

Cambridgeshire and Peterborough  
Clinical Commissioning Group (CCG)

# INFORMATION GOVERNANCE STRATEGY 2019 - 2021

## Approval Process

Lead Author:	Information Governance Lead
Reviewed by:	CCG IG, BI and IM&T Steering Group
Approved by:	CCG IG, BI and IM&T Steering Group – 18 <sup>th</sup> July 2019
Endorsed by:	Integrated Performance and Assurance Committee – 27 <sup>th</sup> August 2019
Ratified by:	CCG Governing Body – 3 <sup>rd</sup> September 2019
Version:	4.1
Review date:	July 2021 Policy remains extant until October 2021 as agreed by the IG, BI and IM&T Steering Group on 15 <sup>th</sup> July 2021.
Valid on:	3 <sup>rd</sup> September 2019

## Document Control Sheet

Development and Consultation:	Strategy developed in consultation with the Information Governance, Business Intelligence and IM&T Steering Group and endorsed by the Integrated Performance and Assurance Committee (IPAC).
Dissemination	This strategy will be available to all staff within the CCG
Implementation	The Chief Finance Officer is responsible for monitoring the application of the strategy by ensuring that: <ul style="list-style-type: none"> <li>• It is brought to the attention of all employees</li> <li>• Managers are aware of their responsibilities for ensuring that staff under their control are aware of the strategy</li> <li>• Staff are informed and consulted as appropriate</li> <li>• Appropriate training and guidance is provided to staff</li> <li>• Corporate business processes support the implementation of the strategy.</li> </ul>
Training	IG Training will be undertaken as part of the CCG's induction processes.
Audit	The strategy will be monitored in line with the Data Security and Protection Toolkit requirements which include the National Data Guardian recommendations.
Review	This strategy will be reviewed two yearly, or earlier if there are changes in procedures or legislation.
Links with other documents and guidance	The Strategy should be read in conjunction with: The Information Governance Policy and Management Framework
Equality and Diversity	The HR Advisor with responsibility for E&D has carried out an Equality & Diversity Impact Assessment and concluded the policy is compliant with the CCG Equality and Diversity Policy. No negative impacts were found.

## Revisions

Version	Page/ Para No	Description of change	Date approved
1		CCG policy endorsed by Information Governance and IM&T Steering Group and approved by Clinical and Management Executive Team.	April 2013
2		Review and ratified by CMET	July 2015
3		Reviewed prior to ratification by CEC	April 2017
4	Whole document	Reviewed and updated for approval prior to endorsement by IPAC	May 2019
4.1	Whole document	Updated to reflect May 2019 Steering Group comments	September 2019

## CONTENTS

	<b>Page</b>
1. Purpose .....	4
2. CCG Corporate Locations .....	5
3. Developments to achieve the CCG and wider NHS objectives .....	5
4. Scope of the Strategy .....	6
5. Review.....	7
Annex A - Equality Impact Assessment Form .....	8

# CCG Information Governance Strategy

## Strategic Vision

The aim of this Information Governance Strategy is to ensure the effective management of Information Governance.

Cambridgeshire and Peterborough Clinical Commissioning Group, through local leadership, commissioning and service developments will improve Information Governance (IG) and Data Security to support patient care within the CCG area.

To enable the CCG to deliver its responsibilities there is a need to ensure that the strategic vision and framework meets the CCG's current and future requirements.

### 1. Purpose

The purpose of this document is to describe the CCG strategy for IG and broad implementation plans to achieve this strategy.

The IG strategy is informed by both national and local strategic goals.

This Strategy sets out the approach to be taken within the CCG to provide a robust Information Governance framework that encompasses the National Data Guardian's ten data security standards for the management and sharing of information. All organisations that have access to NHS patient data and systems must use NHS Digital's Data Security and Protection Toolkit (DSPT) to provide assurance that they are practicing good data security and that personal information is handled correctly. <https://www.dsptoolkit.nhs.uk/>

The NHS Digital DSPT will inform the IG workplan.

The CCG's organisational improvement objectives will also influence the IG strategy.

-  Ensure clear patient voice in everything we do.
-  Deliver improvements that make best use of the public pound and save system 'cost'
-  Use data and information to prove everything
-  Deliver the prioritised performance standards
-  Deliver the 6 transformation programmes
-  Deliver the CCG financial plan.

## **2. CCG Corporate Locations**

The CCG corporate locations are:

- Lockton House, Cambridge
- Pathfinder House, Huntingdon
- Exchange Tower, Wisbech
- Peterborough City Care Centre, Peterborough
- Stanton House; Huntingdon

Note – Exchange Tower will close during 2019.

CCG staff also work on occasions from other locations including at home using remote access solutions.

Any developments to the CCG ways of working influences the CCG IG Strategy in that data protection and security needs to apply regardless of location.

## **3. Developments to achieve the CCG and wider NHS objectives**

The CCG has a statutory responsibility to patients and the public to ensure that the services it provides, have effective policies, processes and people in place to deliver objectives in relation to holding and using (processing) confidential and personal information. As a commissioner, Cambridgeshire and Peterborough CCG will need to be assured that the services it commissions from other organisations also comply with key components that relate to information governance. Completion of the DSP Toolkit is embedded in the contracting process support our strategic aim.

This Strategy outlines the approach the CCG will take to ensure that it develops effective information governance processes throughout the organisation, which will enable it to deliver its objectives and meet its statutory requirements.

The Information Governance Strategy overlaps with the CCG's ICT Strategy and reflects the joint aims relating to data security and protection.

The CCG's organisational objectives are shown above and these will be implemented alongside the priorities shown below.

The national objectives for 2019/2020 require the CCG to address the following priorities:

- The CCG is required to Identify all data processing and ensure lawful information sharing. Selecting or designing appropriate staff training and the introduction of the National Data Opt-Out Policy will support this.
- The CCG is required to ensure staff members understand their personal accountability for data handling. A thematic review of 2018/19 incidents will be undertaken to in the avoidance of future data incidents.
- Annual IG training is mandatory. The CCG will continue to monitor uptake of the e-Learning for Health Data Security module. Bespoke face to face training will be kept up to date or designed as required.

- The CCG must ensure that access to person identifiable data is restricted and authorised. Access must be auditable. The CCG will continue to promote Privacy by Design principles and new services or systems will undergo Data Protection Impact Assessments.
- The CCG processes that support incident reporting of breaches and near misses will be reviewed at least annually. Datix, Serious Incidents Requiring Investigation (SIRIs) and Strategic Executive Information System (StEIS) incidents will be received by the IG, BI and IM&T Steering Group.
- The CCG will participate in national initiatives and schemes to improve resistance and resilience to cyber-attacks. The CCG action plan in relation to Cyber Security is described within the information security development plan.
- Having a tested continuity plan in place to respond to threats to data security is a key objective. Further work to review the business continuity and disaster recovery mechanisms will be undertaken during 2019-2021. As part of this work known weaknesses within the current arrangements will be strengthened.
- As a strategy aim, the CCG will move systems held on legacy solutions that do not have robust business continuity arrangements in place. Examples include CCG information assets based upon software that is not supported for 'cloud' use such as MS Access. This will materially impact ways of working within the CCG.
- The development of business continuity and disaster recovery relies on holding an accurate Information Asset Register and Information Asset Management regime within the CCG.
- As part of business continuity planning and development for 2019, investigation of external services to support the CCG will be undertaken. This may lead to procurement of additional communication services and recovery support. IT suppliers will be held accountable through contracts for protecting the personal confidential data they process and meeting the requirement to understand their obligations as data processors under the GDPR.

#### **4. Scope of the Strategy**

There are two key components underpinning this strategy, which are:

- The CCG Information Governance Policy and Management Framework, which outlines the broader objectives for information governance; and
- An annual implementation plan arising from a baseline assessment against the standards set out in the NHS Digital Data Security and Protection Toolkit.

Fundamental to the success of delivering the Information Governance Strategy is maintaining and further developing the Information Governance culture within the CCG. Awareness and training will be provided to all CCG staff that utilise information in their day-to-day work to promote this culture. In order to achieve this, we will continue with the Confidentiality Awareness Campaign and the use of NHS Digital's e-Learning for Healthcare Data Security Awareness Training Programme.

## **5. Review**

The strategy will be reviewed every alternate year or prior to this should new legislation or national guidance require it. A revised Implementation Plan will be developed annually to reflect the most recent version of the Data Security and Protection Toolkit, to identify key areas for continuous improvement and to provide a safe and secure infrastructure which allows CCG staff to work efficiently and effectively.

Amanda Holloway  
Information Governance Lead  
May 2019

## Annex A - Equality Impact Assessment Form

### Equality Impact Assessment Form

#### Initial Screening

Name of Proposal (policy/strategy/function/service being assessed)	CCG Information Governance Strategy
Those involved in assessment:	Policy developed in consultation with the IG, BI & IM&T Steering Group and for endorsement by the Integrated Performance and Assurance Committee
Is this a new proposal?	No, review and revision of existing strategy.
Date of Initial Screening:	31 May 2019

1. What are the aims, objectives?	To ensure the effective management of Information Governance and that the strategic vision and framework meets the CCG's current and future requirements.
2. Who will benefit?	All staff working for and on behalf of the CCG
3. Who are the main stakeholders?	Staff; Managers; IG, BI, IM&T Steering Group
4. What are the desired outcomes?	Staff awareness of the Policy through being advised of its availability on the CCG's website via iConnect.
5. What factors could detract from the desired outcomes?	<ul style="list-style-type: none"> <li>• Lack of awareness of the existence of the Policy;</li> <li>• Failure to follow the Policy/procedure.</li> </ul>
6. What factors could contribute to the desired outcomes?	Knowledge of the policy and its implementation.
7. Who is responsible?	Staff, managers, IG, BI, IM&T Steering Group
8. Have you consulted on the proposal? If so with whom? If not, why not?	Policy developed in consultation with the IG, BI & IM&T Steering Group for approval and endorsement by the Integrated Performance and Assurance Committee.



9. Which protected characteristics could be affected and be disadvantaged by this proposal (Please tick)		Yes	No
Age	<u>Consider:</u> Elderly, or young people		X
Disability	<u>Consider:</u> Physical, visual, aural impairment, Mental or learning difficulties		X
Gender Reassignment	<u>Consider:</u> Transsexual people who propose to, are doing or have undergone a process of having their sex reassigned		X
Marriage and Civil Partnership	<u>Consider:</u> Impact relevant to employment and /or_training		X
Pregnancy and maternity	<u>Consider:</u> Pregnancy related matter/illness or maternity leave related mater		X
Race	<u>Consider:</u> Language and cultural factors, include Gypsy and Travellers group		X
Religion and Belief	<u>Consider:</u> Practices of worship, religious or cultural observance, include non-belief		X
Sex /Gender	<u>Consider:</u> Male and Female		X
Sexual Orientation	<u>Consider:</u> Know or perceived orientation		X

10. **What information and evidence do you have about the groups that you have selected above?**

The above protected characteristics will have no adverse impact as the Policy has been developed in accordance with new Data Protection legislation (ie General Data Protection Regulation May 2018).

Consider: Demographic data, performance information, recommendations of internal and external inspections and audits, complaints information, JNSA, ethnicity data, audits, service user data, GP registrations, CHD, Diabetes registers and public engagement/consultation results etc.

**How might your proposal impact on the groups identified? For example, you may wish to consider what impact it may have on our stated goals: Improving Access, Promoting Healthy Lifestyles, Reducing Health Inequalities, Supporting Vulnerable People**

Examples of impact re given below:

- a) Moving a GP practice, which may have an impact on people with limited mobility/access to transport etc
- b) Planning to extend access to contraceptive services in primary care without considering how their services may be accessed by lesbian, gay, bi-sexual and transgender people.
- c) Closure or redesign of a service that is used by people who may not have English as a first language and may be excluded from normal communication routes.

<b>Summary</b>	
Positive impacts (note the groups affected) N/A	Negative impacts (note the groups affected) N/A

Summarise the negative impacts for each group:

N/A

**11. What consultation has taken place or is planned with each of the identified groups?**

The Strategy was developed and approved in consultation with the IG, BI & IM&T Steering Group prior to endorsement by the Integrated Performance and Assurance Committee.

What was the outcome of the consultation undertaken?

Approval and Endorsement sought

**12. What changes or actions do you propose to make or take as a result of research and/or consultation?**

Briefly describe the actions then please insert actions to be taken on to the given Improvement Plan template provided.

The Information Governance Team on behalf of the Associate Director of Corporate Affairs will be responsible for ensuring that this policy is implemented, including any supporting guidance and training deemed necessary to support the implementation, and for monitoring and providing Governing Body assurance in this respect.

12.1 **Will the planned changes to the proposal?**

Please  
State  
Yes or  
No

a) Lower the negative impact?	N/A
b) Ensure that the negative impact is legal under anti-discriminatory law?	N/A
c) Provide an opportunity to promote equality, equal opportunity and improve relations i.e. a positive impact?	N/A

13. **Taking into account the views of the groups consulted and the available evidence, please clearly state the risks associated with the proposal, weighed against the benefits.**

Information risk - The CCG must respect patient confidentiality in accordance with the NHS Constitution, ICO Guidance, and the Statutory Code of Practice. 'Necessity' is a qualifying condition to justify the lawful use of PCD.

14. **What monitoring/evaluation/review systems have been put in place?**

Monitoring will be undertaken by the Information Governance team. The frequency of review will be every other year or as required.

15. **When will it be reviewed?**

July 2021

<b>Date completed:</b>	31 May 2019
<b>Signature:</b>	Corporate Services Support Manager (IG)
<b>Approved by:</b>	OD & HR Advisor (Equality and Diversity)
<b>Date approved:</b>	14 June 2019