INFORMATION GOVERNANCE COMMITTEE

DRAFT TERMS OF REFERENCE

Name          NHS Lanarkshire Information Governance Committee

Purpose       To provide direction of and oversee the development of NHS Lanarkshire Information Governance policies and to support the Health and Clinical Governance Committee of the NHS Lanarkshire Board

Membership:

Chairman:     Associate Medical Director (CHP North).

Members:      General Manager, e-Health
              Clinical Director, Acute Division
              Divisional General Manager, Acute Division
              Information Governance Manager
              CHP Locality General Manager
              GP IT Advisor
              Corporate Risk Manager
              Non Executive Board Member (Staff)
              Associate Nurse Director (Primary Care)
              Consultant in Public Health Medicine
              Financial Controller, Finance Department
              Head of Health Records
              Public Partnership Forum Representative
              Primary Care IT Manager
              Lanarkshire Data Sharing Partnership Manager
              Communications Manager
              Freedom of Information Officer
              Human Resources Representative

Deputies:     Each member may identify a single named deputy.
Right of attendance: Other members of the NHS Lanarkshire Board will have a right of attendance at any meeting.

Term of Office of Members: Members are appointed ex-officio

Quorum: To be quorate, meetings will require the attendance of not less than five members of the Group.

Meetings: Meetings will be held monthly initially subject to review in December 2008

Additional meetings will be held as required with the agreement of the chairman and two members of the committee.

Minutes: A formal minute of all meetings and of decisions taken will be recorded.

Reporting: The Information Governance Committee will report to the Health and Clinical Governance Committee of the NHS Lanarkshire Board, and to the Corporate Management Team

A. An annual report will be submitted to the Health and Clinical Governance Committee in May of each year for the preceding year April to March

B. Proposals for activities of the Information Governance Committee for the coming year will be agreed in February of each year and submitted to the NHS Lanarkshire Health and Clinical Governance Committee.

C. Minutes of each meeting of the Group will be submitted to the Health and Clinical Governance Committee and to the Corporate Management Team via the Board Secretary.

D. Other reports will be provided at the request of the Health and Clinical Governance Committee and the Corporate Management Team or as deemed appropriate by the Group.

Remit: Information Governance covers the following topics:

- Data Protection
- Confidentiality
- Caldicott - Clinical Information
- Freedom of Information
- Information Management
- Information Security
- Health Records
- Administrative Records
- Data Quality.
To ensure co-ordination of information governance activities across NHS Lanarkshire by:

Data Protection

- Ensuring that policies, procedures and systems of work are established to comply with all relevant legislation.
- Ensuring that the acquisition, deployment and operational use of manual and electronic systems of data and information management are underpinned by appropriate safeguards, with specific reference to the statutory environment.
- Ensuring that NHS(L) Information Governance and Information Technology policies, procedures and developments are consistent with all relevant local and national programmes and initiatives.
- Ensuring that NHS Lanarkshire undertakes or commissions periodic assessments and audits of its Information Governance policies, procedures and arrangements
- Establishing an annual Information Governance Improvement Plan and to monitor implementation of the plan to address the NHS Scotland Information Governance Toolkit
- Working in partnership with service users, their carers and advocates to develop open and transparent processes governing the collection, handling and sharing of their personal information.

Confidentiality

- Receiving and considering reports regarding breaches of confidentiality and security and where appropriate undertake or recommend remedial action.

Caldicott - Clinical Information

- Providing leadership, advice and guidance on the appropriate and safe use of data, information and systems.
- Setting standards, guidance and policies to ensure that staff are provided with the skills necessary to use the information and technologies available to them in a safe and responsible manner.

Freedom of Information

- Ensuring that policies, procedures and systems of work are established to comply with all relevant legislation.

Information Management

- Ensuring that plans are in place to ensure the safe identification of patients through the use of a single patient identification number (Community Health Index).
• Promoting a risk aware approach to the use of data and information and achieve a balance between a secure working environment and efficiency and effectiveness within responsive timely and well supported service provision.
• Ensuring that Information Governance is embedded in the business planning, service management and risk management agendas.
• Developing and implementing a communications programme to raise awareness within NHS Lanarkshire, and with others as appropriate, about all aspects of the work of the Information Governance Committee.
• Monitoring of compliance with IG procedures and statutory guidance in order to manage risks around IG for NHS Lanarkshire.

Information Security

• Collaborating with Local Authority partners, to ensure that the sharing of patient identifiable data is technically secure and underpinned by relevant guidance on consent and the circumstances where sharing is appropriate.
• Promoting an organisational culture that is ever conscious of the need for secure working practices and embraces a process of openness, learning and improvement in matters associated with Data Protection.

Health Records

• Developing and promoting standards of good practice to improve information quality and records management
• To act as Health Records Committee

Administrative Records

• Ensuring that NHSL manages the safe retention, disposal, storage and retrieval of relevant records on time and at the right place
• Providing IG advice in response to events and incidents.

Data Quality.

• Ensuring that education, training and awareness programmes are in place to equip staff with the skills and behaviours necessary to ensure compliance with good practice
• Promoting and Engendering a culture of data quality improvement and quality assurance that supports patient services through the availability of high quality information at the point of service delivery and to support service planning and development.
Support the Health and Clinical Governance Committee of NHS Lanarkshire Board through:

- The creation and regular review of information governance strategies and regular review of progress on implementation
- Providing regular reports on the quality of information services in NHS Lanarkshire
- Providing an annual report in May of each year for the preceding year April to March
- Providing proposals in February of each year for the activities of the Information Governance Committee for the coming year
- Submitting minutes of each meeting of the Committee to the Health and Clinical Governance Committee and the Corporate Management Team
- Providing other reports as required by the Health and Clinical Governance Committee.
- Acting as a source of advice on IG matters.
The Information Governance Committee will receive the following regular reports.

Monthly: ●

Every Second Meeting: ●
Six-monthly: ●
Annually: ●

Specific Reviews will be received in relation to: ●