

Agenda Item:

Board of Directors Meeting

Report

Subject: Information Governance update and IG Toolkit Submission

Date: 26th March 2015

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SECRETARY

This report has been prepared for consideration by the Board of Directors to outline the Trust's performance against the Information Governance Standards as set out in the Information Governance Toolkit.

Within the current version, 12, the Trust is assessing 27 standards of the 45 standards at a level 2, and the remaining 18 at level 3. The Trust is not scoring any standard at a level 1.

At the submission of version 11 of the IG toolkit on the 31st March 2014, the Trust self- assessed 28 standards at level 2 and 17 standards at a level 3. Therefore one standard has increased to level 3.

The Trust made a small improvement from a score of 79% 'green satisfactory' in March 2014, version 11, to 80% 'green satisfactory' as at the 17th March 2015. The IG group agreed on a smaller improvement target this year as a large number of the leads were involved in the implementation of the Medway PAS project and this resulted in time constraints for working on the toolkit evidence. Therefore this year's target was set at 80% - green satisfactory which has been achieved.

In line with the recommendations of 360 Assurance, all standards now have 'standard owners'. Each standard owner is responsible for obtaining evidence from across the Trust to meet the requirements of their particular standard. All standard owners report to the IG group.

Information Governance as a department own a number of standards, in relation to policy and compliance, however where the standard reflects a need to operationalise and adopt, this is allocated within the Trust. As always the IG team offer a support and advice to support this process, maintaining reporting to the IG Group of actions allocated and progressed.

Compliance for standard 112, which requires that all staff receive IG training, is on target to achieve the required level for 31st March 2015. The IG department has trained 4,356 members of staff including Medirest since 1st April 2014. Figures obtained from HR shows the numbers of staff in post as 4,305 not including 427 Medirest staff at the end of February.

Therefore some 92% of staff have undertaken IG training this year. There are a further 100 members of staff currently booked on face to face training between now and the end of March 2015 and another 150 due to renew their on line training before the end of March 2015.



Recommendations

- 1. The Board is invited to receive assurance from this report regarding achievement against the IG toolkit standards
- 2. The Board is invited to approve the submission of the IG Toolkit on 31st March 2015.

Relevant Strategic Priorities (please mark in bold)	
To consistently deliver safe, effective a high quality care achieving a positive and staff and patient experience	To develop extended clinical networks that benefit the patients we serve
To eliminate the variability of access to and outcomes from our acute and community services	To provide efficient and cost-effective services and deliver better value healthcare
To reduce demand on hospital services and deliver care closer to home	

Links to the BAF and Corporate	Principal Risk 1 – Inability to maintain the quality of patient
Risk Register	services demanded
Details of additional risks	n/a
Links to NHS Constitution	Duty of Quality
Financial Implications/Impact	
Legal Implications/Impact	Failure to deliver robust governance increases likelihood of
	continuance of Regulatory enforcement action
Partnership working & Public	n/a
Engagement Implications/Impact	
Committees/groups where this item	n/a
has been presented before	