

Report to:	Trust Board – 25 April 2013
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Enclosure 7

Title	Information Governance Toolkit Report
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Purpose	To inform the Board of the current IGT Status
Previously considered by	

Executive Summary

The Information Governance Toolkit (Assessment) is a Mandatory Requirement.

All NHS Organisations are obliged to complete the IGT. The requirement is that all 45 requirements score a level 2 to achieve a statement of Compliance. This paper demonstrates SaTH's Assessment scores. Includes salient elements of the IG Framework requiring investment (resource) to maintain the declared scores.

Related SATH Objectives	SATH Sub-Objectives
Improving the health and wellbeing of our community through partnership.	<p>Develop an integrated service strategy in conjunction with all health and social care partners.</p> <p>Achieve sustained improvement in trust, confidence reputation, customer service and public/community engagement.</p>

Risk and Assurance Issues (including resilience risks)	Non-compliance impacts on FT application.
Equality and Diversity Issues	No
Legal and Regulatory Issues	<p>Data Protection Act.</p> <p>Freedom of Information Act.</p> <p>Human Rights.</p>

Action required by the Trust Board

The Board is asked to receive and review the Information Governance Toolkit update.

REPORT TO TRUST BOARD – INFORMATION GOVERNANCE 2013

The Information Governance Toolkit Assessment was completed and submitted by the Trust on the 28 March 2013. The overall result for SaTH was 78% (Satisfactory). The Trust attained at least level 2 compliance in all 45 requirements. This assessment was to be submitted to the Care Quality Commission (CQC) by Connecting for Health (CfH) on 2 April 2013.

Which organisational information does Information Governance cover?

Any information that the organisation holds, whether it is corporate information such as minutes of meetings, contracts, policies or whether it's personal information about staff such as bank details by paying salaries, or patient information like health records.

Information Governance is the framework for handling information in a confidential and secure manner to the appropriate ethical and quality standards in a modern health service. It brings together interdependent requirements and standards of practice in relation to the following IG initiatives:

Initiative	Level achieved 2013	Grade
Information Governance Management	86%	satisfactory
Confidentiality and Data Protection Assurance	87%	satisfactory
Information Security Assurance	75%	satisfactory
Clinical Information Assurance	80%	Satisfactory
Secondary Use Assurance	70%	satisfactory
Corporate Information Assurance	77%	satisfactory

The above scores are based on assurances provided by the individual IG Requirement Owners and Managers. I am not in a position to know whether the evidence they can produce for the declared scores would necessarily satisfy an external audit.

Salient points which are elements of the IG Management Framework:

1. Information Governance Training. This is the most resource intensive aspect, with a staff of 6,000. An average of 500 staff must therefore be trained or refreshed every month, just to maintain the mandatory requirement of 100% compliance.

2. Datix Incidents. Reported incidents relating to unauthorised disclosures and breaches of confidentiality have increased. This is most likely due to the IG Training and awareness related to reporting incidents for lessons to be learned.

3. **IG Committee.** The Medical Director chairs the IG Committee held bi-monthly. All IG issues are reported and discussed. It is essential for Requirement Owners to attend.

4. **Summary Care Record.** The SCR should comply with the Caldicott Principles without creating obstacles for access and layers of bureaucracy. Most GP Practices in the local health economy have now up-loaded information on to the SCR and it is now accessible to those legitimate staff in emergency care settings. An action plan has been developed to ensure all staff requiring access to the SCR have smartcards and the relevant training. It is in the organisation's and patient's best interest to expedite this project.

5. **Medical Records Committee.** This was abandoned in early 2012. The organisation must consider resurrecting this Committee as it is the only source whereby important discussions and decisions about the patient health record and related processes can be raised.

6. **Corporate Records Management.** Currently there is no resource allocated to Corporate Records Management which impacts on Information Quality Assurance and the Freedom of Information Act process. The IG Toolkit states that organisations should have health records and corporate records committees or equivalent with clear defined responsibilities.

The above elements will require resource investment to maintain the declared scores.