1. What strategy has Islington PCT adopted in order to mandate the external independent Information Governance auditing of emerging Clinical Commissioning Groups (CCGs), GP practices, Community Pharmacies and Dental practices against the IG Toolkit requirements being the commissioning body and also under the terms of the NHS Connecting for Health contract and N3 connection?

*For ease the response has been split to respond to the query firstly in relation to the independent contractors (*GP practices, Community Pharmacies and Dental practices) and then CCGs separately.)

Independent contractors

Islington PCT as part of NHS North Central London have within 2011/12 reviewed its obligations to ensure compliance with Information Governance Standards and in turn the Information Governance Toolkit (IGT).

Priority has been given to encouraging independent contractors to complete the IGT on a yearly basis factoring changes and identify any areas for improvement. Islington PCT as part of NHS North Central London have not specifically mandated the independent audit of each practices IGT returns made by independent contractors.

A review to ensure an IGT returns takes place with each Independent Contractor is now included as part of the Primary Care teams Annual Contractual review process. Also in 2012/13 any failure to make a return or outliers (high or low comparative scores) will be reviewed and assurance sought of accurate returns or the implementation of suitable improvement plans.

It should also be noted areas of non compliance may be identified by other activities and interactions that may take place. These may include separate audits, investigation of complaints or incidents or on visits that may take place during the course of routine business that may identify areas of non compliance. Where these are identified action would be taken to review.

For ease I have included the Independent Contractor returns across NHS NCL below as at 21 06 2012. Work is ongoing with those that have not submitted, not answered or published their assessment and the number of which at this stage are unsatisfactory against v9 of the IG Toolkit. Where those organisations are declaring themselves as unsatisfactory we have requested action plans as described.

	Closed N/A	Not Published Yet	Satisfactory	Unsatisfactory	Grand Total
BARNET PCT					
Latest		10			10
Not Answered	1	9			10
Published			48	1	49
CAMDEN PCT					
Latest		8			8
Not Answered		3			3
Published	1		27	1	29

	Closed N/A	Not Published Yet	Satisfactory	Unsatisfactory	Grand Total
ENFIELD PCT					
Not Answered	5	5			10
Published			55	1	56
HARINGEY TEACHING PCT					
Latest		10			10
Not Answered	1	10			11
Published			36		36
ISLINGTON PCT					
Latest		3			3
Published			35		35
Grand Total	8	58	201	3	270

Clinical Commissioning Groups

Work is ongoing with emerging Clinical Commissioning Groups (CCGs) to prepare an Information Governance Toolkit return and embed Information Governance within the shadow CCG operational arrangements. At this stage the arrangements of audit have not yet been confirmed.

2. The GP Information Governance (IG) Toolkit has been in operation for a few years now and yet a large proportion of GP practices within Islington PCT and the NHS North Central London PCT cluster catchment have failed to submit the annual IG Toolkit for version 8 and 9 in March 2011 and 2012. The same goes with community pharmacies and dental practices who are contractually obligated to submit an NHS IG Toolkit annually. What remedial action has Islington PCT taken against such independent contractors as this is a contractual requirement in order to maintain the N3 connection as per Department of Health guidelines and NHS Information Governance Assurance Framework (IGAF) policy?

As outlined in the response to question 1 the focus has been to encourage the completion of v9 of the Information Governance toolkit return for all Independent contractors. The information governance steering group have noted and reviewed the number of

NHS NCL have noted an increase in the number of v9 returns compared with v8 in 2010. Various methods have been used to encourage responses including
- *Written correspondence*
- *Following up where IGT returns have not been made*
- *Reports refreshed and discussed at the Information*

Failure to have completed the v9 IGT will be addressed as part of the annual contractual review process if not undertaken by the time of the review.

3. Can you please confirm the number of 3rd party commissioned contractors within Islington PCT and the NHS North Central London cluster PCT catchment

and out of them where applicable those commissioned 3rd parties that are obligated to submit an IG Toolkit and have failed to do so? (You will have these details if you have declared a level 2 on your IG Toolkit as per the requirement).

Unfortunately NHS North Central London does not have sufficient information to be able to respond to your request.

As mentioned in your question NHS North Central London can confirm that we indicated IGT requirement 110 in the v10 Information Governance toolkit return made for NHS North Central London as a level 0.

Whilst we do not have the ability to provide this report we can confirm that large contract providers and data processors such as main IT providers have this mandated as part of the standard NHS Terms and Conditions for the Supply of Services.

The transitional process will include the need to identify all providers of services which should be able to allow responses in the future.

4. Out of the 3rd party contractors commissioned by Islington PCT, how many of these have been independently externally audited for IG assurance in accordance to the requirements under the NHS IG Toolkit for commissioned contractors by Islington PCT and other PCT's within the NHS North Central London cluster PCT catchment being the commissioning organisations?

In 2011/12 no 3rd party contractors commissioned by Islington PCT or NHS NCL have been independently externally audited for IG assurance. Where issues or incidents have arisen NHS NCL have reviewed systems and processes to ensure they are compliant with expected standards.