

Strategy

Information governance

1 Scope

There are five key components underpinning this strategy which are:

1. The Trust [information governance and information security policy](#), which outlines the objectives for information governance;
2. The identification of any threats, vulnerabilities and risks in relation to information governance;
3. What data the Trust holds, its value and how it should be protected;
4. An annual action plan arising from a baseline assessment against the standards set out in the NHS HSCIC Information Governance Toolkit within the following initiatives:
 - Information governance management
 - Confidentiality and data protection assurance
 - Information security assurance
 - Clinical information assurance
 - Secondary use assurance
 - Corporate information assurance
5. The legal framework and standards relevant to information governance include the following:
 - Data Protection Act 1998
 - Freedom of Information Act 2000
 - Access to Health Records Act 1990
 - The NHS Code of Practice on Confidentiality
 - The NHS Code of Practice for Information Security
 - The NHS Code of Practice for Records Management
 - BS ISO/IEC 27001/27002 Information Security Management
 - Caldicott 2

This strategy applies to all information held by the Trust in all formats.

2 Purpose

This strategy sets out the approach to be taken within the Trust to provide a robust information governance framework for the current and future management of information.

3 Introduction

Information is a vital asset, in terms of the clinical management of individual patients and the efficient management of services and resources. It plays a key part in clinical governance, service planning, performance management, and the Trust's interactions with other organisations.

It is therefore of paramount importance to ensure that information is efficiently managed, and that appropriate policies, procedures and management accountability and structures provide a robust information governance framework to assure and demonstrate the proactive use of information as determined by legislative acts, statute and best practice.

Information governance is 'A framework for handling information in a confidential and secure manner to appropriate ethical and quality standards in a modern health service. It enables NHS organisations to ensure that information is dealt with legally, securely, effectively and efficiently in order to deliver the best possible care to patients, clients and service users.'

4 Responsibilities

The ultimate responsibility for information governance in the Trust lies with the board of directors. The medical director is the named executive director with responsibility for information governance and has been nominated as the Trust's senior information risk owner (SIRO).

The information governance steering group (IGSG) has delegate authority from the board to discharge its functions in this respect, having overall responsibility for overseeing the implementation of this strategy, the [information governance and information security policy](#) and information governance improvement plan.

The IGSG is accountable to the eHospital programme board and Quality Committee. The Quality Committee is a sub committee of the Board. The information governance work program is supported by key roles:

- the information governance lead is responsible for the co-ordination and management of information governance;
- elements of the information governance toolkit are assigned to information governance owners according to their area of responsibility and expertise;
- the information security manager is responsible for ensuring governance compliance in information security and for providing information security advice and direction;

- the Caldicott Guardian, a senior clinician appointed by the Trust to advise on issues of patient confidentiality;
- the information governance lead is the Trust's Caldicott Officer and data protection officer.

A five year business plan will be drafted to identify the areas of improvement, tools and resources required to comply with this strategy, information governance policy and the information governance toolkit. From this an information governance improvement plan will be drafted for approval by the IGSG.

5 Objectives

The aim of this strategy is to ensure the effective management of information governance by:

- ensuring compliance with all relevant information governance legislation and codes of practice;
- complying with best practice and the highest standards of information governance;
- ensuring compliance with the NHS Care Records Guarantee and the NHS Constitution;
- overseeing the implementation of the Health and Social Care Information Centre IG Toolkit ensuring that improvement plans are in place; working towards year on year improvements;
- ensuring that the right information is made available to the right people at the right time;
- issuing and reviewing appropriate policies, procedures and guidance, to deliver compliance with Department of Health information governance standards and legislation;
- ensuring that the right way is the easy way;
- ensuring that there is a robust information risk assessment program in place that understands the business risks, threats and vulnerabilities and works to reduce these;
- ensuring we have an accurate and up to date record of the information assets that we hold and that we understand the level of risk associated with those assets;
- ensuring that we know who has access to our information assets at any one time and that access rights are revoked at an appropriate time;
- ensuring that there are appropriate levels of protection in place, based on data classification, for all our information assets at rest, in use and in transit;

- ensuring that the right information is shared with the right legal basis, with the right person/ organisation to provide patients with high quality care and to manage the business running of the Trust;
- ensuring that we have an accurate record what information is shared and with whom, detailing how the information is shared and the legal basis for that sharing;
- working to instil an information governance culture within the Trust so that it is part of every day business;
- ensuring that staff are aware of their responsibilities in relation to information governance by the provision of appropriate information governance training and awareness;
- minimising the risk of breaches and inappropriate use of personal data;
- ensuring information governance compliance in all aspects of the Trust business, providing information governance approval where required;
- ensuring that privacy and security by design is incorporated into new projects;
- ensuring compliance with information governance through a robust audit program;
- fostering relationships with Trust partners and business areas of the trust in order to enhance information governance compliance across the Trust;
- striving to be innovative and proactive in developing future information governance standards in order to support new ways of working and being ready to accommodate changes to the ways the NHS will work in the future.

6 Monitoring compliance with and the effectiveness of this document

Each year, this strategy and the [information governance and information security policy](#) will be reviewed and an action plan developed against the information governance toolkit to identify key areas for continuous improvement.

Performance against the information governance toolkit will be monitored by the IGSG and submitted to Health and Social Information Centre via the IG toolkit assessment process on an annual basis.

Progress reports will be submitted to the quality committee on a quarterly basis.

Information governance will be included in the internal auditors work program.

Information governance audits will be undertaken by the information governance team across the Trust to monitor compliance with the information governance policies and procedures.

7 Associated documents

- [Information governance management framework](#)
- [Information governance and information security policy](#)
- [Data protection policy](#)
- [Confidentiality of personal health information policy](#)
- [Freedom of information policy and procedure](#)
- [Records management policy and procedure](#)
- [Paper health records procedure](#)
- [Data quality policy](#)

Equality and diversity statement

This document complies with the Cambridge University Hospitals NHS Foundation Trust service equality and diversity statement.

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Document management

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