REPORT TO THE TRUST BOARD - PUBLIC
29 JUNE 2017

Title	Information Governance Compliance 2016/17
Author	Jonathan McKee, Information Governance Manager
Accountable Executive Director	Steven Course, Chief Financial Officer

Purpose of the Report:

To update the Board on the Trust's compliance with NHS Digital's Information Governance Toolkit requirements for last year.

Summary of Key Issues:

The Trust self-declared a Satisfactory compliance score of 74% for Version 14 Information Governance Toolkit as at 31st March 2017. This was an improvement on the previous year. Reliance on past performance would be imprudent due to the tougher regime to be introduced in 2018.

Strategic priorities this paper supports (Please check box including brief statement)

Improving service user satisfaction	☐	
Improving staff satisfaction	☐	
Maintaining financial viability	☐	

Committees/Meetings where this item has been considered:

By September	Progress in implementing the recommendations in this report will be reviews at the Information Governance Steering Group and Quality Committee

Implications:

Equality Analysis	This report has no effect on equalities.
Risk and Assurance	If the Trust does not achieve the minimum requirements then it may be excluded from bidding for new services at the pre-qualification stage.
Service User/Carer/Staff	If service users do not trust staff with their data, then users will not be free in sharing it and this would affect their quality of care.
Financial	The Trust would be in breach of its clinical contracts if it fails to attain the required standards; NHS Improvement would be informed.
Quality	The Trust would be in breach of its clinical contracts if it fails to attain the required standards; the CQC would be informed.

Glossary

Abbreviation	In full
IGT	Information Governance Toolkit
NDG	National Data Guardian.

1.0   Executive Summary

1.1   The Trust submitted a final score of 74% as at 31st March 2017 and a satisfactory rating.

1.2   Areas of relative weakness were apparent in the management of clinical data and corporate data; however, no area scored 100%.

1.3   Internal audit reviewed progress during the year (this was reported to the Audit Committee).

2.0   2016/17 outcome

Information Governance Management						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade
0	0	2	3	5	86%	Satisfactory

Confidentiality and Data Protection Assurance						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade
0	0	8	1	9	70%	Satisfactory

Information Security Assurance						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade
0	0	11	4	15	75%	Satisfactory

Clinical Information Assurance						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade
0	0	5	0	5	66%	Satisfactory

Secondary Use Assurance						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade
0	0	6	2	8	75%	Satisfactory

Corporate Information Assurance						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade

| 0 | 0 | 3 | 0 | 3 | 66% | Satisfactory |

Overall						
Level 0	Level 1	Level 2	Level 3	Total Req'ts	Overall Score	Self-assessed Grade
0	0	35	10	45	74%	Satisfactory

2.1 The Trust's overall rating was the same in percentage terms as in the previous year, but with every section *satisfactory* (there is no RAG rating in IG, only red and green –one or more of the 45 requirements at red means the entire IGT fails).

2.2 Given the Trust's ambition to maintain its high performance, effort will be made to build on this outcome. The IG Steering Group will receive assurance that progress is being made where indicated. It would be useful to express gaps in terms of risk, both of IG risks, and risks with an IG element. Greater understanding and ownership of information governance related matters would be enhanced through the development of the information asset concept (in which distinct data sets or systems are managed by senior staff in the areas responsible for the data, rather than centrally). These areas will be themes for work in 2017/18.

2.3 It is a ministerial expectation that mature Trusts attain level 3 on all requirements, this being a low threshold for an organisation in its 13th year of work on the IGT.

3   2017/18 changes

3.1 Assurance of meeting 2016/17 standards cannot be extended into 2017/18 and beyond. The replacement for the Data Protection Act with the General Data Protection Regulations, the government's response to the national Data Guardian's review, the new IGT (from 2018), and increased emphasis on the management and security of cyber data will have implications for the Trust.

3.2 The forthcoming changes are in addition to those introduced through the revised Records Management Code of Conduct.

3.3 Directors should also be aware of the effect of increased demand and expectations of the public, such as FOI requests, subject access requests, and the need to engage patients in the planning of services.

3.4 A new training tool is to be introduced by the autumn; all directors (including non-executives) need to complete IG training.

4   Action being requested

4.1 That the IG Policy be updated following the forthcoming publication of the government's response to the National Data Guardian's Report.

4.2   That performance management and assurance reporting systems and structures be reviewed in anticipation of the tougher compliance regime and recommendations made to the executive.

4.3   That a report on CQC and NDG related IG expectations is undertaken and progress against recommendations is presented to the Quality Committee.

4.4   The Board is requested to **RECEIVE** and **NOTE** this report and **APPROVE** the recommendations.