



Borough of Telford and Wrekin

Audit Committee

Wednesday 27 May 2026

Information Governance & Caldicott Guardian Annual Report

Cabinet Member:	Cllr Zona Hannington - Cabinet Member: Finance, Governance & Customer Services
Lead Director:	Anthea Lowe - Director: Policy & Governance
Service Area:	Policy & Governance
Report Author:	Rob Montgomery - Head of Governance, Audit & Procurement
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Wards Affected:	All Wards
Key Decision:	Not Key Decision
Forward Plan:	Not Applicable
Report considered by:	Senior Management Team – 12 May 2026 Audit Committee – 27 May 2026

1.0 Recommendations for decision/noting:

It is recommended that Audit Committee:

- 1.1 Note the Information Governance Annual Report for 2025/26.
- 1.2 Note the Caldicott Guardian Annual Report for 2025/26.
- 1.3 Agree the Information Governance Work Programme for 2026/27.

2.0 Purpose of Report

- 2.1 The purpose of this report is to present the 2025/26 Information Governance (IG) & Caldicott Guardian Annual Report to the Members of the Audit Committee.
- 2.2 To provide members with the IG Work Programme for 2026/27 for consideration and approval.

3.0 Background

3.1 2025/2026 INFORMATION GOVERNANCE ANNUAL REPORT

3.2 There are a number of pieces of legislation and good practice standards that govern the IG arrangements of the Council, and these are listed in the background information at the end of this report. The Information Commissioners Office (ICO) is the regulatory body responsible for ensuring Councils meet information legislative requirements relating to information governance.

3.3 The Local Authority Data Handling Guidelines recommend that each local authority should appoint a Senior Information Risk Owner (SIRO). The SIRO should be a representative at senior management level and has responsibility for ensuring that management of information risks are weighed alongside the management of other risks facing the Council such as financial, legal and operational risk. At Telford & Wrekin Council the nominated SIRO for the period covered by this report was the Director: Policy & Governance.

Information Rights

3.4 Information rights is a collective name for 3 main pieces of legislation in respect of public sector information, these are:

- **Freedom of Information Act 2000** – encompasses any information held by the Council
- **Environmental Information Regulations 2004** – information with an environmental impact
- **UK Data Protection Act 2018/UK GDPR** – looks at personal information relating to individuals

3.5 The IG Team has continued to play a key role in providing assurance that the Council complies with information rights legislation during the year. The IG Team has responsibility for the administration of all information rights requests on behalf of the Council including the application of relevant exemptions in respect of requests received.

It also co-ordinates and guides service areas when the Council receives a subject access request (someone requesting their personal information) or a request to access social care records, e.g. a parent asking to view the contents of their child's records.

3.6 The ICO has set a benchmark of 90% for responding to FOI requests within the 20 working day statutory deadline for responding to requests.

3.7 The table below details figures relating to FOI performance for the year 1 April 2025 to end of March 2026 compared with the same period for the previous year:

	24/25	25/26	% Increase / Decrease
Number of FOI requests received	1,262	1,338	6%
Average number of FOI requests received per month	105	111	6%
% of FOI requests responded to within statutory deadline	86	85	-1%
Average time taken (days) to respond to each request	15	15	-

As can be seen from the figures in the table above, the Council's performance in responding to FOI requests within statutory deadlines in 2025/26 has decreased slightly compared to the previous year. However, the number of FOI requests received has increased by 6% from the previous year.

In addition to the above the Council received 55 requests (71 in 24/25) that were processed under the Environmental Information Regulations (EIR) 2004. 89% (85% in 24/25) of these requests were responded to within the 20 day deadline.

- 3.8 In this period IG have received 40 appeals from requestors who were not satisfied with the response they received to their FOI request. This compares to a total of 23 appeals in 2024/25. The majority of appeals received by the Council are not upheld.
- 3.9 During this period, the IG Team received 4 referrals from the Information Commissioner (ICO) for referrals made to them in relation to a freedom of information request. The outcome of each referral is detailed below:
- Referral 1 – ICO decided not to investigate
 - Referral 2 – Council response to an FOI was late, Council did respond to requester and no further action was required
 - Referral 3 – Council provided incomplete information in response to an FOI. The Council provided further information, and no further action was required
 - Referral 4 – ICO decided no further action was required
- 3.10 The UK Data Protection Act 2018 requires the Council to respond to subject access requests (SARs) within one month of receipt unless the request is deemed complex when a further two-month extension can be applied.

In 2025/26 the Council received 173 SARs (136 in 24/25).

Of the requests that had been responded to in 25/26, 95% were responded to within the legislative timescale set. This compares to 96% responded to within timescales in 24/25.

The processing of SAR's continues to be a challenge due to the volume (in pages) and complexity of information being asked for.

The IG Team continuously reviews its practices and looks at the market for new technological solutions to ensure processes improve where possible.

Data Security Incidents

- 3.11 It is unrealistic to consider, given the amount of personal data Council services handle on a daily basis, that human errors will not occur which may result in a data breach. IG supports the investigation (with service areas) of all instances of alleged data breaches that are identified and referred to them. A data breach can cover a number of different incidents from a member/employee reporting a lost mobile phone to personal data being communicated to an unauthorised and/or incorrect recipient.

For each data breach identified in 2025/2026 a thorough investigation has been undertaken into how the breach occurred, confirmation of any individuals that have been informed in compliance with the UK Data Protection Act 2018 and lessons learnt identified and implemented to reduce the likelihood of similar data breaches occurring in the future.

The IG Team continues to work with service areas to improve the secure processing of personal data to prevent data security incidents.

- 3.12 1 data breach in 2025/26 met the threshold for reporting to the Information Commissioners Office (ICO). The ICO is investigating this matter.

Information Governance Related Audits & Work Programme

- 3.13 The 2025/2026 IG work programme was agreed at the May 25 Audit Committee. Progress to date in respect of this programme is shown attached as Appendix A.
- 3.14 Appendix B details the proposed IG work programme for 2026/2027 for approval. This programme mainly incorporates key actions required to facilitate the legal requirements of the UK Data Protection Act/UK GDPR 2018.

4 2025/26 CALDICOTT GUARDIAN ANNUAL REPORT

4.1 Caldicott Guardian (CG) Function – Key Responsibilities

- 4.1.1 Caldicott Guardians play a crucial role in ensuring that the NHS, Councils with Social Service responsibilities including Adult and Children's Social Care, and partner organisations adhere to the highest practical standards for handling patient-identifiable information under a framework compliant with the UK Data Protection Act 2018. They actively support efforts to enable information sharing where appropriate and advise on lawful and ethical processing options.

For Telford and Wrekin Council the Caldicott Guardian is the Director: Adult Social Care.

The Audit Committee is required to consider the Caldicott Guardians' (CG) annual report.

4.2 Summary of CG Activities

4.2.1 **GDPR** – The requirements of this legislation are embedded. Staff must undertake mandatory IG training, and regular audits ensure compliance. Each service has an IG lead responsible for disseminating regular updates.

4.2.2 **Electronic Adult Social Care database and financial systems** – The Council implemented new IT systems in October 2018. The Data Protection Officer monitors the Data Protection Impact Assessment on these.

Various internal audits have taken place of financial management processes including the use of the financial and case management systems as part of routine planned audits undertaken.

4.2.3 **Liquid logic Adult System** - The Liquid logic Adult System (LAS) facilitates the recording and management of client information, including assessments, care plans, and service delivery. LAS integrates with other systems in use within Adult Social Care for financial case management. This ensures seamless data management and improved accuracy reducing error.

The system supports remote working and is protected by robust security measures, including strong password protection and encryption.

4.2.4 **IA Powered Technology Tool** - Adult Social Care have adopted a tool that records sessions and generates detailed write-ups, significantly reducing administrative time. This efficiency allows users to focus more on client interactions.

There are clear safeguards in place to protect personal information and uphold Caldicott principles which are recorded in the Data Protection Impact Assessment (DPIA). The tool adopted does not use any council data for AI training, and all outputs remain first draft only, requiring mandatory practitioner review before entering any case record. The implementation of this tool is overseen by the two Artificial Intelligence (AI) Boards (see AI section). Sub processor checks, and continuous user feedback loops further strengthen oversight.

The tool used remains a controlled, transparent, and ethically governed tool that enhances operational efficiency while maintaining the highest standards of information governance and safe handling of personal confidential data.

4.2.5 **Integrated working with key partners** – Information sharing protocols are regularly updated, supported by the Data Protection Officer. This ensures all appropriate information-sharing agreements are in place and current. Integrating service delivery and records with health partners remains vital to ensure a person-centred holistic view of those that we work with.

The Telford and Wrekin Integrated Place Partnership (TWIPP) is a key local vehicle for development and delivery, linking directly to the ICS Board. Work streams, including the Digital Information Governance Group, have regular input from the Caldicott Guardian and Data Protection Officer to meet information

governance requirements as we move towards integrated pathways and partnerships.

The development of the Integrated Health and Care Record from an adult and Children's service perspective is now business as usual (see more on this below).

The Data Protection Officer provides frequent updates to the Caldicott Guardian and the Council's Senior Management Team on all aspects of information governance.

- 4.2.6 **One Health and Care Integrated Care Record** - One Health and Care is a confidential digital shared care record holding information from various local health and social care organisations. It enables professionals to provide better care by accessing the most up-to-date information about individuals.

This system reduces the need for individuals to repeatedly share their health and social care history, improving decision-making and providing safer, more consistent care. The 2024 audit by the Information Governance Team rated it as 'good'. Data security measures include encryption, data masking, and robust access controls to protect digital information from unauthorized access, corruption, or theft.

Monthly audits are undertaken to ensure user comply with Caldicott Guardian mandated system recording and access. Compliance with regulations such as the Data Protection Act 2018 is ensured through regular audits and monitoring. This product is live and the Data Privacy Impact Assessment is updated annually. T&W users only have read only access to this information and cannot update information. This applies to both T&W data and Health data. One Health and Care data is uploaded direct from LAS by automated API script.

New Developments / Action Plan

- 4.3 Recent developments requiring Data Sharing Agreements and risk assessments to protect data and information include:

a. Adult Social Care Portal:

The Adult Social Care Portal enhances communication between the public and Adult Social Care (ASC), allowing users to access information, create online forms, and engage in two-way communication with ASC workers. It supports personal and professional referrals and integrates with the Liquid logic Adult System (LAS) for seamless data sharing and assessment contributions.

Data security measures include encryption, data masking, and robust access controls, ensuring compliance with the Data Protection Act 2018 through regular audits and monitoring. The personal and professional referral functions of the Adult Social Care Portal facilitate two way communication.

b. Wider System Portals:

The LAS portals enhance communication and streamline processes within ASC, allowing citizens to access self-help resources, complete personal referrals, and enable professionals to make referrals directly into LAS. The portals include:

- Adult Social Care Portal
- Professional Portal
- Online Financial Assessment
- Client Finance Portal – in development
- Provider Portal
- Market Place Brokerage Module
- Live Well Telford

Integration with the back-office social care system improves accuracy and efficiency in managing client and provider information. The portals support remote working and are protected by robust security measures, including password protection, encryption, and audit trails.

The March 2026 DPIA review identified ongoing compliance with the Data Protection Act 2018. Data security measures include encryption, data masking, and robust access controls, ensuring compliance through regular audits and monitoring.

Adult Social Care breaches

- 4.4 The IG Team informs the CG of all breaches related to social care data, ensuring follow-up actions and necessary measures are taken. Data breach oversight is conducted by SMT and the ASC Assurance Board.

Governance and Quality Assurance

- 4.5 The Adult Social Care Assurance Board oversees policy and new developments, conducting regular reviews with the Senior Information Risk Owner, CG, and Data Protection Officer to ensure continued development and assurance of data protection systems, particularly as integration with health and care partners progresses.

Artificial Intelligence (AI)

- 4.6 There are two Artificial Intelligence (AI) Boards in place; AI Governance Board providing strategic oversight, ethical approval, risk management, compliance and organisational decision-making and the AI Assurance Operational Oversight Board monitoring pilot activity, technical implementation, and ensuring AI meets required standards before wider rollout.

The boards also address potential risks, offer advice on AI integration, and ensures that AI solutions are used responsibly and effectively. The boards supported the development of AI Vision Statement 2026, AI Policy, AI General

Risk Assessment, AI Data Protection Impact Assessment template, and AI Governance Board Terms of Reference.

5 CONCLUSIONS FOR 2025/2026

5.1 The Information Governance Team have performed well and made a positive contribution to the governance arrangements within the Council in 2025/2026.

6.0 Summary of main proposals

6.1 The contents of this report provide the committee with information which gives assurance around matters relating to information management and the activity that takes place on a day-to-day basis to gain assurance that our information management processes are robust. Members are asked to note the contents of the report and approve the IG Work Programme for 2026/27.

7.0 Alternative Options

7.1 The committee could choose not to approve the IG work programme. This is not recommended as it would not align with best practice and would not provide assurance around information management.

8.0 Key Risks

8.1 The risks and opportunities in respect of this report will be appropriately identified and managed.

9.0 Council Priorities

9.1 The report supports the Council's values that are embedded in the delivery of all of the Councils' priorities.

10.0 Financial Implications

10.1 The costs associated with delivering the Information Governance and Caldicott Guardian functions are currently met from within the Council's approved base budget.

10.2 The Council continues to see increased demand across key Information Governance activities, including Freedom of Information requests and Subject Access Requests, which may place ongoing pressure on existing resources. These pressures are being managed within existing budgets at this time.

10.3 Effective Information Governance arrangements are a key control in mitigating financial risk to the Council. Failure to comply with relevant legislation, including the UK Data Protection Act 2018 and UK GDPR, could result in financial penalties from the Information Commissioner's Office, as well as potential legal claims and reputational damage.

10.4 The Council continues to invest in systems, processes and training (including the use of digital and AI-enabled tools) to support compliance and efficiency. Any

significant additional investment requirements will be considered as part of the Council's normal budget setting process.

11.0 Legal and HR Implications

11.1 The Local Authority is required to comply with UK GDPR and The Data Protection Act 2018, as well as the Freedom of Information Act 2000 and the Environmental Information Regulations 2004 in data handling. Further the Local Authority must adhere to the Health and Social Care Act 2012 information governance duties - in conjunction with the Care Act 2014 and the Health and Social Care (National Data Guardian) Act 2018 - in relation to the Caldicott Guardian role following the Caldicott Reports and in applying the Caldicott principles.

There are no HR implications arising from this report.

12.0 Ward Implications

12.1 The committee could choose not to approve the IG work programme. This is not recommended as it would not align with best practice and would not provide assurance around information management.

13.0 Health, Social and Economic Implications

13.1 There are no health, social or economic implications directly arising from this report.

14.0 Equality and Diversity Implications

14.1 Transparency supports equalities and demonstrates the Council's commitment to be open and fair.

15.0 Climate Change, Biodiversity and Environmental Implications

15.1 There are no direct climate change and environmental implications arising from this report.

16.0 Background Papers

- 1 Caldicott Review - <https://www.gov.uk/government/publications/the-information-governance-review>
- 2 Information: To Share or not to Share – Government Response to the Caldicott Review.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/192572/2900774_InfoGovernance_accv2.pdf

17.0 Appendices

- A Progress on IG Work Programme for 25/26
- B IG Work Programme for 2026/27

18.0 Report Sign Off

Signed off by	Date sent	Date signed off	Initials
Legal	05/05/2026	18/05/2026	ON
Finance	05/05/2026	11/05/2026	KP