sylwadau ymlaen llaw.

2.1	<p>Cofnodion y cyfarfod diwethaf</p> <p>Cymeradwywyd cofnodion cyfarfod diwethaf y pwyllgor a gynhaliwyd ar 22 Mai 2025 fel cofnod cywir.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>GYMERADWYO cofnodion y cyfarfod diwethaf</p>	Cymeradwywyd	Dim i'w nodi
RHAN 3 – PRIF AGENDA			
3.1	<p>Cofnod Gweithredu</p> <p>Roedd un eitem ar y cofnod gweithredu ac roedd hon wedi'i chwblhau.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODI'R Cofnod Gweithredu.</p>	Nodwyd	Dim i'w nodi
3.2	<p>Adroddiad Sicrwydd Seiberddiogelwch i gynnwys Adolygiad Archwilio'r Uned Seibergadernid</p> <p>Cyflwynodd Mark Edwards (ME), Prif Swyddog Diogelwch Gwybodaeth, yr Adroddiad Sicrwydd Seiberddiogelwch gan amlygu'r gwaith a gwblhawyd dros gyfnod Chwarter 1 yn y meysydd canlynol.</p> <ul style="list-style-type: none"> • Cydymffurfiaeth â Gwydnwch System – Cyfeirnod Risg Gorfforaethol, DHCW0341, DHCW0342 • Astudiaeth Dilysu Aflwyddiannus • Cyfeiriadur Gweithredol Cenedlaethol – Cyfrineiriau gwan • Cyfeiriadur Gweithredol Cenedlaethol – Cyfrifon segur • Gosod Patsys Diogelwch • Profi treiddiad ac adferiad • Efelychu gwe-rwydo IGDC • Sicrwydd Cadeirydd Cyflenwi • Rheol Wal Dân Cenedlaethol – Caniatáu Holl • Diwedd Oes Windows 10 • Risgiau sy'n Gysylltiedig â Diogelwch ar y 	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau ar gyfer y:
Pwyllgor Preifat Llywodraethu a Diogelwch Digidol 22 Mai 2025

	<p>Gofrestr Gorfforaethol</p> <ul style="list-style-type: none"> Gofynion Cyllid Adolygiad Archwilio'r Uned Seibergadernid <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODI'R Adroddiad Sicrwydd Seiber a'r Adolygiad Archwilio Seibergadernid.</p>		
3.3	<p>Y Gofrestr Risg Corfforaethol</p> <p>Nododd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd, fod 20 o risgiau ar y Gofrestr Risg Gorfforaethol ar hyn o bryd, gyda naw ohonynt i'w hystyried gan y Pwyllgor hwn, a thair o'r rheiny yn rhai preifat ac i'w trafod.</p> <p>Roedd y risgiau a neilltuwyd i'r Pwyllgor Llywodraethu a Diogelwch Digidol fel a ganlyn:</p> <ul style="list-style-type: none"> DHCW0341 DHCW0342 DHCW0281 <p>Cafwyd diweddariad cynhwysfawr o dan yr Adroddiad Sicrwydd Seiber a rhoddwyd sicrwydd i'r aelodau bod gwaith yn mynd rhagddo i liniaru'r risgiau hyn.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODI'R Gofrestr Risg Gorfforaethol.</p>	Trafodwyd	Dim i'w nodi
3.4	<p>Adroddiad yr Uwch-berchennog Risg Gwybodaeth</p> <p>Rhoddodd Mark Edwards, Prif Swyddog Diogelwch Gwybodaeth, y wybodaeth ddiweddaraf am yr adroddiad a chytunodd i ystyried yng nghyfarfod gosod agenda nesaf y Pwyllgor sut y gellid cyflwyno elfennau o'r adroddiad SIRO i'r sesiwn gyhoeddus i hyrwyddo gwelededd ar draws y sefydliad ehangach.</p> <p>Penderfynodd y Pwyllgor NODI Adroddiad Blynyddol yr Uwch-berchennog Risg Gwybodaeth.</p>	Nodwyd	<p>Cam Gweithredu: A01 21082025</p>
3.5	<p>Cofrestr Asedau Gwybodaeth</p> <p>Rhoddodd Darren Lloyd (DL), Cyfarwyddwr Cyswllt ar gyfer Llywodraethu Gwybodaeth a Diogelwch Cleifion</p>	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau ar gyfer y:
 Pwyllgor Preifat Llywodraethu a Diogelwch Digidol 22 Mai 2025

	<p>a Diogelu Data, ddiweddariad ar y Gofrestr Asedau Gwybodaeth:</p> <ul style="list-style-type: none"> • Trafododd yr adroddiad y cynnydd a'r ymdrechion sy'n cael eu gwneud i wella cydgrynhoi cofrestr asedau gwybodaeth. • Ei nod oedd rhoi sicrwydd i'r pwyllgor fod dulliau presennol ar gyfer adrodd ar asedau gwybodaeth drwy amrywiol sianeli megis y portffolio gwasanaeth, elfennau cofrestr asedau gwybodaeth a chofrestri gwydnwch systemau. • Y nod yw cydgrynhoi'r dulliau gwahanol hyn yn system fwy cydlynol a chydweithredol gan ddefnyddio offer rheoli gwasanaethau. • Bydd hyn yn darparu dull mwy cyson a sefydledig ar gyfer diffinio asedau gwybodaeth a deall eu rhyngweithiadau â gwasanaethau eraill. <p>Penderfynodd y Pwyllgor: NODI'R Gofrestr Asedau Gwybodaeth er SICRWYDD.</p>		
RHAN 4 – MATERION I GLOI			
4.1	<p>Unrhyw Faterion Brys Eraill Nid oedd unrhyw faterion eraill.</p>	Nodwyd	Dim i'w nodi
4.2	<p>Eitemau ar gyfer Adroddiad ar Brif Bwyntiau'r Cadeirydd i'r Bwrdd</p> <ul style="list-style-type: none"> • Cynnwys gwybodaeth mewn adroddiadau i roi gwybod i'r Bwrdd am faterion penodol. 	Nodwyd	Dim i'w nodi
4.3	<p>Dyddiad y cyfarfod nesaf: Cadarnhawyd y bydd cyfarfod nesaf y Pwyllgor Llywodraethu a Diogelwch Digidol yn cael ei gynnal ar 20 Tachwedd 2025 am 1.00pm. Daeth y cyfarfod i ben am 16:40pm.</p>	Nodwyd	Dim i'w nodi

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

FORWARD WORKPLAN

Eitem ar yr Agenda: Agenda Item:	2.2
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<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:	
<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:	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENabler</u>	N/A
<u>PARTH ANSAWDD 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:	
<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB 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	February 2025	Initial workplan approved
Laura Tolley	November 2025	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 20 November 2025.

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
Corporate Risk Trending Analysis	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
Informatics Assurance 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 Finance
Research and Innovation Strategy Assurance Report	Executive Medical Director
Technical Design Authority	Executive Director of Operations

4.2 The items below have been identified for the following meeting on 05 March 2026

Item	Executive Lead
Action log	Chair
Artificial Intelligence	Executive Medical Director
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
Deep Dive	Director of Corporate Affairs/Board Secretary
Digital and Information Standards	Executive Medical Director
Digital Clinical Standards	Executive Medical Director
Digital Governance & Safety Committee Annual Report	Director of Corporate Affairs/Board Secretary
Digital Governance and Safety Committee Cycle of Business	Director of Corporate Affairs/Board Secretary
Digital Governance and Safety Committee Effectiveness Self-Assessment	Director of Corporate Affairs/Board Secretary
Digital Governance and Safety Committee Terms of Reference	Director of Corporate Affairs/Board Secretary
Forward Work Programme	Director of Corporate Affairs/Board Secretary
Incident Review and Organisational Learning Report	Executive Medical Director
Informatics Assurance 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 Finance
Research and Innovation Annual Report	Executive Medical Director
Research and Innovation Strategy Assurance Report	Executive Medical Director
Technical Design Authority	Executive Director of Operations



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.

6 ARGYMHELLIAD / RECOMMENDATION

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

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

INFORMATION GOVERNANCE FRAMEWORK AUDIT REVIEW

Eitem ar yr Agenda: Agenda Item:	2.3
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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:	Marcus Sandberg, Information Governance Manager
Cyflwynwyd gan: Presented By:	Dave Parsons, WASPI Code Manager, Information Governance

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



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 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:	

<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:	

<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENabler</u>	N/A
<u>PARTH ANSAWDD 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:	

<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB 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	Yes, please see detail below The Information Governance Framework audit may contribute towards GDPR risks.
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
N/A		

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WIGT	Welsh IG Toolkit	GDPR	General Data Protection Regulation



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The following report is included:

[Information Governance Framework \(Substantial\)](#)

A substantial assurance was received from NWSSP Internal Audit, with two medium priority recommendations

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

4.1 A summary of the key findings is provided below:

[Information Governance Framework \(Substantial\)](#)

NWSSP Internal Audit confirmed that DHCW has a robust Information Governance Framework, with no instances of statutory non-compliance during the review period. The Framework includes comprehensive policies, procedures, and governance structures aligned with legal and regulatory standards. Training and awareness programmes are well-established, with compliance rates consistently exceeding Welsh Government targets. Monitoring mechanisms, including incident reporting and regular reviews, are effective and support timely escalation. The Welsh IG Toolkit (WIGT) is completed annually, with results informing action plans and reported to governance bodies.

Two medium priority findings were identified and these include the need to revise the Information Governance Strategy to incorporate SMART objectives and improve clarity and accountability, and to introduce risk scoring for WIGT action items to support prioritisation and strategic planning. Additionally, opportunities for enhancement were noted, such as improving the SharePoint search functionality and formally recording internal reviews and sign-off of the WIGT. These actions aim to strengthen governance and ensure continuous improvement.

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

5.1 There are no key risks or matters for escalation.



6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to RECEIVE the internal audit report for ASSURANCE and NOTING .
----------------------------------	--

3.1 Action Log Public

Reference	Date of Meeting	Action/Decision	Action Lead	Due Date	Status/Outcome Narrative	Status	Revised action	Revised due date	Session Type
A02-20250522	22/05/2025	The creation of a dashboard to monitor data policy non-conformances to improve data quality to be revisited at the next meeting.	Rhidian Hurle (DHCW - Executive Medical Director)	31/07/2025	The action has been picked up by Rhidian Hurle and Darren Lloyd and is now complete.	Complete			Public

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES CORPORATE RISK REPORT

Eitem ar yr Agenda: Agenda Item:	3.2
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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 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
<p>DISCUSS the Corporate Risks assigned to the Digital Governance and Safety Committee.</p> <p>NOTE the status of the Corporate Risk Register.</p> <p>NOTE the Corporate Risk Trending Analysis.</p>	



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
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<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:	
<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: ISO 14001 ISO20000 ISO 27001 BS10008	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Leadership
<u>PARTH ANSAWDD</u> <u>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</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	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
Risk Management Group	07/10/2025	Reviewed
Management Board	17 Oct 2025	Reviewed
Laura Tolley, Head of Corporate Governance	October 2025	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 18 risks on the Corporate Risk Register, of which 7 are for the consideration of this Committee, with 4 of these 7 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
- DHCW0281**
- DHCW0336 Audit + Withdrawal of contracts
- 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 (2) – 2 public, 0 private

There were two risks removed during the period

ID	TITLE	DESCRIPTION	STATEMENT OF REMOVAL
DHCW0350	Increased Cadence of GP Migrations	IF we increase the cadence of GP migrations THEN 1.DHCW will need to recruit additional staff 2.the incoming supplier service charges will increase the required budget needed in 2025/26 (they are more expensive than the outgoing supplier) 3.budgetary spend associated with the migrations (e.g. training, data extracts) will be brought forward 4.the financial support package for practices who did not choose to migrate will be brought forward RESULTING IN the need to find significant monies previously not budgeted for.	Sale of INPS complete. Agreement with buyer to expedite the migrations to be completed in May 2026, mitigating risk of services being withdrawn before migrations are complete
DHCW0340	GP Systems and Services provided by third party INPS	IF the GP clinical system and associated services supplied by INPS (subsidiary of CegeDim) are withdrawn prior to the completion of the GMS Clinical System Migration Project	Sale of INPS complete. Agreement with buyer to expedite the migrations to be

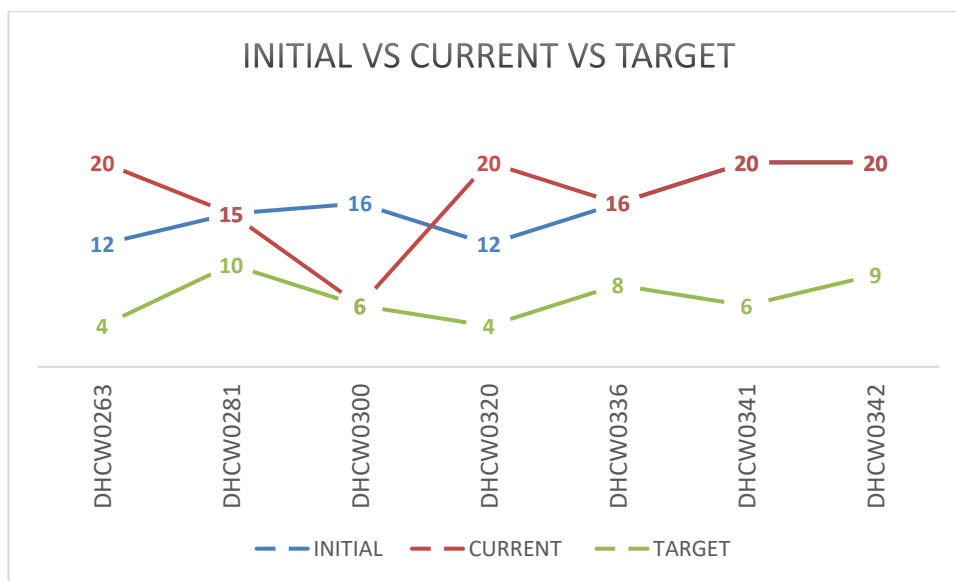


	(subsidiary of cegecim) could be withdrawn	THEN there will be a significant risk to the availability of a clinical system/solution to support General Practice service delivery RESULTING IN GP service delivery and patient care being significantly impacted and further impacting on other healthcare services.	completed in May 2026, mitigating risk of services being withdrawn before migrations are complete
--	--	---	---

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

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)			**DHCW0281 ↔		DHCW0298 - Delay in WLIMS implementation 2.0 ↔
	MAJOR (4)			DHCW0349 - RADIS Team Scaling Back 25/26 ↔	DHCW0336 Audit + Withdrawal from Contracts ↔ DHCW0337 Sustainable Digital Services and Development Funding Model ↔ **DHCW0341 ↔ **DHCW0342 ↔ DHCW0346 DDaT Governance Review Implementation ↔ DHCW0348 Transition to new data Architecture ↔	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 - Canis (Screening and Palliative Care) ↔	DHCW0318 - Welsh Language Scheme Compliance ↔	DHCW0347 National Target Architecture Roadmap ↔ DHCW0237 - New Requirements impact on resources and plan ★	DHCW0351 - Changes in political landscape in Wales ★
	MINOR (2)					
	NEGLIGIBLE (1)					

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



Please note that DHCW0336/0281/ 0341 and 0342 are all tracking their initial score and therefore overlaid on the graph.

- 4.5 Committee members are also asked to receive and discuss the [Annual Digital Governance & Safety Committee Corporate Risk Trend analysis](#) covering the period of 01 October 2024 to 31 August 2025.
- 4.6 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 (2) – 2 public, 0 Private

There were two new risks escalated during the period

Reference	Name	Primary Risk Domain	Committee Assignment
DHCW0237 (RE-ESCALATION)	New requirements impact on resources and plan	Development of services	Programmes Delivery Committee
DHCW0351	Changes in political landscape in Wales	Service Delivery	Audit & Assurance Committee

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

There were no changes in score during the period.

RISKS REMOVED (4) – 4 public, 0 private

There were four risks removed during the period

RISK TITLE	RISK TITLE	EXECUTIVE OWNER	COMMITTEE ASSIGNMENT
DHCW0334	Funding for Care Director in FY25/26	Executive Director of Primary,	Programmes Delivery



		Community & Mental Health Digital Services	Committee
DHCW0350	Increased Cadence of GP Migrations	Executive Director of Primary, Community & Mental Health Digital Services	Digital Governance & Safety Committee
DHCW0340	GP Systems and Services provided by third party INPS (subsidiary of cegecim) could be withdrawn	Executive Director of Primary, Community & Mental Health Digital Services	Digital Governance & Safety Committee
DHCW0207	Document Management Strategy	Executive Director of Finance	Audit & Assurance 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
<p>DISCUSS the Corporate Risks assigned to the Digital Governance and Safety Committee.</p> <p>NOTE the status of the Corporate Risk Register.</p> <p>NOTE the Corporate Risk Trending Analysis.</p>	

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

Eitem ar yr Agenda: Agenda Item:	4.1
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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:	Keith Reeves – Service Management Team Manager

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)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL 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:	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	Choose an item.
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 DUTY OF QUALITY ENABLER</u>	Learning Improvement and Research
<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:	
All Domains Apply	
<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: 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
Incident Review and Learning Group	31/7/25	Approved



Management Board	17/7/25	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 to make and take forward recommendations for improvement.
- 3.2 This report includes specific information regarding Quarter 2.

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 July to 30th September 2025** inclusive.
- 4.5 Specific points to note in relation to this report.
- 4.6 There was one early warning notification issued to Welsh Government, in relation to People and Organisational Development in Q2 with a total of 3 notifications issued across the year. New for 25/26 is incidents reportable under the NIS directive. There has been 1 incident reported, with a total of 2 incidents reported across the year.
- 4.7 Of the Complaints, Concerns, and Feedback, there were 15 complaints in relation to NHS Wales App, relating to known issues which are in the process of being resolved, and 15 in relation to the Dental Access Portal. The remainder were in relation to DHCW business or directed to other NHS Wales bodies
- 4.8 For lessons learned the report covers a failure at one of DHCW's data centres due to a cooling issue. It also covers a technical report for the NHS Wales App.
- 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 an increase in incidents as a result of active failures through change management in previous years, and we are seeing a decline from last year. To note also that the external domain is showing a slight decline from last year, this primarily relates to local health board outages for WRIS.

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

- 5.1 There are no matters for escalation, the paper is presented for assurance to 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
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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 for ASSURANCE this report from the DHCW Information Governance team.	

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)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<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:	
<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:	
<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:	
<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
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	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

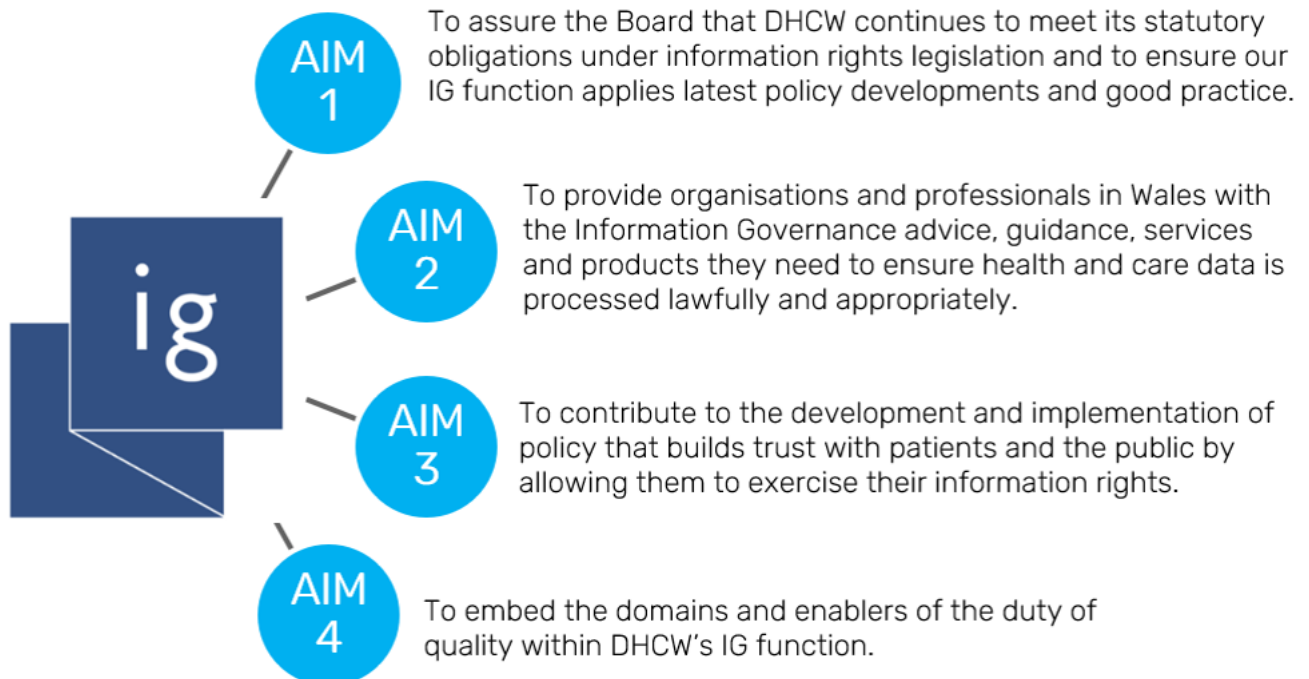
Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Rhidian Hurle	November 2025	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	IG	Information Governance
IMTP	Integrated Medium-Term Plan	WASPI	Wales Accord on the Sharing of Personal Information
WG	Welsh Government	ICO	Information Commissioner's Office

FOIA	Freedom of Information Act	DPIA	Data Protection Impact Assessment
WASPI	Wales Acord on the Sharing of Personal Information	DPO	Data Protection Officer
GMP	General Medical Practitioners	CP	Community Pharmacies
		NDR	National Data Resource

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 6th July to 4th November 2025. 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 During September and October 2025, NHS Wales Shared Services Partnership undertook an internal audit of Information Governance. This resulted in a finding of “Substantial Assurance”. Additionally, there were two opportunities for improvement that are being actioned. Further information is included in a paper provided on the consent agenda.

4.4.2 Following the success of Data Protection Officer Services being delivered to GMPs and Community Pharmacies, the Optometry Wales Data Protection Officer Service had been formally launched following Ministerial approval.

4.4.3 The Wales Accord on the Sharing of Personal Information (WASPI) 20th Anniversary event will take place on the 10th November. The event will be a celebration of two decades of collaboration. The event includes key speakers, the Information Commissioner and the Cabinet Secretary for Economy, Energy and Planning.

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

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

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:

Recommendation:

The Committee is being asked to

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

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

Eitem ar yr Agenda: Agenda Item:	4.4
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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 further progress in taking forward the delivery of the Research and Innovation Strategy and the eLibrary Strategy and REVIEW progress made in advancing the DHCW Research and Innovation and eLibrary 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)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIANT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u>	Choose an item.
<p>Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:</p> <p>A Prosperous Wales, A Resilient Wales, A Healthier Wales, A Wales of Cohesive Communities, A Globally Responsive Wales</p>	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	Choose an item.
<p>Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:</p> <p>Safe Care, Effective Care, Governance, Leadership and Accountability</p>	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u>	Information
<u>PARTH ANSAWDD DOMAIN OF QUALITY</u>	Choose an item.
<p>Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:</p> <p>ISO 27001, ISO20000, ISO90001, ISO 14001, ISO13845, BS10008</p>	
<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
<p>Datganiad: Statement:</p>	



Our commitment to equality, diversity, and inclusion underpins every element of the Research and Innovation Strategy, ensuring our digital health solutions are equitable and accessible for all Welsh patients. Equality impacts are considered from the outset to reduce diversity and support the needs of diverse patient and staff groups.

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	04/11/25	Further drafting



Rachael Powell	05/11/25	Further drafting and approval
Digital Governance and Safety Public Committee	20/11/25	For 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
WHELP	Wales Higher Education Libraries Forum	WIDI	Wales Institute of Digital Information
SAIL	Secure Anonymised Information Linkage		

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 Research and Innovation

- The Research & Innovation (R&I) team is central to driving digital transformation in health and care across NHS Wales.
- R&I work is underpinned by four core principles:
 1. **Strategic partnerships:** Building collaborations with industry, academia, and health services.
 2. **Impactful research:** Focusing on research that delivers tangible benefits.
 3. **Enabling resources:** Providing the tools, knowledge, and infrastructure needed for innovation.
 4. **Innovation culture:** Fostering an environment where new ideas are encouraged and supported.

These principles ensure that R&I activities are closely aligned with service priorities and governed robustly.
- The team has made notable progress against the 2022–2025 R&I Strategy, with all Integrated Medium Term Plan (IMTP) milestones on track for timely delivery.
- Work is already underway to refresh the R&I Strategy for 2026–2029, ensuring ongoing alignment with organisational and sector priorities.
- The R&I team are pursuing DEA Accreditation, which enables secure linking and sharing of datasets for research that benefits the public. Accreditation ensures that robust security measures, governance processes, and skilled personnel are in place when handling personally identifiable data.



- The R&I team is updating Standard Operating Procedures and governance structures to provide a transparent, end-to-end process for researchers.
- A temporary pause on new project work has been implemented, with exceptions only for operational tasks or requests directly from NHS Wales. This pause allows the team to prioritise existing commitments and streamline governance processes.

3.2 E-Library

- The 2024-25 e-Library annual report has been approved by DHCW Management Board and is now available via the website: [English](#) / [Welsh](#).
- Working with WIDI and in collaboration with [WHELF, Research Consulting](#) has been appointed to complete a feasibility study with two aims:
 - to identify whether a Diamond Open Press for the publication of medical, health and social care works would support accelerating the shift towards Open Access for NHS and HE institutions in Wales;
 - take a deep dive into the current publishing practices across NHS Wales's seven (7) Health Boards, three (3) Trusts and two (2) Special Health Authorities and identify whether local or a national Open Access Policy, Institutional Repository and/or Open Press would benefit NHS Wales to increase their research profile while demonstrating a commitment to widening public access to research conducted in NHS Wales.

To **note**: DHCW launched their [Open Access Policy](#) and [Institutional Repository](#) in October 2024.

- The Open Access team continue to support DHCW authors and co-authors to publish Open Access. Work is continuing on uploading content to the institutional repository with particular focus on publications that acknowledge DHCW as a source. For example: [Demonstrating the benefit of a cellulitis-specific patient reported outcome measure \(CELLUPROM©\) as part of the National Cellulitis Improvement Programme in Wales | Journal of Patient-Reported Outcomes](#) that used the [Annual PEDW Data Tables](#) as a data source.
- All e-Library IMTP milestones are on track for delivery to agreed timescales.

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

Research and Innovation

4.1 SAIL

Colleagues from DHCW, Swansea University and the SAIL databank are progressing a new Service Level Agreement to set out clear service standards and arrangements for delivery.

This was also flagged as a recommendation as part of DHCW's DEA Accreditation.

Outcomes / Benefits to Practice:

- Clear service arrangements that are responsive to the demands and requirements of the research community.
- Clear roles and responsibilities for all partners that ensures resources and capabilities are adequately reflected to ensure service delivery.

4.2 DEA Accreditation

Evidence for the annual DEA Accreditation review was submitted on 10 October. The forthcoming audit will offer assurance that robust safeguards, skilled personnel, and effective processes are in place to uphold data integrity and confidentiality. Following an initial review, a Teams meeting will be arranged in the coming weeks to discuss the capability and security evidence, providing an opportunity to address assessor queries and clarify any elements not easily captured within the submission spreadsheet.

Outcomes / Benefits to Practice:

- Strengthens organisational confidence in the secure handling of sensitive data.
- Enables compliant and efficient data linkage for research that benefits patients and the public.
- Promotes a culture of best practice and consistent standards across all teams.

4.3 Bevan Exemplar Cohort 9

Unequal Aging: Health Inequalities in Older Patients

The analysis phase of the Bevan project has been completed. This involved mapping the OECD Population Study questions to defined health capability traits, in order to identify which traits showed strong correlations with mental health outcomes. Among these, only the *confidence to self-manage one's own health* demonstrated a significant correlation with mental health. Further analysis identified specific demographic characteristics that are strongly correlated with this confidence trait, providing potential target cohorts for future interventions aimed at improving self-management confidence.

Work on the final report has now begun. It was presented on 31st October 2025 and is scheduled for delivery at the Senedd on 22nd January 2026.

4.4 SOP's/ Governance

The R&I team is currently updating Standard Operating Procedures and strengthening governance structures to ensure a transparent, end-to-end process for researchers. Key details will be made publicly available on our webpages to set clear expectations.

The updates will include a full process flow, highlighting:

- Points of engagement with IG, Cyber, and ISD for approvals where required.
- Dates for Operational & Engagement (O&E) sessions and Board meetings.



- Expected touchpoints with the R&I team.
- Timelines for when researchers can expect formal responses from the Board.

While exact timescales for data provision and IG sample reviews can vary depending on project complexity, the aim is to agree data analyst capacity and expected timelines prior to O&E. This ensures that project leads have full visibility of the process.

Following recent discussions, a temporary pause on new project work is in place, with exceptions only for operational tasks or requests directly from NHS Wales. This pause allows the team to prioritise existing commitments and streamline governance processes effectively.

Outcomes / Benefits to Practice:

- Improves transparency and clarity for researchers, reducing uncertainty and delays.
- Ensures a consistent and auditable process for approvals and project delivery.
- Helps prioritise resources effectively, maintaining focus on high-value projects and operational priorities.

4.5 Research & Innovation Strategy Report

The draft of the strategy refresh report is now complete and ready for review and feedback from O&E, Board and Innovation Leads.

Outcomes / Benefits to Practice:

- Provides a clear strategic direction for R&I activities, aligning with organisational priorities.
- Supports informed decision-making and resource allocation.
- Enhances the visibility of innovation priorities across the organisation.

4.6 Engagement

The R&I team maintains proactive engagement with stakeholders across industry, academia, and health services. This includes the ongoing development of a structured engagement tracker, a community of interest plan, and learning resources to support collaboration and knowledge sharing.

Recent highlights include:

- **ADR UK – 17–18 September**

The ADR UK 2025 Conference, hosted by ADR Wales in Cardiff, provided valuable engagement with the research community on using administrative data to improve health outcomes and reduce inequalities. Information colleagues presented at this event and AD for Information, Intelligence & Research joined a data hackathon judging panel.

- **Health Data Forum – 24–25 September**

The Health Data Forum Global Hybrid Summit took place at the Principality Stadium, Cardiff. Themed *“Driving Change through Data Insights”*, it brought together international experts to

share best practice on the ethical use of health data.

- **Health Care Research Wales Conference -16th October**

An opportunity to connect with the research community, explore emerging developments, and consider the role of research in driving improvements in health and care.

- **SAFER: Exploring Federation and Innovation Conference – 21st October**

The project is advancing federated analytics in the SAIL Databank by reviewing governance, compliance, and operational processes. The project emphasizes strong engagement through advisory panels, public consultations, and collaboration with national initiatives like TRevolution and DARE UK. These activities are designed to build trust, align security standards, and support secure, collaborative research across multiple partners.

- **MediWales Awards – 4th December**

Celebrating innovation and excellence in the healthcare sector. Representatives from R&I will be in attendance at the awards and were involved in the judging committee.

- **Research, Innovation and Knowledge Management Community of Interest Framework**

The next phase of this project is currently on hold while governance processes are being streamlined.

Outcomes / Benefits to Practice:

- Strengthens collaboration and knowledge sharing across the research and healthcare community.
- Increases awareness of innovation and research opportunities that can enhance patient care and service delivery.
- Provides structured support for researchers, improving engagement and project success.

4.7 AI Policy

In collaboration with NHSWLKS, Welsh Government, PHW library and information colleagues, an AI policy applicable to all those licenced under the NHS Wales CLA licence (all NHS Wales and others) has been developed. The policy outlines how AI should be used appropriately in the library, information and research space, with particular focus on copyright. The policy was reviewed by the AI Commission for Health and Social Care and approved by DHCW Management Board. Following the Digital Governance and Safety Committee, it will be made publicly available and circulated to stakeholders.

Outcomes / Benefits to Practice:

- Provides clear guidance aligned to copyright legislation and guidance from the Copyright Licensing Agency on the use of copyright material with Gen Ai tools
- Supports awareness of ethical and legal obligations for licensed persons
- Enhances the visibility of the NHS Wales e-Library and copyright holders for NHS Wales

4.8 US Administration and Health and Care Digital Resources

The team and Community of Interest Group are monitoring potential impact of the US Administration on biomedical research and in turn nationally procured digital resources. As of 2nd October, a new notice on Pubmed reads:

- *Because of a lapse in government funding, the information on this website may not be up to date, transactions submitted via the website may not be processed, and the agency may not be able to respond to inquiries until appropriations are enacted. The NIH Clinical Centre (the research hospital of NIH) is open. For more details about its operating status, please visit cc.nih.gov. Updates regarding government operating status and resumption of normal operations can be found at opm.gov.*

For now, it is expected that PubMed, and ClinicalTrials.gov, will remain online (Science News Staff, 2025), however, Pubmed will not be kept updated meaning procured databases such as Medline, EMBASE, PsycINFO and others will not be updated as timely as usual. E-Library have raised concerns with database suppliers to discuss contingency plans and have begun advising end users to utilise other databases to support their searching ([Epistemonikos](#), Europe PMC, [LIVIVO](#))

Outcomes / Benefits to Practice:

- Strengthens collaboration and knowledge sharing across the research and healthcare community regarding use of digital resources
- Increases awareness of other sources of information to support searching for information

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

5.1 Supplier and/or health related companies and use of AI

The e-Library were made aware of an instance where a potential (as not yet confirmed) NHS Wales supplier of products has included AI hallucinated references in their marketing and promotional materials. Health and Care professionals requested the library service at Swansea Bay UHB to find the references (as they could not) and librarians were able to conclude that the references did not exist. Risks include misinformation being used in practice should references not be checked and suppliers inflating statistics or information to suit their need.

5.2 Amazon Web Services (AWS) Outage

On the 20th October 2025 at 09:26, AWS experienced an outage due to "significant error rates for requests" to one of its endpoints for services in its US-EAST-1 region. This had an impact on ten (10) NHS Wales e-Library suppliers amounting to 150+ individual resources including e-Journals, e-Books, databases and evidence summaries/clinical decision support tools. The e-Library team invoked their Business Continuity Plan (BCP)



and tested all forty-five (45) interfaces it procures, confirming the ten (10) affected by 11:14. As of 15:00, all ten (10) platforms were back online with little impact on end users. All stakeholders and end users were communicated with via email and social media channels.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE further progress in taking forward the delivery of the Research and Innovation Strategy and the eLibrary Strategy and **REVIEW** progress made in advancing the DHCW Research and Innovation and eLibrary services.

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

WALES INFORMATICS ASSURANCE

GROUP REPORT

Eitem ar yr Agenda: Agenda Item:	4.5
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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:	
<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:	
<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:	
<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:	



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	04/11/2025	Approved
Rhidian Hurle, Medical Director	05/11/2025	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	CTM	Cwm Taf Morgannwg University



	Report	UHB	Health Board
ePMA	Electronic Prescribing Medicines Administration	WNCR	Welsh Nursing Care Record
WCP	Welsh Clinical Portal	LIMS	Laboratory Information Management System
ABUHB	Aneurin Bevan University Health Board	CDR	Care Data Repository
WCRS	Welsh Care Records Service		

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 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.

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

Go-live compliance within the reporting period

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

Project	WIAG sign off	Medical Director sign off
LIMS 2.0 Tranche 1	29 th September 2025	Approved
CMDB Software Testing	30 th October 2025	Approved

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

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

For Information:



The WIAG process will undergo a Quality Improvement (QI) activity, using the *Kaizen* methodology, to support continuous improvement and identify opportunities to refine and streamline current processes. Assurance Leads, Project Managers, and other relevant stakeholders will be invited to participate.

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 TECHNICAL DESIGN AUTHORITY UPDATE

Eitem ar yr Agenda: Agenda Item:	4.6
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	20 November 2025

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
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:	
<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:	
<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:	
<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
Management Board	October 2025	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



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 To ensure successful implementation of our Open, API, and Cloud-first architecture, we established a critical governance and assurance mechanism: the Technical Design Authority (TDA). Launched in 2023/24 as a pilot program and subsequently formalised as a permanent board, the TDA currently comprises representatives from both Welsh Government and ABUHB. This collaborative body has been instrumental in defining key architecture domains, establishing a robust Enterprise Architecture framework, and rigorously reviewing and approving architectural principles. The TDA provides crucial oversight and guidance, ensuring alignment and consistency across all technology initiatives.
- 3.2 The TDA operates within a robust governance structure designed to ensure effective oversight and alignment with organisational objectives:
- The TDA derives its authority from the Management Board, providing a clear line of accountability and ensuring its decisions are aligned with strategic priorities.
 - The TDA's primary focus is on establishing and maintaining architectural decisions, principles, standards, and reusable patterns. This ensures consistency, interoperability, and efficiency across technology initiatives.
 - To facilitate broad engagement and expertise, the TDA forms working groups and commissions work as needed. This ensures diverse perspectives are considered in the development and review of architectural artifacts.
 - A dedicated Technical Design Assurance Group (TDAG) reports directly to the TDA. This structure provides a focused and specialised body for the detailed assurance of designs.
 - The TDAG will rigorously assesses designs against the principles, standards, and patterns approved by the TDA. This ensures all technology solutions adhere to established architectural guidelines and meet the required standards.
- 3.3 Since the last Digital Governance and Safety Committee:
- The public facing site used to publish principles, decisions and TDA meeting information has migrated to a new home, enabling better support and security behind the scenes.¹
 - The 'Digital Products & Software Engineering' principles² were approved by the TDA.
 - The 'User Centred Design' principles³ were approved by the TDA.
 - The Architecture Principles have been reviewed by the newly formed pan-NHS Wales architecture community of practice (established under the National Target Architecture project) and some changes are under discussion that would enable the principles to be uplifted to a national level.

¹ <https://gigcymru.github.io/architecture>

² <https://gigcymru.github.io/architecture/principles/digital-products-and-software-engineering/>

³ <https://gigcymru.github.io/architecture/principles/user-centred-design/>



- The draft Clinical Principles⁴ were reviewed by the TDA, with member feedback indicating these may be better incorporated into the existing principles rather than being captured separately; this is in hand.
- The newly approved Architecture Decision Record (ADR) Process⁵ has been utilised to form a 'Temporary Decision Group' to develop a framework to guide teams in the choice of Public Cloud provider for different solutions based on agreed criteria. This use case is helping validate the process and inform learning and improvement.

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

4.1 For the architecture principles to be elevated and adopted at a national level across NHS Wales, it is essential that an appropriate national governance body is established. This body would have the necessary authority to approve the principles and mandate their alignment across all relevant organisations. The process of setting up this national governance structure is currently underway, in collaboration with the Welsh Government. It is anticipated that the inaugural meeting of this DDaT Standards and Architecture Group will take place imminently, with the architecture principles set to be one of the first key agenda items for discussion.

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

5.1 There are no key risks / matters for escalation.

6 ARGYMHELLIAD / RECOMMENDATION

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

⁴ <https://gigcymru.github.io/architecture/principles/clinical/>

⁵ <https://gigcymru.github.io/architecture/design-authority/dhcw/architecture-decision-record-process/>