# NHS Golden Jubilee

### **Meeting: NHS Golden Jubilee Board**

### **Meeting date: 28 August 2025**

### **Title: Digital Services Annual Report**

### **Responsible Executive/Non-Executive: Jonny Gamble; Executive Director of Finance**

### **Report Author: Stuart Graham; Digital Services Director**

## 1 Purpose

### This is presented to NHS Golden Jubilee Board for:

### Decision

### This report relates to a:

* Local Policy

### This aligns to the following NHS Scotland quality ambition(s):

* Effective
* Person Centred
* Safe

**This aligns to all NHSGJ Corporate Objectives**

## 2 Report summary

## 2.1 Situation

As a support services to Golden Jubilee’s core business, it is crucial that the digital services provide a fit for purpose, resilient environment on with the organisation can operate.

On an Annual basis a Digital Services report will be presented to the Committee for approval. This report reflects the work undertaken by the department during financial year 2024/25.

## 2.2 Background

2.2.1 The report sets out the work undertaken across the range of digital services and includes:

* + Systems Improvements
	+ Digital Governance
	+ Cyber
	+ NIS Directive and Audit
	+ Sustainability
	+ Resources

## Systems Improvements

FY 24/25 saw the second and most delivery intensive year of the Digital Improvement Plan with 19 application or infrastructure improvements successfully delivered alongside iterative improvement works to a number of existing clinical and corporate systems. Some key highlights from this year’s activities are: -

* Critical Care System Replacement
* TrakCare Application and Integration Service Upgrade
* Hospital Electronic Prescribing and Medicines Administration (HEPMA)
* Meeting Room Technology Replacement
* Single Sign-On service upgrade
* Electronic Occupational Health Screening (eOPAS)
* Digital Commissioning for Surgical Centre
* Contracts and Vendor Management Service
* Change Control System
* Security & Compliance Tooling
* Local Server Hosting Environment upgrade

The cumulative effect of these improvements can be seen across the organisation with the following tangible benefits achieved:

* Improved resilience through the removal of legacy systems
* Access to additional features and functionality within existing systems through upgrade to latest versions
* Improvements in cyber posture through the availability of mainstream support from vendors and application of security patching
* Reduction in paper through the adoption of electronic care pathways in nursing and orthopaedics
* Digitisation of heavily manual and resource intensive processes such as occupational health screening freeing up time for valuable staff roles.
* Replacement of aging and frequently failing hardware adopting the latest technologies in Backup, Audio Visual and server environments
* Vastly improved governance practices specifically in vendor and contracts management and change control creating safer environments and protecting from external threat actors.

Overall, the advances over this past year have made the digital applications landscape more resilient, better protected from cyber threat and more integrated meaning less effort for the end user in engaging with Digital services. This work will continue through the next financial year to achieve fully the upgrade and replacement programme within the Digital Improvement Plan.

## Digital Governance

Digital Governance is a critical element of the effective running of the Board. It ensures that relevant and appropriate safeguards are in place to manage our legal obligations under several pieces of legislation including the Data Protection Act 2018 and the UK GDPR ensuring necessary safeguards for, and appropriate processing of, patient and personal information. The Digital Governance Team are responsible for managing Information Governance, Freedom of Information (FOI) requests and Subject Access Requests (SAR), ensuring robust information management is in place for all Digital systems through the approval of Data Processing Agreements (DPA) and Data Protection Impact Assessments (DPIA). The team are also responsible for the collation and submission of evidence for the Boards audit under the Network and Information Systems (NIS) Directive.

### Information Governance Incidents

During 2024/25, 43 digital governance incidents have been recorded on the Datix risk management system. These incidents are categorised as follows:

* 0 categorised as major
* 10 categorised as moderate
* 20 categorised as minor
* 13 categorised as negligible.

|  |  |
| --- | --- |
| Incident Category | Number of incidents |
| Patient case notes | 16 |
| Email data loss | 14 |
| Data loss | 2 |
| Unconsented imaging | 2 |
| Patient details uploaded to SharePoint | 1 |
| Accidental disclosure under FOISA | 1 |
| Fraudulent email | 1 |
| Patient case notes/Subject Access Request | 1 |
| Unusual account activity | 1 |
| Accidental deletion of data | 1 |
| Clinical imaging | 1 |
| Confidential data left unattended | 1 |
| Password sharing | 1 |

There is a fully documented process and reporting structure to manage any Digital & Information Governance incidents within the Board, which includes reporting to the Digital Governance Group chaired by the Caldicott Guardian.

### Requests for Information

 In 2024/25, there were 108 FOI requests, an increase in the number of requests received last year, which was 89. 86 of these requests were responded to within the legislative timeframe. 22 requests were responded to out with the legislative timeframe, due to either the complexity of the requests or delays in receiving the information from the relevant department.

 This is broken down as follows:

* Q1 – 26 requests. 22 responded on time, 4 late responses
* Q2 – 19 requests. 15 responded on time, 4 late responses
* Q3 – 27 requests. 26 responded on time, 1 late response
* Q4 – 36 requests. 23 responded on time, 13 late responses

The following Subject Access Requests under the Data Protection Act 2018, were received:

* Q1 – 257 requests
* Q2 – 255 requests
* Q3 – 190 requests
* Q4 – 265 requests

Total = 967 requests

## Cyber

Significant investments in Cyber protection from the Board are now bedding in to day to day practice and coupled with a strong focus on user education and service resilience, is an area of growing and demonstrable strength for the organisation. Almost all of the available national tooling for cyber has now been deployed within the Board with additional local product deployment giving a true strength in depth position for cyber security.

**NIS Directive and Audit**
The Board has successfully completed year 2 NIS Directive audit review and is now entering in to its final year of this 3-year audit cycle. The first full year audit took place in 2023.Over the 3-year period, the Board is required to provide sufficient evidence to satisfy compliance against all 427 controls within the Framework.

NHS Golden Jubilee continues to be a strongly performing Board with another strong audit submission. This year’s audit cycle saw the Board achieving an overall compliance of 91%, a significant uplift of last year’s 77%. The following highlights the KPIs met this year:

* Overall compliance – 91%
* All 17 categories have achieved compliance >80% 11 of the 17 achieving >90%
* 55 (81%) of the 68 subcategories have achieved compliance >80%

The Board has achieved the advanced 80-80-0 KPIs, accomplishing 91-100-0.

The report highlights a common compliance weak area across boards in NHS Scotland is that of Business Continuity however this is an area in which Golden Jubilee excels. The report notes that the Board deserves recognition as a strength and area of Good Practice and as such, it is an approach that will be of interest to other health boards.

## Sustainability

As part of the Digital Improvement Plan outcomes there are a number of indirect sustainability measures which should be highlighted:

***Power Consumption***

Movement of previously locally hosted systems to cloud hosting (i.e. TrakCare) and a Cloud first approach to new systems deployments (i.e. HePMA) means the power consumption and cooling requirements for the Boards local infrastructure are trending downwards over the lifespan of the Digital Improvement Plan. This is also supplemented by the upgrade of legacy server and networking equipment on site which have significantly less power and cooling requirements than their predecessors

***Reducing Paper***

The adoption of electronic pathways (e.g. EPR) and digitisation of previously paper based services (e.g. eOPAS) are actively reducing the volume of paper and therefore paper waste across the Health Board. Nursing forms in pre-assessment are trending downwards and occupational health referrals are now fully digitised meaning printing and stationary use are reducing. The move towards digital patient communications through initially SMS messaging is also reducing the volume of printed paper sent out to patients during their interactions with the organisation.

## 2.3 Assessment

### 2.3.1 Quality/ Patient Care

The improvements above have directly and indirectly improved quality and patient care

### 2.3.2 Workforce

The staff compliment within the department has grown this year with an additional headcount of 9 staff across Governance, Operations and Programmes. These additional resources have brought the department considerable expertise

### 2.3.3 Financial

Despite some considerable pressures at the beginning of the financial year the department exceeded its Achieving the Balance target for this financial year. In addition, the introduction of some digital systems, particularly in Pharmacy have helped other service areas achieve their own savings targets for the financial year.

The digital budget overall reached a break even position with a Capital spend for the year totalling £515k spread across schemes within the infrastructure improvements portfolio

### 2.3.4 Risk Assessment/Management

Any risks have been identified and presented to Board in the Strategic Risk Register

### 2.3.5 Equality and Diversity, including health inequalities

None to note

### 2.3.6 Other impacts

**Climate Emergency and Sustainability**

Sustainability Section above

### Communication, involvement, engagement and consultation

Stakeholder engagement throughout the year

### Route to the Meeting

Finance and Performance Committee – 13 August 2025

## 2.4 Recommendation

* The Board are asked to approve the annual report on progress