WEL CCGs IG Training Needs Analysis

Document revision history

Date	Version	Revision	Comment	Author
Nov 2018	V5	Template		NELCSU IG Team
Jan 2020	V.1	Reviewed and tailored for WEL CCG's		IG Complianc e Manager

Table of Contents

1. Introduction

This IG Communications and Training Plan describes how the WEL Clinical Commissioning Groups, comprising of NHS Newham, Tower Hamlets and Waltham Forest CCG's (hereafter 'the organisations') will communicate with staff about the need to complete IG training necessary for their role and responsibilities and provides a high level plan about how the organisations will deliver this training and make use of existing online resources.

The requirement for annual IG training is mandatory, the knowledge and experience staff can gain from completing relevant training contributes to managing risks and may highlight practices and processes which are not fit for purpose.

Alongside the formal training, the organisations will also adopt a pro-active approach to more general IG awareness raising initiatives making use of resources such as the staff newsletter, global emails and the intranet to deliver key messages that will raise the profile of IG within the shared culture of the organisation.

2. Training Needs Analysis

Training needs analysis (TNA) is a process for identifying training and development needs of staff. The TNA is the starting point for all training and is the first step of the training life cycle.

Content

The content of IG training for all staff needs to reflect the content areas of the NHS Digital online Data Security Awareness training module. The table below indicates the sections of the NHS Digital module and verifies they are included in the NELCSU training package.

Content area of NHS Digital online introduction to IG training module	Inclusion in training
Types of data [identifiable, anonymised, corporate]	Included

Key legislation and NHS standards	Included
Data Protection Principles	Included
Caldicott Principles	Included
Common Law Duty of Confidence	Included
Explicit consent and legal requirements to share	Included
Freedom of Information Act	Included
Records / Information Asset Management	Included
Care Records Guarantee	Included
Information Security	Included
Password Management	Included

3. Communication Principals

The aim of this plan is to establish sound principles of communication for the organisations and to ensure that staff understand the structure (communications and training plan, appendix 1) and importance of communication mechanisms in order to create a positive corporate identity by what we do and how we perform, by:

Ensuring all communications make a significant contribution to the organisation's aims and objectives;

Effective communications, at all levels of the organisation that are systematic and consistent. Demonstrating that the organisation values and respects staff expertise and contribution, respects

confidentiality, focuses on strengths and provides appropriate, balanced supervision, appraisal and evaluation;

Communications that are clear and unambiguous, involving, receiving and giving information in a language that all parties understand, and inviting feedback from all staff in an honest and open way;

Communications that are two-way and participative, involving all staff at all levels of the organisation, and demonstrating that lessons learnt are implemented by listening to what others say, embracing best practice, involving staff, seeking experience, learning from comments and complaints, and challenging the 'status quo';

Providing support to all staff through training and practical guidance on key IG issues and risks that are applicable and helpful in the working environment, and avoiding jargon or terminology which staff cannot engage with.

4. Training Principals

Completing IG training is mandatory for all staff and will run on an annual basis.

IG Training will be undertaken via the Learning and Development section on Workforce. This will be the default approach and is the mandated training required to be completed.

Four face to face training sessions will also be available and provided by NELCSU which will managed through Workforce and will be equivalent to completing the e-learning module on Workforce.

NHS Digital Online Data Security Awareness training

- Where there is a preference for online training, the new NHS Digital online Data Security Awareness training can be completed. This will log completion results using the national OLM tool. The new online training can be found at https://www.e-lfh.org.uk

Workforce IG training module

- CCG's who purchase the CSU Workforce system have access to the Workforce IG training module.
- The certificate for the Workforce training module cannot be accessed until the test has been completed and passed.

- No further logon is needed other than the Workforce logon to access the Workforce IG training module.

Face to face delivery of IG training

- CCG's will need to arrange the date of training in discussion with their IG Compliance Manager (CM), book suitable accommodation for the training to take place, and advise their CM of the maximum capacity the location can accommodate.

- The Workforce system will only allow a default capacity of 10 delegates on the training session - once 10 delegates have registered no further bookings will be accepted by the system.

- Compliance Managers must confirm the date, time, location, trainer and maximum number of delegates to ensure efficient processing of the training. This will then be published and made available via Workforce.

- CCG's must promote the course to their staff to register on the course.

- The CM must accurately record attendance at face to face training sessions. Attendees must sign against their name to prevent attendance fraud. Delegates must complete the register with their email address. Where delegates arrive who have not registered for the training through Workforce and we do not have a contact email address, their training may not contribute to the organisation's training compliance score.

- Delegates must logon to Workforce and complete a course assessment form. This will release their training certificate which can be downloaded from Workforce. Until they have completed the assessment form their training will not count towards their organisation's training compliance score.

- Training compliance scores are reported to client IGSG meetings.

- If the correct process for completion of the online Workforce IG training module and the online training are followed where these methods have been used then the compliance reports will reflect the correct compliance score for all three routes of training compliance.

New starters must complete their IG training requirements (see Induction Checklist with New Starter form) before being given access to any information assets other than the assets required to complete their IG training.

Current staff requesting new IT assets such as laptops, USB sticks, smart phones etc. must complete their IG training before being given any new IT assets requested.

Existing current staff with access to IT assets should complete their IG training by the end of March each year.

The SIRO, Caldicott Guardian, Information Asset Owners and staff with specialist IG/IT responsibilities will also undertake specialist training as necessary. Staff with key Registration Authority support responsibilities will in addition undertake Registration Authority training.

Based on their responsibilities and roles and required training needs outcomes, other staff may be required to undertake additional training as necessary.

Line managers who grant access to third parties to access and use the information assets of the organisation must assure themselves of IG awareness and culture of these third parties before allowing future and continued access to IT assets.

Quarterly monitoring and reporting of uptake and completion of IG training will be provided to the Information Governance Steering Group for management and governance purposes. The IGSG will also be responsible for highlighting under-performing areas to the relevant Director so that those concerned can be reminded of their training responsibilities.

Communication and Training plan

A dated plan for the dissemination of communications and training is in Appendix 1, which delivers training to a three level plan:

Level 1: Identify all staff who have not completed their IG training since January and issue communications materials directing them to the training and the support resources available from the IG Team.

Level 2: for those staff who have completed their training since January, implement a timetabled 'reminder' system and communications materials that ensure this group maintain their training requirement.

Level 3: Targeted IG training for staff with specific roles and responsibilities supported by appropriate communications materials indicating which modules they need to complete and the support available from the IG Team.

5. Legal Compliance

GDPR, Data Protection Act 2018 and common law duty of confidentiality

The organisations will comply with their Data Protection responsibilities and only use customer and corporate information for the purposes defined and agreed either through contract or described on their Privacy Notice. All staff, through completion of the relevant IG training, will contribute to managing the risks associated with having access to patient confidential or corporate-sensitive information and will have an enhanced appreciation of their data protection and confidentiality responsibilities. Staff will be further supported by having access to relevant IG policies and a Confidentiality Code of Conduct setting out key responsibilities.

Freedom of Information

The organisations support the concept of the Freedom of Information Act 2000 and will be open in publicising and releasing information in compliance with the Law; i.e.:

- Publish and maintain a Publication Scheme, via the organisation's internet site;
- Ensure that information covered by the Act is available within the specified 20 working days of receipt of request;
- Publicise the ways in which the public can access information covered by the Act; and
- Provide assistance to those requesting information to help them to clarify their requirements, to identify and locate the necessary information.

Queries and points of contact

Where a member of staff requires assistance on issues relating to the Data Protection and Freedom of Information Acts, the first point of contact will be the Information Governance Team and the FOI Team.

6. Internal Methods of Communication

Internal Communications objectives are as follows:

- To continue to inform staff about information governance related developments within the organisation and the wider NHS, to enable them to perform their roles as effectively as possible;
- To involve staff in the development of the organisation's information governance awareness raising, communications and training initiatives;
- To provide opportunities to consult with staff and for them to express their views and offer ideas and suggestions on the IG agenda within the organisations;
- To ensure that staff take responsibility for their IG related training and development needs recognising when they need to call upon additional support where necessary;
- To ensure that staff are representing the organisations in a consistent way, with an awareness of shared goals and receiving the same key IG messages; and
- To encourage openness and honesty and to ensure that staff receive and exchange information quickly and easily, including where they identify IG risks or in the reporting of IG incidents.

The key methods of Internal Communications are as follows:

Communication Channel	Aim
Articles in staff newsletters	- To reach the majority of the organisation's staff to give basic briefs and more detailed articles on current issues/initiatives. - All such publications are to be of a consistently high standard (e.g. printing, copy etc.).
Global Email	- To reinforce key messages and important updates. - To raise awareness of more comprehensive articles / issues in staff newsletters / intranet. - If information sent by email is intended to reach 'all staff', the text should include a request to share with staff without email access.

Targeted Email	• To senior managers advising them of performance or seeking advice/feedback on planned initiatives or ideas.
Intranet	• To continue with the development of the intranet for internal staff to provide access to policies, procedures, presentations, recent news and guidance to staff.
Training	• Organisations to provide Induction, statutory and mandatory and ad hoc training as required. • To promote e-learning as the key vehicle to deliver training.

Other methods of Internal Communications are as follows:

- Open staff meetings;
- Service/department meetings;
- Management briefings;
- Appraisals;
- Events/Open Days;
- Corridor/staff room notice boards; and
- Staff surveys.

7. Evaluation

Completion of information governance training will be monitored via the on line Administrator profile of the Workforce tool. Regular communications to managers and staff will be sent to update on progress in completing the IG training.

Evaluating IG related awareness raising communications is an important part of being a learning organisation. This will be achieved through the Staff Survey, annual specific communications surveys and staff will be encouraged to feedback on an ad hoc basis to the Information Governance Lead.

Feedback on the plan itself or on any communications issues please email nelcsu.information-governance@nhs.net

8. Monitoring and compliance

Compliance to this plan will be monitored. Staff are mandated to complete Information Governance training as part of their contractual obligations. The level of staff compliance is reported externally via the Data Security and Protection Toolkit annual self-assessment and an audit undertaken on the level of assurance provided by the submitted evidence. Appendix one shows how the organisation will implement and monitor staff compliance.

Monitoring of compliance

Compliance with all aspects of Information Governance will be undertaken as part of the Information Governance work plan or at the direction of the CCG IG Steering Group, Senior Information Risk Owner, Data Protection Officer or Caldicott Guardian.

Non Compliance

Failure to comply with the standards and appropriate governance of information as detailed in this plan and supporting communications as set out in Appendix One can result in disciplinary action. All staff are reminded that Information Governance covers several aspects of legal compliance that as individuals they are responsible. Failure to maintain these standards can result in criminal proceedings against the individual.

These include but are not limited to:

- GDPR and Data Protection Act 2018
- Freedom of Information Act 2000
- Computer Misuse Act 1990
- Common law duty of confidentiality
- Human Rights Act 1998
- NHS Act 2006
- Health and Social Care Act 2012
- Care Act 2014

This is not an exhaustive list of legislation which interacts with Information Governance requirements, for advice on other legal obligations specific to work area contact the IG team: nelcsu.information-governance@nhs.net.

9. Review

Review will take place every three years or earlier until rescinded or superseded, due to legal or National Policy changes.

The audience of this document should be aware that a physical copy may not be the latest version. The latest version, which supersedes all previous versions, is available in the policy register for the organisation. Those to whom this plan applies are responsible for familiarising themselves periodically with the latest version and for complying with policy and procedure requirements at all times.

10. Implementation and dissemination of this document

The updated document, once approved by the IG Steering Group, will be shared with all staff through an emailed and physical staff briefing to support this dissemination and updated on the intranet.

Awareness will be checked through a staff survey and spot checks on at least an annual basis.

Appendix 1: Information Governance Communication and Training Plan

Introduction

In line with the Department of Health's guidance all staff should receive annual basic IG training appropriate to their role through an online NHS Digital Data Security Awareness Training Tool. This training will support and build on the IG Awareness raising materials that will be issued on a regular basis. This plan has been developed to ensure that the IG Training is implemented through a variety of approaches including:

- E-learning
- Targeted Departmental Training
- Facilitated sessions
- IG Training Management

Delivery Method	Implementation Plan	By when	Progress
Individual E learning modules	- Implement communication through staff induction - Develop clear guidelines on 'how to' access e- learning modules - Offer support where appropriate	May each year	January each year
Facilitated Session	- Design facilitated workshop sessions material - Arrange dates / venues - Communicate to staff	June each year	February each year
IG Training Management	- Master spread sheet developed - Reporting processes implemented - Filing completed assessment forms - Reminder E-mails - Cross communications with HR - Certificates stored	April each year	October each year and January each year

Appendix 2: Workforce IG Training Tool Module
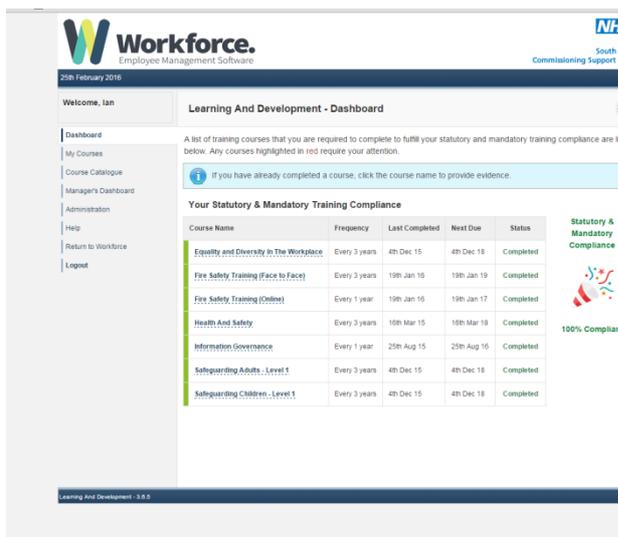
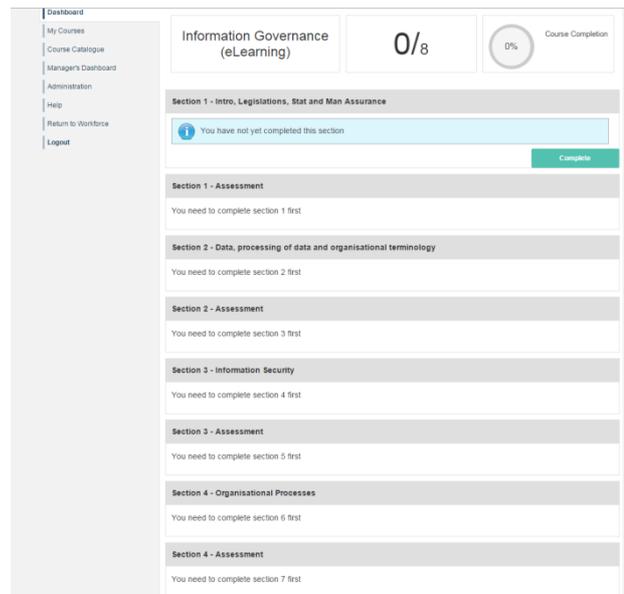https://secsu.nhsworkforce.org/applications/elearning/

1: Log onto Workforce:
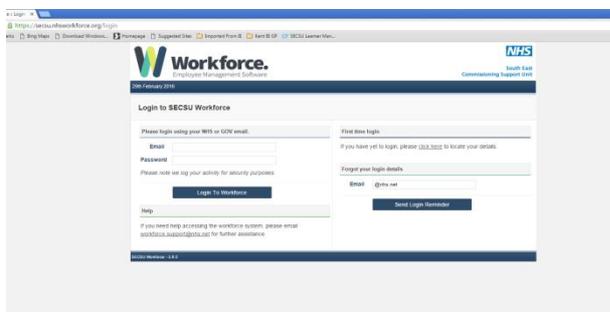
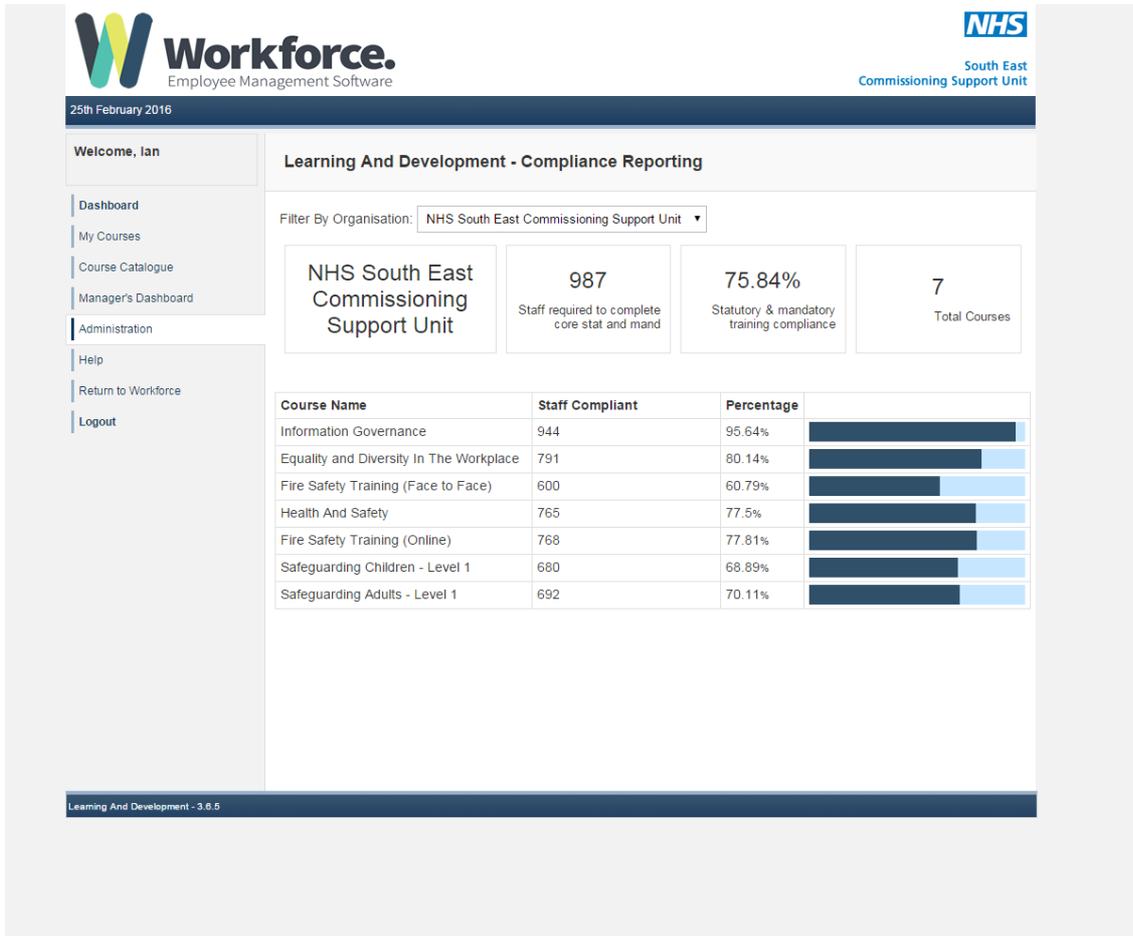2: Click on the "Learning and Development link

3: Click on the Information Governance course

4: Complete the four training sections

Taking into account staff on long term leave, we must achieve 95% compliance