

HSI21/043

GOVERNING BODY

Title of paper	Policy Development Programme: Update Report		
Agenda item	8	Date of meeting	8 September 2021
Exec lead	Fiona Howarth, Chief of Staff	Clinical sponsor	N/A
Author	Jackie Zabiela, Governance Manager		

Purpose	For decision	<input type="checkbox"/>
	To ratify	<input checked="" type="checkbox"/>
	To discuss	<input type="checkbox"/>
	To note	<input checked="" type="checkbox"/>

Link to strategic objective	Policies and procedural documents are a key component of the Hampshire, Southampton and Isle of Wight CCG corporate governance framework and risk management system, which keep the organisation and its staff safe, protect the same from challenge, reputational damage and claim for redress. This framework supports all of the CCGs strategic objectives.
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Executive Summary

This report outlines progress on the development of a Policy Development and Review Programme, including the establishment of a Policy Sub Group with oversight via the Audit and Risk Committee.

Terms of Reference for the Policy Sub Group were approved by the Executive Team at its meeting of 27 July 2021, reviewed and approved at the inaugural meeting of the Policy Sub Group on 12 August 2021 and then ratified by the Audit and Risk Committee on 1 September 2021. A number of policies / documents as outlined below were also reviewed and approved, for ratification by the Governing Body.

A number of Information Governance related documents were reviewed and approved for ratification at the Audit and Risk Committee which took place on 14 July 2021. The Committee which took place on 1 September 2021 approved a Business Continuity Policy as well as a draft Bribery Statement which will need to be approved and signed by the Chief Executive Officer for publication on the CCG website.

The work of the Policy Review Group, overseen by the Audit and Risk Committee, is an essential component of our Integrated Care System development and transition programme.

Recommendations	<p>The Governing Body is asked to:</p> <ul style="list-style-type: none"> • Note progress with the policy development and review programme • Note the approval of the Terms of Reference for the Policy Sub Group • Ratify the following new policies / documentation which have been reviewed and approved by sub-committees of the Governing Body for use by the CCG: <ul style="list-style-type: none"> ○ Business Continuity Policy (CORP/006/V1.0) ○ Fair Processing Notice (IG/001/V1.3) ○ Information Governance Management Framework and Strategy (IG/002/V1.3) ○ Individual Rights Policy (IG/0033/V1.2) ○ Individual Rights Requests: Standard Operating Procedure (IG/004/V1.2) ○ Information Governance Staff Handbook (IG/005/V1.1) ○ Confidentiality and Safe Haven Policy (IG/006/V1.1) ○ Information Governance Policy (IG/007/V1.2) ○ Information Governance Incident Management Framework and Reporting Procedure (IG/008/V1.1) • Ratify approval of a draft Bribery Statement (CORP/005/V1.0) which will require final approval and signature by the Chief Executive Officer prior to publication on the CCG website. • Ratify approval of the following updated policy: <ul style="list-style-type: none"> ○ Policies and Procedural Documents: Development and Management Policy (CORP/002/V1.2). 	
Publication	Include on public website ✓	

Please provide details on the impact of following aspects	
Equality and quality impact assessment	Equality Impact Assessments are undertaken on policies which have been identified as having a medium or high impact on people with protected characteristics i.e. the Confidentiality and Safe Haven Policy and Information Governance Policy.
Patient and stakeholder engagement	NA
Financial impact, legal implications and risk	NA

Governance and Reporting- which other meeting has this paper been discussed		
Committee Name	Date discussed	Outcome
Policy Sub Group	12 August 2021	Terms of Reference and policies as listed above were approved
Audit and Risk Committee	1 September 2021	Received update / progress report on the creation of a policy development and review programme as well as policies / documentation which would be submitted to the Governing Body for ratification.

POLICY DEVELOPMENT PROGRAMME

Update Report

INTRODUCTION

Policies and procedural documents are a key component of the Hampshire, Southampton and Isle of Wight CCG corporate governance framework and risk management system, which keep the organisation and its staff safe, protect the same from challenge, reputational damage and claim for redress.

The CCG uses policies and procedures to enable staff working for, and with us, to do so in a way that is efficient, consistent, safe and in keeping with our values, objectives and purpose. The development, approval and monitoring of the use of our policies, also ensures that we meet statutory, legal and insurance requirements as well as best practice in relation to corporate and clinical governance.

As reported to the Governing Body on 28 April 2021, as part of the governance and finance workstreams of the Future Ways of Working Programme, in preparation for the creation of the new organisation, a task was undertaken to collate all policies that were in place across predecessor CCGs with the aim of developing a policy development work programme.

A Policy Sub Group has been established with responsibility for managing the work programme as well as the review and recommendation for approval of policies, guidelines and procedures. The Audit and Risk Committee will have oversight of the Policy Sub Group's activities, and the CCG Governing Body is responsible for the final ratification of policies for use within the CCG. Draft Terms of Reference were approved by the Executive Team meeting of 27 July and then the Policy Sub Group at its inaugural meeting of 12 August and subsequently ratified by the Audit and Risk Committee on 1 September 2021.

Approved policies / documents are published on the CCG website (corporate) or intranet (human resources); a small number have already been ratified for use by the CCG i.e.:

- **Standards of Business Conduct and Managing Conflicts of Interest Policy (CORP/001/V1.1)**, approved by predecessor CCG Audit Committees in Common 16 March 2021 as part of the establishment of the new, merged CCG
- **Policies and Procedural Documents: Development and Management Policy (CORP/002/V1.00)**, approved by Governing Body, 28 April 2021
- **Risk Management Policy (CORP/003/V1.1)**, approved by Audit & Risk Committee, 12 May 2021
- **Emergency Preparedness, Resilience & Response Policy (CORP/004/V1.00)**, approved by Governing Body, 7 July 2021.

DOCUMENTATION FOR RATIFICATION

The Governing Body is asked to ratify the following new documentation which has been reviewed and approved by sub committees for onward ratification by the Governing Body (copies can be found in the Reading Room for information):

Approved by Audit and Risk Committee: 14 July 2021

- **Fair Processing Notice (Privacy Notice) (IG/001/V1.3).** This document details the types of personal data held and processed by the CCG.
- **Information Governance Management Framework and Strategy (IG/002/V1.3).** This framework sets out the approach taken within the CCG for embedding information governance and details the continuous improvements that the CCG is working towards.
- **Individual Rights Policy (IG/003/V1.3)**
- **Individual Rights Requests: Standard Operating Procedure (IG/004/V1.2).** The purpose of this document is to provide detailed guidance on how to process Individual's Rights requests under the UK General Data Protection Regulation (UK GDPR) and Data Protection Act (DPA) 2018 (commonly referred to as the Data Protection Legislation).

Approved by Policy Sub Group 12 August 2021 / noted at Audit and Risk Committee 1 September 2021

- **Information Governance Staff Handbook (IG/005/V1.1).** This document provides a summary of information governance requirements / arrangements that all staff must be aware of.
- **Confidentiality and Safe Haven Policy (IG/006/V1.1).** This policy describes CCG responsibilities under the Data Protection Legislation and ensures all employees abide by the common law duty of confidence and Safe Haven Framework to protect personal confidential data ensuring all staff are informed of their operational and legal responsibilities.
- **Information Governance Policy (IG/007/V1.2).** This policy supports CCG staff in compliance with Data Protection legislation, achieving best practice in the area of Information Governance and in meeting the requirements of the Data Security and Protection Toolkit.
- **Information Governance Incident Management Framework and Reporting Procedure (IG/008/V1.1).** This document identifies the measures taken to ensure that the CCG manages information incidents in a way that meets organisational, NHS and Regulatory Body Requirements.

Approved by Audit and Risk Committee 1 September 2021

- **Business Continuity Policy (CORP/006/V1.0).** This policy outlines the process that the CCG will follow as part of their Emergency Preparedness Resilience and Response resilience arrangements. The intention of this policy is to inform all staff of the legal obligations in relation to business continuity and to establish a proactive culture around resilience.
- **Bribery Statement (CORP/005/V.0).** This document confirms the CCG's commitment to ensuring that all staff are aware of their responsibilities in relation to the prevention of bribery and corruption and that the risk of CCG exposure to acts of bribery is mitigated. The statement will need to be submitted to the Chief Executive Officer for final approval and signature.

Existing documentation that has been reviewed / amended (i.e. previously ratified by the CCG Governing Body)

The Governing Body is asked to ratify the following documentation that has been reviewed and recommended for approval by the Policy Sub Group (a copy can be found in the Reading Room for information):

- **Policies and Procedural Documents: Development and Management Policy (CORP/002/V1.2).** The purpose of this policy is to provide a framework for the development, approval and monitoring of the use of our policies and procedures. The policy was approved

for use by the Governing Body at its meeting of 28 April 2021. Amendments have been made to streamline the policy and policy template in light of recommendations that policies are as short as possible, with elements relating to processes and procedures included in appendices, rather than in the body of the policy

POLICY / DOCUMENTATION DEVELOPMENT SUMMARY

The following is a summary of the numbers and status of the documents currently listed on the initial draft policy / document schedule, a copy of which is available in the Reading Room for information, although please be aware that this is a work in progress.

Status	Number*
Policies / documents approved and ratified for use within the CCG	4
Policies / documents awaiting approval / ratification	10
Predecessor CCG policies / documents overdue for review (not started)	61
Predecessor CCG policies / documents overdue for review (started)	7
Predecessor CCG policies / documents not yet due for review (not started)	15
Predecessor CCG policies / documents not yet due for review but for which work is already underway	2
New policies / documents in draft / in development	0
New policies / documents suggested for future development (by predecessor CCGs)	9
Total	108

*Please note that some of these policies were only in existence in single predecessor CCGs and may not be required.

Where similar policies were in place across multiple CCGs, the review dates given relate to the version which is the most overdue for review. This shows that the majority of policies are now overdue; in most cases this will be because the usual policy review processes were paused due to the imminent CCG merger and then the need to prioritise resource to respond to the COVID-19 pandemic during 2020/21.

Policies are categorised as follows:

- **HR** – there are 17 policies currently listed as overdue for review, 8 not due for review until 2022/23 and 4 where development had been suggested by predecessor CCGs but not yet taken forward. HR have advised that work has been underway for several months to review / develop a suite of HR policies; confirmation has been requested as to when it is expected that these will be submitted for review / approval.
- **Information Governance** – work is most advanced on this category, with a suite of 8 documents being submitted to this Governing Body meeting for ratification. Work is nearing completion for the remaining 5 documents, which will be required for the CCGs Data Security and Protection Toolkit submission
- **IT Security** – there are 20 IT security related policies, only one of which is not overdue for review. The majority of these will need to be adopted by the CCG, with perhaps one or two minor amendments to reflect local arrangements. The Governance Team has requested the current versions from the South Central & West Commissioning Support Unit and Isle of Wight Trust IT teams
- **Corporate** – there are 18 corporate policies currently overdue for review, 6 that have been approved / or are awaiting ratification, 5 not yet due until later this year and 3 that had been suggested by predecessor CCGs but not yet taken forward.

- **Clinical** – there are 5 clinical related policies currently listed as overdue for review, however 4 of these were only in existence in a single predecessor CCG and as such a decision will need to be made as to whether these would be required moving forward. There are also two Continuing Healthcare related policies due for review later this year / early next and one new policy that had been suggested for development by a predecessor CCG in relation to revalidation of Allied Health Professionals who predominantly work for the CCG within the Continuing Healthcare team.
- **Safeguarding** – there are 4 listed as overdue and two that were proposed for development but not finalised.

Authors / subject leads have therefore been requested to review their policies to determine:

- Policies which should be prioritised for review / developed for use by Hampshire, Southampton and Isle of Wight CCG together with anticipated completion date, for example, those which are most out of date for review or where issues may have been identified.
- Policies which may no longer be required, such as those which were only in place for a single predecessor CCG
- New policies which may need to be developed, together with anticipated completion date.

This information has been requested for early September in order to further develop the work programme / policy register in time for the next Policy Sub Group meeting taking place on 23 September.

SUMMARY OF RECOMMENDATIONS

The Governing Body is asked to:

- **Note progress with the policy development and review programme**
- **Note the approval of the Terms of Reference for the Policy Sub Group**
- **Ratify the following new policies / documentation which have been reviewed and approved by sub-committees of the Governing Body for use by the CCG:**
 - **Business Continuity Policy (CORP/006/V1.0)**
 - **Fair Processing Notice (IG/001/V1.3)**
 - **Information Governance Management Framework and Strategy (IG/002/V1.3)**
 - **Individual Rights Policy (IG/0033/V1.2)**
 - **Individual Rights Requests: Standard Operating Procedure (IG/004/V1.2)**
 - **Information Governance Staff Handbook (IG/005/V1.1)**
 - **Confidentiality and Safe Haven Policy (IG/006/V1.1)**
 - **Information Governance Policy (IG/007/V1.2)**
 - **Information Governance Incident Management Framework and Reporting Procedure (IG/008/V1.1)**
- **Ratify approval of a draft Bribery Statement (CORP/005/V1.0) which will require final approval and signature by the Chief Executive Officer prior to publication on the CCG website.**
- **Ratify approval of the following updated policy:**
 - **Policies and Procedural Documents: Development and Management Policy (CORP/002/V1.2).**

*Jackie Zabiela
Governance Manager
1 September 2021*