

**GDPR (General Data Protection Regulations) Project Status Report Overall Project Status:**



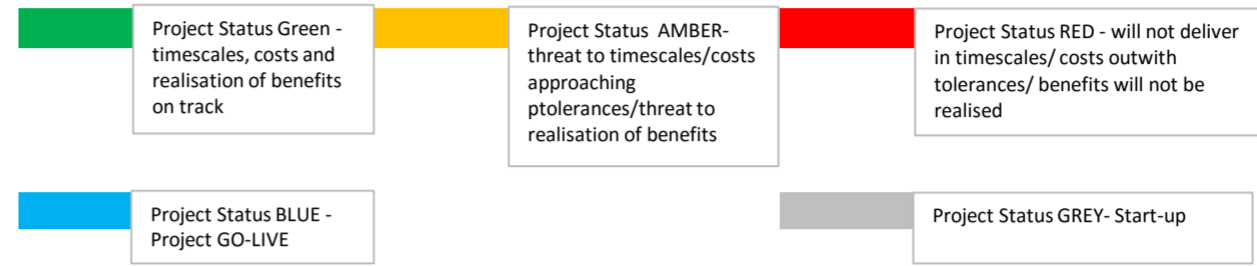
**START DATE:** 06/01/2018

**Completed By:** Norma Paterson

**Period Ending:** 06/03/2018

**Work Sub Group**

|                         | Jan-18 | Feb-18 | Mar-18 | Apr-18 | May-18 | Jun-18 |
|-------------------------|--------|--------|--------|--------|--------|--------|
| IG Manager/IG Committee | Green  | Green  |        |        |        |        |
| Communications          | Green  | Yellow |        |        |        |        |
| Clinical Quality        | Green  | Green  |        |        |        |        |
| eHealth                 | Green  | Green  |        |        |        |        |
| Health Records          | Green  | Green  |        |        |        |        |
| Human Resources         | Yellow | Yellow |        |        |        |        |
| Patient Information     | Green  | Green  |        |        |        |        |
| Procurement             | Red    | Yellow |        |        |        |        |
| Research & Development  | Green  | Green  |        |        |        |        |
| Community Services      | Red    | Grey   |        |        |        |        |
| Care Partners           | Grey   | Yellow |        |        |        |        |



|  |  |
|--|--|
| <p><b>Progress Summary</b></p> <ul style="list-style-type: none"> <li>The IG Forum is awaiting a response from the ICO on the draft privacy statement that it has drawn up.</li> <li>A patient leaflet paragraph has been agreed by IG Committee and acute patient leaflets are being updated.</li> <li>The IG Manager has produced the first of fortnightly 7 minute briefings to raise awareness of the key issues.</li> <li>A Communications plan has been produced and implementation has started but the Project Group want to make some changes which has resulted in the amber status.</li> <li>Clinical Quality have made very good progress on addressing the issues of compliance around the data they hold. The next stage is to tackle the issue of consent processes.</li> <li>The eHealth group has met and carried out a scoping exercise with in respect of their items. The review of the ISMS has started and a plan has been agreed with Procurement for reviewing IT contracts</li> <li>The Health Records group has updated its action list with additional items and has produced staggered delivery dates. It has noted links to IT security policies and has also identified issues in relation to IT systems and SAR processing.</li> <li>The Human Resources Group are making progress but have an issue with national guidance which results in the amber status.</li> <li>Patient Information is making steady progress.</li> <li>Procurement has drawn up a plan for the work required but has a resource issue in respect of profiling the current contracts. Hence the amber status.</li> <li>R&amp;D have done detailed work on the legal basis under which they undertake their work and are planning accordingly.</li> <li>Nominated contacts for community services have been appointed and are being advised on what is required. The nursing representatives have commenced work but this is at an early stage. Hence the grey status.</li> <li>Progress in relation to care partners is not under control of the Project Group. It is known that the data sharing agreements are being updated. This is a challenging task given the timescale. Hence the amber status.</li> </ul> | <p><b>Variations Summary</b></p> <ul style="list-style-type: none"> <li>There is a significant issue in respect of completion of the Information Asset Register. An SBAR on this issue will be provided by the General Manager, eHealth/ICT.</li> <li>Procurement has advised that there is a resource issue in respect of profiling all existing contracts.</li> <li>The Project Group wish to enhance the communications plan to get more easy to assimilate information out to staff on the need for urgent action on GDPR.</li> <li>Recent ICO advice is that processing for "public task" means health will not need to provide erasure for routine processing. However it will need to provide erasure in special circumstances where consent is obtained. However while erasure may not be required the right to complain and for rectification will still be applicable.</li> <li>While not requiring for individual requests for erasure, it has been noted that most clinical IT systems don't support erasure of patient records in line with record retention policies. NHSL has little control over this. This needs to be addressed at both local and national level with suppliers.</li> <li>The Health Records group has identified that there is no register of Subject Access requests and some handling processes may not be compliant. This is being addressed.</li> <li>Human resources has noted the lack of national guidance in some key areas.</li> </ul> |
| <p><b>Key Issues Summary</b></p> <ul style="list-style-type: none"> <li>The Issues Log has been updated and will be maintained in line with discussions at the GDPR Project Group meetings and from the sub group fortnightly checkpoint reports.</li> </ul>   | <p><b>Key Risks Summary</b></p> <ul style="list-style-type: none"> <li>The Risks Register has been updated following the meeting of the GDPR Project Group on 06/02/18. The risks have been allocated owners so that the scoring can be evaluated by those owners and their respective sub groups.</li> </ul>  |
| <p><b>To be Achieved Next Period</b></p> <ol style="list-style-type: none"> <li>An approved Privacy Statement. <b>IG Manager</b></li> <li>Revised communications plan. <b>Communications</b></li> <li>Training of those implementing GDPR. <b>IG Manager</b></li> <li>All actions finalised with implementation dates. <b>All Sub Groups</b></li> </ol>  |  |