

**NHS DORSET CLINICAL COMMISSIONING GROUP
GOVERNING BODY MEETING
ANNUAL INFORMATION GOVERNANCE TOOLKIT REPORT**

Date of the meeting	16/07/2014
Author	J Green, Head of Corporate Governance
Sponsoring Board Member	T Goodson, Chief Officer
Purpose of Report	To assure the Governing Body that the requirements of the Information Governance Toolkit are being met and that significant improvements continue to be made across the CCG.
Recommendation	The Governing Body is asked to Note the report.
Stakeholder Engagement	N/A
Previous GB / Committee/s, Dates	N/A

Monitoring and Assurance Summary

This report links to the following Assurance Domains	<ul style="list-style-type: none"> • Quality • Engagement • Outcomes • Governance • Partnership-Working • Leadership 		
I confirm that I have considered the implications of this report on each of the matters below, as indicated:	Yes [e.g. ✓]	Any action required?	
		Yes Detail in report	No
All three Domains of Quality (Safety, Quality, Patient Experience)	✓	✓	
Board Assurance Framework / Risk Register	✓		✓
Budgetary Impact	✓		✓
Legal / Regulatory	✓		✓
People / Staff	✓		✓
Financial / Value for Money / Sustainability	✓		✓
Information Management & Technology	✓		✓
Equality Impact Assessment	✓		✓
Freedom of Information	✓		✓

Initials : JG

1. Introduction

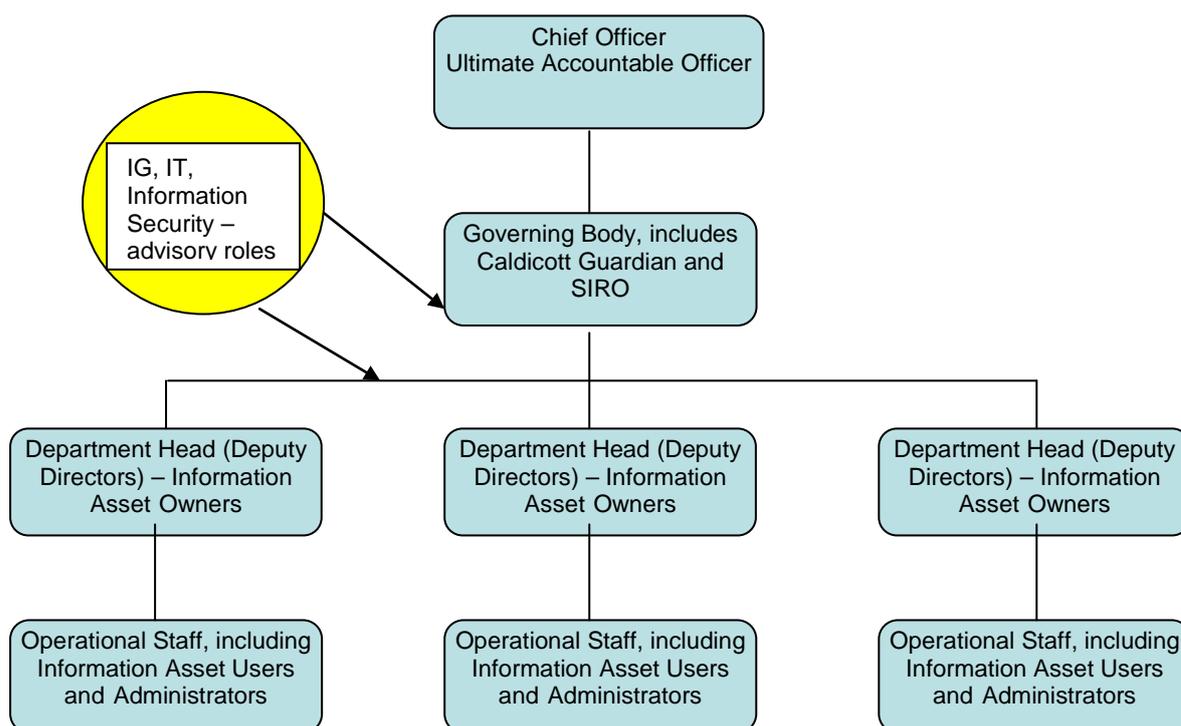
- 1.1 NHS Information Governance (IG) is a framework for handling personal information about patients and employees in a confidential and secure manner to appropriate ethical and quality standards in a modern health service. It provides consistent standards enabling employees to deal with the many different information handling requirements
- 1.2 The Information Governance Toolkit (IGT) is the means by which the NHS demonstrates implementation of good practice for IG ensuring:
 - implementation of the Department of Health and the Health and Social Care Information Centre (HSCIC) advice and guidance;
 - information will be protected against unauthorised access;
 - confidentiality of information will be assured;
 - integrity of information will be maintained;
 - information will be supported by the highest quality data;
 - regulatory and legislative requirements will be met;
 - business continuity plans will produced, maintained and tested;
 - information security training will be available to all staff; and
 - all breaches of information security, actual or suspected, will be reported and investigated.
- 1.3 The IGT performance results provide assurance and are monitored by the HSCIC and used by the Care Quality Commission, the Audit Commission and shared with the Information Commissioner's Office. The results are also freely available to the public and are required to be published in the CCG's Annual Report.
- 1.4 As a commissioner we are required to monitor the Information Governance performance of providers to support the recommendations of the Francis Report and so reduce risk.

2. Information Governance

Information Governance Internal Accountability/Responsibility

- 2.1 The Information Governance Group (IGG) met on a bi-monthly basis during 2013/14. This group is chaired by the Senior Information Risk Officer (SIRO) and is attended by the Caldicott Guardian, Head of Information Governance and Customer Care, the Senior Audit Manager and representatives from each directorate. The group reports via the Audit and Quality Committee.
- 2.2 The IGG has overseen the work plan for the CCG during 2013/14, in relation to the IGT and the development and approval of core IG framework policies and procedures.
- 2.3 The CCG has established an approach to information governance that ensures the organisation (from Governing Body level down) has the ability to fully comply with its requirements in terms of data protection and confidentiality.
- 2.4 It is essential to ensure that the Governing Body and the senior management of the organisation can be assured of continued compliance, and in particular, changes in performance (both within the CCG and commissioned services), can be monitored and managed.
- 2.5 The arrangements in place to achieve this are set out below:

Overarching Approach to Confidentiality and Data Protection Assurance



- 2.6 The CCG has established a comprehensive information security assurance framework in line with IGT requirements, which is formalised within information security policies and operating procedures under the leadership of the SIRO and the Information Security Manager, and embedded in the directorate structures of Information Asset Owners (IAO's).
- 2.7 The CCG has in place an Information Asset Register which is maintained by the IAO's and regularly updated, ensuring that risks to the information assets are assessed and reviewed and reported to the SIRO. System level security and access control is also managed by the IAO's, along with the mapping of information flows to and from the information assets to ensure information is kept secure.
- 2.8 All risks associated with any aspect of information governance are entered onto the CCG risk register and managed locally to reduce them to the lowest possible level.

Information Governance Toolkit

- 2.9 The IGT is the mechanism through which NHS and related organisations demonstrate their compliance with IG requirements – of which there are 28 for Clinical Commissioning Groups.
- 2.10 The IGT is under the remit of the Health and Social Care Information Centre (HSCIC).
- 2.11 A new functionality within the toolkit was the introduction of an IG Incident Reporting Tool. This replaces the previous reporting line which was via the SHA. It has been developed by the HSCIC in conjunction with the Information Commissioners Office (ICO). Once an incident is recorded as a level 2 severity it has to be reported using this tool. An automated notification will be sent to the DH, the ICO and relevant regulators if required.
- 2.12 There is a new requirement within the IGT which relates to the use of the NHS Number in all communication with patients. This is in line with the National Patient Safety Agency.

Information Governance Toolkit Assessment

- 2.13 NHS Dorset CCG is required to upload evidence to support its assessment of compliance against criteria set within the toolkit. This then determines the scores for each requirement which range from level zero to three. To achieve an overall organisational rating of 'Satisfactory', each requirement must be scored at level 2 or above.
- 2.14 Under normal circumstances submission of the IGT would take place annually, submitted by the 31 March. In order to achieve Accredited Safe

Haven status, and for the CCG to be able to continue to use identifiable patient information under controlled circumstances, the HSCIC required Dorset CCG to submit the IGT, attaining level 2 in all requirements, by 31 October 2013.

- 2.15 The IGG verified the submission of version 11 of the 2013/14 IGT and the score as 67%, satisfactory. See appendix 1.
- 2.16 Prior to submitting its final assessment, the Dorset CCG's auditors, South Coast Audit, audited a random sample of 12 requirements and agreed the proposed scores.
- 2.17 NHS Dorset CCG submitted version 11 (2013/14) of the IGT on 31 October 2013.
- 2.18 The HSCIC confirmed that the next IGT submission for the CCG will be in March 2014/15.

Information Governance Training

- 2.19 In order to comply with requirement 11-134 of the IG Toolkit staff attendance was mandatory and has to be repeated annually. To allow for long term sickness, maternity leave etc., 95% of staff attending is acceptable. In 2013/14 Dorset CCG achieved the following:
 - 20 face to face training sessions were taken by the Corporate Governance Team;
 - 338 staff attended the sessions;
 - 21 staff did not attend with 7 having a valid reason for non-attendance.
- 2.20 The above figures equate to 96% of staff attending. Although this complies with the requirement it must be noted that it is only by 1%. The relevant Directors were notified of staff non-attendance.
- 2.21 A further IG Training session was arranged and attended to complete the mandatory training for 2013/14.
- 2.22 Dates for mandatory IG Training for 2014/15 are currently being determined. Training materials are to be revised to ensure currency.

Serious Untoward Incidents

- 2.23 The CCG had no serious untoward incidents in relation to IG.

Information Commissioner Notices

- 2.24 Dorset CCG has not been subject to any Information Commissioner data protection monetary penalties,

Information Governance Work Plan for version 12 of the IGT

- 2.25 The CCG has a work plan in place to improve its compliance with the IG Toolkit standards. This will be formally reviewed by the IGG, and the Audit and Quality Committee, now v12 of the toolkit has been published. It will describe the work required to substantiate current levels of compliance and work required to achieve level 2/3 compliance.
- 2.26 Key areas identified for 2014/15 are:
- a. promote and monitor the uptake of IG training which requires 95% of staff to undertake or refresh their training annually;
 - b. review the IAR, the Corporate Records Register and the Data Mapping over the course of the year as one piece of work;
 - c. ensure that the CCG's contract database for third parties include relevant IG clauses;
 - d. continue the programme of confidentiality audits;
 - e. ensure all IG policies contain the requirements of the Caldicott 2 report.

3. Conclusion

- 3.1 NHS Dorset CCG has made significant progress in maintaining and improving levels of compliance in Information Governance. Much has been achieved in the last year, which is supported by the 'Satisfactory' rating in the IG Toolkit assessment and external audit.
- 3.2 CCG staff have an increased awareness of their responsibilities, as well as the risks and consequences of failure to comply with processes and requirements. Awareness has been raised, and will continue to be raised, through staff training, induction and the CCG bulletin.
- 3.3 The Information Governance Team will continue to deliver an effective service and aim for continuous improvement for 2014/15, and onwards, to ensure that the CCG meet the needs of all services.
- 3.4 The Governing Body is asked to receive and note this report.

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Date: 25 June 2014

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APPENDICES	
Appendix 1	IG Toolkit Assessment Summary Report 2013/14

IG Toolkit Assessment Summary Report 2013/14

**NHS Dorset
CCG**

Information Governance Management				
Assessment	Overall Score	Initial Grade	Current Grade	Reason for Change of Grade
Version 11 (2013/14)	73%	Satisfactory	Satisfactory	n/a

Confidentiality and Data Protection Assurance				
Assessment	Overall Score	Initial Grade	Current Grade	Reason for Change of Grade
Version 11 (2013/14)	66%	Satisfactory	Satisfactory	n/a

Information Security Assurance				
Assessment	Overall Score	Initial Grade	Current Grade	Reason for Change of Grade
Version 11 (2013/14)	66%	Satisfactory	Satisfactory	n/a

Clinical Information Assurance

Assessment	Overall Score	Initial Grade	Current Grade	Reason for Change of Grade
Version 11 (2013/14)	66%	Satisfactory	Satisfactory	n/a

Overall

Assessment	Overall Score	Initial Grade	Current Grade	Reason for Change of Grade
Version 11 (2013/14)	67%	Satisfactory	Satisfactory	n/a

Grade

Not Satisfactory	Not achieved Attainment Level 2 or above on all requirements (Version 8 or after)
Satisfactory	Achieved Attainment Level 2 or above on all requirements (Version 8 or after)