

Pwyllgor Llywodraethu A Diogelwch Digidol - Cyfarfod Cyhoeddus

Thu 05 March 2026, 13:00 - 15:10

Agenda

13:00 - 13:05 1. MATERION RHAGARWEINIOL

5 min

1.1. Croeso a Chyflwyniadau

I'w Nodi Cadeirydd

1.2. Ymddiheuriadau am absenoldeb

I'w Nodi Cadeirydd

1.3. Datganiadau o Fuddiant

I'w Nodi Cadeirydd

13:05 - 13:10 2. AGENDA GYDSYNIO

5 min

2.1. Cofnodion heb eu cadarnhau o gyfarfodydd blaenorol

2.1.1. Cyhoeddus

I'w Gymeradwyo Cadeirydd

📄 2.1.1 DGS DRAFT Minutes PUBLIC 201125v1-en-cy-C.pdf (10 pages)

2.1.2. Preifat - Crynodeb

I'w Gymeradwyo Cadeirydd

📄 2.1.2 DGS 20112025 PRIVATE ABRIDGEDv1-en-cy-C.pdf (5 pages)

2.2. Blaengynllun Gwaith

I'w Nodi Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

📄 2.2 DG&S Forward plan.pdf (5 pages)

2.3. Adroddiad Blynnyddol Llywodraethu a Diogelwch Digidol

I'w Gymeradwyo Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

📄 2.3 DG&S Annual Report.pdf (6 pages)

2.4. Hunanasesiad Effeithiolrwydd y Pwyllgor Llywodraethu a Diogelwch Digidol

I'w Nodi Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

📄 2.4 DG&S Self Effectiveness report.pdf (6 pages)


2.5. Cylch Gorchwyl Llywodraethu a Diogelwch Digidol

I'w Gymeradwyo Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd

📄 2.5 Digital Governance and Safety Terms of Reference.pdf (4 pages)

2.6. Llywodraethu Digidol a Chylch Diogelwch Busnes

I'w Gymeradwyo *Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd*

 2.6 DG&S Cycle of Business 26-27.pdf (4 pages)

13:10 - 13:25 3. PRIF AGENDA

15 min

3.1. Cofnod Gweithredu (0)

I'w Nodi *Cadeirydd*

3.2. Y Gofrestr Risg Gorfforaethol

I'w Drafid *Cyfarwyddwr Materion Corfforaethol | Ysgrifennydd y Bwrdd*


 3.2 Corporate Risk Register.pdf (7 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-Q3 DGS -2025-26.pdf (5 pages)

4.2. Adroddiad Sicrwydd Llywodraethu Gwybodaeth

Er Sicrwydd *Cyfarwyddwr Cyswllt ar gyfer Llywodraethu Gwybodaeth a Diogelwch Cleifion*
i.bPecyn Cymorth Llywodraethu Gwybodaeth

 4.2 IG Assurance Report.pdf (6 pages)

4.3. Adroddiad Sicrwydd Gwasanaethau Gwybodaeth

Er Sicrwydd *Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd ac Ymchwil*


 4.3 Information Assurance Report.pdf (5 pages)

4.3.1. Egwyl - 10 munud

4.4. Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth

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

- Adroddiad Strategaeth Tair Blynedd

 4.4 RIKM- DGS Committee Assurance Report -March 2026 (1).pdf (11 pages)

4.5. Adroddiad Grŵp Sicrwydd Gwybodeg Cymru

Er Sicrwydd *Rheolwr Ansawdd (Cydydffurfedd Rheoleiddiol)*

 4.5 DGSC Feb 2026.pdf (5 pages)

4.6. Adroddiad Sicrwydd yr Awdurdod Dylunio Technegol

I'w Nodi *Cyfarwyddwr Gweithredol Gweithrediadau*

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

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

5.1. Adroddiad Crynhoi Cynnydd y Pwyllgor i'r Bwrdd

I'w Draford *Cadeirydd*

5.2. Unrhyw Faterion Brys eraill

I'w Draford *Cadeirydd*

5.3. Dyddiad y cyfarfod nesaf: Dydd Llun 18 Mai 2026

I'w Nodi *Cadeirydd*

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

🕒 13:00 –15:15

📅 20 Tachwedd 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
David Selway	DS	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	IGDC
Yn bresennol	Blaenlythrennau	Teitl	Sefydliad
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
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	IGDC
Jamie Manning	JM	Rheolwr Ansawdd (Cydymffurfedd Rheoleiddiol)	IGDC
Rachael Powell	RP	Cyfarwyddwr Cyswllt Gwybodaeth, Deallusrwydd ac Ymchwil	IGDC
Keith Reeves	KR	Rheolwr Tîm Rheoli Gwasanaethau	IGDC
Julie Robinson	JR	Cydlynnydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth Cyfarfodydd)	IGDC
Michelle Sell	MS	Cyfarwyddwr Rhaglenni ac Ymgysylltu	IGDC
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol Dirprwy Ysgrifennydd	IGDC

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu a Diogelwch Digidol 20112025

		y Bwrdd	
--	--	---------	--

Ymddiheuriadau	Teitl	Sefydliad
Darren Lloyd	Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion	IGDC
Chris Collis	Prif Bensaer Digidol	IGDC
Marilyn Bryan Jones	Aelod Annibynnol	IGDC

Acronymau

AIA	Awdurdod Iechyd Arbennig	DG&S	Llywodraethu a Diogelwch Digidol
NDR	Adnoddau Data Cenedlaethol	ADS	Cymhwyso, Dylunio a Chymorth
YA	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 Personol 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	DAP	Porth Mynediad Deintyddion

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 20112025 – Cynorthwywyd gan y Copilot

Rhif yr Eitem	Eitem	Canlyniad	Cam Gweithredu i'w Gofnodi
RHAN 1 – MATERION RHAGARWEINIOL			
1.1	Croeso a Chyflwyniadau Croesawodd y Cadeirydd bawb i'r cyfarfod.	Nodwyd	Dim i'w nodi
1.2	Ymddiheuriadau absenoldeb Nodwyd ymddiheuriadau am absenoldeb oddi wrth: <ul style="list-style-type: none"> Darren Lloyd, Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion Chris Collis, Prif Bensaer Digidol Marilyn Bryan Jones, Aelod Annibynnol 	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiant Nodwyd nad oedd unrhyw Ddatganiadau o Fuddiant.	Nodwyd	Dim i'w nodi
1.4	Materion sy'n codi 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: GYMERADWYO Cofnodion Cyhoeddus a Phreifat Cryno'r cyfarfod diwethaf ar 20 Awst 2025	Cymeradwywyd	Dim i'w nodi
2.2	Blaengynllun Gwaith Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Blaengynllun Gwaith	Nodwyd	Dim i'w nodi
2.3	Adolygiad Archwilio Fframwaith Llywodraethu Gwybodaeth Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODYN er SICRWYDD .	Sicrwydd	Dim i'w nodi
RHAN 3 - PRIF AGENDA			
3.1	Cofnod Gweithredu NODODD y Pwyllgor fod un cam gweithredu ar y Cofnod Camau Gweithredu, a oedd wedi'i gwblhau.	Nodwyd	Dim i'w nodi
3.2	Y Gofrestr Risg Gorfforaethol Nododd Chris Darling, Cyfarwyddwr Materion	Trafodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 20112025 – Cynorthwywyd gan y Copilot

Corfforaethol/Ysgrifennydd y Bwrdd fod 18 o risgiau ar y Gofrestr Risg Gorfforaethol ar hyn o bryd, ac roedd saith ohonynt i'w hystyried gan y Pwyllgor hwn, tri ohonynt wedi'u dosbarthu fel rhai preifat a fyddai'n cael eu trafod yn y sesiwn breifat a phedwar yn destun trafodaeth yn y sesiwn hon:-

- **Risgiau Llywodraethu Gwybodaeth: 0263**
(swyddogaethau data) a 0320 (Ymddiriedaeth Dinasyddion a Rhanddeiliaid mewn data iechyd/gofal cymdeithasol)
- **0300 CANISC:** Mae risg sgrinio a cholposgopi, sydd bellach ar ei sgôr isaf, yn parhau ar y gofrestr nes datgomisiynu'r system yn llawn.
- **0336 Archwilio ynghyd â Risg Tynnu Contractau yn Ôl:** Parhaus, wedi'i aseinio i'r pwyllgor hwn.

Rhoddodd y Cyfarwyddwr Meddygol Gweithredol, Rhidian Hurlle (RH), fanylion pellach am y ddau risg llywodraethu gwybodaeth IGDC**0263** (swyddogaethau data) ac IGDC 0320 (ymddiriedolaeth Dinasyddion a Rhanddeiliaid), a chynghorodd fod grŵp Caldicott Guardian yn gweithredu ar wahân i strwythurau llywodraethu ffurfiol DDaT, a bod hyn wedi'i uwchgyfeirio trwy Brif Swyddog Gweithredol IGDC i arweinwyr llywodraethu a pholisi Llywodraeth Cymru. Cynghorodd RH, er bod rhannu data wedi gwella ar draws GIG Cymru gyda llofnodi'r cytundeb data ar y cyd, fod cyfyngiadau'n parhau, gan na fydd yr holl ddata yn cael ei rannu gan bob Bwrdd Iechyd, a bod hyn hefyd wedi'i godi drwy Lywodraethu DDaT.

Ymunodd Lee Mullin, Cyfarwyddwr Rhaglen (LM) â'r cyfarfod i roi rhagor o wybodaeth am y risg DHCW**0336** Archwiliad + Tynnu Contractau yn Ôl. Rhoddodd y prif bwyntiau canlynol ar y gwaith a wnaed hyd yn hyn:-

- Roedd ffrwd waith dechnegol y prosiect wedi datblygu'n dda, gyda datrysiaid posibl wedi'i ddatblygu, ond roedd cynnydd yn dibynnu ar Optum yn darparu detholiad data diweddaraf Cymru.
- Roedd y ffrwd waith Llywodraethu Gwybodaeth (IG) yn mynd rhagddi, ac roedd yr Asesiad Effaith Diogelu Data (DPIA) wedi'i ddrafftio.
- Roedd gweithgareddau adrodd wedi'u gohirio i raddau helaeth, gan aros am fynediad at ddata byw.
- Risg sylweddol i'r rhaglen yw dibyniaeth Optum ar drydydd parti i echdynnu data yn amserol, gan nad oes amserlen lawn wedi'i darparu eto.
- Roedd yr ymdrechion mudo yn cynnwys ymgynghori â'r cyflenwr presennol, ynghylch estyniad posibl a pharatoi papurau penderfyniad i sicrhau parhad y gwasanaeth waeth beth fo oedi gan drydydd parti.

	<p>Trafododd y Pwyllgor fabwysiadu technoleg gan feddygon teulu yng Nghymru a dywedwyd wrthynt nad oedd Cymru ar hyn o bryd yn wynebu'r un risgiau â Lloegr o ran gwrthwynebiad meddygon teulu i dechnoleg newydd. Fodd bynnag, roedd defnydd technolegol mewn practisau meddygon teulu yn destun trafodaethau contract parhaus ac mae rhai nodweddion (e.e. apwyntiadau drwy apiau) wedi cael eu treialu ond wedi dod i ben mewn rhai ardaloedd.</p> <p>Trafododd y Pwyllgor y Cytundeb Rhannu Data ar gyfer yr Adnodd Data Cenedlaethol a derbyniodd gadarnhad bod IGDC bellach yn rheolwr data ar y cyd ar gyfer yr Adnodd Data Cenedlaethol, ond nid oedd y cytundeb yn ei gwneud yn ofynnol nac yn gorchymyn i sefydliadau rannu eu data cleifion. Roedd rhywfaint o ddata yn llifo i mewn, ond roedd rhannu arferol yn dibynnu ar gyfeiriad polisi yn y dyfodol a newid diwylliannol system.</p> <p>Dadansoddiad Tueddiadau Risg Corfforaethol</p> <p>Darparodd CD uchafbwyntiau'r dadansoddiad tueddiadau risg corfforaethol blynyddol:-</p> <ul style="list-style-type: none"> • Mae tri risg wedi aros yn sefydlog yn ystod y cyfnod adrodd. • Mae Pwyllgor Llywodraethu DDaT wedi gweld y nifer uchaf o risgiau a neilltuwyd iddo dros y 12 mis diwethaf, gan adlewyrchu ei gylch gwaith eang (llywodraethu gwybodaeth, seiber, gwasanaethau gwybodaeth, dysgu sefydliadol) • Mae gan genadaethau strategol 1 a 2 (Trawsnewid Digidol a chynhyrchion/gwasanaethau digidol o ansawdd uchel) y nifer uchaf o risgiau wedi'u neilltuo. <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: TRAFODER a NODER y Gofrestr Risg Gorfforaethol a'r Dadansoddiad Tueddiadau Risg Gorfforaethol.</p>		
RHAN 4 – AGENDA SICRWYDD			
4.1	<p>Adroddiad Adolygu Digwyddiadau a Dysgu Sefydliadol</p> <p>Cyflwynwyd gan Keith Reeves, Rheolwr Tîm Rheoli Gwasanaeth, a nododd fod adroddiad Chwarter 2 yn cwmpasu'r cyfnod 1 Gorffennaf 2025 i 30 Medi 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, un mewn perthynas â Phobl a Datblygu Sefydliadol a'r ail, a oedd yn rhan o'r gwelliant i'r adroddiad o'r flwyddyn flaenorol, h.y. adroddwyd ar y digwyddiad drwy'r gyfarwyddeb newydd, gan arwain at ddau hysbysiad yn ystod y flwyddyn. 	Trafodwyd er Sicrwydd	Dim i'w nodi

	<ul style="list-style-type: none"> • Cwynion, Pryderon ac Adborth: roedd 15 o gwynion mewn perthynas ag Ap GIG Cymru. Roedd y rhain yn ymwneud â phroblemau hysbys sydd yn y broses o gael eu datrys a 15 yn ymwneud â'r Porth Mynediad Deintyddol. Roedd y gweddill yn ymwneud â busnes IGDC neu'n cael eu cyfeirio at gyrff eraill GIG Cymru. • Adolygu – 7 adolygiad o ddigwyddiadau, roedd un adolygiad yn rhan o'r eitem Gwranddo a Dysgu ar y Cyd a gyflwynwyd i Fwrdd AIA. • Gwersi a Ddysgwyd: mae'r adroddiad yn ymdrin â methiant yn un o ganolfannau data IGDC oherwydd problem oeri. Mae llawer o'r dysgu yn ymwneud yn ôl â digwyddiad blaenorol a gwelliannau a nodwyd. <p>Trafododd y Pwyllgor y Porth Mynediad Deintyddol (DAP) a chynnydd yn nifer y cwynion. Roedd y prif faterion yn canolbwyntio ar ddisgwyliadau defnyddwyr a gwallau technegol, fodd bynnag roedd y rhain yn cael eu datrys drwy gyfathrebu parhaus ac ymdrechion ymwybyddiaeth y cyhoedd.</p> <p>Rhoddodd SL gyd-destun pellach ar ddatblygiad model cymorth unedig IGDC ar gyfer gwasanaethau sy'n wynebu dinasyddion ond nododd nad oedd IGDC yn gyfrifol am ymholiadau cyffredinol y GIG.</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 Dave Parsons, Rheolwr Cod WASPI (DP), yr Adroddiad Sicrwydd Llywodraethu Gwybodaeth, gan nodi gwaith y tîm Llywodraethu Gwybodaeth o'r cyfnod hwn. Amlygwyd y pwyntiau allweddol canlynol:</p> <ul style="list-style-type: none"> • Mae archwiliadau mewnol a hunanasesiadau yn dangos cydymffurfiaeth gref gyda dim ond meysydd gwella bach a amlinellwyd. • Mae tryloywder wedi cynyddu gyda chynllun cyhoeddi newydd ar wefan IGDC • Mae staff wedi cael hyfforddiant ar gyfrifoldebau allweddol, gan gynnwys diogelu data a Rhyddid Gwybodaeth. • Ymdriniwyd â 35 o Asesiadau Effaith Diogelu Data gyda 16 wedi'u llofnodi. • Nodwyd ugainmlwyddiant Cytundeb Rhannu Gwybodaeth Bersonol Cymru gan ddigwyddiad a gynhaliwyd gan IGDC ar gyfer rhanddeiliaid allweddol, a daeth nifer dda i'r digwyddiad. • Derbyniodd tîm llywodraethu gwybodaeth IGDC wobwr breifatrwydd arwyddocaol ers cyhoeddi'r adroddiad. 	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 20112025 – Cynorthwywyd gan y Copilot

	<p>Llongyfarchodd y Pwyllgor y tîm am gyflawni cod ymddygiad cydnabyddedig ar gyfer Cytundeb Rhannu Gwybodaeth Bersonol Cymru o fewn Swyddfa Comisiynydd Gwybodaeth y DU.</p> <p>Trafododd y Pwyllgor y canlynol:</p> <ul style="list-style-type: none"> • Roedd y Gwasanaeth DPO, a oedd eisoes wedi cael derbyniad da gan feddygon teulu, bellach wedi'i ymestyn yn ffurfiol i fferyllfeydd cymunedol ac optometreg. Roedd nifer sylweddol o fferyllfeydd cymunedol wedi manteisio arno, ac yn ogystal roedd cyfranogiad y sector optometreg yn ei gamau cynnar ond disgwyliad iddo dyfu. • Rheolwyd y gwasanaeth DPO drwy Gytundeb Lefel Gwasanaeth (CLG), gan sicrhau bod adnoddau a chapasiti yn cael eu graddio yn ôl y galw. Roedd cyllid o'r cytundebau hyn i gael ei ddefnyddio i adeiladu'r capasiti tîm angenrheidiol wrth i'r nifer sy'n cymryd rhan gynyddu. • Roedd yr ehangu wedi cael derbyniad cadarnhaol ac roedd y tîm yn hyderus yn eu gallu i gefnogi cydweithwyr ychwanegol. <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd Llywodraethu Gwybodaeth</p>		
4.3	<p>Adroddiad Sicrwydd Gwasanaethau Gwybodaeth 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"> • Adolygwyd wyth Cynllun Sicrwydd Ansawdd ers mis Gorffennaf, gan sicrhau bod cynhyrchion/gwasanaethau yn bodloni safonau gwybodaeth • Cyflawnwyd pob carreg filltir allweddol i'r prosiect ar amser, a disgwyliad i gerrig milltir yn y dyfodol aros ar y trywydd iawn. • Roedd risgiau dangosfwrdd Power BI wedi cael eu harchwilio a'u tynnu o'r gofrestr risgiau. • Roedd data APC GIG Lloegr ar gyfer meincodi a chefnogi Byrddau Iechyd wedi'i sicrhau. • Roedd y wefan a'r sianeli adborth yn cael eu diweddarau'n rheolaidd er mwyn bod yn agored ac er mwyn gwella gwasanaethau. <p>Trafododd y Pwyllgor y pwyntiau canlynol o'r adroddiad:-</p> <ul style="list-style-type: none"> • Darparwyd rhagor o wybodaeth am sut y byddai'r 	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 20112025 – Cynorthwywyd gan y Copilot

	<p>dangosfwrdd newydd ar 'gwympiadau' yn cael ei ddefnyddio, gyda'r pwyllgor yn cael gwybod y byddai'n rhan o strategaeth ehangach i wella canlyniadau iechyd trwy fewnwelediadau sy'n seiliedig ar ddata a chydweithio traws-sector.</p> <ul style="list-style-type: none"> • Roedd adborth parhaus ac ymgysylltu â rhanddeiliaid yn ganolog i ddatblygiad ac effeithiolrwydd y dangosfwrdd. • Roedd angen cydnabyddedig i gyfleu effaith a manteision y dangosfyrddau hyn yn y byd go iawn yn gliriach mewn adroddiadau pwyllgor yn y dyfodol. <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODI'R Adroddiad Sicrwydd Gwasanaethau Gwybodaeth</p>		
4.4	<p>Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth Cyflwynodd RP yr Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth gyda'r uchafbwyntiau canlynol:</p> <ul style="list-style-type: none"> • Mae pob carreg filltir o Strategaeth Ymchwil ac Arloesi 2022-2025 wedi'u cyflawni, ac roedd strategaeth wedi'i hadnewyddu ar gyfer 2026-2029 ar y gweill. • Cwblhawyd achrediad Deddf Economi Ddigidol Blynyddol a chyhoeddwyd adroddiad blynyddol yr E-Lyfrgell. • Arweinyddiaeth barhaus mewn Mynediad Agored, gyda gwaith newydd ar ystorfeydd ac astudiaeth ddichonoldeb ar gyfer cyhoeddi ehangach, roedd cyflwyniad Gwranddo a Dysgu a Rennir ar Fynediad Agored i fod i gael ei rannu ym Mwrdd AIA ym mis Tachwedd 2025. • Cydweithio parhaus â SAIL a GIG yr Alban i wella rhannu data ac effaith ymchwil. • Datblygu polisi deallusrwydd artifisial ar gyfer gwasanaethau llyfrgell ymchwil, gan ganolbwyntio ar hawlfraint. • Rheoli digwyddiadau'n effeithiol, gan gynnwys toriad AWS gyda'r effaith leiaf posibl. <p>Trafodwyd y meysydd canlynol ymhellach:-</p> <ul style="list-style-type: none"> • Mynediad Agored a Gofal Cymdeithasol: mae'r gwasanaeth E-Lyfrgell wedi ehangu i gynnwys gofal cymdeithasol, gan ddarparu mynediad agored at ffynonellau, cynnwys gofal cymdeithasol mewn strategaeth ac olrhain defnydd ac effaith. • Y Toriad yn AWS: ymatebodd tîm yr E-Lyfrgell yn gyflym ac yn effeithiol i'r toriad yn AWS, gan ddangos cynllunio parhad busnes cryf. • Bydd yr adnewyddiad strategaeth sydd ar ddod yn adeiladu ar y cynnydd presennol, gan ganolbwyntio ar arweinyddiaeth ymchwil, cydweithio ac arloesi. Gwelwyd nifer o doriadau pŵer yn ddiweddar ac wrth i IGDC ddechrau ar storio cwmwl, roedd pwyslais ar 	Nodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 20112025 – Cynorthwywyd gan y Copilot

	<p>gynnal dull aml-gwmwl i reoli risgiau digidol a geoleidyddol.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: NODER yr Adroddiad Sicrwydd Ymchwil, Arloesi a Rheoli Gwybodaeth.</p>		
4.5	<p>Adroddiad Grŵp Sicrwydd Gwybodeg Cymru Cyflwynodd Jamie Manning, Rheolwr Sicrwydd Ansawdd a Chydymffurfiaeth Rheoleiddiol (JM), Adroddiad Sicrwydd Gwybodeg Cymru a thynnodd sylw at y canlynol:-</p> <ul style="list-style-type: none"> • Roedd y prosesau sicrwydd yn cael eu digideiddio trwy Ap WIAG Power sy'n symleiddio llifoedd gwaith ac yn galluogi casglu data gwell. • Cynhaliwyd digwyddiad Kaizen i nodi gwelliannau. Mae'r canlyniadau yn yr arfaeth, a byddent yn cael eu rhannu mewn adroddiad yn y dyfodol. • Roedd 24 o brosiectau'n defnyddio'r ap ar hyn o bryd, gydag adroddiadau rheolaidd a dim risgiau mawr y chwarter hwn. • Ar y cyfan, roedd sicrwydd a llywodraethu yn datblygu'n esmwyth, a disgwylir diweddariadau pellach yn dilyn adroddiad Kaizen. <p>Diolchodd y Pwyllgor i JM a'r tîm am effeithlonrwydd cyflwyno'r ap a'i fewnosod ar draws y sefydliad.</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 Sam Lloyd, Cyfarwyddwr Gweithredol Gweithrediadau, adroddiad yr Awdurdod Dylunio Technegol (TDA) a darparodd yr uchafbwyntiau canlynol:-</p> <ul style="list-style-type: none"> • Mae'r Awdurdod Dylunio Technegol (TDA) yn arwain safoni pensaernïol ar draws IGDC yn ystod cyfnod o newid sylweddol. • Prif gyflawniadau hyd yma: <ul style="list-style-type: none"> ○ Egwyddorion dylunio saernïol a dylunio sy'n canolbwyntio ar y defnyddiwr wedi'u diffinio a'u cyhoeddi. ○ Lanswyd gwefan gyhoeddus ar gyfer tryloywder ar benderfyniadau TDA. ○ Egwyddorion clinigol a menter integredig ar gyfer mabwysiadu cenedlaethol. ○ Dechrau cofnodion penderfyniadau ffurfiol, gan ddechrau gyda dewis darparwr cwmwl. <p>Roedd y trafodaethau'n seiliedig ar y pwyntiau canlynol:</p> <ul style="list-style-type: none"> • Mae angen cydnabyddedig am ddull llywodraethu a phensaernïaeth genedlaethol unedig o fewn GIG Cymru fel rhan o Lywodraethu DDaT. 	Trafodwyd	Dim i'w nodi


Cofnodion heb eu cadarnhau:


Pwyllgor Cyhoeddus Llywodraethu Digidol a Diogelwch 20112025 – Cynorthwywyd gan y Copilot

	<ul style="list-style-type: none"> • Roedd Bwrdd Saernïaeth Cenedlaethol yn cael ei sefydlu fel is-strwythur i Fwrdd Arweinyddiaeth DDaT. Roedd y Cylch Gorchwyl wedi'i rannu a Chadeirydd wedi'i nodi, fodd bynnag, roedd y cyfarfod cyntaf a'r amserlenni yn dal i fod yn yr arfaeth. • Bydd y saernïaeth yn cefnogi safonau data agored a rhannu data diogel, gydag IGDC yn datblygu Strategaeth API a gwelliannau integreiddio. • Roedd cynnydd ar y saernïaeth genedlaethol hon yn bwysig ar gyfer bodloni gofynion monitro gwell. <p>Cafodd y Pwyllgor sicrwydd gan gyfeiriad y cynnydd ac roedd yn edrych ymlaen at dderbyn diweddariadau pellach.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: DRAFOD yr Awdurdod Dylunio Technegol.</p>		
RHAN 5 – MATERION I GLOI			
5.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Nid oedd unrhyw fusnes brys arall i'w nodi.</p>	Nodwyd	Dim i'w nodi.
5.2	<p>Eitemau ar gyfer Adroddiad Crynhoi Cynnydd y Cadeirydd i'r Bwrdd</p> <p>Nodwyd yr eitemau i'w cynnwys yn Adroddiad Uchafbwyntiau'r Cadeirydd ar gyfer Bwrdd AIA ym mis Chwefror fel a ganlyn:</p> <ul style="list-style-type: none"> • Y Bwrdd i gael gwelededd o Gytundeb Rhannu Gwybodaeth Bersonol Cymru a'r llwybr i fod yn God Ymddygiad gan Swyddfa'r Comisiynydd Gwybodaeth ac ymdrechion arobryn y Tîm. 	Nodwyd	Dim i'w nodi
5.3	<p>Dyddiad y cyfarfod nesaf</p> <p>Cadarnhawyd y byddai dyddiad cyfarfod nesaf y Pwyllgor Llywodraethu Digidol a Diogelwch yn digwydd ar 05 Mawrth 2026 am 1.00pm.</p>	Nodwyd	Dim i'w nodi

CYFARFOD PWYLLGOR LLYWODRAETHU A DIOGELWCH DIGIDOL – CRYNODEB PREIFAT

COFNODION, PENDERFYNIADAU A CHAMAU I'W CYMRYD

 15:15 – 16:25

 20 Tachwedd 2025

 MS Teams

Yn Bresennol (Aelodau)	Blaenlythrenna u	Teitl	Sefydliad
Rowan Gardner (Cadeirydd)	RG	Aelod Annibynnol, Cadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru (IGDC)
Alistair Klaas Neill	AKN	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)

Yn bresennol	Blaenlythrennau	Teitl	Sefydliad
Chris Darling	CD	Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)
Mark Edwards	ME	Prif Swyddog Diogelwch Gwybodaeth	Iechyd a Gofal Digidol Cymru (IGDC)
Rhidian Hurle	RH	Cyfarwyddwr Meddygol Gweithredol	Iechyd a Gofal Digidol Cymru (IGDC)
Julian Jones	JJ	Pennaeth Seiberddiogelwch	Iechyd a Gofal Digidol Cymru (IGDC)
Sam Lloyd	SL	Cyfarwyddwr Gweithredol Gweithrediadau	Iechyd a Gofal Digidol

Cofnodion heb eu cadarnhau:
Pwyllgor Preifat ar Lywodraethu a Diogelwch Digidol 20 Tachwedd 2025

			Cymru (IGDC)
Darren Reynolds	DR	Rheolwr System Datblygu Monitro Genedlaethol	Iechyd a Gofal Digidol Cymru (IGDC)
Julie Robinson	JR	Cydlynnydd Llywodraethu Corfforaethol (Ysgrifenyddiaeth)	Iechyd a Gofal Digidol Cymru (IGDC)
Laura Tolley	LT	Pennaeth Llywodraethu Corfforaethol Dirprwy Ysgrifennydd y Bwrdd	Iechyd a Gofal Digidol Cymru (IGDC)

Ymddiheuriadau	Teitl	Sefydliad
Darren Lloyd	Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion	Iechyd a Gofal Digidol Cymru (IGDC)
Marilyn Bryan Jones	Aelod Annibynnol	Iechyd a Gofal Digidol Cymru (IGDC)
David Selway	Aelod Annibynnol, Is-gadeirydd y Pwyllgor Llywodraethu a Diogelwch Digidol	Iechyd a Gofal Digidol Cymru (IGDC)

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

Rhif yr	Eitem	Canlyniad	Cam
---------	-------	-----------	-----

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 20 Tachwedd 2025 – Cynorthwywyd gan CoPilot

Eitem			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"> • Darren Lloyd, Cyfarwyddwr Cyswllt Llywodraethu Gwybodaeth a Diogelwch Cleifion • Marilyn Bryan Jones, Aelod Annibynnol • David Selway, Aelod Annibynnol 	Nodwyd	Dim i'w nodi
1.3	Datganiadau o Fuddiant Nid oedd unrhyw ddatganiadau o fuddiant i'w nodi.	Nodwyd	Dim i'w nodi
RHAN 2 – AGENDA GYDSYNIO			
Dosbarthwyd eitemau ar yr agenda gydsynio cyn y cyfarfod a nodwyd nad oedd y Cadeirydd wedi derbyn unrhyw sylwadau ymlaen llaw.			
2.1	Cofnodion y cyfarfod diwethaf Cymeradwywyd cofnodion cyfarfod diwethaf y pwyllgor a gynhaliwyd ar 21 Awst 2025 fel cofnod cywir. Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: GYMERADWYO cofnodion y cyfarfod diwethaf	Cymeradwywyd	Dim i'w nodi
2.2	Adroddiad Ymgynghori a Chymeradwyo Dogfennau <ol style="list-style-type: none"> 1) ELIB-POL-2 AI yn E-lyfrgelloedd GIG Cymru 2) Polisi Defnydd Derbyniol CS-POL-12 – Deallusrwydd Artiffisial. Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol: CYMERADWYO'R ddau bolisi.	Cymeradwywyd	Dim i'w nodi
2.3	Achos Busnes Amlinellol (OBC) Datrysiad Archwilio Deallus Cenedlaethol (NIAS) Rhoddodd Darren Reynolds, Rheolwr System	Nodi	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 20 Tachwedd 2025 – Cynorthwywyd gan CoPilot

	<p>Datblygu Monitro Genedlaethol (DR), drosolwg o OBC NIIAS a oedd ar hyn o bryd yn y broses gaffael.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODER yr Achos Busnes Amlinellol ar gyfer yr Ateb Archwilio Deallus Cenedlaethol</p>		
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 gynwys y diweddariad Seiberddiogelwch Cenedlaethol</p> <p>Cyflwynodd Mark Edwards (ME), Prif Swyddog Diogelwch Gwybodaeth yr Adroddiad Sicrwydd Seiberddiogelwch gan dynnu sylw at y gwaith a gwblhawyd dros gyfnod Chwarter 2 yn y meysydd canlynol.</p> <p>Tirwedd Bygythiadau Seiber Cyfredol</p> <p>Gweithgaredd diweddar ac ymateb IGDC</p> <p>Sicrwydd Cadeirydd Cyflenwi – Cyfeirnod Risg Gorfforaethol DHCW0277, DHCW17371</p> <p>Canmolodd y Pwyllgor ME am ei effaith a'i eglurder a chadarnhaodd fod y camau nesaf yn cynnwys adrodd ar gydymffurfiaeth yr Uned Adfer Iawndal a GWEITHRED 01-20251120 datblygu cyfathrebu a chynllun seiber i wneud y mwyaf o gyfleoedd i wella.</p> <p>Penderfynodd y Pwyllgor Llywodraethu a Diogelwch Digidol:</p> <p>NODI'R Adroddiad Sicrwydd Seiber</p>	Nodwyd	CAM GWEITHREDU 01-20251120
3.3	<p>Y Gofrestr Risg Gorfforaethol</p> <p>Nododd Chris Darling, Cyfarwyddwr Materion Corfforaethol/Ysgrifennydd y Bwrdd fod 18 o risgiau ar y Gofrestr Risg Gorfforaethol ar hyn o bryd, ac roedd saith ohonynt i'w hystyried gan y Pwyllgor hwn, a thri ohonynt wedi'u dosbarthu fel rhai preifat ac yn destun trafodaeth.</p>	Trafodwyd	Dim i'w nodi

Cofnodion heb eu cadarnhau:

Pwyllgor Preifat Llywodraethu Digidol a Diogelwch 20 Tachwedd 2025 – Cynorthwywyd gan CoPilot

	<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>		
RHAN 4 - MATERION I GLOI			
4.1	<p>Unrhyw Faterion Brys Eraill</p> <p>Nid oedd unrhyw faterion arall.</p>	Nodwyd	Dim i'w nodi
4.2	<p>Eitemau ar gyfer Adroddiad Crynhoi Cynnydd y Cadeirydd i'r Bwrdd</p> <ul style="list-style-type: none"> • Adroddiad sicrwydd seiberddiogelwch gwell • Cynhwyswch ddolen i Adolygiad Blynyddol y Ganolfan Seiberddiogelwch Genedlaethol (NCSC) ar gyfer 2025 - 'Mae'n amser gweithredu', yn yr adroddiad uchafbwyntiau ar gyfer ymwybyddiaeth aelodau'r Bwrdd. • Cyngori bod y Pwyllgor yn argymhell trafod Diweddariad Seiber ehangach i IGDC drwy sesiwn Briffio / Datblygu'r Bwrdd. 	Nodwyd	Dim i'w nodi
4.3	<p>Dyddiad y cyfarfod nesaf:</p> <p>Cadarnhawyd y byddai dyddiad cyfarfod nesaf y Pwyllgor Llywodraethu Digidol a Diogelwch yn digwydd ar 05 Mawrth 2026 am 1.00pm.</p> <p>Daeth y cyfarfod i ben am 16:25pm</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:	05 March 2026

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

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

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



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

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



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

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Digital Governance and Safety Committee	February 2025	Initial workplan approved
Laura Tolley	February 2026	Approved

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



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The Digital Governance and Safety Committee has a Cycle of Business that is reviewed on an annual basis. Additionally, there is a forward workplan which is used to identify any additional timely items for inclusion to ensure the Committee are reviewing and receiving all relevant matters in a timely manner.

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

4.1 The following items are due to be presented to the Committee meeting on 05 March 2026.

Item	Executive Lead
Action log	Chair
Audit Reports	Relevant Lead
Committee Highlight Report to SHA Board	Chair
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Cyber Resilience Unit Annual Report	Executive Director of Operations
Cyber Security Assurance Report inc Funding	Executive Director of Operations
Declarations of interest	Chair
DHCW Welsh IG Toolkit Submission 2024-2025	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
Information Governance Assurance Report	Executive Medical Director
Information Services Assurance Report	Executive Medical Director
Minutes	Chair
Policy Report	Executive Director of Finance
Research, Innovation & Knowledge Management Three year strategy report	Executive Medical Director
Research, Innovation & Knowledge Management Assurance Report	Executive Medical Director
Technical Design Authority	Executive Director of Operations
Wales Incident Review and Organisational Learning Report	Executive Medical Director

4.2 The items below have been identified for the following meeting on 18 May 2026

Item	Executive Lead
Action log	Chair
Audit Reports	Relevant Lead
Committee Highlight Report to SHA Board	Chair
Corporate Risk register	Director of Corporate Affairs/Board Secretary
Corporate Risk register - Private Risks	Director of Corporate Affairs/Board Secretary
Cyber Resilience Unit Annual Report	Executive Director of Operations
Cyber Security Assurance Report inc Funding	Executive Director of Operations
Declarations of interest	Chair
Deep Dive	Director of Corporate Affairs/Board Secretary
DHCW Welsh IG Toolkit Submission 2024-2025	Executive Medical Director
Digital and Information Standards	Executive Medical Director
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
Publication Scheme on DHCW Website	Executive Medical Director
Research and Innovation Annual Report	Executive Medical Director
Research, Innovation & Knowledge Management 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 ANNUAL REPORT OF THE DIGITAL GOVERNANCE AND SAFETY COMMITTEE

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:	05 March 2026

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

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

Pwrpas yr Adroddiad: Purpose of the Report:	For Endorsement
Argymhelliad: Recommendation:	The Committee is being asked to
ENDORSE the Annual Report of the Digital Governance and Safety Committee 2025/26 for APPROVAL to the SHA Board.	



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Provide a platform for enabling digital transformation
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 Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD 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: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: 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
Laura Tolley, Head of Corporate Governance/Deputy Board Secretary	February 2026	Reviewed
Rowan Gardner, Committee Chair	February 2026	

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
NIIAS	National Intelligence Integrated Audit Solution	OBC	Outline Business Case



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 In accordance with best practice and good governance, the Digital Governance and Safety Committee produces an Annual Report to the SHA Board which sets out how the Committee has met its Terms of Reference during the financial year.
- 3.2. In line with Schedule 3 of the Standing Orders, the SHA Board nominated a committee which covers oversight and scrutiny of quality, safety, information governance, data quality, security and risk. In addition, the remit of the Committee would extend to include Organisational Learning in digital in relation to health and care. The SHA Board agreed the Committee would be known as the Digital Governance and Safety Committee.
- 3.3 The purpose of the Digital and Safety Committee is to advise and assure the SHA Board in discharging its responsibilities with regard to the quality and integrity, safety, security and appropriate use of information and data to support health and care delivery and service improvement and the provision of high-quality digital health and care.
- 3.4 The Committee seeks assurance on behalf of the SHA Board in relation to DHCW's arrangements for appropriate and effective management and protection of information (including patient and personal information) in line with legislative and regulatory responsibilities.

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

- 4.1 The Committee was appointed by the SHA Board from amongst the non-officer members of the SHA and consists of no less than 3 members, comprising:

Chair: Independent Member

Members: Independent Member x 4.

Other usual expected attendees:

- Executive Medical Director (Caldicott Guardian)
- Director of Information and Communication Technology
- Associate Director of Information, Intelligence and Research
- Associate Director of Information Governance
- Director of Corporate Affairs/Board Secretary

At least **two** members must be present to ensure the quorum of the Committee, one of whom should be the Committee Chair or Vice Chair. In the interests of effective governance, it is expected that at least one Director listed above will also be in attendance.

4.2 The Committee met four times during the period 1 April 2025 and 31 March 2026. This is in line with its Terms of Reference. The Digital Governance and Safety Committee achieved attendance rate of 87.5% for this period.

	22.05.25	21.08.25	20.11.25	05.03.26	Attendance
Rowan Gardner (Chair)	✓	✓	✓	✓	100%
David Selway (Vice Chair)	✓	X	✓	✓	75%
Marilyn Bryan Jones	✓	✓	X	✓	75%
Alistair Klaas Neill	✓	✓	✓	✓	100%
Total	100%	75%	75%	100%	87.5%

4.3 During the financial year 2025/26 the Digital Governance and Safety Committee reviewed the following key items at its public meetings:

4.3.1 Standing items presented at each Committee throughout the year are as follows: -

Forward Workplan (informed by the Annual Cycle of Business)

The workplan as identified by members of the Committee in developmental meetings with Director of Corporate Affairs | Board Secretary and Executive Medical Director around the Annual Cycle of Business and is noted at each meeting with the opportunity for further input.

Risk Management Report including Risk Register

At all meetings during the period, the Committee received and reviewed Corporate Risks assigned to the Committee for scrutiny and oversight. In addition, deep dives were undertaken on a number of risk areas and the Committee received the Annual Risk Trending Analysis for discussion.

Incident Review and Organisational Learning Report

The Incident Review and Organisational Learning Report is presented as a standing agenda item, with an emphasis on themes and learning trends.

Assurance Reports

At each meeting during the period, the Committee received detailed assurance reports on the following areas:

- Information Governance Assurance Report
- Information Services Assurance Report
- Research, Innovation and Knowledge Management Assurance Report
- Wales Informatics Assurance Group
- Technical Design Authority

4.3.2 In addition, the following items were presented to the Committee for oversight and endorsement

- Digital and Information Standards

Consultation and Document Approval Reports

- AI in NHS Wales E-libraries
- Acceptable Use Policy – Artificial Intelligence.

Committee Membership, Terms of Reference, and Effectiveness Self-Assessment

As an annual exercise the Committee Membership and Terms of Reference are reviewed, and Committee members undertake a Committee Effectiveness Self-Assessment with results presented to the Committee at the end of each financial year.

4.4 During the financial year 2025/26 the Digital Governance and Safety Committee reviewed the following key items at its **private** meetings:

- Corporate Risk Register – all risks deemed private were reviewed in detail for assurance at each meeting.
- Cyber Assurance Report – this report was presented at each Committee meeting throughout the period.
- Government Cyber Action Plan
- Cyber Resilience Annual Report
- Disaster Recovery Plan
- Information Asset Register
- Senior Information Responsible Officer Report
- National Intelligence Integrated Audit Solution (NIAS) Outline Business Case (OBC)

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

5.1 The Digital Governance and Safety Committee is of the opinion that the draft Digital Governance and Safety Committee Annual Report 2025/26 is consistent with its role as set out within the Terms of Reference and that there are no matters the Committee is aware of at this time that have not been disclosed appropriately.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
ENDORSE the Annual Report of the Digital Governance and Safety Committee 2025/26 for APPROVAL to the SHA Board.	

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES DIGITAL GOVERNANCE AND SAFETY COMMITTEE EFFECTIVENESS SELF ASSESSMENT REPORT

Eitem ar yr Agenda: Agenda Item:	2.4
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	05 March 2026

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

Noddwr Gweithredol: Executive Sponsor:	Chris Darling, Director of Corporate Affairs / Board Secretary
Paratowyd gan: Prepared By:	Julie Robinson, Corporate Governance & Risk 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 content of the report and DISCUSS the findings.	



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)	ALL
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 Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Information
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Effective
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: N/A	



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

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Bethan Walters	February 2026	Reviewed
Chris Darling, Director of Corporate Affairs/Board Secretary	February 2026	

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance & Safety	SOs	Standing Orders



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 The Chair of the Digital Governance and Safety Committee is required to present an annual report outlining the business of the Committee throughout the financial year to the DHCW SHA Board. The report is designed to provide assurance on the monitoring and scrutiny on behalf of the DHCW Board in relation to their remit. As part of this process the Committee are required to undertake an annual effectiveness self-assessment questionnaire.
- 3.2 Members of the Committee are asked to discuss and review the Committee effectiveness self-assessment questionnaire relating to the activities and performance of the Committee on behalf of the Board during 2025/26.
- 3.3 Members should note six responses were received. The report does not include comments in order to ensure anonymity.

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

4.1 Summary report

The report is split into three areas:

- Positive assurance
- Areas requiring further assurance
- Areas requiring further action

Positive Assurance	Area: Composition, Establishment and Duties
	<p>Members were aware that:</p> <ul style="list-style-type: none"> • There were approved Terms of Reference and there was an expectation they were reviewed annually to take into account governance developments and the remit of other Committees within the organisation. • The Committee will prepare an annual report on its work and performance for 2025/26 to the SHA Board. • The Committee have established an annual cycle of business to be dealt with across the year. <p>Members felt:</p> <ul style="list-style-type: none"> • The Committee had been provided with sufficient authority and resources to perform its role effectively. One Member stressed there is no governance mechanism to insist that Cyber is a topic for NHS Boards discussions at private sessions. • The Committee met sufficiently frequently to deal with planned matters and there was sufficient time for questions and



	<p>discussions.</p> <ul style="list-style-type: none"> • The Committee undertook deep dives into significant risks to review and challenge actions to mitigate the risks. • The atmosphere is considered conducive to open and productive debate and behaviour is courteous and professional. One Member commented that this was critical and agreed that the atmosphere was considered conducive but that improvements could always be made. • There was appropriate use of private sessions of the Committee when attended.
	<p>Area: Committee Leadership and Support</p> <p>Findings:</p> <ul style="list-style-type: none"> • The meetings are effectively chaired with clarity of purpose and outcome, with one member commenting the Chair was excellent. • The Chair provided clear and concise information to the Board on the activities of the Committee • Members felt the Committee is adequately supported by the Executive Directors in terms of attendance, quality and length of papers and response to challenges/questions. • Members felt the Committee operated in line with DHCW Values. • Members felt there was adequate secretariat support. • Members felt their training was adequate, and no further training was required to fulfil their roles. • General comments from members indicate the Committee had further matured over the past year, with an open, honest and no surprises approach.
<p>Areas Requiring Further Action / Assurance</p>	<p>There were no findings requiring further action or assurance.</p>

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

5.1 The outcome of the Digital Governance and Safety Committee Effectiveness Survey will input to the Committee Annual Report to the SHA Board to include addressing areas where further improvements can be made to the operating of the Committee.



6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE the content of the report and **DISCUSS** the findings.

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES DIGITAL GOVERNANCE AND SAFETY TERMS OF REFERENCE

Eitem ar yr Agenda: Agenda Item:	2.5
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	05 March 2026

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

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

Pwrpas yr Adroddiad: Purpose of the Report:	For Approval
Argymhelliad: Recommendation:	The Committee is being asked to
APPROVE the Digital Governance & Safety Terms of Reference to go to the SHA Board.	



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)	All risks are relevant
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 Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement: N/A	



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

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

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

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance and Safety Committee	SOs	Standing Orders
SFI's	Standing Financial Instructions		



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

- 3.1 In-line with the Special Health Authority’s Standing Orders, Terms of Reference for Committees of the Board should be reviewed on an annual basis.
- 3.2 Digital Governance & Safety Terms of Reference were reviewed and agreed by the Committee in February 2024 and approved by the SHA Board in March 2024.

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

- 4.1 The review of the [Digital Governance & Safety Terms of Reference](#) by Members of the Committee allows for any comments or changes to be incorporated prior to submission to the SHA Board for approval.
- 4.2 The Terms of Reference have been reviewed by the Corporate Governance Team. There are a limited number of changes made to the Terms of Reference, these changes have been tracked and left in the document so that Committee members can easily see the changes made.
- 4.3 The main amendment to the Terms of Reference is the reflection of the Committees duties under the Well-being of Future Generations (Wales) Act 2015, to ensure the Act’s requirements are fully embedded into DHCW’s governance arrangements.

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

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

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad: Recommendation:	The Committee is being asked to
APPROVE the Digital Governance & Safety Terms of Reference to go to the SHA Board.	

IECHYD A GOFAL DIGIDOL CYMRU DIGITAL HEALTH AND CARE WALES DIGITAL GOVERNANCE AND SAFETY COMMITTEE CYCLE OF BUSINESS 2026-

Eitem ar yr Agenda: Agenda Item:	2.6
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	05 March 2026

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

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

Pwrpas yr Adroddiad: Purpose of the Report:	For Approval
Argymhelliad: Recommendation:	The Committee is being asked to
APPROVE the DHCW Digital Governance and Safety Committee Annual Cycle of Business.	



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)	All
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>	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>	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 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	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
Chris Darling, Director of Corporate Affairs/Board Secretary	February 2026	Approved
Rhidian Hurle, Executive Medical Director	Dec 2025	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
DG&S	Digital Governance and Safety Committee	SO's	Standing Orders



3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

3.1 The DHCW Digital Governance and Safety Committee should, on annual basis, receive an Annual Cycle of Committee Business which identifies the agenda items and reports which will be regularly presented to the Committee for consideration. The annual cycle is one of the key components in ensuring that the Committee is effectively carrying out its role.

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

4.1 The Cycle of Business is presented as item [2.6i Appendix 1](#). The approval of the annual Cycle of Committee Business will take place before the start of the new financial year.

4.2 The Cycle of Business covers the period 1 April 2026 to 31 March 2027. The Cycle of Business has been developed to help plan the management of Committee matters and facilitate the management of agendas and Committee business

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
APPROVE the DHCW Digital Governance and Safety Committee Annual Cycle of Business.	

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:	05 March 2026

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

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

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



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

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

RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	All are relevant to the report
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: N/A	

<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: 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	03 Feb 2026	Reviewed
Management Board	12 Feb 2026	Reviewed
Laura Tolley, Head of Corporate Governance	Feb 2026	Reviewed

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



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

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

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

RISKS REMOVED (1) – 0 public, 1 private
There was one risk removed during the period

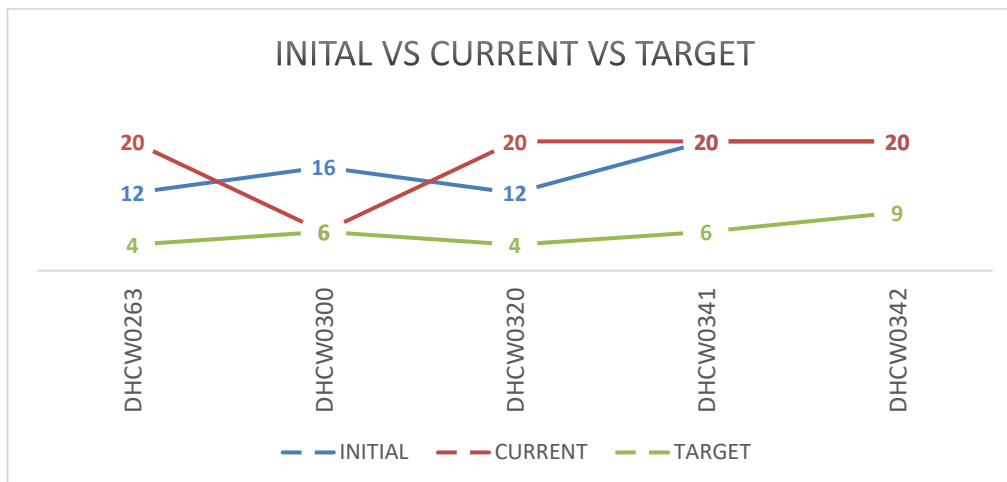
ID	TITLE	DESCRIPTION	STATEMENT OF REMOVAL
DHCW0281***	PRIVATE	PRIVATE	Downgraded for management at directorate level

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

		LIKELIHOOD				
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	ALMOST CERTAIN (5)
CONSEQUENCES	CATASTROPHIC (5)					DHCW0298 – Delay in WLIMS implementation 2.0 ↔
	MAJOR (4)			DHCW0349 – RADIS Team Scaling Back 25/26 ↔ DHCW0352 – Delivery of 2025-2026 Milestones ★ DHCW0353 Programme Funding – Connecting Care ★	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 – Canisc (Screening and Palliative Care) ←		DHCW0347 National Target Architecture Roadmap ↔ DHCW0237 – New Requirements impact on resources and plan ↔	DHCW0351 – Changes in political landscape in Wales ↔
	MINOR (2)					
	NEGLECTIBLE (1)					

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

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 DHCW0300/ 0341 and 0342 are all tracking their initial score and therefore overlaid on the graph.

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

NEW RISKS (2) – 2 public, 0 Private

There were two new risks escalated during the period

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

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

There were no changes in score during the period.

RISKS REMOVED (3) – 2 public, 1 private

There were two risks removed during the period

RISK TITLE	RISK TITLE	EXECUTIVE OWNER	COMMITTEE ASSIGNMENT
DHCW0281	PRIVATE	Executive Director for Digital Operations	Digital Governance & Safety Committee



DHCW0318	Welsh Language Scheme Compliance	Executive Director for Digital Strategy	Programmes Delivery Committee
DHCW0336	Audit + Withdrawal of Contracts	Executive Director of Primary, Community & Mental Health Digital Services	Digital Governance & Safety Committee

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

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

6 ARGYMHELLIAD / RECOMMENDATION

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

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

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

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	5 March 2026

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

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

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



1 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 LLESIAENT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Resilient Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	Multiple see below
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: ISO 20000, ISO 27001, ISO 9001, ISO 13485, SDI (Service Desk Institute Standard)	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Learning Improvement and Research
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	All Domains apply
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</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
No, (detail included below as to reasoning)	Outcome: N/A
Datganiad: Statement: Quarterly Assurance Report	



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

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Management Board	15/1/2026	Approved



Incident Review & Learning Group	10/2/2026	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 3 (covering the period **1st October to 31st December 2025**).

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 October to 31st December 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 Information Services in Q3 with a total of 6 notifications issued across the year. New for 25/26 is incidents reportable under the NIS directive. There have been 0 incidents reported, with a total of 2 incidents reported across the year.
- 4.7 Of the Complaints, Concerns, and Feedback, there were 7 complaints in relation to the NHS Wales App, relating to known issues which are in the process of being resolved, and 9 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 thematic review around Change as the cause of Incidents, as well as programme lessons learned related to the Bridgend Disaggregation and Digital Maternity Programmes.
- 4.9 Some elements of the report have been reformatted to improve ease of reading, notably the Contributory Factors Framework section moving from a table to quarterly comparison graphs. In relation to this section, there has been 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 by the Digital Governance and Safety Committee.

6 ARGYMHELLIAD / RECOMMENDATION

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

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

INFORMATION GOVERNANCE

ASSURANCE REPORT

Eitem ar yr Agenda: Agenda Item:	4.2
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	5 March 2026

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

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

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



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
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: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	BS 10008 - Evidential Weight & Legally Admissible Information Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	N/A
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	N/A
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
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	20/02/2026	Approved

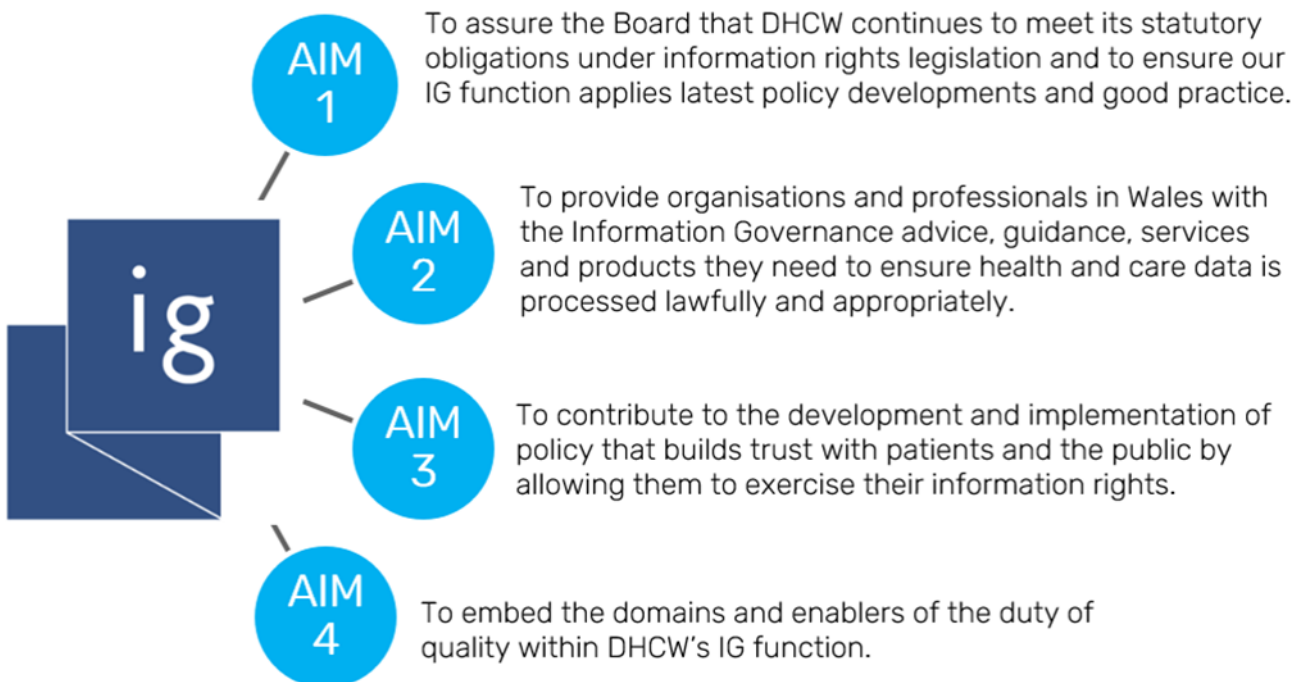
Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
IMTP	Integrated Medium-Term Plan	WG	Welsh Government
WASPI	Wales Accord on the Sharing of Personal Information	ICO	Information Commissioner's Office
FOIA	Freedom of Information Act	DPIA	Data Protection Impact Assessment
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 4th November 2025 to 31st January 2026. Relevant updates from this reporting period are provided based on the strategic aims of the Information Governance team, as set out in the DHCW IG three-year IG strategy:



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

4.1 Corporate Information Governance Compliance (AIM 1)

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

Relevant updates for this Committee period are:

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

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

4.2 National Information Governance Framework (AIM 2)

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

Relevant updates for this Committee period are:

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

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

4.3 Information Governance Policy (AIM 3)

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

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

4.4 Duty of Quality (AIM 4)

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

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

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

Relevant updates for this Committee period:

4.4.1 In 2025 the Data Use and Access Act (DUAA) passed through parliament and became law. This piece of legislation is due to come into effect as a phased approach over the course of 2026, with some changes already having taken effect. Digital Health and Care Wales Information Governance team is working through a DUAA action plan to ensure the organisation meets the requirements of the legislation. It is anticipated that the Board will receive further reports on this topic in due course. Some of the relevant key themes in DUAA include:

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

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

5.1 There are no issues of escalation to Committee.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE this report from the DHCW Information Governance team.

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

INFORMATION ASSURANCE

Eitem ar yr Agenda: Agenda Item:	4.3
-------------------------------------	-----

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	5 March 2026

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

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

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



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Drive better value and outcomes through innovation
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	
<u>DEDDF LLESIAINT CENEDLAETHAU'R DYFODOL WELL-BEING OF FUTURE GENERATIONS ACT</u>	A Healthier Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u>	Information
<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: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
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	Yes, please see detail below The formalisation of internal assurance processes for information will have a positive impact on the organisation. The DEA accreditation ensures safe and secure management of information which will have a positive impact.
CYFREITHIOL GOBLYGIADAU/EFFAITH LEGAL IMPLICATIONS/IMPACT	No, there are no specific legal implications related to the activity outlined in this report.
ARIANNOL GOBLYGIADAU/EFFAITH FINANCIAL IMPLICATION/IMPACT	No, there are no specific financial implications related to the activity outlined in this report
AR Y GWEITHLU GOBLYGIADAU/EFFAITH WORKFORCE IMPLICATION/IMPACT	No, there is no direct impact on resources as a result of the activity outlined in this report.
ECONOMAIDD- GYMDEITHASOL GOBLYGIADAU/EFFAITH SOCIO ECONOMIC IMPLICATION/IMPACT	No, there are no specific socio-economic implications related to the activity outlined in this report.
YMCHWIL AC ARLOESI GOBLYGIADAU/EFFAITH RESEARCH AND INNOVATION IMPLICATION/IMPACT	Yes, please see detail below ISD and NDR are developing an approach to operationalise the Secure Data Environment to further support R&I activities through safe, secure access to anonymised data.

2 LLWYBR CYMERADWYO & CRAFFU / APPROVAL & SCRUTINY ROUTE

Y Person / Pwyllgor / Grŵp sydd wedi derbyn y papur hwn cyn y cyfarfod hwn Person / Committee / Group who have received this paper prior to this meeting		
PERSON, PWYLLGOR NEU GRŴP PERSON, COMMITTEE OR GROUP	DYDDIAD DATE	CANLYNIAD OUTCOME
Rhidian Hurle	18/02/2026	Approved

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



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

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

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

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

4.1 Since the beginning of November 2025, the ISD Assurance Group (ISDAG) has reviewed nine Assurance Quality Plans (AQP's), zero Requests for Change (RFC), and zero Safety Case and Readiness Reports (SCRR's) to consider the impact on Information Services.

4.2 All Information Services milestones within the IMTP were achieved as planned by the end of Q3 2025/26. There is a total of 54 milestones to be delivered in Q4 2025/2026, all of which are on track for delivery.

4.3 An internal Kaizen Data Governance event was held, facilitated by the Quality Improvement team, to identify a clear pathway for supporting and identifying appropriate governance routes for data requests. This built on established processes and brought together teams and specialists across the organisation, to streamline the end-to-end process and also strengthen the governance, transparency and assurance around data-sharing.

4.4 The annual DEA Accreditation review was undertaken with UKSA which confirms strong controls for the acquisition, management and supply of research data to SAIL, remain embedded and fit-for-purpose, reinforcing trust with regulators, data providers and research partners.

4.5 Publication of a new Palliative Care and Mental & Behavioural Disorders Hospital Admissions indicators expands the quality, reliability and breadth of standardised public reporting across two priority areas. This will allow HBs, planners and policy leads to use

these indicators to understand local variation, identify pressures within pathways and inform service improvement priorities. Increased transparency and consistency in these datasets are expected to support stronger performance oversight, more targeted interventions and improved evidence-based planning across both palliative and mental health services.

- 4.6 Publication of the WCP usage dashboard, updated Urgent & Emergency Care dashboard, Colposcopy (Cancer) dashboard and phase 1 Rare Disease dashboard has strengthened the visibility, consistency and governance of key national datasets. Services, teams and managers will be able to use these products to understand variation, monitor pathway pressures, validate activity and support evidence-based planning. Collectively, these dashboards will improve situational awareness, enhance the quality of local and national insight, and enable more targeted and timely service improvements.
- 4.7 A dedicated iPassport skills group has been established for all PowerBI Pro licence holders, requiring them to read and stay up to date with essential DHCW PowerBI guidance. All existing licence holders have confirmed compliance, and new users are only issued a licence once they have reviewed and acknowledged all mandatory documentation, ensuring consistent understanding of responsibilities and strengthening assurance around Power BI use.
- 4.8 The AI & NHS Wales Libraries Policy was approved and disseminated across the organisation. The policy sets clear expectations around responsible data use, AI-supported research, information-gathering standards and copyright, strengthening governance and compliance.

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

- 5.1 There are no key risks and matters for escalation to the Committee.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

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

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

RESEARCH, INNOVATION 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:	5 March 2026

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

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

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

NOTE further progress in taking forward the delivery of the Research and Innovation Strategy and the e-Library Strategy.
The Committee is requested to **NOTE** and **REVIEW** progress made in advancing the DHCW Research and Innovation and e-Library services.



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	Drive better value and outcomes through innovation
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	
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 Globally Responsible Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
A Prosperous Wales, A Resilient Wales, A Healthier Wales, A Wales of Cohesive Communities, A Globally Responsive Wales	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	Multiple see below
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below:	
Safe Care, Effective Care, Governance, Leadership and Accountability	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD DUTY OF QUALITY ENABLER</u>	Information
<u>PARTH ANSAWDD DOMAIN OF QUALITY</u>	Multiple see below
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below:	
ISO 27001, ISO20000, ISO90001, ISO 14001, ISO13845, BS10008	
<u>DATGANIAD ASESIAID O'R EFFAITH AR GYDRADDOLDEB EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
Choose an item.	Outcome: N/A
Datganiad: Statement: 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	16/02/26	Further drafting
Rachael Powell	16/02/26	Further drafting and

		approval
Rhidian Hurle	17/02/26	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
OCP	Organisational Change Process	NHSWLKS	NHS Wales Library and Knowledge Services

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

Research, Innovation and Knowledge Management

- 3.1 This report provides an update on key developments across Research, Innovation and Knowledge Management function within DHCW. It outlines progress in strengthening governance arrangements, advancing organisational change, enhancing stakeholder engagement, maintaining critical digital information infrastructure, and expanding Open Access activity.
- 3.2 Collectively, these developments support service continuity during transition, improve digital and information governance assurance, enhance workforce access to high-quality evidence resources, and strengthen the visibility and impact of DHCW research outputs.
- 3.3 The work aligns with organisational priorities relating to digital resilience, knowledge management, and evidence-informed practice across NHS Wales.
- 3.4 The team has made strong progress against the Integrated Medium-Term Plan (IMTP) milestones and are on track for delivery.
- 3.5 The refreshed [Research & Innovation Strategy 2026-2029](#) has been developed to ensure continued alignment with DHCW's strategic direction and the evolving needs of NHS Wales.

DHCW has retained accreditation under the Digital Economy Act 2017, enabling the secure preparation and linkage of data for research in the public interest. This

demonstrates continued compliance with legislative and governance requirements and reinforces DHCW's position as a trusted data provider.

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

Research and Innovation

Research & Innovation Strategy Report

- 4.1 The refreshed Research & Innovation Strategy 2026–2029 (attached), which sets a clear and ambitious direction for strengthening Wales's research and innovation infrastructure, deepening collaboration, and embedding a culture of learning and impact, has now been approved by the Management Board and the Strategy Assurance Group.

It is now being submitted to the Digital Governance & Safety Committee (DG&S) for final approval, after which it will serve as the strategic direction for delivering high quality, impactful research and innovation across NHS Wales.

DEA Accreditation

- 4.2 DHCW has retained its accreditation for the preparation of data under the *Digital Economy Act 2017*. As part of the 2025/26 annual review, DHCW was assessed as 'Capable' for Security and 'Capable' for Capability, demonstrating strong governance, skilled personnel, and robust processes for managing and preparing data for research purposes.
- 4.3 The research and Innovation team scheduled time in January to review recommendations and work has begun to ensure actions are progressed in a structured and timely manner.
- 4.4 DHCW's next annual review is provisionally scheduled for consideration in September 2026. In preparation, the control areas expected to be in scope for security are *Access Control, Operations Security and Systems acquisition, development and maintenance*. Evidence gathering will begin in Q4 2025, with engagement of the relevant teams and specialists to enable completion in Q1 2026.

- 4.5 In addition, discussions have taken place with the Quality Assurance team to

strengthen and improve DHCW's organisational approach to DEA audits, ensuring more consistent preparation via iPassport, clearer evidence gathering processes, and enhanced cross-team collaboration.

Outcomes / Benefits to Practice:

- Demonstrates continued organisational compliance with the Digital Economy Act and commitment to secure data preparation.
- Reinforces external confidence in DHCW's governance, security, and capability standards.
- Ensures future audit readiness through early planning and cross-team collaboration.

Organisational Change Process (OCP)

- 4.6 Work continues to progress through the Organisational Change Process (OCP), including the development of a revised team structure that integrates the NHS Wales e-Library Service and Research and Innovation into the new Research, Innovation and Knowledge Management function. This redesign aims to better align capacity with demand, provide greater clarity of roles and responsibilities, and support more efficient and effective delivery across DHCW.
- 4.7 As the OCP has extended beyond its original timeline, interim roles supporting both the e-Library and R&I – including the Head of Research and Innovation and the e-Library Specialist Lead – have been extended until July 2026 to ensure service continuity.
- 4.8 In addition, following interviews held on Thursday 12 February, a new Business Support Officer has been appointed, further strengthening administrative and operational capacity.

Outcomes / Benefits to Practice

- Supports effective prioritisation of resources, maintaining focus on high-value projects and operational priorities.
- Strengthens administrative and operational capacity to meet growing demand.
- Enables closer alignment of library, research and innovation functions, improving efficiency and strategic impact.

ISO 56001 Accredited Innovation Management Training

Rachael Powell, Rachel Sully and Louisa Dean attended the two-day ISO 56001 Accredited Innovation Management training with [NHS Wales Innovation Leads](#). The programme covered core innovation methodologies, governance requirements, the role of leadership in driving an innovation culture, and how ISO 56001 can support consistent approaches, clearer processes, and improved measurement of innovation

activity across organisations.

Outcomes / Benefits to Practice

The ISO 56001 training will strengthen DHCW's capability to manage innovation more consistently and effectively. It will improve understanding of core innovation methodologies, enhanced governance and clarity of processes, supported leadership to foster an innovation driven culture, and enabled a more standardised Wales-wide approach for monitoring and measuring innovation activity.

Engagement

The R&I team maintains proactive engagement with stakeholders across industry, academia, and health services.

Recent highlights include:

MediWales Awards – 4th December

The awards unite industry, academia, and health and social care staff to celebrate achievements in Wales' Life Sciences sector. Categories include Industry and Health Awards, with Industry winners advancing to the Medilink UK National Competition for broader UK recognition.

The event was highly successful, encouraging excellent collaboration and providing valuable networking opportunities, including connections with RED Medtech Training Company

Bevan Exemplar Showcase – 22nd January

On 22 January 2026, Specialist Data Analyst Alex Shaw presented his Bevan Exemplar Cohort 9 project at the Senedd, showcasing the culmination of his research on *Unequal Ageing: Health Inequalities in Older Patient*. The presentation was well received, with plans underway to share the published outputs more widely across NHS Wales.

Health Inequalities amongst older adults represent a critical challenge in public health manifesting in disparities in morbidity, mortality, quality of life and access to health care services. This project identified and analysed these health inequalities using comprehensive inpatient, outpatient and emergency data.

The primary objective of this project was to uncover patterns and determinants of health inequalities among the elderly population to allow for future data-driven decision making around service provision, healthcare policy and workforce levels.

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.

E-Library

AI Policy

A revised AI Policy has been launched and made available through iPassport, the DHCW website, and the e-Library website. The policy has been renamed to “*Policy on Using AI for Information Discovery and Use*” to ensure the scope is accurately reflected.

Developed in collaboration with NHS Wales Library and Knowledge Services, Welsh Government and Public Health Wales colleagues, the policy provides clear guidance on the responsible use of AI within library, information and research contexts, with particular emphasis on copyright compliance.

The policy has been approved by DHCW Management Board and circulated across DHCW as mandatory reading.

Outcomes / Benefits to Practice:

- Provides clear, consistent guidance on safe and responsible AI use.
- Reduces organisational risk relating to copyright, data protection and information governance.
- Supports staff confidence and capability in using AI tools appropriately within research and information contexts.
- Strengthens governance and assurance arrangements across DHCW.

Engagement

Engagement activity across the e-Library function has remained strong, with several initiatives aimed at deepening relationships and increasing awareness of national resources. The team delivered dedicated nursing engagement sessions, presenting to Deputy Directors of Nursing in October and to Wrexham nursing students in December, promoting national nursing resources and highlighting opportunities to engage with key

materials such as the Royal Marsden Manual.

The Community of Interest Group continues to monitor developments in the US Administration that may affect biomedical information resources and the availability of procured digital databases, users and validating response processes, e-Library data and maintaining strong links with partners across academia, industry and clinical services. Recent business continuity exercises have further strengthened operational resilience, with successful live testing of the e-Library Business Continuity Plan (BCP) during the AWS outage in October and subsequent Cloudflare disruptions in November and December, ensuring minimal impact on users and validating response processes, e-Library data and maintaining strong links with partners across academia, industry and clinical services. Recent business continuity exercises have further strengthened operational resilience, with successful live testing of the e-Library Business Continuity Plan (BCP) during the AWS outage in October and subsequent Cloudflare disruptions in November and December, ensuring minimal impact on users and validating response processes, e-Library data and maintaining strong links with partners across academia, industry and clinical services. Recent business continuity exercises have further strengthened operational resilience, with successful live testing of the e-Library Business Continuity Plan (BCP) during the AWS outage in October and subsequent Cloudflare disruptions in November and December, ensuring minimal impact on users and validating response processes, e-Library data and maintaining strong links with partners across academia, industry and clinical services. Recent business continuity exercises have further strengthened operational resilience, with successful live testing of the e-Library Business Continuity Plan (BCP) during the AWS outage in October and subsequent Cloudflare disruptions in November and December, ensuring minimal impact on users and validating response processes, e-Library data and maintaining strong links with partners across academia, industry and clinical services. Recent business continuity exercises have further strengthened operational resilience, with successful live testing of the e-Library Business Continuity Plan (BCP) during the AWS outage in October and subsequent Cloudflare disruptions in November and December, ensuring minimal impact on users and validating response processes. Ensuring that early intelligence is shared across NHS Wales.

Wider engagement efforts have encompassed operational areas such as supporting the Finance Benefits team through provision of e-Library data and maintaining strong links with partners across academia, industry and clinical services. Recent business continuity exercises have further strengthened operational resilience, with successful live testing of the e-Library Business Continuity Plan (BCP) during the AWS outage in October and subsequent Cloudflare disruptions in November and December, ensuring minimal impact on

Outcomes / Benefits to Practice:

- Increases awareness and uptake of national digital knowledge resources.
- Supports evidence-informed clinical practice and professional education.

CINAHL database

To minimise disruption during the transition to the new user interface, the supplier of the CINAHL database has agreed to maintain access to the existing user interface until 30 June 2026. This provides time to achieve full functionality parity between the old and new interfaces.

Outcomes / Benefits to Practice:

- Prevents disruption to clinical, research and student workflows.
- Maintains user confidence and continuity of access to critical evidence resources.
- Open Access
-

Progress continues across DHCW's Open Access and institutional repository activity, reflecting sustained commitment to strengthening research visibility and accessibility. The organisation has exceeded its Open Access targets, achieving a 50% increase in openly published papers and continuing to retrospectively upload publications that acknowledge DHCW to ensure a comprehensive and authoritative record of research outputs. Work is also ongoing to support strategic developments, including the retendering of the Open Access feasibility study—now scheduled for completion by February 2026. This study explores options such as a Diamond Open Press and assess publishing practices across NHS Wales. -tendering of the Open Access feasibility study—now scheduled for completion on 19 December 2025—which will explore options such as a Diamond Open Press and assess publishing practices across NHS Wales.

Outcomes / Benefits to Practice:

- Improves visibility, accessibility and impact of DHCW research outputs.
- Strengthens compliance with Open Access and research transparency expectations.
- Enhances organisational reputation and contribution to NHS Wales knowledge infrastructure.

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

Commercial

Negotiations with RPS to remove two under-used modules from the *Medicines Complete* subscription have concluded with a cost saving to NHS Wales.

CLA Licence: The CLA has confirmed that adding the Generative AI extension to NHS Wales' licence would incur an additional cost of 7% per annum. The Generative AI extension does not cover content from all publishers, as certain exclusions apply. The team are reviewing options regarding the upgrade and whether it is required at this time.



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 e-Library Strategy.

The Committee is requested to **NOTE** and **REVIEW** progress made in advancing the DHCW Research and Innovation and e-Library services.

IECHYD A GOFAL DIGIDOL CYMRU

DIGITAL HEALTH AND CARE WALES

WALES INFORMATICS ASSURANCE

GROUP REPORT

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

Enw'r Cyfarfod: Name of Meeting:	Digital Governance and Safety Committee
Dyddiad y Cyfarfod: Date of Meeting:	05 March 2026

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

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

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



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
ASESIAD O'R EFFAITH AR ANSAWDD (cyf, os yw'n briodol) QUALITY IMPACT ASSESSMENT (ref if appropriate)	N/A
<u>DEDDF LLESIAENT CENEDLAETHAU'R DYFODOL</u> <u>WELL-BEING OF FUTURE GENERATIONS ACT</u>	A More Equal Wales
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC</u> <u>DHCW QUALITY STANDARDS</u>	ISO 9001 - Quality Management System
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Safe
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
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	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	17/02/2026	Approved
Rhidian Hurle, Medical Director	17/02/2026	Approved

Acronymau Acronyms			
DHCW	Digital Health and Care Wales	SHA	Special Health Authority
WIAG	Wales Informatics Assurance Group	AQP	Assurance Quality Plan
SCRR	Safety Case and Readiness Report	CTM UHB	Cwm Taf Morgannwg University Health Board
ePMA	Electronic Prescribing Medicines	BCUHB	Betsi Cadwallader University Health



	Administration		Board
PROMS	Patient Reported Outcome Measures	LIMS	Laboratory Information Management System
ABUHB	Aneurin Bevan University Health Board	WCP	Welsh Clinical Portal
CDR	Care Data Repository		

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. The [Q3 report](#) is attached.

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

Go-live compliance within the reporting period

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

Project	WIAG sign off	Medical Director sign off
CTMUHB ePMA	13th October 2025	Approved
Tactical Adoption of AWS Cloud- Hosted Infrastructure for the EMIS Web Clinical System	30th October 2025	Approved
BCUHB ePMA	14th November 2025	Approved
LIMS 2.0 Tranche 2	19th December 2025	Approved
Entra- Admin Cloud-Native Account Migration	21st January 2026	Approved

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

5.1 There is one matter for escalation within this reporting period.

The Single Vaccination project proceeded to go-live without formal approval from the Executive Medical Director. While the project had obtained input/approval from the 20 assurance leads, the WIAG PowerApp process was not fully completed prior to deployment.

This has now been retrospectively addressed, with the required documentation completed and formally recorded within the PowerApp.

Engagement has taken place with the project team to reinforce adherence to the agreed WIAG governance pathway. Appropriate reminders have been issued to ensure future compliance with the established approval process prior to go-live.

No further action is required at this time; however, this incident reinforces the importance of end-to-end process completion before deployment.

For Information:

Quality Improvement Activity:

The WIAG process has recently undergone a structured Quality Improvement (QI) event using Kaizen methodology.

This review has resulted in several agreed improvements, including:

- Enhanced education and familiarity with the WIAG process
- Improved efficiency within assurance workflows
- Strengthened alignment with other DHCW governance groups
- Clearer articulation of Definition of Ready and Definition of Done
- Development of Key Performance Indicators (KPIs) to monitor and drive continuous improvement

These changes are intended to increase clarity, reduce friction, and further embed proportional assurance.

Agile Alignment Review:

WIAG is also working with Reply to assess whether the refined assurance model is compatible with agile delivery methodologies. The objective is to ensure that governance remains robust while supporting iterative development approaches and reducing unnecessary delay.

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:	05 March 2026

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

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

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



1 ASESIAID O'R EFFAITH / IMPACT ASSESSMENT

CENHADAETH STRATEGOL STRATEGIC MISSION	All missions apply
RISG GORFFORAETHOL (cyf, os yw'n briodol) CORPORATE RISK (ref if appropriate)	N/A
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>	
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>SAFONAU ANSAWDD IGDC DHCW QUALITY STANDARDS</u>	N/A
Os oes mwy nag un safon yn berthnasol, rhestrwch nhw isod: If more than one standard applies, please list below: N/A	
<u>GALLUOGWR Y DDYLETSWYDD ANSAWDD</u> <u>DUTY OF QUALITY ENABLER</u>	Whole Systems Approach
<u>PARTH ANSAWDD</u> <u>DOMAIN OF QUALITY</u>	Efficient
Os oes mwy nag un galluogwr/parth yn berthnasol, rhestrwch nhw isod: If more than one enabler / domain applies, please list below: N/A	
<u>DATGANIAD ASESIAID O'R EFFAITH AR</u> <u>GYDRADDOLDEB</u> <u>EQUALITY IMPACT ASSESSMENT STATEMENT</u>	Dyddiad cyflwyno: Ddim yn berthnasol Date of submission: N/A
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
Sam Lloyd	23/02/2026	Reviewed

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

3 SEFYLLFA & CEFNDIR / SITUATION & BACKGROUND

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

- Defines and maintains DHCW's Enterprise Architecture, including principles, standards, patterns, and roadmaps.
- Commissions and oversees working groups to develop domain-specific architectural outputs.
- Works in partnership with the Technical Design Assurance Group (TDAG), which undertakes detailed technical assurance and escalates issues to the TDA where required.
- Ensures that major technology decisions align with strategic intent and national direction.
- The last update to DG&S (November 2025) reported significant progress on refining principles, establishing improved transparency, and maturing the Architecture Decision Record (ADR) process. Since then, further developments have taken place.

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

TDA Development Session – 14 January 2026

A dedicated TDA Development Session was held on 14 January 2026¹, focusing on strengthening the TDA's role, clarifying its purpose, and setting the strategic focus for 2026. Key themes emerging from this session included:

- **Strengthening governance clarity:** Participants recognised a need for clearer articulation of how TDA, TDAG, WIAG, and other governance forums interact, particularly where decision boundaries and escalation routes lie.
- **National alignment:** With the establishment of the new *National Architecture & Standards Board*, the TDA must now adjust its remit to support two-way alignment, ensuring DHCW principles and designs are consistent with national direction and vice-versa.
- **Improving adoption and support:** It was acknowledged that teams require more practical tools, examples, training, and blueprints to effectively adhere to architectural expectations.
- **Strategic clarity:** Key architecture capabilities such as identity, demographics, integration, and data require stronger strategic definition to support whole-system interoperability.

¹ <https://gigcymru.github.io/architecture/design-authority/dhcw/meetings/2026-01-14/>

These discussions informed the proposed TDA focus for 2026 outlined below.

TDA Meeting – 20 February 2026

The first formal TDA meeting of the year (20 February 2026) centred on confirming priorities for 2026 based on the outputs of the Development Session. The committee confirmed five main areas of focus:

1. TDA Positioning Within DHCW Governance

- Review and refresh the **Terms of Reference** to clarify scope, responsibilities, escalation routes, and the relationship with TDAG, WIAG, and programme governance.
- Improve clarity for teams submitting designs, ensuring consistent, proportionate, and transparent assurance pathways.

2. Alignment With the National Architecture & Standards Board

- Establish clear two-way communication mechanisms to ensure:
 - DHCW architectural principles and decisions reflect national direction.
 - DHCW actively contributes to national standards and patterns.
- Identify opportunities for shared working on common architecture components.

3. Standards, Patterns and Blueprints

- Systematically review and iterate DHCW standards across all architecture domains.
- Develop **Blueprints** (pre-approved patterns) that enable teams to accelerate safe and compliant delivery.
- Align this work with the **Cloud Transition Programme**, particularly standardised landing zones and reference infrastructure patterns.

4. Defining Strategic Architecture Components

- Commission work to define the future strategic direction for example:
 - **Master Patient Index (MPI)** and demographics services.
 - The relationship between **Integration Hub**, **Clinical Data Repository**, and legacy systems.
 - Wider whole-system architecture components that underpin national interoperability.
- These will form part of an updated Architecture forward plan.

5. Strategic Architecture Assessment for Business Cases

- Develop a clearer mechanism for assessing the architectural fitness of new initiatives at the **Strategic Case** stage.
- Provide early TDA approval or challenge to ensure alignment with national and organisational architecture from the outset.



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

There are currently no matters for escalation. However, the committee should note:

- The success of the 2026 work is dependent on dedicated capacity across architecture domains.
- Clear alignment with national structures will be important to avoid duplication and ensure coherence.

6 ARGYMHELLIAD / RECOMMENDATION

Argymhelliad:
Recommendation:

The Committee is being asked to

NOTE this update on the Technical Design Authority (TDA).