

**Health and Social Care information Centre (ENDPB)**

**Board Meeting – Public Session**

Title of Paper:	Appointment of Caldicott Guardian and Senior Information Risk Officer (SIRO)
Board meeting date:	26 April 2013
Agenda Item No:	HSCIC 13 02 05(b)
Paper presented by:	CEO
Paper prepared by:	Ruth Miller, Board Secretary
Paper approved by (Sponsor Director)	
Purpose of the paper:	To approve recommendations on appointment of Caldicott Guardian and SIRO
Actions required by the Board:	To approve

## **Introduction**

1. The purpose of this paper is to make recommendations for the appointment of a Caldicott Guardian and Senior Information Risk Officer (SIRO) for the HSCIC.
2. The HSCIC is required to identify Board/senior level individuals to assume these roles given the organisation's statutory role and functions – including for managing national data collections and the secure storage and publication of core national data resources. Details of the responsibilities of these roles are set out at Annex A.

## **Recommendation of the CEO**

3. The CEO recommends that:
  - Dr Mark Davies, Director of Clinical and Public Assurance, is appointed as the Caldicott Guardian
  - Clare Sanderson, Director Solution Design, Standards and Assurance is appointed as Senior Information Risk Officer.

## **Board Action**

4. The board is asked to ratify the recommendation of the CEO.

## Caldicott Guardian Role

Caldicott Guardian is a senior person responsible for protecting the confidentiality of patient and service-user information and enabling appropriate information-sharing.

The Guardian plays a key role in ensuring that NHS, Councils with Social Services Responsibilities and partner organisations satisfy the highest practical standards for handling patient identifiable information.

Acting as the 'conscience' of an organisation, the Guardian actively supports work to enable information sharing where it is appropriate to share, and advises on options for lawful and ethical processing of information. Local issues will inevitably arise for Caldicott Guardians to resolve. Many of these will relate to the legal and ethical decisions required to ensure appropriate information sharing. It is essential in these circumstances for Guardians to know when, and where, to seek advice

The Caldicott Guardian also has a strategic role, which involves representing and championing Information Governance requirements and issues at Board or management team level and, where appropriate, at a range of levels within the organisation's overall governance framework.

This role is particularly important in relation to the implementation of the national systems and the development of Electronic Social Care Records and Common Assessment Frameworks.

## Key Caldicott Responsibilities

**Strategy & Governance:** the Caldicott Guardian should champion confidentiality issues at Board/senior management team level, should sit on an organisation's Information Governance Board/Group and act as both the 'conscience' of the organisation and as an enabler for appropriate information sharing.

**Confidentiality & Data Protection expertise:** the Caldicott Guardian should develop a knowledge of confidentiality and data protection matters, drawing upon support staff working within an organisation's Caldicott function but also on external sources of advice and guidance where available.

**Internal Information Processing:** the Caldicott Guardian should ensure that confidentiality issues are appropriately reflected in organisational strategies, policies and working procedures for staff. The key areas of work that need to be addressed by the organisation's Caldicott function are detailed in the Information Governance Toolkit.

**Information Sharing:** the Caldicott Guardian should oversee all arrangements, protocols and procedures where confidential patient information may be shared with external bodies both within, and outside, the NHS and CSSRs. This includes flows of information to and from partner agencies, sharing through the NHS Care Records Service (NHS CRS) and related new IT systems, disclosure to research interests and disclosure to the police.

The Guardian should be, in order of priority:

- an existing member of the management board or senior management team of the organisation;
- a senior health or social care professional;
- the person with responsibility for promoting clinical governance or equivalent functions within the organisation.

The individual providing the role should also have a close relationship with the senior health professional responsible for promoting clinical governance or their social care equivalent.

It is particularly important that the Guardian has the seniority and clear authority from the Board/senior management team and Chief Executive or Director of Adult Social Services and Director of Children's Services to influence policy development and strategic planning, and carry the confidence of his or her colleagues.

## Senior Information Risk Owner (SIRO)

The establishment of the role, Senior Information Risk Owner (SIRO) within NHS organisations was one of several NHS Information Governance (IG) measures identified to strengthen information assurance controls for NHS information assets. These arrangements are consistent with requirements introduced by Cabinet Office for Departments resulting from the data handling review in Government.

David Nicholson, Chief Executive of the NHS, in his letter of 20 May 2008 set an action that all NHS organisations also identify a Senior Information Risk Owner.

The nominated person should be an Executive or Senior Manager on the Board who is familiar with information risks and the organisation's response to risk. The role of the SIRO is to take ownership of the organisation's information risk policy, act as an advocate for information risk on the Board and provide written advice to the Accounting Officer on the content of their annual governance statement in regard to information risk.

The aim is to ensure that the approach to information risk management:

- Takes full advantage of existing authority and responsibility structures where these are fit for this purpose;
- Associates tasks with appropriate management levels;
- Avoids unnecessary impacts on day to day business;
- Ensures that all the necessary activities are discharged in an efficient, effective, accountable and visible manner.

The NHS SIRO should be a member of the Trust Board, or of an equivalent level within NHS organisations without Boards, who has allocated lead responsibility to ensure organisational information risk is properly identified, managed and that appropriate assurance mechanisms exist. Responsibilities of the SIRO may be in addition to other job responsibilities and to avoid confusion should be identified clearly within the role-holder's job description.

The SIRO's responsibilities can be summarised as:

- Leading and fostering a culture that values, protects and uses information for the success of the organisation and benefit of its customers
- Owning the organisation's overall information risk policy and risk assessment processes and ensuring they are implemented consistently by IAOs
- Advising the Chief Executive or relevant accounting officer on the information risk aspects of his/her statement on internal controls
- Owning the organisation's information incident management framework

NHS organisations are required to ensure their appointed SIRO possesses the necessary knowledge and skills to undertake their role effectively and to provide periodic evidenced statements of information assurance to their organisation's accounting officer for the annual Statement of Internal Control. The SIRO should undertake information risk management training at least annually to be able to demonstrate their skills and capabilities are up to date and relevant to the needs of the organisation.

The following table explores the functions and responsibilities that are appropriate to all NHS SIROs in greater detail.

<b>Lead and foster a culture that values, protects and uses information for the success of the organisation and benefit of its customers</b>
<p>Responsibilities:</p> <ul style="list-style-type: none"><li>• to ensure the Organisation has a plan to achieve and monitor the right NHS IG culture, across the Organisation and with its business partners</li><li>• to take visible steps to support and participate in that plan (including completing own training)</li><li>• to maintain sufficient knowledge and experience of the organisation's business goals with particular emphasis on the use of and dependency upon internal and external information assets</li><li>• to ensure the Organisation has Information Asset Owners (IAOs) who understand their roles and are supported by the information risk management specialists that they need</li></ul>

- to initiate and oversee an information risk awareness / training programme of work to communicate importance and maintain impetus
- to ensure that good information governance assurance practice is shared within the organisation and to learn from good practice developed and practiced within other NHS organisations locally and nationally

**Own the organisation's overall information risk policy and risk assessment processes and ensure they are implemented consistently by IAOs.**

Responsibilities:

- to act as the focal point for information risk management in the organisation including resolution of any pan-organisation or other escalated risk issues raised by Information Asset Owners, Information Security Officers, Auditors etc
- to develop and implement an IG Information Risk Policy that is appropriate to all departments of the organisation and their uses of information setting out how compliance will be monitored
- to initiate and oversee a comprehensive programme of work that identifies, prioritises and addresses NHS IG risk and systems' accreditation for all parts of the organisation, with particular regard to information systems that process personal data
- to ensure that Privacy Impact Assessments are carried out on all new projects when required in accordance with the guidance provided by the Information Commissioner
- to review all key information risks of the organisation on a quarterly basis and ensure that mitigation plans are robust
- to ensure that NHS IG Policy, information risk management method and standards are documented, applied and maintained consistently throughout the organisation's information governance risk assessment and management framework
- to ensure that information risk assessment is completed on a quarterly basis taking account of extant NHS Information Governance guidance
- to understand the information risks faced by the organisation and its business partners ensuring that they are addressed, and that they inform investment decisions including outsourcing
- to ensure that information risk assessment and mitigating actions taken benefit from an adequate level of independent scrutiny

**Advise the accounting officer on the management of information risk and provide assurance**

Responsibilities:

- to ensure routine meetings are established with the organisation's Chief Executive or Accounting Officer to brief, discuss or report upon matters on information governance risk assurance and information risk culture affecting the organisation, including input to the annual NHS IG reporting processes
- to sign off an annual assessment of performance, including material from the IAOs and specialists, covering NHS Information Governance reporting requirements

**Own the organisation's information incident management framework**

Responsibilities:

- to ensure that the organisation has implemented an effective information incident management and response capability that supports the sharing of lessons learned
- to ensure that there is a considered and agreed IG incident response and communications plan available, including the reporting of 'perceived' or 'actual' Information Governance Serious Untoward Incidents (IG SUIs).
- to ensure that the organisation's management, investigation and reporting of IG SUIs conforms to national guidance and does not conflict with the organisation's policies and procedures for non-IG SUIs (e.g. clinical incidents)