

Agenda Item 18

Information Governance Assurance Report 2019/2020



Falkirk Integration Joint Board

20 November 2020

Information Governance Assurance Report 2019/2020

For Noting

1. Executive Summary

- 1.1 This report is to provide assurance to the Board regarding the arrangements for information governance that are applicable to the Board as a public body, along with the information governance arrangements in place within its partners, Falkirk Council (Council) and NHS Forth Valley (NHS FV), which deliver services on behalf of the Board.
- 1.2 Good information governance ensures that organisations handle information legally, securely, efficiently and effectively in order to support delivery of the best possible care. The 3 information governance areas in which the Board, and its partners, have statutory responsibilities are:
 - Freedom of Information
 - Data Protection
 - Records Management.

2. Recommendations

The Integration Joint Board is asked to:

- 2.2 note the Information Governance activity for the year 2019/2020.

3. Background

- 3.1 The Board holds a range of information and records – about its business, its members and any operational matters which come to its attention (such as complaints and information requests under freedom of information and data protection legislation). Its partners hold a far broader range of information (particularly personal information) about services and those using those services.
- 3.2 The Board is supported in its information governance responsibilities by information governance specialists in NHS FV and Council. The Head of Information Governance in NHS Forth Valley is the nominated Data Protection Officer for the Board. NHS Forth Valley administers information requests on behalf of the Board.

- 3.3 The partners have their own information governance teams. NHS FV has recently increased the size of its Information Governance Team to cope with the increased demands of the Data Protection legislation, including the General Data Protection Regulation 2018.

4. Information Governance Assurance Report 2019/2020

- 4.1 This section of the report provides the Board with an overview of their requirements as a public body. It sets out the activity over the reporting period for the following areas.

4.2 Freedom of Information

The Board is subject to the Freedom of Information (Scotland) Act 2002 and the Environmental Information (Scotland) Regulations 2004, as are its partners. The Board itself receives very few FOI requests, and most of these relate to information held by one of the partners, which means the requests need to be refused. Requesters are advised to contact the relevant partner for the information.

4.3 Freedom of Information Requests 2019/2020

Number of Requests	Exemption Applied
6	Section 17 Information not held
1	No exemption – information provided
0	There were no review requests

All requests were dealt within the 20-day statutory time limit.

- 4.4 The partners receive FOI requests in their own right which relate to integrated services.
- 4.5 The Board received no requests for environmental information in the relevant period. This is to be expected as the Board does not generally hold environmental information.
- 4.6 The Board makes information available to the public on a proactive basis by publishing a Guide to Information, based on a Model Publication Scheme issued by the Scottish Information Commissioner. This was last reviewed in December 2018 and will be reviewed again when there are any changes to the Model Publication Scheme.
- ### 4.7 Data Protection
- The Board is subject to data protection legislation (the General Data Protection Regulation and the Data Protection Act 2018), as are its partners. The Board pays a small annual fee to the Information Commissioner's Office by way of notification that it is a data controller. However, the Board processes minimal personal data (primarily information about its members, and details of anyone making information requests or complaints). By

contrast, its partners hold a huge amount of personal data about employees and service users/patients.

- 4.8 The Board received no Subject Access Requests (i.e. requests by individuals for their personal information) in the relevant period. This is to be expected given the Board holds limited personal data. The partners receive Subject Access Requests in their own right which relate to integrated services.
- 4.9 One of the data protection principles is that data controllers must have appropriate security measures in place to protect personal data. NHS FV and the Council have information security policies and procedures in place to protect personal data, including data incident management, for the assurance of the Board. There were no data breaches involving Board information in the relevant period. Again, this is to be expected given the Board holds limited personal data. The partners have their own processes in place to deal with any data breaches relating to integrated services and to ensure that all staff who handle personal data undertake appropriate training.
- 4.10 A key element of the 2018 data protection legislation was a new principle of “accountability”. Data controllers must be able to evidence compliance with the legislation. The Information Commissioner has recently issued an Accountability Framework to assist data controllers with compliance.
- 4.11 Linked to this, data controllers must take a “data protection by design and default” approach to new projects with privacy implications, including ensuring data protection impact assessments are carried out and information sharing agreements are in place. This is of limited direct impact to the Board but has resulted in considerably more information governance work for its partners.
- 4.12 Work is underway between the partners, with the support of the Forth Valley Information Governance Group, to review existing agreements, and any gaps, to ensure these are in place. Regular monitoring will be established and reports will be presented to the respective HSCP management teams.
- 4.13 **Records Management**
The Board is subject to the Public Records (Scotland) Act 2011, as are its partners. The Act requires certain public authorities to prepare and implement a records management plan which must set out proper arrangements for management of its records. The plan must be broken down into 14 key elements and must be submitted to the Keeper of the Records of Scotland (**Keeper**). The Board holds limited records in its own right but has an interest in ensuring its partners are properly managing their records relating to integrated services in line with their approved plans. The partners’ records management arrangements therefore impact on the Board’s plan. The Board submitted its first plan to the Keeper in March 2020. The Keeper’s [assessment](#) of the plan is available on the National Records of Scotland website. The assessment looked for improvement in

the following areas:

1. Business classification – the records of the delivery of the integrated services (as opposed to the records of the operational administration of the Board) are held under the business classification scheme of the partners. The plans of both of the partners were agreed by the Keeper under “improvement model” terms for this element, and accordingly the Board plan was approved on the same basis.
2. Retention schedule – the plan for NHS FV was agreed by the Keeper under “improvement model” terms for this element, and accordingly, the Board plan was approved on the same basis.
3. Destruction arrangements - the plans of both of the partners were agreed by the Keeper under “improvement model” terms for this element, and accordingly the Board plan is approved on the same basis. The issue is primarily around destruction of electronic records, in common with many Scottish public authorities.
4. Business continuity and vital records - the plan for the Council was agreed by the Keeper under “improvement model” terms for this element, and accordingly, the Board plan was approved on the same basis.
5. Audit trail - the plan for the Council was agreed by the Keeper under “improvement model” terms for this element, and accordingly, the Board plan was approved on the same basis.
6. Assessment and review – the Act requires an authority to keep its plan under review. At the time of submission of the plan to the Keeper there was no agreed mechanism for review. However, discussions are underway with a records manager at another Council to carry out reciprocal review of the Councils’ and Boards’ plans by way of review. The Keeper has agreed to this element under “improvement model” terms.

5. Conclusions

- 5.1 There are appropriate arrangements in place to ensure the Board’s compliance with its information governance responsibilities.
- 5.2 In relation to data protection responsibilities, the partners need to ensure that information sharing agreements are in place for any operational data sharing relating to integrated services.
- 5.3 In relation to records management responsibilities, the partners need to ensure that they improve on their arrangements in line with their respective records management plan. This will assist the Board to ensure it can demonstrate improvement on its own plan.

Resource Implications

The Board relies on specialists from its partner organisations in relation to

information governance.

Impact on IJB Outcomes and Priorities

Ensuring compliance with information governance legislation is required to support the implementation of the Strategic Plan, and ensure services delegated to the Board are delivered in compliance with information governance legislation.

Directions

A new Direction or amendment to an existing Direction is not required as a result of the recommendations of this report.

Legal & Risk Implications

The Forth Valley Information Governance Group meets regularly and oversees the information governance requirements of the Board and will support the Leadership Team to comply with legal and risk implications.

Consultation

This is not required for the report.

Equalities Assessment

This is not required for the report.

6. Report Author

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7. List of Background Papers

Board Records Management Plan
Keeper's assessment report

8. Appendices

None