

Clinical Commissioning Group (CCG) Governing Body 2019/2020 – Part 1

Date of Meeting:	17 January 2020
Agenda Item:	2.2
Subject:	Information Governance Management Group Terms of Reference
Reporting Officer:	Karen Hurley
Aim of Paper:	To provide the reviewed Information Governance Management Group Terms of Reference for ratification.

Governance route prior to Governing Body	Meeting Date	Objective/Outcome
Governing Body	Select date of meeting.	Click to Select
Audit Committee	Select date of meeting.	Click to Select
Strategic Place Board	Select date of meeting.	Click to Select
Integrated Commissioning Board	Select date of meeting.	Click to Select
Locality Engagement Group	Select date of meeting.	Click to Select
Patient and Public Engagement Committee	Select date of meeting.	Click to Select
Quality and Safeguarding Committee	Select date of meeting.	Click to Select
Remuneration Committee	Select date of meeting.	Click to Select
Clinical and Professional Advisory Panel	Select date of meeting.	Click to Select
Primary Care Commissioning Committee	Select date of meeting.	Click to Select
Other	Information Governance Management Group - Approved	

Governing Body Resolution Required:	Approval/Decision
Recommendation	To ratify the reviewed Terms of Reference for the Information Governance Management Group.

Link to Strategic Objectives	Contributes to: (Select Yes or No)
SO1: To be a high performing CCG, deliver our statutory duties and use our available resources innovatively to deliver the best outcomes for our population.	Yes
SO2: To deliver on the outcomes of the Locality Plan in respect of Prevention and Access (Prevention and Self Care)	No
SO3: To deliver on the outcomes of the Locality Plan in respect of Neighbourhoods & Primary Care (Getting help in the Community)	No
SO4: To deliver on the outcomes of the Locality Plan in respect of In Hospital - Planned (Getting more help)	No
SO5: To deliver on the outcomes of the Locality Plan in respect of In Hospital - Urgent Care (Getting more help)	No
SO6: To deliver on the outcomes of the Locality Plan in respect of Children, young people and families	No
SO7: To deliver on the outcomes of the Locality Plan in respect of Mental Health	No

Risk Level: (To be reviewed in line with Risk Policy)	Not Applicable
Comments (Document should detail how the risk will be mitigated)	Click here to enter text.

Content Approval/Sign Off:	
The contents of this paper have been reviewed and approved by:	Chief Finance Officer, Health and Social Care Integration Sam Evans
Clinical Content signed off by:	Not applicable
Financial content signed off by:	Not Applicable

	Completed:
Clinical Engagement taken place	Not Applicable
Patient and Public Involvement	Not Applicable
Patient Data Impact Assessment	Not Applicable
Equality Analysis / Human Rights Assessment completed	Not Applicable

Executive Summary

The aim of the paper is to provide Governing Body with the reviewed Terms of Reference (ToR) for the Information Governance Management Group (IGMG).

Recommendation:

To approve the ToR for the IGMG.

HEALTHIER PEOPLE,
BETTER FUTURE



Heywood, Middleton
and Rochdale
Clinical Commissioning Group

Information Governance Management Group

Terms of Reference

November 2019



VERSION CONTROL

VERSION	ISSUED TO	DATE	COMMENTS
V1.0	IGOG	July 2013	Approved
V1.0	Finance, Performance & Risk	November 2013	Ratified
V2.0	IGOG	May 2014	Approved
V2.0	Finance, Performance & Risk	November 2014	Ratified
V3.0	IGOG	October 2015	Approved
V3.0	Finance, Performance & Risk	December 2015	Ratified
V4.0	IGOG	October 2016	Approved
V4.0	Corporate Governance Committee	December 2016	Ratified - with minor amendment as requested by CGC.
V5.0	IGOG	July 2017	Annual review – Approved with minor amendment as requested by IGOG
V5.0	Corporate Governance Committee	August 2017 (via Chairs actions).	Ratified - with minor amendment to job title as requested by CGC.
V6.0	IGOG	May 2018	Annual review – Approved.
V7.0	IGOG	July 2019	Annual Review - Approved
V7.1	IGMG	September 2019	Amendments made to name and governance - Approved
V7.2	IGMG	November 2019	Updates to template and corporate sustainability

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1. Introduction

This Management Group will oversee and influence the development of Information Governance across NHS Heywood, Middleton and Rochdale Clinical Commissioning Group via the implementation of an Information Governance Framework including the risk management of information assets, the management of information incidents, and provision of Data Security / IG relevant training to all CCG employees.

2. Purpose of the Group

Under delegated authority from Governing Body, the Information Governance Management Group (IGMG) will provide assurance on the CCG's statutory requirements in relation to information governance and associated legislation and Department of Health requirements, including the completion of the Data Security & Protection Toolkit (DSPT).

The Group will conduct its business in accordance with national guidance and the Nolan principles of public life. The group will review its own performance, membership and terms of reference. Any resulting changes to the terms of reference should be approved by the Governing Body.

The Group will monitor the CCG's compliance against the National Cyber Security Centre's Cyber Essentials framework and report on this annually to the CCG Governing Body.

3. Objectives of the Group

- Promote and develop a robust information governance framework within the CCG
- Ensure openness, security, quality and legal compliance in all information produced, utilised and reported by the CCG
- In conjunction with key groups / committees develop appropriate systems, policies, procedures and accountability for the effective management of information, including (but not restricted to) the areas of: Information Risk Management / Confidentiality and Data Protection / Incident Management / IG Training / Specialist Information Governance Advice and Guidance
- Drive the CCG's compliance against relevant internal and external standards and assessment criteria, including the annual Data Security & Protection Toolkit assessment; and internal / External Audit reviews.
- Develop, and performance manage Action Plans / Reports to achieve Information Governance objectives.
- Onward report relevant issues and concerns to relevant individuals / groups, including but not limited to Quality and Safety and Commissioning.
- Inform and report the CCG performance, action plans, and identified risks connected to information governance to the Governing Body.
- Co-ordinate the work programme for the Information Asset Owners & Administrators in relation to compliance with the Information Risk Management Framework.
- Inform and report the CCG performance in relation to the management of Information and Cyber Security to the Governing Body
- Provide a forum for discussion and debate on any ad hoc information governance issues.

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4. Membership

The Group shall operate as a sub - group of the Governing Body. The membership shall comprise:

ROLE	RESPONSIBILITY	VOTING/ NON-VOTING
GP, CCG Chair (Caldicott Guardian)	Chair / Caldicott Guardian	Voting
Head of IT & Assurance	Vice Chair	Voting
Director of Operations Officer / Executive Nurse (DPO)	IG Lead / DPO	Voting
Chief Finance Officer (SIRO)	Member / SIRO	Voting
IT Operations Manager	Member	Voting
Senior Information Governance Lead	Member	Voting
Rochdale Council IG Lead	Member	Non-Voting
Co-opted members	Specialist knowledge will be co-opted as deemed necessary	Non-Voting

In attendance:

The Group may co-opt or seek advice from other representatives/expertise as appropriate and deemed necessary.

Deputies must be fully briefed and hold the represented members full delegated authority.

5. Quoracy

For each meeting to be deemed quorate attendance must include a minimum of four members and must include either the Chair or the Vice Chair and one of the SIRO or Caldicott Guardian. All members should attend at least 70% of meetings annually, and arrange appropriate deputation, where possible, in their absence.

6. Frequency of Meetings

The frequency of meetings will be bi-monthly and will be scheduled where possible to coincide with relevant reporting committees.

All meetings will be scheduled in advance for the full year.

7. Conflicts of Interest

An up to date register of members' interest will be retained.

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Members will be expected to declare any conflicts of interest at all meetings and the Chair will determine how any conflict will be handled in line with CCG guidelines.

8. Accountability

The Group will report to the Governing Body and following each meeting, the minutes shall be formally recorded, and submitted to the Governing Body, with six monthly summary reports being submitted to Governing Body.

Any Chairs action taken between meetings must be ratified at the next meeting of the Group.

Members may be asked to leave the meeting during certain discussions, where a conflict of interest may exist and this will be formally recorded in the minutes.

The IGMG may also operate with a Part 2 function to receive updates on the management of a sensitive and/or confidential nature. The Part 2 agenda may mirror the format for the Part 1 agenda (as set out elsewhere in these Terms of Reference).

The IGMG may establish sub working groups as is deemed necessary. The IGMG will be the responsible body for sponsoring the outcomes of sub groups onto other committees.

9. Scheme of Delegation

The group will carry out the duties as detailed in these terms of reference in accordance with the scheme of delegation as set out in the NHS Heywood, Middleton and Rochdale CCG Constitution.

10. Corporate Sustainability

As a healthcare commissioner, the CCG is committed to planning and buying health care on a sustainable basis, this committee will support the commitments of the HMR CCG Sustainable Development Management Strategy and Delivery Plan, wherever possible in;

1. Commissioning for Sustainability and Adaptation
2. Being a Sustainable Organisation
3. Promoting sustainability with member practices
4. Delivering our commitments and Assessing our Performance

Commissioning for sustainable development in the health and care system means;

- Planning services which are efficient, effective and safe
- Buying services which provide highest quality at best value, are safe and which have least impact on the environment
- Avoiding duplication, inefficiency and waste
- Focus on preventative, proactive care
- Patients public engagement and involvement in planning and design of services

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- Building resilience, and protecting and developing community assets and strengths
- Making the best use of all of the resources we have
- Minimising carbon emissions

11. Review Date

These Terms of Reference will be reviewed annually as a minimum.

12. Secretarial Support

Secretarial support will be provided by the CCG Hub to support the Chair in the management of the group's business and the collation and distribution of papers.

Items for the agenda should be submitted to the IT & Assurance Team for approval a minimum of seven days prior to the meeting.

The agenda and papers for meetings shall be distributed at least five working days prior to the meeting.

Minutes of meetings and supporting actions shall be issued to members no later than ten working days after the meeting

13. Conduct of Group

The group will set an annual work programme/schedule; it will review annually the terms of reference and membership and the chair.

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