Privacy Impact Assessment Wales National Workforce Reporting System (WNWRS)

Author: Tim Knifton & Donna Hudson
Service owner: Lisa Williams
Approver: Tim Knifton
Version: **Final v2**

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NHS Wales Shared Services Partnership
Alder House,
Cwrt Alder,
St Asaph Business Park,
Saint Asaph LL17 0JL

www.nwssp.wales.nhs.uk

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1 DOCUMENT HISTORY

1.1 Revision History

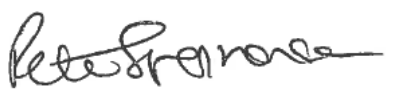| Date	Version	Author	Revision Summary
9 /9/2022	New draft v1.1	Donna Hudson/Lisa Williams	NWSSP IG Ratification Revised Data Sharing Requirements and Expansion
22/9/2022	Draft v1.1	Tim Knifton	Review of changes and finalised DPIA to reflect new data sharing arrangements
7/10/22	Draft v1.2	Lisa Williams	Updates to final draft for approval
25/10/22	Final v1.3	Tim Knifton	Finalised version and Data Sharing Agreement
7/8/23		Lisa Williams	Incorporated Article 9
16/8/23	V2 final	Tim Knifton	Reviewed and agreed changes
4/9/23	V2 final	Tim Knifton	Sent for review and approval to IG Steering Group members

1.2 Reviewers

This document requires the following reviews:

Date	Version	Name	Position
25/10/24	Final	IG/Project leads	Reviewers

1.3 Authorisation

Signing of this document indicates acceptance of its contents.

Author's Name:	Tim Knifton		
Role:	Information Governance Manager (NWSSP)		
Signature:		Date:	7th September 2023

Approver's Name:	Peter Stephenson on behalf of the Information Governance Steering Group		
Role:	Final approver		
Signature:		Date:	7th September 2023

1.4 Document Location

Type	Location
Electronic	NWSSP Information Governance DPIA Sharepoint folders

2. Screening Questions

To be completed by the project lead

Please complete the table below. Answering "Yes" to any of the screening questions below represents a potential IG risk factor that will have to be further analysed to ensure those risks are identified, assessed and mitigated wherever possible by working through sections A, B and C of this document.

Category	Screening question	Yes/No
Identity	Will the project involve the collection of new information about individuals?	Yes
Answer	The capture of workforce data in the WNWRS is to be extended to non-nhs staff employed by Community Pharmacies, Dental Practices and Ophthalmic Practices. These are independent contractors.	
Identity	Will the project compel individuals to provide information about themselves?	Yes
Answer	Workforce demographics are captured and provided by respective employers (Practice/Contractors within the Data Module) not from the individual directly	
Multiple organisations	Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information?	Yes
Answer	The data captured will be available as described in the WNWRS Data Access Permissions matrix. Data access is restricted, only anonymised data will be available within the reporting module	
Data	Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?	Yes
Answer	Data will be captured in accordance with sector contract compliance. This has increased the frequency of capture and how this data is made available to wider stakeholders (**anonymised basis)** The WNWRS Data Access Permissions matrix sets out these arrangements.	
Data	Does the project involve using new technology which might be perceived as being privacy intruding for example biometrics or facial recognition?	No

Category	Screening question	Yes/No
Data	Is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For example, health records, criminal records, or other information that people are likely to consider as private?	Yes
Answer	The data held within the WNWRS Data Module includes Date of Birth, National Insurance Number and where applicable Registered Body Number and personal sensitive data. The WNWRS Data Access Permissions matrix sets out these arrangements.	
Data	Will the project require you to contact individuals in ways which they may find intrusive?	No
Data	Will the project result in you making decisions or taking action around individuals in ways which could have a significant impact on them?	No

Section A - Project Description

To be completed by the project lead

Please complete with as much information as possible as this will assist the Information Governance Manager in assessing whether further action is required.

Information Asset/Project Name	Wales National Workforce Reporting System (WNWRS)
Directorate/Department	NWSSP Employment Services
Is this a change to an existing process?	Yes
Assessment Completed By	Lisa Williams
Job Title	Assistant Director of NWSSP Employment Services
Date completed	9th September 2022
E-mail	Lisa.williams@wales.nhs.uk
Purpose / Objectives - Why is it being undertaken? This could be the objective of the process or the purpose of the system being implemented as part of the project.	
As part of 'A Healthier Wales' Primary Care (Sustainability) Model for Wales, it is identified that a critical component of modernising the workforce infrastructure is understanding the workforce demographic. Welsh Government engaged NHS Wales Shared Services Partnership (NWSSP) to procure and implement the WNWRS. **This has now been in place since January 2020. The existing Data Impact Assessment was put in place following the withdrawal and replacement of the original supplier to ensure business continuity from 1st April 2021.** The WNWRS is a secure web-based system developed to capture practice staff information for all General Practices, Community Pharmacists, Dental Practices and Ophthalmic Practices in Wales. The system will also capture temporary workforce and where appropriate workforce contributing to the workforce capacity within these sectors. This assessment is undertaken to incorporate the expansion of the software from General Practices to all sectors and to extend the scope of sharing data with strategic partners where appropriate to do so. **This assessment strengthens the legal responsibility in respect of personal sensitive data.**	

Project/Change Outline - What is it that is being planned? If you have already produced this as part of the project's Project Initiation Document, Assurance Quality Plan or Business Case etc. you may make reference to this, however a brief description of the project/process being assessed is still required.

Over the 2 years of developing General Practice data intelligence there is a recognised requirement to appropriately share data for the purposes of enhancing capability in planning, developing, shaping and supporting the health and social care workforce in Wales. General Practice and extended sector data will be critical to this.

Working directly with Strategic Partners such as Welsh Government, Health Education Improvement Wales and the Strategic Programme for Primary Care the service aims to continue developing new data points for General Practice strengthening mapping of the sector and its workforce. For example, identifying GP Practices holding a Home Office Sponsorship Licence. This informs the wider strategy and supports the GP Trainee pipeline and employment into GP Practices in Wales. **Where required, this service will be developed to support other contractors and any new data areas reflected in future assessments to provide GDPR assurances.**

Identifiable data is visible to those entering the data, NWSSP and Argyle IT for administration and processing purposes. This is the Data Module. All data within the Data Warehouse Module is anonymised. NWSSP has established a data sharing agreement with Health Education Improvement Wales reflecting a data set that will include National Insurance Number for the specific purposes of linking external multiple data sets to produce a pseudo number. This is essential to meeting their statutory obligations in enabling capability in planning, developing, shaping and supporting the health and social care workforce in Wales.

Under the Guidance for the GMS Contract Additional Capacity Scheme, Health Boards will require validation of practice claims through the WNWRS including individual names. Practices will provide these as part of the payment application process under the scheme (see Section B1)

The WNWRS is supplied by Argyle IT, who are contracted to host the system, provide Tier 2/3 service/user support and system development management. NWSSP continue to provide Tier 1 service/user support.

NWSSP provide systems administration, data/reporting administration and be a single point of contact for GP Practices, **Dental Practices, Community Pharmacies and General Ophthalmic Services and respective stakeholders.**

All GP Practices hold access to the WNWRS through the Practice Management. During roll-out to other services, the service managers will be given the option to

either complete an MS Excel template with their staff data to upload onto WNWRS via Argyle IT or wait for access to the WNWRS to enter their staff data directly.

What is the purpose of collecting the information within the system? For example patient treatment, patient administration, research, audit, reporting, staff administration etc.
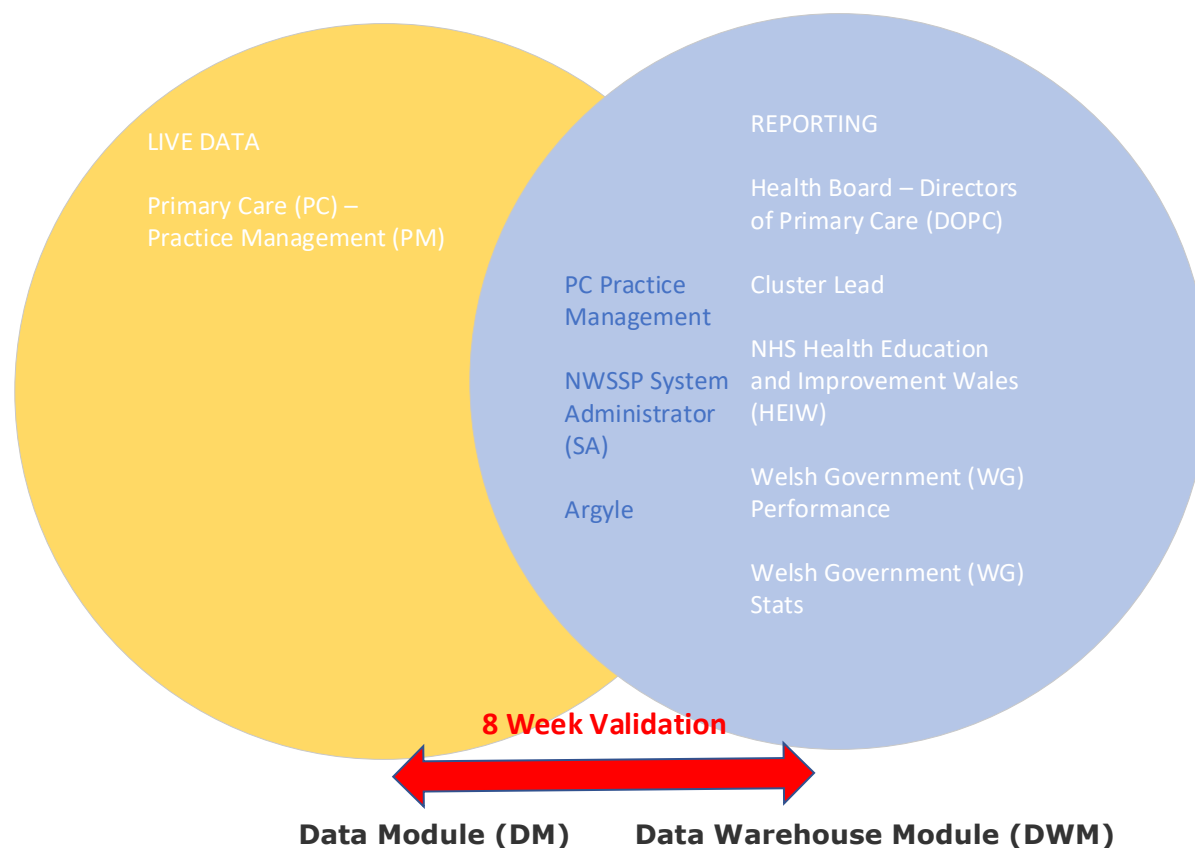
Wales National Workforce Reporting System (WNWRS) is a system of two modules. The first is the data module, which contains staff records and workforce administration functions. The second is the reporting module, which contains detailed reports for the contractor/practice management and anonymised reports of the workforce for reporting stakeholders.

Apart from anonymised reporting, an extract of the data will be taken from the system to support sector census and quarterly updates, published by the Welsh Government.

Data is analysed and generates intelligence to inform commissioning, planning, capacity and workforce skills and capacity. The anonymised data is used by a wide variety of stakeholders including Health Boards and Cluster Leads. The individual data is used to inform a capacity change in the workforce to support Additional Capacity Payment decisions and where applicable reported for General Medical Practice Indemnity purposes.

The system will continue to be developed to meet the needs of the individual professions whilst applying national data standards and ability to report and benchmark across all sectors.

Provide a description of the information flows (preferably including a diagram). Even if detailed information is not available some indication must be provided; this may already be available through requirements gathering. Broadly speaking the aim is to establish: who the information will be made available to, what type of information, why the information is required, how it will be shared and how often.

LIVE DATA

Primary Care (PC) – Practice Management (PM)

REPORTING

Health Board – Directors of Primary Care (DOPC)

Cluster Lead

NHS Health Education and Improvement Wales (HEIW)

Welsh Government (WG) Performance

Welsh Government (WG) Stats

PC Practice Management

NWSSP System Administrator (SA)

Argyle

8 Week Validation

Data Module (DM)   Data Warehouse Module (DWM)

Data Module – Identifiable Data

Practice appointed administrators with Entry, management and maintenance of
- Workforce Data
- Absence Data
- Vacancy Information
- Practice Profile

NWSSP System Administrator
Tier 1 Support to resolve data entry queries

Argyle IT
Tier 2 and 3 Support to resolve data entry queries

All data entered in the Data Module flows through to the Data Warehouse Model where agreed access allows you to view and download data in line with approved permission levels.

Data Warehouse Module – Anonymised Data

Argyle IT
System wide line level data reports

NWSSP System Administration
System wide line level data reports

Practice appointed administrators
Practice specific line level data reports
Practice/Cluster/Health Board/All Wales anonymised reports

Cluster Leads
Data Quality report Practices/Clusters/Health Board/All Wales
Practice/Cluster/Health Board/All Wales anonymised reports (exception where Cluster Lead has been provided with Practice Appointed Administrator access)

Health Boards and other Strategic Stakeholders
Data Quality report Practices/Clusters/Health Board/All Wales
Practice/Cluster/Health Board/All Wales anonymised reports

Health Education and Improvement Wales (HEIW)
Workforce Questionnaire
Enhanced Group Overview Report to include unique identifier National Insurance number for duplication identification and accurately develop an efficient workforce profile (Data Sharing Agreement established)
Starter and Leaver report
Practice/Cluster/Health Board/All Wales anonymised reports
Any further reporting changes will be noted with the NWSSP Information Governance Manager and assessment in isolation rather than complete a further DPIA

Welsh Government
Anonymised validated data extraction report for National Statistics (replaces annual GP Practice Census) published here:

https://gov.wales/general-practice-workforce

Provide details of how the development will have the potential to impact on the confidence patients/service users/employees have in the NHS maintaining the confidentiality of their personal data. For example, it could be that specific information is being held that hasn't previously, the level of information held about an individual is increasing or information is being shared with another organisation through a shared system or database where it wasn't previously.
Data held within the WNWRS is entered directly by the individual practice or contractor; through their secure login and from data that is already held on their employees or temporary workforce. Some of these records will relate to non-NHS employees/workers. The sector expansion during 2022-23 will increase this data capture to include Community Pharmacy, Dental Practices and Optometry Practices. By populating the WNWRS, GP Practices, Pharmacies, Dental Practices and Optometrists will be entrusting Argyle IT and NWSSP to maintain system/data security, GDPR compliance, system administration, data validation and reporting administration. GP Practices, Pharmacies, Dental Practices and Optometrists are not NHS employees, with the exception of Health Board Managed Practices and some UPPCs, so understandably there are concerns with sharing data outside their business. NWSSP has established a Data Sharing Agreement with Health Education Improvement Wales (HEIW). This is in place to restrict use of the identifiable data for the purposes to further safeguard anonymity, Health Education Improvement Wales will also adhere to the Information Commissioners Office (ICO) guidance on low numbers and potential for identification or backwards engineering and also abide by their own internal Information Governance controls. https://ico.org.uk/media/1061/anonymisation-code.pdf
Provide details of any previous Privacy Impact Assessment or other form of personal data compliance assessment done on this initiative.   If this is a change to an existing system, a PIA may have been undertaken during the project implementation
A Privacy Impact Assessment was previously completed on 27th June 2019 for the WNWRS contract with NHS Digital. The Privacy Impact Assessment was updated when the provider contract moved from NHS Digital to Argyle IT from the 1st April 2022. The only change at this date was the inclusion of development work to extend the functionality to Pharmacists, Dentists, Optometrists and UPCCs. In addition to that, Welsh Language functionality was also developed within the software.

Stakeholders - who is involved in this project/change? Please list stakeholders, including internal, external, organisations (public/private/third) and groups that may be affected by this system/change in the table below and detail any stakeholder activity taken.

Organisation	Engagement / Stakeholder Activity
NWSSP Employment Services	**Implementation/Procurer/Data Processor** Responsible for procuring and implementing the system, system/data administration, reporting, data validation and contract management.
NWSSP Information Governance Manager	**DPIA** Advisory person to support Employment Services on its Information Governance requirements and active support in drafting the Privacy Impact Assessment.
Argyle IT	**Supplier** Contracted to provide the system, system/user support, developments, data validation and control.
Welsh Government	**Funding/Stakeholder** Funding the project and system procurement. Also, a stakeholder in the system reporting output.
General Practitioners Committee (GPC) Wales	**GP Advisory/Stakeholder** GPC Wales is a standing committee of the BMA and represents all GPs working in Wales. Involved in the WNWRS Implementation Group.
GP Practices	**Data Controllers** Secure access to the live system – workforce admin and reporting. Need to populate and maintain the data, adhere to GDPR and Information Governance. There are GP Practice Managers involved in the Implementation Group and Data Quality/ Reporting Task & Finish Group.
Pharmacy Services	**Data Controller** Secure access to the live system – workforce admin and reporting. Need to populate and maintain the data, adhere to GDPR and Information Governance.

Organisation	Engagement / Stakeholder Activity
Dental Services	**Data Controller** Secure access to the live system – workforce admin and reporting. Need to populate and maintain the data, adhere to GDPR and Information Governance.
Optometry Services	**Data Controller** Secure access to the live system – workforce admin and reporting. Need to populate and maintain the data, adhere to GDPR and Information Governance.
Urgent Primary Care Centres (UPPCs)	**Data Controller** Secure access to the live system – workforce admin and reporting. Need to populate and maintain the data, adhere to GDPR and Information Governance.
NWSSP Digital Workforce Solutions	**Advisory Stakeholder** Provides input on data quality and reporting. Represented on the Implementation Group and Data Quality/Reporting Task & finish Group.
Health Board – Stakeholders	**Advisory Stakeholder** Represented on the Implementation Group and Data Quality/Reporting Task & Finish Group. Requests Primary Care reporting data.
Health Education and Improvement Wales (HEIW)	**Data Processor** Represented on the Implementation Group and Data Quality/Reporting Task & Finish Group. Requests Primary Care reporting data. Recipients under Data Sharing Agreement
Welsh Government – Knowledge and Analytical Services (KAS)	**Data Processor** Represented on the Implementation Group and Data Quality/Reporting Task & Finish Group. Requests Primary Care reporting data.
DHCW Information Governance – Data Protection Officer (DPO) Service	**Advisory (GMPs)** DHCW provide a DPO subscription service to GP Practices across Wales.

Organisation	Engagement / Stakeholder Activity
NWSSP Legal & Risk Services	**Indemnity** Providing General Medical Practice Indemnity (GMPI) to GP Practices on behalf of Welsh Government.
NWSSP Primary Care Services (PCS)	**Data Processor** Providing administration of the Medical Performers List (MPL) and GP Partnership Premium Payment Scheme, in addition to other Primary Care services.
Stakeholders - Has the patient (or group that the system is designed to hold data on e.g. employee) been consulted on the project?	

✓ **Yes**

☐ No

GP Practices were consulted including represented by GPC Wales and GP Business / Practice Managers involved as part of the WNWRS Implementation Group.

Consultation will continue during 2022-23 with each sector as part of the expansion and implementation of the sector. A copy of the DPIA will be made available and robust explanations of the data capture, process and reporting modules and use provided. Any questions and requests for clarity on data management will be provided as and when received during expansion.

Data Types

In order to understand the potential risks to an individual's privacy, it is important to know the types of data that will be held and/or shared. Even if exact detail is not known and initial indication will assist in the Privacy Impact Assessment.

Personal	**Tick** (All that Apply)	**Sensitive**	**Tick** (All that Apply)
Name	✓	Racial / ethnic origin	✓
Address (home or business)	☐	Political opinions	☐
Postcode	☐	Religious beliefs	☐
NHS No.	☐	Trade union membership	☐
Email address	☐	Physical or mental health	✓
Date of birth	✓	Sexual life	☐
Payroll number	☐	Criminal offences	☐
Driving Licence [shows date of birth and first part of surname]	☐	Biometrics; DNA profile, fingerprints	☐
Data of a "higher" sensitivity	**Tick** (All that Apply)	Bank, financial or credit card details	☐
Abortion, Pregnancy, Embryology and Fertilisation	☐	Mother's maiden name	☐
Mental Health	☐	National Insurance number	✓
HIV/AIDs and sexually transmitted BBV's	☐	Tax, benefit or pension Records	☐
Genetic	☐	Health, adoption, employment, school, Social Services, housing records	✓
Sexually transmitted diseases	☐	Child Protection	☐
Adoption	☐	Safeguarding Adults	☐
Sample types to include urethral swab and semen sample	☐		
Cervical Cytology screening	☐		
Comments and Additional data types (if relevant):			

Physical or mental health is ticked because the practice management can choose to use the optional Staff Absence Management function, which may result in the recording of health data.

Health, adoption, employment, school, Social Services, housing records is ticked as the system contains employment data.

Professional registration will be collected for all relevant staff roles.

Summary of the Assessment

There are a significant number of recommendations (19) highlighted in the following assessment table as part of this Privacy Impact Assessment.

	Number of Recommendations	Number Complete
High	2	2
Medium	9	9
Low	8	8
TOTAL	**19**	**19**

It is important to emphasise that the majority of these are standard Information Governance recommendations that have been included to consider accessibility, integrity, confidentiality and awareness of data use to be considered by the project and the importance that, if things change, a further impact assessment is completed.

Following on from the original 2019 DPIA and with this updated assessment, there are considered to be no concerns that affect the changes within this project and/or the data used within it.

It is important to add that the all those recommendations in Section C are marked as 'Green' as there has been an excellent response and the correct measures are considered to be in place.

Any further work required to be completed or changes will be discussed at the point of discovery or when the objectives change. All parties have been consulted on the change and the intended data use and sharing.

Section B - Privacy Impact Assessment Table

The project lead should complete the 'Response' box for each question.
The IG lead will then complete the 'Risk Type' and 'Outcome' box

Guidance Notes:

Response - Please answer the questions as fully as possible. If you are unsure of how to answer the question, please contact the **Information Governance Manager**. If there is supporting information that relates to any of the questions, which you feel would be informative, indicate within the comments section and send this along with the completed assessment.

Additional guidance notes have been provided for some questions; once completed the guidance notes can be removed.

The assessment table is designed to be a 'working document' that can be added to at intervals throughout the process, for example bullet points or rough notes can be used. These notes can be used to highlight things that need to be followed up; noted requirements can be marked up ready for the requirement schedule, etc.

Risk Type – The Information Governance Manager will use the guidance notes in Appendix 1 to identify the type of risk; this will help the organisation to judge the level of risk and either accept it or put in place appropriate measures to mitigate it.

Outcome – The Information Governance Manager will use the information provided to decide if any potential IG risks are identified. If, following discussion with the project manager/lead it is agreed there is an IG risk that requires further action the risk will be transferred onto the IG requirements schedule. The risk will be scored and progress against the identified mitigations captured using a red/amber/green status (RAG).

Section B – Privacy Impact Assessment Table [WNWRS]

1	What types of information will be held and/or shared?		
	Guidance Note: For example diagnostic, care plan, clinic correspondence, screening programmes, immunisation records, child health, reference data, pharmacy records, employee data, etc. Will the records be electronic or paper?		
	Response (completed by project lead)	**Risk type (completed by IG Lead)**	**Outcome (completed by IG Lead)**
	Please see the embedded document (WNWRS Data Access Permissions) that details the system data fields, who has access to each field and what will be shared through the data reporting. As the additional services are developed and go live WNWRS Data Access Permission Documents will be in place for each of the services. In addition, under the Guidance for the GMS Contract Additional Capacity Scheme, Health Boards will require validation of practice claims through the WNWRS including individual names. Practices will provide these as part of the payment application process. A copy of the Scheme is embedded. WNWRS Data Access Permissions v6.1 - Exp gms-contract-additional-capacity-2022-20.	Organisational/ Individual/ Compliance	RQ1 - Assurance that any changes to the levels and detail of data fields used will require further impact assessment

2	Will any of the following activities be involved (tick those that apply):
	✔ **Recording of demographic data**
	☐ ~~Sharing of patient information~~
	☐ ~~Diagnostic activity results~~
	☐ ~~Reporting of patient activity~~
	~~Transfer of patient identifiable data: to other systems, to patients, to GPs or other third parties~~
	✔ **Other (please specify)**
	Transfer of staff identifiable data: to other systems, or third parties under a Data Sharing Agreement with HEIW - copy embedded below
	📄 PDF
	DSA HEIW NWSSP WNWRS final v1.0.pd

3	Will you be relying on individuals to provide consent to the processing of their personal data?
	Guidance Note: If yes, how will consent be recorded, what information will be provided to support the consent process and what will you do if permission is withheld or given but later withdrawn?

Response	Risk type	Outcome
It was decided through the WNWRS Implementation Group that consent was not required. This was affirmed following advice from the DHCW Information Governance / DPO Service and the NWSSP Information Governance Manager.		No recommendations

The developed reporting and sharing of data does not change this position. Sections of GDPR Article 6 warrant the processing of personal data. We consider the most appropriate bases are either under: Article 6(b). Processing is necessary for the performance of a contract to which the data subject is party or in order to take steps at the request of the data subject prior to entering into a contract; and (e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller. In respect of GDPR Article 9 (Processing of special categories of personal data) either of the following will apply: 2.(b) processing is necessary for the purposes of carrying out the obligations and exercising specific rights of the controller or of the data subject in the field of employment. (h) processing is necessary for the management of health or social care systems and services. (J)processing is necessary for archiving in the public interest, scientific historical or research purposes or statistical purposes	

The capture of personal sensitive data such as ethnicity will engage Article 8 of the ECHR. Our assessment of purpose and proportionality considers alternative methods. Restrictions are embedded into the system with role base access controls restricting access to identifiable sensitive data such as ethnicity.		

4	Will the planned use of personal data be covered by information already provided to individuals or is a new or revised communication planned or required?		
	Guidance Note: 'Fair and Legal Processing' i.e. informing individuals of what is happening to their information is a requirement under Data Protection Legislation. What are the existing communications? What are the planned communications?		
	Response	**Risk type**	**Outcome**
	Frequent operational communications take place in-year are planned. The organisation has communicated the reasons and benefits for providing the data using this system. NWSSP operate a quarterly data validation cycle to minimise data quality issues. GDPR factsheet and Privacy Notice and Data Sharing Agreement(s) are in place and will be reviewed on an annual basis. Argyle IT currently provide system terms & conditions and a GDPR Information statement. Wales National Workforce Reporting System	Individual/ Compliance	RQ2 - Any changes to the processing of personal data will require a further impact assessment and communication with all stakeholders RQ9 - Assurance that the use of the data for the processes (i.e. identifying and addressing user participation, data quality, training/guidance, communications and system developments) are communicated effectively to all service users to ensure that any issues are addressed swiftly and effectively

5	Will the development enable the sharing of records with other organisations? How will records be shared?

Guidance Note: Will information be transferred to a central hub with a collated record made available to participating organisations? Will participating organisations be provided with a view of records created in another organisation?

Response	Risk type	Outcome
Access to the records will be shared with NWSSP and Argyle IT for the purpose of system/user administration and data validation for the reporting function. Anonymised data will be shared with Welsh Government, Health Board Directors of Primary Care and HEIW through the WNWRS Reporting Tool and data extraction reports. A validated data extraction report will be shared with Welsh Government for the Primary Care/GP Census. See the Access Permission document in Section B, Question 1 for detail on what is shared. Dedicated roles within HEIW will have unique access in the Data Reporting Module to the Enhanced Group Overview Report which will include the Professional Registration Number and National Insurance Number of the individual as a unique identifier but no other person or sensitive person identifiable information.	Organisational/ Compliance/ Individual	RQ3 - Ensure that any data shared with those bodies detailed in the response are accessed appropriately and there is assurance that levels of access are managed appropriately depending on role (i.e. administration, reporting, validation)

This forms part of a Data Sharing Agreement held with NWSSP (copy embedded below)

DSA HEIW NWSSP
WNWRS final v1.0.pd

Data (minimum data set) will be shared with NWSSP Departments on request for the administration of GMPI and, if required for GP Partner identification and data validation for any contractual payment schemes established through contract reform e.g., the Partnership Premium Payment Scheme.

Individual Practice Managers will have the access to produce reports for sharing.

6	Will the development result in the handling of a significant amount of new data about each person, or significant change in existing data holdings?		
	Response	**Risk type**	**Outcome**
	Yes. NWSSP and Argyle IT will be exposed to GP Practice staff data from across Wales, handling data for system/user administration and data validation for the reporting function.	Individual/ Compliance	RQ4 - Assurance that those who access the data within the WNWRS only do so when required and for legitimate purposes

	Management of additional Community Pharmacy, Dentistry, Optometry and UPPCs data will mirror that of GP Practice Data management.		

7	Will the development result in the handling of new data about a significant number of people, or a significant change in the population coverage?		
	Guidance Note: Is the development dependent on, or does it link to other systems such as Welsh Demographic Service, Open Exeter, ESR (for example)?		
	Response	**Risk type**	**Outcome**
	The development will result in handling new data (already held with GP Practices) for Community Pharmacists, Dental Practices, Ophthalmic Practices across the whole of Wales. The data is not dependant on other systems but will use data held in other systems to validate data held in WNWRS with the aim of providing data quality assurance. Data held within ESR e.g., GP Trainees (NWSSP as lead employer) and Managed GP Practice staff (Health Board employees) will be extracted to link and validate with the data populated in the WNWRS. We will also validate data held within the Medical Performers List (MPL) with data in the WNWRS. Locum activity data held in GPWales – Locum Hub Wales will be extracted to link with data populated in WNWRS.	Individual/ Organisational/ Compliance	RQ5 - Ensure that if there are changes to the proposed handling of this data and the introduction of new links to other systems, that the process is further impact assessed and discussed with stakeholders

	Data captured for Additional Service areas expected to be in line with what is currently reflected for GP Practices with Data Sharing to be confirmed following engagement with relevant service leads.		
8	Does the project involve new linkage of personal data with data in other collections, or significant change in data linkages?		
	Guidance Note: Will the NHS Number be used as the common identifier? If not how will records be matched/linked. What measures will be in place to correctly match/link records?		
	Response	**Risk type**	**Outcome**
	The system contains data quality reports that identify duplicate records or missing information. As part of the quarterly reporting, Argyle IT will extract the system data securely, NWSSP will validate before moving it back into the system to populate the reporting module. The role of NWSSP will be to improve data quality, complete data validation before quarterly extraction (will involve matching/linking data with other data sets – see above Q.7). NWSSP will also undertake a full validation on data extracted from the system by Argyle IT. The system currently contains national insurance number, date of birth and where applicable the professional registration number. Along with the name, these will be used in identification and	Individual/ Organisational/ Compliance	RQ6 - Assurance that data quality reports run are fit for purpose and guarantee the integrity of the data and the processes that are required to be completed to correct erroneous or missing information RQ13 - Assurance that any changes to arrangements for the transportation of extracted data is further impact assessed

	validation of data. These key identifiers will enable data assurances when linking with other workforce data sets such as ESR. Data captured for Additional Service areas expected to be in line with what is currently reflected for GP Practices with Data Sharing to be confirmed following engagement with relevant service leads			
9	Will there be any secondary use of personal information in an identifiable or non-identifiable form?			
	Guidance Note: *Will the information be used for anything other than direct care? What level of information is to be used for these purposes, how will it be managed and how it will be communicated to patients / service users / employees?*			
	Response		**Risk type**	**Outcome**
	The data will be used for workforce/service planning, training and development. It will also contribute to annual census and payment schemes specified withing the respective contracts. The data within the WNWRS Reporting Module is non-identifiable data. Data contained in the extraction reports contains both identifiable and non-identifiable information. Details of who has access to what data is displayed in the document attached in Section B, Question One.		Individual/ Organisational	RQ7 - Assurance that the Argyle IT extraction is secure and the integrity of the data returned on validation is correct

Practice management will be able to report on Locum usage, Absence, vacancies, staff records and data quality. The practice management would be responsible for the sharing of this data and whether it contains identifiable or non-identifiable information.

There is a minimum data set (MDS) of personal identifiable and non-identifiable information that would be used, if requested by NWSSP Departments, for GMPI and, if required for GP Partner identification and data validation for the Partnership Premium Payment Scheme.

HEIW have permission-based access in the system to the Enhanced Group Overview Report which contains Professional Registration and National Insurance Number as a unique identifier. No other person or sensitive person identifiable information is accessible. The unique identifier is essential to accurately develop an efficient workforce profile and aid in profiling of the future workforce more precisely. This will be for a specific purpose under a Data Sharing Agreement held by NWSSP. The NI number is shared with HEIW for this purpose and is not shared or used with any other party.

	Data captured for Additional Service areas will be in line with what is currently reflected for GP Practices and system data management.		

10	Does the development involve the use of new or inherently privacy invasive technologies?		
	Guidance Note: For example: smart cards, radio frequency identification (RFID) tags, biometrics, locator technologies and intelligent transportation systems, visual surveillance, digital image and video recording, profiling, data mining, and logging of electronic traffic.		
	Response	**Risk type**	**Outcome**
	None		No recommendations

11	Is the information you are using likely to be of good enough quality for the purpose it is used for?		
	Guidance Note: *Consider the flow process, and how often, the information is checked for accuracy and are there procedures to support this? Will the NHS number be used as the primary patient identifier? Is there is a likelihood that data cleansing and records reconciliation will take place? Is there is a facility to deal with data inaccuracies? Is there a facility to record the source of the information?*		
	Response	**Risk type**	**Outcome**
	Yes. The system contains national insurance number, date of birth and where applicable the professional registration number. Along with the name, these will be used in identification and validation of data. The quality of the information is relying on the participation and maintenance of the individual records by the service users. The NWSSP will assist in identifying and addressing user participation, data quality, training/guidance, communications and system developments with specific elements of the data supplied within fair and lawful processing. Data captured for Additional Service areas will be in line with what is currently reflected for GP Practices and system data management.	Organisational/ Compliance	RQ8 - Although the data is not used for direct care, assurance that data produced by the WNWRS is handled and shared at the right level and is accurate

12	What are the retention periods for the personal information and how will this be implemented?

Guidance Note: Retention periods for health records are set out in the Records Management Code of Practice http://systems.digital.nhs.uk/infogov/iga/rmcop16718.pdf . Within the record keeping system, there must be a method of deciding 'what is a record?' and therefore 'what needs to be kept?' This is described as 'declaring a record'. A declared record is then managed in a way that will hold it in an accessible format until it is appraised for further value or it is destroyed, according to retention policy that has been adopted.

Response	Risk type	Outcome
The system allows for a minimum data retention of 8 years. The Scheme for General Medical Practice Indemnity (GMPI) for all GP Practice staff delivering GMS contract in Wales requires staff to be identifiable through the WNWRS to access the scheme. A quarterly extract detailing all staff is held by NWSSP on our secure servers to confirm employment dates and job role. If a claim is raised against any individual these details are requested by NWSSP Legal and Risk Services who manage the scheme.	Organisational/ Compliance	RQ10 - Ensure that records retained by the system are reviewed annually (although this will not be an issue for several years)

13	How will you action requests from individuals for access to their personal information (in accordance with their rights)?		
	Guidance Note: Under Data Protection Legislation, Individuals have a right to ask for a copy of information held about them. If this is a shared record it must be established who will be responsible for dealing with the request.		
	Response	**Risk type**	**Outcome**
	The Practice/Contractor Management will have full access to their staff data and will be responsible for providing any response to individuals for access to their personal information. Any requests received by NWSSP will be noted and redirected to the relevant Practice/Contractor.	Compliance	RQ11 - Ensure that any requests for Subject Access are passed to the relevant Practice/Contractor if received from another party
14	What security controls will be in place to prevent unauthorised or unlawful processing of information?		
	Guidance Note: Describe any such measures (e.g. system controls such as role based access, break glass, audit notifications, etc.) and outline any possible implications?		
	Response	**Risk type**	**Outcome**
	WNWRS is a secure web based system with the security certificates provided through DHCW. The system requires username and password (all Wales standard) access with variable permission levels and controlled through the system administration. The system also has built-in user audit log. The system utilises two-authenticator log-in.	Individual/ Compliance	RQ4 - Assurance that those who access the data within the WNWRS only do so when required and for legitimate purposes

15	Have any training needs been identified in addition to the mandatory NHS Wales Information Governance training?		
	Response	**Risk type**	**Outcome**
	Argyle IT have provided NWSSP System Administrators with training and training materials. NWSSP have developed further the training materials to share with service users. Working with Argyle IT, further webinar, workshops and on-line system tutorials will be made available as and when required. Full training and training materials would be made available to Pharmacists, Dentists, Optometrists and UPPCs.	Organisational/ Compliance	RQ12 - Assurance that any new administrators or users of the system receive training and ensure that all staff receive their mandatory Information Governance training (classroom and/or eLearning) when their compliance has expired

16	What additional controls will be in place to deal with information of a higher sensitivity?		
	Guidance Note: this includes the nationally agreed 'Highly Sensitive Conditions'; abortion, HIV/AIDS, STDs, gender reassignment, human embryology and fertilisation. Consideration must also be given to name changes through adoption, public protection or gender change and health records relating to genetics, mental health, and occupational health.		
	Response	**Risk type**	**Outcome**
	Information described as 'highly sensitive' is not held on the system. The Gender field contains the option of selecting Male, Female or other/unknown.		No recommendations
17	Does the system maintain a comprehensive audit trail of user activity and how will the audit log be accessed and analysed?		
	Guidance Note: Will the system need to connect to National Intelligent Integrated Audit Solution? Who will be responsible for auditing? Will additional or new organisational processes be required to meet the requirement to audit all user access.		
	Response	**Risk type**	**Outcome**
	Yes. The system provides a user audit log. This provides the last 100 entries for a Practice, Service Lead or Individual (if viewed by the user). There is a 'Download Audit Trail' option for complete audit trail for the practice/user. This can be downloaded into an MS Excel file format.	Individual/ Organisational/ Compliance	RQ18 - Ensure that role-based access and administration is controlled to provide assurance that only those who require access to manage access are approved, and when those change, those changes are communicated to Argyle IT

18	Will information be transferred outside the NHS Wales network?		
	Guidance Note: where it will go and what security arrangements will apply (e.g. encryption)? Will removable media be used? Using which method will the information be transported (e.g. telephone, post, secure file sharing portal, email)?		
	Response	**Risk type**	**Outcome**
	Yes. Argyle IT will extract the data and share with NWSSP to validate before it is moved back into the system. This task is completed within a single team, with any movement of data (to the system supplier) transferred via a secure file sharing portal. When sharing data with the Welsh Government, we will use the NHS Wales Secure File Sharing Portal or the Secure Government Portal options. This would be applicable to all services.	Individual/ Organisational/ Compliance	RQ13 - Assurance that any changes to arrangements for the transportation of extracted data is further impact assessed RQ14 - Assurance that all users of the system are aware that the only method of transportation of data should be via the secure file sharing portal

19	Where will the information be held and who will have responsibility for it?		
	Guidance Note: Detail where the servers will be sited and who will have responsibility for them. Will the database be centrally hosted?		
	Response	**Risk type**	**Outcome**
	The system and data servers are situated within the UK in a central location, on the premises of the system supplier and developer.	Individual/ Organisational/ Compliance	RQ15 - Assurance from the supplier that the system and the data are within the UK. Any proposed changes for relocating the system and/or data servers is further impact assessed to ensure the proposals meet IT security and IG standards.
20	Are there business continuity and disaster recovery plans in place to recover information which may be damaged or lost through human error, computer virus, network failure, theft, fire, flood or other disaster?		
	Guidance Note: Has this been agreed as part of the Service Management arrangements?		
	Response	**Risk type**	**Outcome**
	The system and data is backed-up. The system is registered on Employment Services System and Service Catalogue and within its Data Asset Register. The system is not business critical but will be added to the NWSSP Employment Services business continuity planning.	Organisational/ Compliance	RQ16 - Assurance that BC and DR plans are tested on a regular basis. There should be assurance that test reports are shared with NWSSP at least annually.

21	Are there any elements of the system or service that are provided by a third party?		
	Guidance Note: *Is there a contractor (and any sub-contractors?) If so please document who the contracting authority is, who the contractors are and the confidentiality provisions within the contract, please note whether they have been subject to the information governance procurement processes, and whether they are registered with the Information Commissioner.*		
	Response	**Risk type**	**Outcome**
	Argyle IT are contracted to provide the system to NWSSP (engaged by Welsh Government) for GP Practices in Wales. Additional Primary Care Services namely Pharmacists, Dentists, Optometrists and UPPCs would access the system from implementation in 2022-23. Argyle IT have the satisfactory information governance provisions to deliver the system and service. Registration number: ZA275303 Date registered: 3rd October 2017 Registration expires: 2nd October 2023 Payment tier: Tier 1 Data controller: Argyle IT Consulting Limited Address: 127 Church Road London W7 3BJ	Organisational/ Individual/ Compliance	RQ17 - Ensure that any changes to sub-contracting provisions will require further impact assessment and discussion to ensure that proposed changes reflect the required and current arrangements

22	How is access to the system managed?		
	Guidance Note: Who authorises accounts, manages role based access and disables accounts? Please detail who is responsible for the business processes		
	Response	**Risk type**	**Outcome**
	System access is managed by Argyle IT and NWSSP. The initial access will be provided to NWSSP service users based on information gathered by NWSSP during implementation. These details are passed to Argyle IT to arrange account set-up. During service user consultation NWSSP establish role based access and will undertake a review annually as part of the business continuity and system governance reviews.	Organisational/ Compliance	RQ18 - Ensure that role-based access and administration is controlled to provide assurance that only those who require access to manage access are approved, and when those change, those changes are communicated to Argyle IT
23	Is automated decision making involved?		
	Guidance Note: Is there any profiling involved? Can there be any human intervention if required?		
	Response	**Risk type**	**Outcome**
	Automated decision making is not involved.		No recommendations

24	One of the principles of data protection is to process no more personal data than necessary. Is all information being processed by the project necessary?		
	Yes, the information processed by the system is necessary. This is both a workforce recording and reporting system. Some of the data fields are mandatory to ensure the reporting output is consistent with the actual workforce data. Personal identifiable information data is used to improve the data validation process and fulfil accurate records for GMPI. Additional workforce data fields are available to improve workforce management and planning.	Compliance	RQ19 - Assurance that if the level of data being collected and processed by the WNWRS changes, this will be subject to a further impact assessment to discuss the changes and the reasons for the change Further to this recommendation, the WNWRS is also included on the NWSSP Information Asset Register (IAR)

Name   Date:

LISA WILLIAMS/DONNA HUDSON…………………………………   October 2022 (Revision of 2019 DPIA)

TIM KNIFTON

Document C – IG Requirements Schedule Wales National Workforce Reporting System (WNWRS)

The requirements schedule forms part of the NHS Wales Shared Services Partnership, Privacy Impact Assessment (PIA) process.

This document must be read in conjunction with the project description for Wales National Workforce Reporting System (WNWRS) (section A)

Following the review of the populated PIA table (section B) the Information Governance Manager and project lead/manager will agree the information governance / privacy requirements and record them on the IG requirements schedule.

Each requirement will be scored against the risk matrix at Appendix 3. The requirements schedule will be used to capture progress against each requirement and note the final outcomes. It should be stated whether the risks identified have been eliminated, reduced or accepted.

The schedule is designed to be a living document which is updated regularly as the development progresses.

Using red, amber and green (RAG) as progress indicators within the schedule, by the time the report and recommendations go to the NWSSP Information Governance Steering Group/Senior Management Team, all requirements should be green. However, dependent on the nature of the project and the issues raised it is possible that requirements may be amber or in an exceptional case even red; where this is the case the organisations involved must agree to accept any residual risk.

See Appendix 2 for further guidance on how to complete the requirements schedule.

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ1	Assurance that any changes to the levels and detail of data fields used will require further impact assessment	Initial	2	4	**8**		Ad hoc	NWSSP WNWRS Business Support		NWSSP will address the impact assessment of any changes to the level and data fields within the WNWRS, where appropriate through our own internal processes and/or through the stakeholder groups.

Undertake an annual review of the DPIA as part of system governance and business continuity to take account of any strategic change needs |
| | | Residual | 2 | 2 | **4** | Medium | | | | |

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ2	Any changes to the processing of personal data will require a further impact assessment and communication with all stakeholders	Initial	1	3	**3**		Adhoc	NWSSP WNWRS Business Support		Yes, this is agreed.

Changes to the processing of personal data will go through the respective implementation group and communicated to stakeholders

Following this we shall address the impact assessment of any changes through our own internal processes or through the stakeholder task & finish groups. All changes will be communicated.

There is establishment of a Data Sharing Agreement with Health Education Improvement Wales. |
| | | Residual | 1 | 2 | **2** | Low | | | | |

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ3	Ensure that any data shared with those bodies detailed in the response are accessed appropriately and there is assurance that levels of access are managed appropriately depending on role (i.e administration, reporting, validation)	Initial	2	4	8		Adhoc	NWSSP WNWRS Business Support		Argyle IT have a designated team with the system access permission to perform the data extract , adhering to a set procedure. The data is moved using the secure file sharing within the system, to be uploaded back into the WNWRS.
		Residual	2	3	6	Medium				An audit trail will be in place to ensure the access level given to any service user is appropriate. Argyle IT have provided NWSSP with detailed guidance on the user access permissions, and will work with NWSSP to control access requests. This will be replicated for additional developed services.
										There is establishment of a Data Sharing Agreement with Health Education Improvement Wales.

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ4	Assurance that those who access the data within the WNWRS only do so when required and for legitimate purposes	Initial	2	4	8		Complete	NWSSP WNWRS Business Support		Argyle IT provide their assurance that access to the data within WNWRS will only occur for business/system contractual reasons and legitimate purposes.

The NWSSP WNWRS Business Support Team will be the only access holders within NWSSP. They will only access data when required and for legitimate purposes, as outlined in the roles & responsibilities.

There is establishment of a Data Sharing Agreement with Health Education Improvement Wales. |
| | | Residual | 2 | 3 | 6 | Medium | | | | |

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ5	Ensure that if there are changes to the proposed handling of this data and the introduction of new links to other systems, that the process is further impact assessed and discussed with stakeholders	Initial	1	4	4		Complete	Lisa Williams – Assistant Director of NWSSP Employment Services		Yes, agreed.

There are opportunities for Primary Care Wales associated with this development. If these propose changes to the handling of the data and involve NWSSP, then we would need to impact assess these proposals and discuss with stakeholders.

Future data capture will be reviewed and DPIA re-assessed

There is establishment of a Data Sharing Agreement with Health Education Improvement Wales |
| | | Residual | 1 | 2 | 2 | Low | | | | |

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ6	Assurance that data quality reports run are fit for purpose and guarantee the integrity of the data and the processes that are required to be completed to correct erroneous or missing information	Initial	2	4	8		Complete	NWSSP WNWRS Business Support		The data quality reports will help identify data fields containing missing, inaccurate and conflicting data, which will feed into the reporting extraction processes. It will be an essential task to produce these reports and investigate the outcome, so to ensure system /data accuracy and integrity.
		Residual	2	3	6	High				
RQ7	Assurance that the Argyle IT extraction is secure and the integrity of the data returned on validation is correct	Initial	2	4	8		Complete	NWSSP WNWRS Business Support		Argyle IT have a designated team with the system access permission to perform the data extract. The data is moved using the secure file sharing within the system, to be uploaded back into the WNWRS.
		Residual	2	3	6	High				

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ8	Although the data is not used for direct care, assurance that data produced by the WNWRS is handled and shared at the right level and is accurate	Initial	2	4	8	Medium	Complete	NWSSP WNWRS Business Support		NWSSP will adhere to GDPR Information Governance protocols to provide compliance that data produced by WNWRS is handled and shared at the right level. Service users responsible for the data entry will need to ensure that the data they enter into the system is accurate, that they take responsibility for the reports they have access to produce, and that the data they share is at the appropriate level and in a secure way. We will make reference to this within the WNWRS Reporting Guidance. Additional Service Managers would be responsible for the accurate entry of staff details in the WNWRS. There is establishment of a Data Sharing Agreement with Health Education Improvement Wales.
		Residual	2	3	6					

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ9	Assurance that the use of the data for the processes (i.e identifying and addressing user participation, data quality, training/guidance, communications and system developments) are communicated effectively to all service users to ensure that any issues are addressed swiftly and effectively	Initial	2	3	6		Complete	NWSSP WNWRS Business Support		This will be a key responsibility of the NWSSP WNWRS Business Support role. We will be working with and supporting service users, Argyle IT and all stakeholders to address these areas as and when required. NWSSP will work with Argyle IT to development training methods and access to training. This extends to NWSSP delivering throughout the year workshops to service users to develop knowledge and use of the data to help integrate the system and enable full user assurance and benefits.
		Residual	1	2	2	Low				

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ10	Ensure that records retained by the system are reviewed annually (although this will not be an issue for several years)	Initial	1	3	**3**		On-going	NWSSP WNWRS Business Support		Yes, we are working with Argyle IT to detail the record management procedure for WNWRS. Both the Records Management Code of Practice and the NHS Wales Governance e-Manual will be a source of guidance.

In addition to this we are consulting with NWSSP Legal & Risk on a data retention process that would advise GP Practices of their duty to retain records required for possible claims covered by GMPI. Report data from the system will assist in record management before the system data is destroyed.

A similar approach would be used when engaging Additional Service Area Users. |
| | | Residual | 1 | 2 | **2** | Low | | | | |

**Privacy Impact Assessment
Process**

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ11	Ensure that any requests for Subject Access are passed to the relevant Practice/Contractor if received from another party	Initial	1	2	**2**		Complete	NWSSP WNWRS Business Support		Yes, we will ensure that any subject access requests are passed to the relevant GP Practice/Contractor

NWSSP will support the Practice/Contractor advising on appropriate report for extraction of data.

Where a request is received directly by NWSSP Service, this will be re-directed to the relevant Practice/Contractor. |
| | | Residual | 1 | 1 | **1** | Low | | | | |

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ12	Assurance that any new administrators or users of the system receive training and ensure that all staff receive their mandatory Information Governance training (classroom and/or eLearning) when their compliance has expired	Initial	2	3	6		Complete	NWSSP WNWRS Business Support / NWSSP ES Service Improvement Manager		NWSSP staff need to fulfil their mandatory e-learning training competencies, including Information Governance compliance through both the e-learning and classroom based course. This is monitored by both the individual, the line manager and NWSSP Learning & Development.

Local training plan embeds the principles of information management for new system administration staff |
| | | Residual | 2 | 2 | 4 | Low | | | | |

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ13	Assurance that any changes to arrangements for the transportation of extracted data is further impact assessed	Initial	2	4	**8**		Complete	Lisa Williams – Assistant Director of NWSSP Employment Services		Argyle IT would need to inform us and discuss with us any changes to the transportation of the extracted data. They currently use the secure file sharing within the WNWRS.
		Residual	2	3	**6**	Medium				
RQ14	Assurance that all users of the system are aware that the only method of transportation of data should be via the secure file sharing portal	Initial	2	4	**8**		Complete	NWSSP WNWRS Business Support		This is currently the main route Argyle IT will transport and accept data. NHS Wales utilise We.Transfer software for use by customers outside of the NHS network. Post implementation, the core data transport and acceptance of data into the Data Module (DM) is only via Argyle IT secure file sharing. This is direct data entry by the Practice/ Contractor. This is only available to registered Data Module users with administration access, i.e. Argyle IT and NWSSP. When needing data from the Practice/Contractor that is not in WNWRS, then we have set-up and informed leads to use the NHS Wales Secure File Sharing Portal provided by DHCW or approved We.Transfer software.
		Residual	2	3	**6**	Medium				

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ15	Assurance from the supplier that the system and the data are within the UK. Any proposed changes for relocating the system and/or data servers is further impact assessed to ensure the proposals meet IT security and IG standards.	Initial	1	4	4		Complete	NWSSP WNWRS Business Support / NW SSP ES Service Improvement Manager		Agreed, as consulted and involved in the WNWRS implementation; NWSSP Business Systems & Informatics, NWSSP Information Security, NWSSP Information Governance and DHCW will be consulted on any changes for relocating system and/or data servers.
		Residual	1	3	3	Low				

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ16	Assurance that BC and DR plans are tested on a regular basis. There should be assurance that test reports are shared with NWSSP at least annually.	Initial	1	4	4		On-going	NWSSP WNWRS Business Support/ NWSSP Service Improvement		WNWRS is captured within NWSSP Service and System Catalogue. All data assets are captured within the Divisional List Register and are reviewed with NWSSP IG Manager. Further service action planned is to align the data asset list and catalogues during BC and DR testing planned for Q3/4 for 2022-23. These tests are subject to annual review.
		Residual	1	3	3	Medium				

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
		Initial	1	4	4	Low				Any changes to sub-contracting provisions will be discussed, understood and impact assessed.
		Residual	1	2	2					
RQ17	Ensure that any changes to sub-contracting provisions will require further impact assessment and discussion to ensure that proposed changes reflect the required and current arrangements						Complete/ Annual Review	Lisa Williams – Assistant Director of NWSSP Employment Services		The contractual arrangements are reviewed in line with contract management arrangements. Monthly performance meetings are scheduled with Argyle IT throughout the contract management providing platform for discussing any planned system changes or sub-contracting provisions.

Privacy Impact Assessment Process

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ18	Ensure that role based access and administration is controlled to provide assurance that only those who require access to manage access are approved, and when those change, those changes are communicated to Argyle IT	Initial	2	3	6		Complete	NWSSP WNWRS Business Support		NWSSP have established clear role-based access controls with Argyle IT. Any access requests, or permission changes are referred onto the NWSSP WNWRS Business Support to verify the user and confirm authorisation.

Identifiable data is restricted within these role based access control levels. These are set out in Section B(1) WNWRS Access Permissions matrix. |
| | | Residual | 2 | 2 | 4 | Medium | | | | |

Ref	Identified Requirement	Risk Assessment					Time-scale	Lead	Completion (RAG)	Comments / Progress / Further Action / Final Outcome
		Risk History	Likelihood	Impact	Score	Status (low, medium, high)				
RQ19	Assurance that if the level of data being collected and processed by the WNWRS changes, this will be subject to a further impact assessment to discuss the changes and the reasons for the change	Initial	2	4	**8**	Low	Complete	NWSSP WNWRS Business Support		NWSSP will work with Welsh Government, Argyle IT and all stakeholders to ensure that changes are subject to an impact assessment to discuss and understand the reasons for the change.

This is evidenced by the revision of WNWRS DPIA in 2021 and in 2022 with the expansion to contractor services. |
| | | Residual | 2 | 3 | **6** | | | | | |

Are any residual risks scored higher than 10?
☐Yes   ☐No

If Yes, has the ICO been consulted on the processing?

Not applicable.

Appendix 1 – Risk Type

Risks to individuals	Compliance risk	Associated organisation/corporate risk
• Inadequate disclosure controls increase the likelihood of information being shared inappropriately. • The context in which information is used or disclosed can change over time, leading to it being used for different purposes without people's knowledge. • New surveillance methods may be an unjustified intrusion on their privacy. • Measures taken against individuals as a result of collecting information about them might be seen as intrusive. • The sharing and merging of datasets can allow organisations to collect a much wider set of information than individuals might expect. • Identifiers might be collected and linked which prevent people from using a service anonymously. • Vulnerable people may be particularly concerned about the risks of identification or the disclosure of information. • Collecting information and linking identifiers might mean that an organisation is no longer using information which is safely anonymised. • Information which is collected and stored unnecessarily, or is not properly managed so that duplicate records are created, presents a greater security risk. • If a retention period is not established information might be used for longer than necessary.	• Non-compliance with the common law duty of confidentiality • Non-compliance with the duties in the Health & Social Care (Safety & Quality) Act 2015 • Non-compliance with Data Protection legislation. • Non-compliance with the Privacy and Electronic Communications Regulations (PECR). • Non-compliance with sector specific legislation or standards. • Non-compliance with human rights legislation.	• Non-compliance with Data Protection or other legislation can lead to sanctions, fines and reputational damage. • Problems which are only identified after the project has launched are more likely to require expensive fixes. • The use of biometric information or potentially intrusive tracking technologies may cause increased concern and cause people to avoid engaging with the organisation. • Information which is collected and stored unnecessarily, or is not properly managed so that duplicate records are created, is less useful to the business. • Public distrust about how information is used can damage an organisation's reputation and lead to loss of business. • Data losses which damage individuals could lead to claims for compensation.

Appendix 2

Additional Guidance notes for completion of the Requirement Schedule

- **Ref -** Unique number allocated to each requirement (RQ) within the schedule, the reference number should be noted against the relevant question in the PIA table.
- **Identified Requirement –** Details of the IG requirement identified and a brief description of the risk posed if the requirement is not addressed. The Risk Type, as identified in the PIA table should be
- **Risk History** – this is the status of the risk, whether it is the initial risk or the residual risk.
- **Likelihood** – What is the likelihood of breaching Data Protection Legislation if no action is taken. This should be scored as per the table below.
- **Impact** – This is the severity of the impact of a breach of Data Protection Legislation if no action is taken. This should be scored as per the table below.
- **Score** – This is the likelihood score x the impact score.
- **Status** – This is whether the risk is low, medium, high or extreme. The score dictates the status as per the table below.
- **Timescale** – For each requirement to be addressed within, as aligned to the project timescales;
- **Lead** – Person responsible for taking each requirement forward;
- **Completion (RAG)** – The level of progress applicable to that action in red (for not begun), amber (in progress), green (complete)
- **Comments / Progress / Further Action / Final Outcome** describe the progress to date for each requirement (each entry should be dated), list any additional comments and further actions as appropriate. Ensure that it is noted if a risk has been eliminated, reduced or accepted. Any significant actions should be fed in as a further requirement.

Appendix 3 - Risk Scoring Tables

Likelihood score	1	2	3	4	5
Descriptor	Rare	Unlikely	Possible	Likely	Almost certain
Frequency How often might an IG breach occur	This will probably never happen/recur	Do not expect it to happen/recur but it is possible it may do so	Might happen or recur occasionally	Will probably happen/recur but it may not be a persisting issue	Will undoubtedly happen/recur, possibly frequently

Impact score (severity levels) and examples of descriptors	1	2	3	4	5
	Negligible	Minor	Moderate	Major	Catastrophic
Impact on an individual's privacy and confidentiality	Minimal privacy impact requiring no/minimal intervention Other manual or electronic process in place to mitigate the IG risk	Minor impact on an individual's privacy Other manual or electronic process in place to mitigate the IG risk	Moderate privacy impact requiring professional intervention Aspects of reputational damage for the organisation if IG requirement not adopted Could result in an event which impacts on a moderate (less than 100) number of patients/clients	Major breach leading to possible larger scale privacy breaches Possible ICO reportable breach if IG standard not adhered to Mismanagement of patient/client privacy with long-term reputational issues Would impact on over 100 patients/clients – part system failure	Serious IG breach and non-compliance with the law if requirement not adhered to Definite ICO report required if breach occurs An event which impacts on a large number of patients/clients – full system breach because of no adherence to standards. Is likely to be 1000 of patients/clients

		Likelihood				
		1	2	3	4	5
		Rare	Unlikely	Possible	Likely	Almost certain
Impact Score	5 Catastrophic	5	10	15	20	25
	4 Major	4	8	12	16	20
	3 Moderate	3	6	9	12	15
	2 Minor	2	4	6	8	10
	1 Negligible	1	2	3	4	5

Status

	1 - 3	Low risk
	4 - 6	Moderate risk
	8 - 12	High risk
	15 - 25	Extreme risk