



INFORMATION GOVERNANCE STEERING GROUP TERMS OF REFERENCE 2020-2021

1. PURPOSE

The Information Governance Steering Group (IGSG) will:

- a) Support the Senior Information Risk Owner (SIRO) in overseeing all aspects of Information Governance (IG).
- b) Provide a forum for scrutiny and debate for issues such as Information Security, Confidentiality, Incident Reporting, Mandatory Training, Data Security and Protection Toolkit (DSPT); and providing escalation reports and recommendations to the Digital Transformation Executive (DTE) as required.
- c) Ensure that the Trust has effective policies and management arrangements in place to maintain a co-ordinated approach to IG.
- d) Ensure that best practice is the basis for decision making where data security and protection topics are involved.
- e) Monitor compliance with relevant regulatory standards, in particular, Care Quality Commission Fundamental Standards, Regulation 17; Good Governance.
- f) Oversee the development, implementation and monitoring of the IG Strategy.

2. ACCOUNTABILITY

- 2.1 IGSG is accountable to the DTE and will report the delivery of the IG work plan and DSPT submissions as follows:
 - a. Baseline submission by 31 October
 - b. Final submission by 31 March

Each submission will be reported to the next DTE meeting immediately following the relevant submission. Additionally, an Annual Report will be provided which will be presented in May of each year and this will account for the activity of the preceding year.

2.2 IGSG will send to DTE, each March, and present a formal Assurance Report in respect of the compliance of the DSPT with the prevailing national requirements. DTE will be required to approve this Assurance Report before





the DSP Toolkit may be uploaded and 'Published' by the Trust's Data Protection Officer.

3. KEY RESPONSIBILITIES

IGSG will have responsibility for the oversight of information governance within the Trust and as such will:

- a) Ensure that the Trust has effective policies and management arrangements in place, covering all aspects of IG;
- b) Inform, review and approve the annual IG Work Plan, prior to its submission for approval by DTE in March of each year. IGSG will then monitor the implementation and delivery of that plan, to enable the provision of regular reports and escalation to DTE or such other groups or committees as are appropriate.
- c) To receive an annual report from the Caldicott Guardian each year in March that details the work that has been undertaken.
- b) Ensure that the Trust undertakes ongoing assessments and audits of its IG policies and arrangements in relation to Data Protection, Confidentiality, Privacy, Records Management, Information Security and data sharing. The group will review these audits with a view to improving IG compliance and performance.
- c) Ensure that the activities of staff in respect of data protection, confidentiality, information handling, security and quality, records management, and other aspects of IG are compliant with legislative requirements and current standards.
- d) Provide support, advice and assistance to the SIRO and Caldicott Guardian in making decisions on IG issues on behalf of the Trust Board and in doing so;
 - i. Reviewing all Information Sharing / Processing Agreements as the Trust requires to enter into and thus advising the Caldicott Guardian of their appropriateness and fitness to enter into.
 - ii. Receive regular reports in respect of data incidents or information breaches within the Trust or from which the Trust may be at risk, along with assurance that there is evidence of implementation of recommendations and lessons learned.
 - iii. Receive regular reports in respect of Subject Access Requests made to the Trust and details of the Trust's compliance with its obligation to respond to these as per the General Data Protection Regulation 2016 and the Data Protection Act 2018.





- iv. Receive regular reports in respect of Freedom of Information Act Requests made to the Trust and details of the Trust's compliance with its obligation to respond to these as per the Freedom of Information Act 2000.
- v. Receive regular reports in respect of all aspects of Cyber Security as they may affect the Trust. This should include but not be limited to, current health of cyber security, risks, breaches, concerns and workplans.
- vi. Request such other reports as it sees fit in order to assure itself that the IG requirements that the Trust may need to comply with are being met.
- e) Monitor progress and improve compliance in relation to the DSPT.
- f) Authorise the sending to DTE such papers, reports and a recommendation towards the end of each financial year that the DSPT is in a fit state, in its opinion, to be published on the NHS Digital DSPT website as the Trust's final return each year. In the event that any submission does not meet all the mandatory assertions, to approve any Improvement Plan required to be sent to NHS Digital and monitor its effective implementation within timelines:
- g) Ensure that there is an effective programme in place for staff DSP Training. This will include mandatory staff induction and a comprehensive programme for awareness and continuing training.
- h) Consider the approval of Data Protection Impact Assessments and review reports in conjunction with the Caldicott Guardian.
- i) Consider the approval of Data Security Assessments and review reports in conjunction with the Information Security Management requirements.
- j) Consider the approval of Data Privacy by Design Assessments and workplans that the Trust is working on.
- k) Ensure that the Trust develops and maintains an appropriate framework for the management and protection of information which is appropriately supported by Information Asset Owners.
- Receive and review reports on IG risks on the Risk Register and ensure appropriate controls and actions are in place.
- m) Receive regular reports and monitor compliance on Legitimate Relationship Alerts.





- n) Provide a focal point for the resolution and/or discussion of Cyber Security issues which may impact on personal data held by the Trust.
- Receive matters for consultation, review and approval outside of the scheduled group meetings and via email, that are time critical. Issues will only be considered in this way by exception.

4. MEMBERSHIP

- 4.1 Membership of the Group will comprise of:
 - a. Chief Finance Officer (SIRO and Chair)
 - b. Medical Director (Caldicott Guardian) (Vice Chair)
 - c. Head of Information Governance / Data Protection Officer (Deputy Vice Chair)
 - d. DTS senior representative
 - e. Associate Director of Nursing
 - f. Head of Clinical Governance
 - g. Deputy Head of Information Governance Manager
 - IG Team representative Information Security Specialist
 - i. HR senior representative
 - j. Learning & Development senior representative
 - k. Finance senior representative
 - I. Business Information senior representative
 - m. Representation from each of the Divisions
- 4.2 In the event that any member of IGSG is unable to attend then they shall appoint a Deputy to attend on their behalf. Such Deputy shall have the authority to act on their behalf.
- 4.3 The Chair has the authority to co-opt additional members of staff or advisors to meetings on either a regular or ad-hoc basis as appropriate.
- 4.4 IGSG will be administered by the Information Governance Administrator.
- 4.5 The membership of IGSG shall ensure that all matters discussed and business conducted within the meetings, whether scheduled or otherwise, are done so with an appropriate level of confidentiality and decorum. Where items are discussed or documents are shared, reviewed or otherwise managed then they





shall be dealt with in a confidential manner unless there is agreement within the group otherwise.

5. CHAIR

5.1 The Chair of IGSG will be the Trust SIRO/Chief Financial Officer and the Vice Chair will be the Medical Director (Caldicott Guardian).

6. QUORACY

6.1 There shall be a quoracy when either the Chair, Vice Chair or Deputy Vice Chair and five or more members of the IGSG are present, which must include representation from at least three divisions/services. Those present shall be deemed to be competent to exercise all or any of the authorities, powers and discretions vested or exercisable by the Steering Group.

7. FREQUENCY OF MEETINGS

IGSG will meet bi-monthly.

8. REVIEW

The Terms of Reference for the IGSG will be reviewed annually and in the event of any changes hereto presented to DTE for formal ratification following formal acceptance by IGSG.