

Information Governance Steering Group Terms of Reference

Author(s)	Corporate Services Manager
Version	2.0
Version Date	November 2017
Implementation/approval Date	November 2017
Date Due for Review	November 2018
Review Body	Audit and Governance Committee

Policy Amendments

Version	Author	Date	Amendment
0.1	NYH CSU IG Officer	May 2014	First Draft
0.2	S.A.Brown, SIRO	August 2014	Second Draft to reflect SRCCG terms and roles.
			Reviewed by IGSG July 2015 – No changes required.
1.0	IGSG	April 2016	<p>Addition of group members as follows:</p> <ul style="list-style-type: none"> • FOI Lead Team Representatives as required. <p>Addition of responsibilities re</p> <ul style="list-style-type: none"> • Monitoring RA, FOI and SAR compliance, and the completion of Data Flow Mapping and risk assessment. • Monitoring implementation of IG requirements within the Contracting Process through the receipt of a sample of contract checklists for PC and Acute services. • Monitoring the completion of Privacy Impact Assessments for new projects and services and actions required from the risk assessments. • Monitoring of Primary Care completion of the IG Toolkit. <p>Change of YHCS to Embed Health Consortium.</p>
2.0	Corporate Services Manager	March 2017	Amends to membership to include a deputy for Caldicott and Accountable Officer
			Amends to reporting to include a reporting mechanism into A&G Committee and SMT

INDEX TO CONTENTS

1	Introduction	4
2	Executive Summary	4
3	Purpose	4
3.1	Overall Purpose	4
3.2	Specific Responsibilities	5
4	Accountability and Delegated Authority	6
4.1	Delegated Authority	6
5	Confidentiality	6
6	Steering Group Membership	6
7	Requirements for Quorum	7
8	Sub Groups.....	7
9	Schedule of Meetings	7
10	Reporting Arrangements.....	7
11	Administration	8
12	Performance and Monitoring.....	8
13	Links Maintained by the Committee	8
13.1	Internal.....	8
13.2	External	8

1 Introduction

Information Governance is the discipline which, through the means of a formal framework, robust practices and procedures for handling personal confidential and corporately sensitive information is implemented. The Information Governance (IG) Steering Group has been established to oversee and monitor the implementation of the Clinical Commissioning Groups (CCG's) Information Governance Framework, including identifying lines of accountability and to ensure that information governance practices and procedures are embedded throughout the CCG.

2 Executive Summary

These Terms of Reference set out the rights and responsibilities of the group, to cover the work areas as follows:

- Confidentiality and Consent;
- Data Protection;
- Data Quality;
- Information Management;
- Information Disclosure and Sharing;
- Information Security;
- Records Management;
- Registration Authority and access control;
- Information Governance Incident Reporting and investigation; and
- Freedom of Information.

3 Purpose

The Information Governance Steering Group will be the organisation's forum with delegated authority to oversee the implementation of Information Governance practices, resolution of issues, development and implementation of appropriate work plans, in order to provide appropriate assurance on behalf of the CCG.

The group will liaise closely with the Embed Health Consortium Information Governance Team who co-ordinate operational Information Governance services on behalf of the organisation.

3.1 Overall Purpose

The IG Steering Group is a standing group accountable to the Audit and Governance Committee. The group's purpose is to support and embed the broader information governance agenda within the CCG and provide the Governing Body with assurance that effective information governance is in place within the organisation.

The Group is tasked with:

- ensuring organisation-wide engagement in the Information Governance Agenda in line with HSCIC Information Governance Toolkit;
- ensuring that the Information Governance Assurance Framework is documented and embedded across the organisation;
- providing a local forum for Information Governance team leads, disseminating national guidance and best practice; and
- to receive concerns, issues and problems with a view to determining appropriate resolutions.

3.2 Specific Responsibilities

Specific Responsibilities are as follows:

- cascade national guidance and advice;
- lead on local implementation of guidance and advice;
- receive and action Information Governance performance reports produced by the Embed Health Consortium, Information Governance Team;
- receive and review Information Governance policies and procedures;
- ensuring that agreed information governance strategies, policies and procedures are embedded within the culture and practice of the organisation and adhered to;
- ensuring that local operational leads are assigned for specific areas of the information governance agenda as appropriate, who will be responsible for providing evidence to support Information Governance Toolkit compliance and reviewing and approving toolkit scores in their designated area(s);
- receive reports of information governance incidents and take forward lessons learned resulting from the investigation of those incidents; and
- monitoring compliance of statutory and mandatory training in respect of Information Governance
- Monitoring RA, FOI and SAR compliance, and the completion of Data Flow Mapping and risk assessment.
- Monitoring implementation of IG requirements within the Contracting Process through the receipt of a sample of contract checklists for PC and Acute services.
- Monitoring the completion of Privacy Impact Assessments for new projects and services and actions required from the risk assessments.
- Monitoring of Primary Care completion of the IG Toolkit.

4 Accountability and Delegated Authority

The Accountable Officer has overall accountability for ensuring that the organisation operates in accordance with statutory requirements as outlined in the Information Governance Management Framework.

The Chair/Vice Chair of the IG Steering Group will provide quarterly reports to the Senior Management Team which provides assurance to the Audit and Governance Committee for assurance. A report for the Governing Body will be submitted to the Audit and Governance Committee alongside the organisation's annual submission of the Information Governance Toolkit for formal sign off and formally authorised by the Accountable Officer prior to submission of the organisation's end of year toolkit scores.

4.1 Delegated Authority

The IG Steering Group is accountable to the Governing body through the Audit and Governance Committee and is authorised to:

- investigate any activity within its terms of reference
- seek any information it requires from any employee and all employees are directed to co-operate with any request made by the Group. This remit extends to those working on any of the statutory bodies' behalf; and
- co-ordinate and implement activities in line with these terms of reference, as part of the Information Governance work programme.

5 Confidentiality

- The Chair shall advise on all aspects of confidentiality with respect to the information presented to and discussed by the membership.
- All person-identifiable information shall be subject to the NHS Code of Confidentiality.

6 Steering Group Membership

In order to appropriately co-ordinate the CCG's Information Governance Agenda the group should be by the following.

The core membership of this committee will be as follows:

Role	Responsible Member
Chair & CCG Information Governance Lead	Associate Director of Corporate Affairs, CCG Senior Information Risk Owner (SIRO)
Co-chair and Caldicott Guardian	Executive Nurse, CCG Caldicott Guardian
Accountable Officer	Chief Officer, Accountable Officer
eMBED IGT Team Representative	Information Governance Manager or Officer
CCG IG Officer and FOI Lead	Corporate Services Manager

Additional members are as follows:

Role	Responsible Member
To act as deputy for Caldicott Guardian when required	Deputy Executive Nurse
To act as deputy for Accountable Officer/SIRO when required	Legal Services Manager
Team Representatives	Team Information Asset Owners or representative: Executive Assistant Primary Care Business Manager Finance Manager Programme Management Officer Contracts & Performance Analyst

Where a member is unable to attend, a deputy or nominated representative should attend in their place.

Other staff may be requested to attend the meeting in relation to specific topics or the requirement to ensure implementation of appropriate information governance practices and procedures. These may include staff from Contracting, Finance, Improvement and innovation, Integrated Governance and Nursing, Quality and Patient Safety, and any others as required. There may also at times be a requirement for representatives from other departments e.g. Communications or Freedom of Information services.

7 Requirements for Quorum

The IG Steering Group shall be quorate as long as the Senior Information Risk Owner Officer or the Caldicott Guardian, the Accountable Officer or their designated representative) and one member of the eMBED Information Governance Team are present.

8 Sub Groups

There are no sub-groups to the IG Steering Group.

9 Schedule of Meetings

The IG Steering Group will meet bi-monthly.

10 Reporting Arrangements

Action notes will be kept of the proceedings and submitted to the Audit and Governance Committee and circulated by the Embed Health Consortium Information Governance Team.

A summary of the meeting will be tabled at Audit and Governance Committee and Senior Management Team.

11 Administration

- the agenda will be managed by the Information Governance Team and circulated to members at least 3 working days prior to the meeting along with relevant papers;
- agreed actions will be documented and circulated to all members within 5 working days of the meeting;
- any queries regarding the action notes should be referred to the Information Governance Team.

12 Performance and Monitoring

The effectiveness of the IG Steering Group will be measured as part of the Information Governance Toolkit assessment and the associated audit. A report on the effectiveness of the IG Steering Group will be provided to the audit committee on a least an annual basis.

13 Links Maintained by the Committee

13.1 Internal

- Accountable Officer and Senior Management Team
- Audit and Governance Committee
- Risk Management and Incident Reporting process
- Senior Management Team and staff

13.2 External

- eMBED Health Consortium, (Informatics, HR, ICT, Information Governance)
- Commissioned Acute, Mental Health, Foundation and other NHS Trusts
- Commissioned Any Qualified Providers of Healthcare services
- Commissioned Any Qualified Providers of non-Healthcare services
- Health and Social Care Information Centre
- Information Commissioner's Office
- NHS England