West Hertfordshire Hospitals **NHS**

NHS Trust

TRUST BOARD MEETING – 29 March 2012

Title of the Paper:	Information Governance – 20011/2012 End of Year Report
Agenda item:	64/12
Author:	Paul Jenkins – Director for Partnerships
Trust Objective:	To meet the national requirements for Information Governance

Purpose
The Information Governance (IG) Toolkit requires that the Trust Board is adequately briefed and routinely receives reports on IG related issues

Risk Implications for the Trust (*including any clinical and financial consequences*):	Mitigating Actions *(Controls):*
A failure to ensure information governance procedures are in place and operating may be reflected in the governance risk ratings. Persistent failure to maintain a level 2 against the key requirements of the IG Toolkit may lead to a down grading of the governance risk rating assigned to the Trust.	A framework exists within the Trust to manage the IG agenda via the Information Governance Group. Action plans in place to address areas of non-compliance.

Level of Assurance that can be given to the Trust Board from the report
Sufficient

Links to Board Assurance Framework, CQC Outcomes, Statutory Requirements (i.e. BAF risk reference, CQC outcomes linked to report)
Statutory requirement.

Legal Implications:
The requirements of the Freedom of Information Act 2000, Data Protection Act 1998 and Human Rights Act 1998 (Article 8 – the privacy right) are incorporated into the IG Framework.

The Criminal Justice and Immigration Act 2008, enacted in October 2008, created new and increased sanctions for the Information Commissioner, which includes the ability to impose heavy sanctions on any individual and/or organisation who deliberately or recklessly commit serious breaches of the Data Protection Act 1998, which includes loss of personal data. The maximum penalty is £500,000

Recommendation to the Trust Board:
The Trust Board members are asked to:

- **Note the contents of this report.**
- **Approve the Trust's 2011-2012 IG Toolkit End of Year assessment**
- **Note the action plan for improving level 2 performance**

Public Board Meeting 29th March 2012

Information Governance Standards: 20011 - 2012 End of Year Submission

Presented by: Paul Jenkins, Director for Partnerships

Purpose

1. The purpose of this report is to inform the Board of the Trust's position at end of year on levels of compliance against the national Information Governance Toolkit (IGT) v9.0.

Background

2. The Trust made its baseline submission against v9 of the IGT on 31st July 2011 for the period 1st April 20011 – 31st July 2011. The Board was informed of our baseline submission at the July Board meeting.

3. The assessment grading scheme remains categorised as follows;

Satisfactory (coloured green): level 2 achieved on all <u>45</u> requirements
Not Satisfactory (coloured red): level 2 not achieved on all <u>45</u> requirements
All NHS organisations are required to achieve level 2 in all requirements.

IG Toolkit v9.0 – End of Year Submission

4.   The table below provides the Trust performance

2011-2012	End of Year Results 31st Mar 2011 V8.0	Baseline Assessment 31st Jul 2011 V9.0	Performance Results 31st Oct 2011 V9.0	End of Year Results 31st Mar 2012-V9.0
Overall Results	**73%** Not Satisfactory	**74%** Not Satisfactory	**78%** Not Satisfactory	**78%** Not Satisfactory
Number of requirements scored at Level 2/3	**44 out of 45**	**44 out of 45**	**44 out of 45**	**44 out of 45**

5. The Trust has achieved 'satisfactory' in 44 of the requirements with a 5% increase in our overall percentage score since our end of year submission in March 2011. The increase is due to achieving level 3 in six requirements (see Appendix 1 for details); however our current submission has still resulted in a 'not satisfactory status'.

The single requirement we have failed to meet is IG -112 which states that to achieve level 2 Information Governance awareness and mandatory training

procedures must be in place and <u>all staff</u> appropriately trained. 'All staff' was subsequently defined as "*95% of your workforce (including all permanent staff and staff on temporary contracts of more than 3 months) must have received basic IG training. This applies to employed staff, contracted staff, volunteers, temporary staff, students, etc.*".

6. The following table shows the excellent improvements made in overall compliancy in Information Governance training over the past year.

Date	Total Requirement (Staff)	Meets Requirement	Does Not Meet Requirement	% Overall Staff Compliance
30th Sep 10	3709	1373	2336	37%
31st Dec 10	3726	1839	1887	49%
31st Mar 11	3735	2115	1620	57%
30th Sep 11	3807	2861	946	75%
29th Feb 12	3951	3220	731	81%

Action Plan to increase and Maintain compliancy

7. The Board has been previously informed of the action plan in place across the Trust aiming to raise the percentage compliancy figures. Although this has proved successful a number of clinical staff particularly in AAU, A&E, Theatres, Maternity and the Dacorum Community Midwives are struggling to either attend classroom based IG training or undertake e-learning due to the following reasons:

- Lack of time available to staff during work to attend classroom based training.
- Only work evenings or weekends so unable to attend class-room based training sessions held during the day.
- Sudden requirement to cover staff shortages.
- Unable to use a computer within work time.
- No access to a computer at home to undertake e-learning programme.

8. To target this issue each individual has received printed copies of the IG training slides to read and complete a short test before returning to Information Governance for marking. The Training department are notified and training records of those that have achieved a pass mark of 80% are updated.

9. A large number of Consultants, House Officers, Specialty Registrars have been targeted and are currently in the process of completing online training co-ordinated by the Medical Education Manager.

Factors That Affect Compliancy Figures

10. There are on average between 50-60 new starters each month that should attend Induction training within 8 weeks of joining the trust. These individuals will appear non-compliant on monthly training compliancy reports until they attend.

11. All staff will be required to undertake Information Governance training on an annual basis as from April 2012. Based on Januarys training compliancy report on average 122 members of staff will become non-compliant each month throughout 2012 which will impact on our overall compliancy figures unless this training is undertaken by staff prior to them becoming non-compliant.

Implication of 'Not Satisfactory' Score

12. This is a highly challenging requirement. In the event that the Trust continues to consistently fall to meet level 2 for IG 112, this could impact on the Trust's governance rating.

13. This risk will be mitigated as long as the action plan summarised above is implemented.

Recommendation

14   The Board is asked to:
- Note the contents of this report
- Approve the Trust's 2011-2012 IG Toolkit v9 End of Year assessment
- Note the action plan to improve Level 2 performance

Nicola Bateman
Information Governance Manager

March 2012