



Trust Board Report

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| Meeting Date: | Monday 30 March, 2015 |
| Title: | Information Governance Toolkit Submission V12 2014/15 |
| Executive Summary: | <ul style="list-style-type: none"> To keep the board informed on IG Toolkit scores for submission to the Department of Health by 31st March 2015 IG Toolkit scores will all reported at level 2 or 3 and ratified by the IGSG 24th March 2015, and signed off at Trust Management Committee Internal Audit has reviewed evidence for 10 IG Toolkit requirements in October 2014 and January 2015. |
| Action Requested: | For information: Scores will be ratified at IG Steering Group on the 24 th March and signed off at TMC. |
| Report of: | Dr Jonathan Odum Medical: Director/ Caldicott Guardian |
| Author: Contact Details: | Raz Bassi – Information Governance Lead Presented by Tel 01902 307999 Email raz.bassi@nhs.net |
| Resource Implications: | N/A |
| Public or Private: (with reasons if private) | Public Session |
| References: (eg from/to other committees) | Information Governance Steering Group – scores ratified Trust Management Committee – Submission signed off |
| Appendices/ References/ Background Reading | |
| NHS Constitution: (How it impacts on any decision-making) | <p>In determining this matter, the Board should have regard to the Core principles contained in the Constitution of:</p> <ul style="list-style-type: none"> ✚ Equality of treatment and access to services ✚ High standards of excellence and professionalism ✚ Service user preferences ✚ Cross community working ✚ Best Value ✚ Accountability through local influence and scrutiny |

Background Details

1 Background detail on the IG Toolkit

The IG Toolkit is an online system which requires NHS organisations and partners to assess themselves against Department of Health Information Governance policies and standards, in order to operate the NHS (N3) network.

End of financial year submission also accepts the IG Assurance Statement. This is binding on each organisation and acceptance should be authorised by an appropriate senior management.

Please see **Appendix 1** for the full statement to approve.

End of year submissions link to the Care Quality Commission (CQC) and may be used by the Information Commissioners Office (ICO) in the case of a serious information incident to enforce a civil monetary penalty of up to £500,000. The Trust Development Authority (TDA) require level 2 minimum for any Trusts applying for Foundation Trust Status.

2 IG Toolkit final scores March 2015

The IG Steering Group was due to take place on the 18th March, due to not being quorate this meeting has been rescheduled to the 24th March where the IG Toolkit scores will be ratified by the IGSG 24th March 2015,; any residual risk is being managed via requirements reports and monitored via the IGSG. The evidence relating to each of the requirements has been through a process of review, updating and monitoring by the requirement leads.

Summary of the IG Toolkit scores to be approved.

| Assessment | Stage | No of requirements self-assessed at: | | | | | Overall Score | Grade | Exception detail on any level 1's |
|--------------------------|--------------------------------------------|--------------------------------------------------------------|----------|-----------|-----------|--------------|---------------|---------------------|-----------------------------------|
| | | Level 0 | Level 1 | Level 2 | Level 3 | Total Req'ts | | | |
| Version 12 (2014 – 2015) | Baseline July 2014 | 0 | 1 | 33 | 11 | 45 | 74% | Not Satisfactory | 112; IG Training Below 95% |
| | Performance Update Oct 2014 | 0 | 1 | 31 | 13 | 45 | 75% | Not Satisfactory | 112; IG Training Below 95% |
| | Expected as Published 31 March 2015 | 0 | 0 | 29 | 16 | 45 | 78% | Satisfactory | |
| Not Satisfactory | | Not achieved Attainment Level 2 or above on all requirements | | | | | | | |
| Satisfactory | | Achieved Attainment Level 2 or above on all requirements | | | | | | | |

In summary:

IG Toolkit requirements have been a process of on-going ratification and will be finally reviewed at the March IGSG. TMT approval of the scores outlined in the table above is required.

Requirements had changed compliance throughout the year due to documentation needing to be reviewed and re-approved.

The Trust has shown an improvement within the IG Toolkit within the year, 5 requirements attainment levels have raised from level 2 to level 3, these are:

- 12 – 324: The confidentiality of service user information is protected through the use of pseudonymisation and anonymisation techniques where appropriate
- 12-401: There is consistent and comprehensive use of the NHS Number in line with National Patient Safety Agency requirements
- 12- 505: An audit of clinical coding, based on national standards, has been undertaken by a Clinical Classifications Service (CCS) approved clinical coding auditor within the last 12 months
- 12 – 507: The Completeness and Validity check for data has been completed and passed
- 12-510: Training programmes for clinical coding staff entering coded clinical data are comprehensive and conform to national clinical coding standards

Information on level 1's is required to be referenced in the annual report / Statement of Internal Control, along with details of any Information Governance SUI's of which the Trust is expected to have no attainment levels below level 2 in the March 2015 submission.

Summary of Incidents during 2014/15

There have been 29 IG incidents that have been reported to STEIS in 2014/15, eight of which are still being investigated. Out of these incidents, eight incidents involved information being disclosed in error to the wrong recipient either by fax, email or on discharge and ten involved data loss where data was either lost or stolen. One incident involved large amounts of data being transferred to a personal device; this incident has been reported to the Information Commissioners office (ICO), and is still open.

Work is being carried out in 2015/16 to ensure learning from IG incidents is embedded into working practices, which will be supported by IGSG.

3 Action requested by Trust Management Committee :

Acceptance of the IG Assurance Statement **Appendix 1**

Approval of the IG Toolkit final scores, referenced in **Section 2** of this report.

Approve delegated authority to the IG Lead to submit the IG Toolkit.

Referred to Trust Board for information.

Appendix 1

Information Governance Assurance Statement for Organisations that use, or plan to use HSCIC Services

Version 4, 10/06/2014

1. All organisations that have either direct or indirect access to HSCIC services¹, including N3, must complete an annual Information Governance Toolkit Assessment and agree to the following additional terms and conditions. Where the Information Governance Toolkit requirements are not met to an appropriate standard (minimum level 2), an action plan for making the necessary improvements must be agreed with the HSCIC External Information Governance team or with an alternative body designated by the Department of Health (e.g. a commissioning organisation).
2. All organisations providing indirect access² to HSCIC services for other organisations (approved N3 link recipients), are required to provide the Department of Health, on request, with details of all organisations that have been permitted access, the business justification and the controls applied, and must maintain a local log of organisations to which they have allowed access to N3. This log should be reviewed regularly by the organisation and unnecessary access rights removed. The Department of Health or an alternative body designated by the Department of Health may request sight of these logs in order to facilitate or aid audit or investigations.
3. The approved N3 link recipient is responsible for their compliance with IG policies and procedures and may request authorisation by the Department of Health to monitor and enforce the compliance and conduct of subsidiary connected organisations and suppliers to ensure that all key information governance requirements are met.
4. The use of HSCIC Services should be conducted to support NHS business activities that contribute to the care of patients. Usage of individual services must be conducted inline with those individual services requirements and acceptable use policies. The use of HSCIC provided infrastructure or services for unauthorised advertising or other non-healthcare related activity is expressly forbidden.
5. All threats or security events affecting or potentially affecting the security of HSCIC provided infrastructure or services must be immediately reported via the HSCIC incident reporting arrangements or via local security incident procedures where applicable.
6. All infrastructure and connections to other systems and networks which are not covered by an approved Information Governance Toolkit Assessment and agreement to this IG Assurance Statement must be segregated or isolated from IGT covered infrastructure and connections such that IGT covered infrastructure and connections, or HSCIC Services are not put at risk. A Logical Connection Architecture diagram must be maintained by network managers in accordance with HSCIC guidance and must be provided for Department of Health review on request.
7. Organisations with access to HSCIC Services shall ensure that they meet the requirements of the Department of Health policy on person identifiable data leaving England, or being viewed from overseas. A copy of the Information Governance Offshore Support Requirements applicable to those accessing HSCIC Services is available on request or can be downloaded from <http://systems.hscic.gov.uk/infogov/igsoc/links/index.html>. The agreement of the Department to this limited support or exceptionally to more extensive processing must be explicitly obtained.
8. Where another network is connected to N3, only services that have been previously considered and approved by the Department of Health as appropriate for that network are permissible. Requests for new or changed services must be provided to the Department for consideration.
9. Organisations may not create or establish any onward connections to the N3 Network or HSCIC provided services from systems and networks which are not covered by an approved Information Governance Toolkit Assessment and agreement to this IG Assurance Statement.
10. The approved organisation shall allow the Department of Health, or its representatives, to carry out ad-hoc on-site audits, and to review any/all evidence that supports the Information Governance Toolkit Assessment, as necessary to confirm compliance with these terms and conditions and with the standards set out in the Information Governance Toolkit.

Information Governance Assurance Statement

I confirm that I have read, understood and agree to comply with the additional terms and conditions that apply to organisations that have access to HSCIC services and acknowledge that failure to maintain compliance may result in the withdrawal of HSCIC services.

¹ HSCIC Services include the N3 network and other applications or services provided by HSCIC, e.g. the NHS Spine Service, NHSmail, Choose and Book (and in future the NHS e-Referral Service).

² Access to the N3 network or HSCIC Services via another organisation or gateway