NHS Ayrshire & Arran

Meeting:	**Ayrshire and Arran NHS Board**
Meeting date:	**Monday 17 August 2020**
Title:	**Information Governance Annual Report 2019-2020**
Responsible Director:	**Dr Crawford McGuffie, Medical Director**
Report Author:	**Mrs Jillian Neilson, Head of Information Governance and Data Protection Officer**

1. Purpose

This is presented to the Committee for: Awareness

This paper relates to:
- Government policy/directive
- Local policy

This aligns to the following NHS Scotland quality ambition(s): Safe, Effective and Person Centred

2. Report summary

2.1 Situation

The Information Governance Committee provides an assurance report annually which sets outs key achievements through the year in discharging its remit. The draft Information Governance Committee report for 2019-2020 was approved by the Committee on 21 July 2020.

2.2 Background

Each NHS Board Governance Committee is required to provide an annual report to Committee and the Board to provide assurance that the Committee has discharged its role as set out in the agreed Terms of Reference. The Committees' approved Terms of Reference and information on the composition and frequency of the Committee will be considered as an integral part of the Board Standing Orders.

The Governance Committee annual reports are part of the overall assurance mechanism for the NHS Board and are considered by the Audit Committee in order to provide assurance in support of the Board's annual governance statement that the committees have fulfilled their remit.

2.3 Assessment

Due to temporary changes to corporate governance arrangements to support our emergency response to Covid-19, which paused governance Committee business, the Annual Reporting timetable for Governance Committee reports is behind schedule. Committees would normally consider and approve reports in Mach or April each year, for discussion at a May Board meeting, and subsequent submission to June Audit committee.

At the NHS Board meeting on 25 May 2020 Members agreed an approach to resume the normal timetable of governance committee meetings and committee business and hence the annual report has now been progressed.

The Information Governance assurance report details the membership of the Information Governance Committee and provides information on the activities of the Committee in the past year.

Key Messages

- The Committee regularly reviewed corporate level Information governance risks and identified cross-cutting Information governance issues.
- The Committee was provided with regular reports on the trends, themes and quality improvements relating to Information Governance.

2.3.1 Quality/patient care
Ensuring good information governance supports the effective delivery of quality, patient-centred services throughout NHS Ayrshire & Arran.

2.3.2 Workforce
This assurance report has no workforce implications for the organisation and enhances joint working across the NHS Board and Ayrshire Integration Boards.

2.3.3 Financial
There are no financial implications

2.3.4 Risk assessment/management
The annual report process ensures an assessment of committee business against the agreed Terms of Reference. This mitigates against the risk of any gaps in assurance and supports the NHS Board's annual assurance statement.

2.3.5 Equality and diversity, including health inequalities
An impact assessment has not been completed because this is an assurance reporting paper.

2.3.6 Other impacts
- Best value - Reporting ensures sound governance and accountability.
- Compliance with Corporate Objectives - Providing this assurance report supports compliance with objectives on quality, safety, improved patient experience and a learning organisation

2.3.7 Communication, involvement, engagement and consultation
This paper requires no engagement with external stakeholders.

2.3.8 Route to the meeting
The annual report was considered and approved by the Information Governance Committee on 21 July 2020.

2.4   Recommendation

For awareness. Members are asked to receive the annual report and note the progress of the Information Governance Committee in 2019/20.

3.   List of appendices

- Appendix 1 – Information Governance Committee Annual Report 2019/20

Appendix 1

NHS Ayrshire & Arran Information Governance Committee

Annual Report for 2019/2020

1. Summary

1.1 The Information Governance Committee has a remit to consider a range of areas including; the Caldicott Principles, Freedom of Information (FOI), Data Protection, Information Quality, IT Security and Data Sharing.

The Information Governance Committee is also responsible for overseeing the development and implementation of a Records Management Plan (RMP) for NHS Ayrshire & Arran (NHS A&A) to ensure records, both clinical and corporate are being managed throughout their lifecycle in compliance with Public Records (Scotland) Act 2011 (PRSA).

1.2 Key Messages
- The Joint Controller and Information Sharing Agreement is now in place between NHS A&A and GP Contractors.
- The Information Governance team have been actively raising the profile of Information Governance through a series of events and training.
- In 2019, 95.6% of freedom of information requests were responded to within 20 working day deadline.

2. Remit

2.1 The Committee's Terms of Reference are detailed at Appendix 1 to this report.

3. Membership

3.1 The Committee's membership during the reporting period was as follows:

Miss Lisa Tennant, Non-Executive Board Member (Chair)
Cllr Joe Cullinane, Non-Executive Board Member (Vice Chair)
Mrs Margaret Anderson, Non-Executive Board Member
Mr Michael Breen, Non-Executive Board Member (joined on 06.05.19)
Mr Bob Martin, Non-Executive Board Member (left on 06.05.19)
Mr John Rainey, Non-Executive Board Member

Ex-officio Members:

Dr Martin Cheyne, Board Chairman (left on 31.12.19)
Mrs Lesley Bowie, interim Chair (from 01.01.20)

Mr John Burns, Chief Executive
Dr Alison Graham, Medical Director (Caldicott Guardian)
Mr Derek Lindsay, Director of Finance (Senior Information Risk Owner)
Mrs Jillian Neilson, Head of Information Governance & Data Protection Officer
Mr John Wright, Director of Corporate Support Services

4.   Meeting

4.1   The Committee met on five occasions between 1 April 2019 and 31 March 2020.

4.2   The NHS Board has previously agreed that attendance at Committee meetings should be recorded in the relevant Annual Report. The attendance record of each member is shown below (x indicates attended).

Member	Dates				
	15.04.19	03.06.19	02.09.19	04.11.19	17/02/20
Miss Lisa Tennant (Chair)	X	X	X	X	X
Cllr Joe Cullinane (Vice Chair)	X				
Mrs Margaret Anderson	X	X		X	X
Mr Bob Martin (left on 06.05.19)	X	--	--	--	--
Mr Michael Breen (joined on 06.05.19)	--	X	X	X	X
Mr John Rainey	X		X	X	X

5.   Committee Activities

5.1   The Information Governance Committee routinely receives an information security breach report, as well as progress reports on the Information Governance improvement plan. Throughout the year one personal data related incident was considered to meet the criteria for notification to the Information Commissioner's Office. This incident was duly reported. The incident was closed by the ICO with no regulatory action taken. Robust processes are in place to ensure that information security breaches are appropriately recorded and effectively managed in line with Data Protection Legislation and organisational procedures.

Fundamental requirements to promote compliance with the updated Data Protection Legislation have been completed, with the exception of the completion of the Information Asset Register, the ongoing maintenance is now considered business as usual. A two year Information Governance improvement plan is being progressed, which includes plans to ensure the Information Asset Register is sufficiently completed.

The Information Governance team have been actively raising the profile of Information Governance through a series of events and promotion of Information Governance, Records Management and Freedom of Information Golden Rules. A number of Information Governance Essentials training sessions have been delivered across the organisation. These sessions focus on the essential information governance rules which are applicable to all staff. The majority of information security breaches which occur within NHS A&A are due to human error, this training is designed to equip staff with the basics to help keep themselves right and to protect confidential information. A programme of training for 2020/21 has been scheduled. Uptake of the revised Safe Handling Information Module has been high. NHS A&A can be assured that staff awareness of the new Data Protection Legislation is high.

The Joint Controller and Information Sharing Agreement is now in place between NHS Boards and GP Contractors within NHS A&A. The provision of Data Protection Officer services by the NHS A&A Head of Information Governance & Data Protection Officer now extends to GP Contractors within NHS A&A.

5.2   A regular report on the implementation of the Records Management Plan (RMP) and associated Corporate Records Management improvements is provided to the Information Governance Committee. NHS A&A's RMP was approved by the Keeper of the Records of Scotland in October 2016. In January 2020 a progress update report was submitted to the Keeper of the Records of Scotland detailing the organisations progress with the implementation of the plan. The feedback on the report was positive and National Records of Scotland are satisfied that NHS A&A is taking its statutory obligations seriously. The implementation of actions to support NHS A&A's compliance with the PRSA is ongoing. Improvements have been made to the storage of paper corporate records, as it was identified that a number of the storage facilities were not fit for purpose, this improvement work continues. A toolkit of records management policies, guidance and training continues to be developed and rolled out across the organisation. NHS Scotland are progressing with the implementation of Microsoft Office 365 and this will have implications for records management. The NHS A&A Information Governance Manager (Corporate Records) is involved locally and nationally in planning for the implementation of a business classification scheme and file management plan as part of the Office 365 rollout.

5.3   The Information Governance Committee agenda has increasingly included audit reports on IT Security and Controls with particular reference to Cyber Security and IT Resilience. This is taking recognition of the increasing trend and risk of cyber-attacks and the requirement for NHS A&A to have appropriate Cyber Resilience Controls in place as set out in the Public Sector Cyber Resilience Action Plan, the Directive on security of network and information systems (NIS Directive) and the NHSScotland Information Security Policy Framework.

The Information Governance team in conjunction with the IT Security team continue to review and appraise any changes or developments to the way personal information is processed. There is a structured process of conducting data protection impact assessments and IT security assessments to ensure that proposed methods of processing information are secure, meet regulatory requirements and have the suitable documentation in place.

5.4   The Information Governance Committee also oversees the volume and frequency of Freedom of Information requests, compliance levels and monitors the Freedom of Information improvement plan. In 2019, NHS A&A received 621 requests, eight of which were withdrawn or no clarification provided. 586 of the remaining 613 requests (95.6%) received a response within 20 working days. This compares to a total of 692 received in 2018, of which 618 (90.7%) received a response within 20 working days, 63 were late, six were withdrawn by the applicant and five closed as clarification not provided. The number of requests received has decreased by 10 per cent on the previous year however requests have become more complex requiring response and co-ordination between different directorates. In 2019 a third of all requests received were processed by the Acute Directorate. 12.7% of requests were processed by Corporate Support Services and 11.9% were processed by Organisational & Human Resources Development. There were seven requests for internal review in 2019. Four of the requests were upheld with no further action taken. One request was upheld and another exemption applied and one was upheld but further information was provided as it was now in the public domain. All internal reviews were responded to within the statutory 20 working days. One applicant was dissatisfied with the result of the internal review and has appealed to the Scottish Information Commissioner. All requested information was submitted on time and NHS A&A are awaiting a decision from the Commissioner. Work has continued to streamline FOI processes to promote efficiency.

5.5   The Information Governance Committee maintains regular scrutiny of the risks associated with Information Governance; a Strategic Risk Register report is routinely discussed at each Information Governance Committee meeting.

6.   Priorities for 2020/21

6.1   A key priority for the Information Governance Committee will be to continue overseeing and monitoring the Information Governance improvement plan. A key priority continues to be the completion of the Information Asset Register to ensure that NHS A&A has detailed records of its processing activities and can provide evidence that information assets are being managed in line with Data Protection Legislation.

6.2   Overseeing the implementation of NHS A&A's RMP will remain a high priority for the Information Governance Committee throughout 2020/21. The Information Governance Committee will be seeking assurance that there is continued progress being made on the key areas of improvement as identified by the Keeper of the Records of Scotland.

6.3   The implementation of Office 365 represents a significant change to the way NHSScotland staff access IT facilities, manage and process information. Ensuring the appropriate governance surrounding Office 365 is in place will be a major priority for 2020/21. The implementation of Office 365 also presents a resounding opportunity to improve records management throughout NHS A&A through undertaking a data cleanse and more effectively managing our records within a business classification scheme and file management plan.

6.4   A key priority for the Committee through 2020-2021 will be to support Covid-19

governance requirements as NHS Ayrshire & Arran moves from the emergency response stage to phase 2 mobilisation and towards recovery. The current Covid-19 pandemic has presented a number of challenges to the organisation. With respect to Information Governance these have related to the vast mobilisation of home working for staff and the requirement to manage and process personal information associated with managing Covid-19 in new ways. Ensuring compliance with Data Protection legislation whilst responding fluidly to pressures and demands surrounding the future management of services associated with Covid-19 will be a priority for the Information Governance Committee.

6.5   NHS A&A welcomes a new Caldicott Guardian in 2020/21, Dr Crawford McGuffie, with whom both the Information Governance Team and Committee look forward to working.

7.   Chair's Comments

7.1   It has been a busy and productive year for the Committee. Compliance with Freedom of Information legislation last year was excellent with 95.6% of requests being responded to within the statutory deadline. The organisation continues to make improvements to promote compliance with the updated data protection legislation. Many areas have made improvements to the storage of paper corporate records and advancing the records management plan. The implementation of Office 365 presents both challenges and opportunities in terms of information governance and records management.

More recently, the Committee has supported the organisation in the Covid-19 response by ensuring cyber security and information governance regulations are met when new technologies have been used to enable improved communications. I look forward to working with the Committee to ensure we do not lose the benefits of the strategic digital changes the organisation has made and to continue to deliver good governance over all the information in the organisation. I thank Board members and colleagues for their continued support of the Committee.

Miss Lisa Tennant
Chair – Information Governance Committee

Information Governance Committee Terms of Reference

1.   Introduction

1.1   The Information Governance Committee is identified as a Committee of the NHS Board. The approved Terms of Reference and information on the composition and frequency of the Committee will be considered as an integral part of the Standing Orders.

1.2   The Committee will be known as the Information Governance Committee of the NHS Board and will be a Standing Committee of the Board.

2.   Remit

2.1   To provide assurance to the NHS Board that information governance is being discharged in relation to the Boards statutory duty for quality of care.

3.   Committee Membership

3.1   The Committee shall be established by the NHS Board and be composed of four Non-Executive members. The NHS Board shall appoint the Chair and approve membership of the Committee. A Vice Chair will be proposed by the Governance Committee Chair and agreed by the Committee.

3.2   Committee membership will be reviewed annually or as required.

4.   Quorum

4.1   Three Non-Executive members will constitute a quorum.

5.   Attendance

5.1   The Medical Director (Caldicott Guardian), the Director of Finance (as Senior Information Risk Owner), the Director of Infrastructure and Support Services and the Head of Information Governance and Data Protection Officer (as Chair of the Information Governance Operational Delivery) will attend in an *ex-officio* capacity to provide the Committee with advice and guidance. The Chief Executive may also be in attendance.

5.2   The Committee may co-opt additional advisors as required.

5.3   With the prior approval of the Chair, the Medical Director and the Director of Infrastructure and Support Services will be able to provide deputies on an exceptional basis.

6. Frequency of Meetings

6.1 The Committee will normally meet bi-monthly but will meet at least four times per annum.

6.2 The Chair may, at any time, convene additional meetings of the Committee.

7. Authority

7.1 The Committee is authorised to investigate any matters which fall within its Terms of Reference, and obtain external professional advice.

7.2 The Committee may form one or more Sub-committees to support its functions.

7.3 The Committee is authorised to seek and obtain any information it requires from any employee whilst taking account of policy and legal rights and responsibilities.

7.4 The Committee will have the authority to require the attendance of any employee of NHS Ayrshire and Arran, as may be required.

8. Duties

The Committee shall be responsible for the oversight of information governance arrangements within NHS Ayrshire and Arran. Specifically it will:

8.1 Consider and scrutinise the health system's compliance with relevant legislation and performance against national standards with regards to information governance.

8.2 Hold the relevant officers of NHS Ayrshire and Arran to account in respect of their compliance with relevant information governance legislation, organisational and national standards.

8.3 Review action taken by the organisation on recommendations made by the Committee or the NHS Ayrshire and Arran Board on information governance matters.

8.4 Monitor and review risks falling within its remit.

8.5 Receive annual reports and quarterly updates on Information Governance performance in order to provide assurance and accountability.

8.6   Provide assurance to the NHS Board on compliance with information governance legislation, organisational and national standards, highlighting issues, breaches and action being taken where appropriate.

8.7   Consider and scrutinise the health system's compliance with relevant legislation and performance against national standards with regards to IT Security. Monitor and review audit reports and IT Security risks with particular emphasis on Cyber Security and IT Resilience.

9.   Conduct of business

9.1   Meetings of Committee will be called by the Committee Chair.

9.2   The agenda and all available supporting papers will be sent to members at least three working days before the date of the meeting.
Any additional papers can be circulated via email.

10.   Reporting Arrangements

10.1   Minutes will be kept of the proceedings of the Committee. These will be circulated, in draft normally within three working days to the Chair of the Committee and within ten working days thereafter to members, prior to consideration at a subsequent meeting of the Committee.

10.2   The Chair of Committee shall provide assurance on the work of the Committee and the approved minutes will be submitted to the NHS Board meeting for information.

10.3   The Committee will conduct an annual review of its role and function and report to the NHS Board in June each year.

10.4   Items requiring urgent attention by the NHS Board can be raised at any time at NHS Board Meetings, subject to the approval of the Chair.

Version:	Date:	Summary of Changes:	Approved by
02.0	04/06/18	Addition of Vice chair arrangements	IGC 04/06/18
02.1	19/06/18	Attendance – addition of Senior Information Risk Owner and Data Protection Officer. Duties – addition of scrutiny and monitoring in regard to IT security and cyber security risk	IGC 03/09/18
02.2	16/07/20	Review of Terms of Reference against new Board Model Standing Orders	IGC 21/07/20