

APPENDIX C

Committee & Sub- Group Terms of Reference

1. Quality Committee
2. Health & Safety Group
3. Information Governance Steering Group



NHS Humber and North Yorkshire Integrated Care Board Quality Committee Terms of Reference

Terms of Reference:	HNY ICB Quality Committee
Authorship:	Executive Director of Nursing and Quality
Board / Committee Responsible for Ratifying:	Integrated Care Board
Approved Date:	14 June 2023
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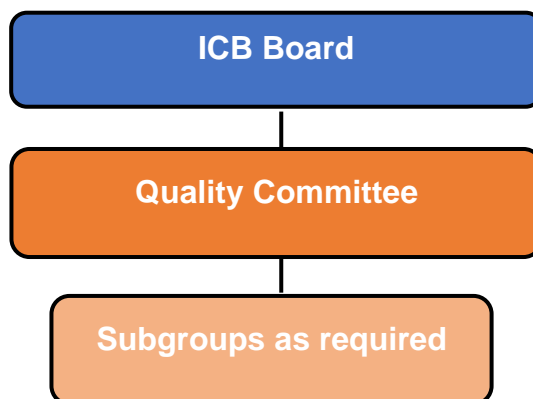
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1. Governance

The Quality Committee (the Committee) is established by the Integrated Care Board (the Board) as a Committee of the Board in accordance with its Constitution.

These Terms of Reference (ToR), which must be published on the ICB website, set out the membership, the remit, responsibilities and reporting arrangements of the Committee and may only be changed with the approval of the Board who it is accountable to.

The Committee is an independent non-executive chaired committee of the Board, and its members are bound by the Standing Orders and other policies of the ICB.



2. Authority

The Quality Committee is a formal committee of the ICB. The Board has delegated authority to the Committee as set out in the Scheme of Reservation and Delegation (SoRD) and Operational Scheme of Delegation (OSD), where appropriate, which may be amended from time to time.

The Quality Committee is authorised by the Board to:

- Investigate any activity within its terms of reference;
- Seek any information it requires within its remit, from any employee or member of the ICB (who are directed to co-operate with any request made by the Quality Committee) within its remit as outlined in these terms of reference;
- Commission any reports it deems necessary to help fulfil its obligations;
- Obtain legal or other independent professional advice and secure the attendance of advisors with relevant expertise if it considers this is necessary to fulfil its functions. In doing so the Quality Committee must follow any procedures put in place by the ICB for obtaining legal or professional advice;
- Create task and finish sub-groups in order to take forward specific programmes of work as considered necessary by the Quality Committee members. The Quality Committee shall determine the membership and terms of reference of any such task and finish sub-groups in accordance with the ICB's constitution, standing

orders and Scheme of Reservation and Delegation (SoRD) but may not delegate any decisions to such groups.

- For the avoidance of doubt, the Quality Committee will comply with, the ICB Standing Orders, Standing Financial Instructions, OSD and the SoRD.

3. Purpose

The Quality Committee has been established to provide the ICB with assurance that is delivering its functions in a way that secures continuous improvement in the quality of services, against each of the dimensions of quality set out in the Shared Commitment to Quality and enshrined in the Health and Care Act 2021. This includes reducing inequalities in the quality of care.

The Committee exists to scrutinise the robustness of, and gain and provide assurance to the ICB, that there is an effective system of quality governance and internal control that supports it to effectively deliver its strategic objectives and provide sustainable, high-quality care.

The Committee will provide regular assurance updates to the ICB in relation to activities and items within its remit.

The duties of the Quality Committee will be driven by the organisation's objectives and the associated risks. An annual programme of business will be agreed before the start of the financial year; however, this will be flexible to new and emerging priorities and risks.

4. Responsibilities of the Committee

The Quality Committee duties can be categorised as follows:

It is expected that the Quality Committee will:

- Be assured that there are robust processes in place for the effective management of quality including ensuring that mechanisms are in place to ensure Equality, Quality and other relevant impact assessments are undertaken within the ICB and ICS
- Scrutinise structures in place to support quality planning, control, and improvement, to be assured that the structures operate effectively, and timely action is taken to address areas of concern.
- Agree and put forward the key quality priorities that are included within the ICB strategy/ annual plan, including priorities to address variation/ inequalities in care
- Oversee and monitor delivery of the ICB key statutory requirements
- Review and monitor those risks on the BAF and Corporate Risk Register which relate to quality, and high-risk operational risks which could impact on care.
- Ensure the ICB is kept informed of significant risks and mitigation plans, in a timely manner

- Oversee and scrutinise the ICB's response to all relevant (as applicable to quality) Directives, Regulations, national standard, policies, reports, reviews, and best practice as issued by the DHSC, NHSEI and other regulatory bodies / external agencies (e.g, CQC, NICE) to gain assurance that they are appropriately reviewed and actions are being undertaken, embedded and sustained.
- Maintain an overview of changes in the methodology employed by regulators and changes in legislation/regulation and assure the ICB that these are disseminated and implemented across all sites
- Oversee and seek assurance on the effective and sustained delivery of the ICB Quality Improvement Programmes
- Ensure that mechanisms are in place to review and monitor the effectiveness of the quality of care delivered by providers and place for children and adults
- Receive assurance that the ICB identifies lessons learned from all relevant sources, including, incidents, never events, complaints and claims and ensures that learning is disseminated and embedded
- Receive assurance that the ICB has effective and transparent mechanisms in place to monitor mortality and that it learns from death (including coronial inquests and PFD report) for children and adults
- To be assured that people drawing on services are systematically and effectively involved as equal partners in quality activities
- Scrutinise the robustness of the arrangements for and assure compliance with the ICB's statutory responsibilities for:
 - High quality, safe services
 - Safeguarding Adults and Children
 - Child Death Reviews
 - Infection Prevention and Control
 - Equality and Diversity as it applies to people drawing on services
 - Medicines Optimisation and Safety
 - Mental Capacity Act and Deprivation of Liberty Safeguards (LPS when takes effect).
 - Maternity Services
 - Population Health
 - Others as determined by the Chair of the Committee
- Have oversight of and approve the Terms of Reference and work programmes for the groups reporting into the Quality Committee
- Comment on and contribute to the Terms of Reference and work programmes of other system groups of relevance to the Committee e.g., Safeguarding Boards
- Approve ICS Quality Policies within the remit of the Quality Committee
- Approve ICB clinical policies and clinical pathways.

5. Chair, Membership and Attendance

Chair and Vice Chair

The Quality Committee will be chaired by an Independent Non-Executive Member of the Board approved on account of their specific knowledge skills and experience making them suitable to chair the Committee.

In the event of the Chair of the Quality Committee being unable to attend all or part of the meeting, the Vice Chair will be appointed to Chair the meeting.

In the absence of the chair or vice-chair, the remaining members present shall elect one of their members to chair the meeting.

The Chair will be responsible for agreeing the agenda and ensuring matters discussed meet the objectives as set out in these ToR.

Membership

The Quality Committee members shall be approved by the Board in accordance with the ICB Constitution.

Core Membership

The Board will approve no fewer than four members including one who is an Independent Non-Executive Member of the Board. Other attendees of the Committee need not be members of the Board, but they may be.

When determining the membership of the Committee, active consideration will be made to equality, diversity, and inclusion.

Core Membership comprises:

- Independent Non-Executive Director (Chair) from the ICB
- Independent Non-Executive Director / Deputy Director from a provider (Board Advisor)
- ICB Executive Director of Nursing and Quality (Vice Chair)
- ICB Executive Director of Clinical and Professional Services.
- 2 x lay members with lived experience (e.g Healthwatch, patient safety partners)

Other members include:

- Place based quality lead from each HNY Place – Place Nurse Director
- 1 acute provider representative – an Executive Director with responsibility for Quality sourced via the Collaborative of Acute Providers
- 1 primary care representative, nominated by the primary care PCN
- 1 mental health provider representative - an Executive Director with responsibility for Quality sourced through Mental Health collaborative
- 1 community provider representative - an Executive Director with responsibility for Quality sourced through Community and Care Collaborative

- 1 ambulance provider representative - YAS / EMAS Director or Deputy Director with responsibility for Quality
- local authority lead- one Director of Adult Social Care and one Director of Children's Services (different to those LA representatives on the SQG)

Attendees

Officers may request or be requested to attend the meeting when matters concerning their responsibilities are to be discussed or they are presenting a paper.

Other individuals may be requested to attend the meeting when matters concerning their responsibilities are to be discussed or they are presenting a paper

The Chair may ask any or all of those who normally attend, but who are not members, to withdraw to facilitate open and frank discussion of particular matters.

6. Meeting Quoracy and Decisions

Frequency

The Quality Committee will meet no less than 6 times per year and arrangements and notice for calling meetings are set out in the Standing Orders. Additional meetings may take place as required at the discretion of the Committee Chair.

The Board, Chair or Chief Executive may ask the Quality Committee to convene further meetings to discuss particular issues on which they want the advice of the Quality Committee.

In accordance with the Standing Orders, the Quality Committee may meet virtually when necessary and members attending using electronic means will be counted towards the quorum.

Quorum

The Committee will be quorate when at least four members of the Committee are present to include at least:

- Chair or Vice Chair
- 1 x Director of Nursing and Quality or Executive Director of Clinical and Professional Services
- One provider representative and
- One Local Authority representative.

Where members are unable to attend, they should ensure that a named and briefed deputy is in attendance who is able to participate on their behalf.

If any member of the Committee has been disqualified from participating in an item on the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.

If the quorum has not been reached, then the meeting may proceed if those attending agree, but no decisions may be taken.

7. Decision Making and Voting

Decisions will be taken in accordance with the Standing Orders. The Committee will ordinarily reach conclusions by consensus. When this is not possible the Chair may call a vote.

Only members of the Committee may vote. Each member is allowed one vote and a majority will be conclusive on any matter.

Where there is a split vote, with no clear majority, the Chair of the Committee will hold the casting vote.

If a decision is needed which cannot wait for the next scheduled meeting, the Chair may conduct business on a 'virtual' basis through the use of telephone, email or other electronic communication.

8. Behaviours and Conduct and ICB values

Members will be expected to conduct business in line with the ICB values and objectives. Members of, and those attending, the Committee shall behave in accordance with the ICB's Constitution, Standing Orders, and Code of Conduct and Behaviours.

Equality and diversity

Members must demonstrably consider the equality and diversity implications of decisions they make.

9. Accountability and Reporting Arrangements

The Quality Committee is accountable to the Board and shall report to the Board on how it discharges its responsibilities.

The minutes of the meetings shall be formally recorded by the secretary and submitted to the Board in accordance with the Standing Orders.

The Chair of the Quality Committee will provide assurance reports to the Board (Public Session) after each meeting and provide a report on assurances received, escalating any concerns where necessary and shall draw to the attention of the Board any issues that require disclosure to the Board or require action.

The Committee will advise the Audit Committee on the adequacy of assurances available and contribute to the Annual Governance Statement.

The Committee may refer matters to other ICB Committees and Groups as it sees necessary to fulfil its duties.

The Committee will receive scheduled assurance report from its delegated groups and the approved minutes of the System Quality Group. Any delegated groups would need to be agreed by the Board through these Terms of Reference. The groups for the Quality Committee are:

- Place Quality Groups
- ICS Safeguarding Groups; and
- others as determined by the Quality Committee

10. Secretariat and Administration

The Committee shall be supported with a secretariat function which will include ensuring that:

- The agenda and papers are prepared and distributed in accordance with the Standing Orders having been agreed by the Chair with the support of the relevant executive lead.
- Attendance of those invited to each meeting is monitored and highlighting to the Chair those that do not meet the minimum requirements.
- Records of members' appointments and renewal dates and the Board is prompted to renew membership and identify new members where necessary.
- Good quality minutes are taken in accordance with the standing orders and agreed with the chair and that a record of matters arising, action points and issues to be carried forward are kept.
- The Chair is supported to prepare and deliver reports to the Board.
- The Committee is updated on pertinent issues/ areas of interest/ policy developments including providing members with assurance that due process has been followed.
- Action points are taken forward between meetings and progress against those actions is monitored.

11. Virtual Meetings / Recording of Meetings/Storage of 'chat' text

Before starting a recording, the Chair is legally required to inform attendees if the meeting is being recorded and / that the purpose of the recording is as an administrative tool to support the provision of clear and accurate minutes. The recording is only retained for the period of drafting the minutes and then subsequently deleted from all systems. No person admitted to a meeting of the

Committee will be permitted to record the proceedings in any manner without written approval from the Chair.

'Chat' text from the meeting will be saved, following the meeting, in support of the formal minutes. The file will be saved alongside the formal minutes of the meeting.

12. Declarations of Interest / Conflicts of Interest

Conflicts of interest will be managed in accordance with the ICBs policies and procedures. All committee members and attendees must adhere to the ICB's Constitution and Conflicts of Interest policies. Where the Chair or a member, or attendee, of the committee believes that they have any actual or perceived conflicts of interest in relation to one or more agenda items, they must declare this at the beginning of the meeting wherever possible, and always in advance of the agenda item being discussed. It will be responsibility of the Chair to decide how to manage the conflict and the appropriate course of action.

Any interests which are declared at a meeting must be included within the minutes of the meeting, the individual with the conflict must ensure that the interest is added (if not already the case) to their declaration as soon as is practicable following the meeting.

13. Review

The Committee will review its effectiveness at least annually and complete an annual report submitted to the Board.

These terms of reference will be reviewed at least annually and more frequently if required. Any proposed amendments to the terms of reference will be submitted to the Board for approval.

The Committee will utilise a continuous improvement approach in its delegation and all members will be encouraged to review the effectiveness of the meeting at each sitting.

END.

**NHS Humber and North Yorkshire
Integrated Care Board
Health and Safety Group
Terms of Reference**

June 2023

Terms of Reference:	Health and Safety Group
Authorship:	Executive Director of Corporate Affairs
Board / Committee Responsible for Ratifying:	ICB Board
Approved Date:	June 2023
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ICB HEALTH AND SAFETY (H&SG) TERMS OF REFERENCE

1. CONSTITUTION

- 1.1. NHS Humber and North Yorkshire integrated Care Board (HNY ICB) has a statutory duty to protect employees at work, patients, the general public and other people who may be affected by the organisation's undertakings in the widest sense, through the means of a formal framework, robust practices and procedures for Health and Safety. The Health and Safety Group (H&SG) is established by the ICB Board in accordance with the Constitution and Scheme of Reservation and Delegation.

2. PURPOSE

- 2.1. NHS HNY ICB Health & Safety Group will support the ICB to fulfil its statutory duty to ensure safeguards are in place to protect its employees and visitors to the ICB. The purpose of the group is to oversee and drive the broader Health and Safety agenda and the implementation of the Humber and North Yorkshire Integrated Care Board Health and Safety Framework, including identifying lines of accountability to ensure that health and safety practices and procedures are embedded at Place and throughout ICB.
- 2.2. The Group supports the organisation in complying with The Health & Safety at Work Act 1974 (and subsequent health and safety legislation).

3. ACCOUNTABILITY

- 3.1. The NHS HNY ICB Health & Safety Group is accountable to the Board via the Executive Director of Corporate Affairs and will provide assurance to the Audit committee that effective Health and Safety best practice mechanisms and controls are in place within the organisation. This will be achieved by the monitoring of key areas in relation to Health and safety legislation, which will be set out in the H&SG workplan.

4. AUTHORITY

- 4.1. The Group is appointed to ensure effective implementation of the ICB Health and Safety policies and to investigate any activity within its terms of reference. The Group may seek any information it requires from any employee or persons carrying out work on behalf of the ICB. All employees or persons working on behalf of the ICB are directed to co-operate with any request made by the Group.
- 4.2. The Group may co-ordinate and implement activities in line with these terms of reference, as part of the Health and Safety work programme.



- 4.3. The Group may seek independent assurance or other expert advice, as necessary, in order to meet its objectives.
- 4.4. Meetings shall be administered in accordance with the ICB's Constitution, Standing Orders and other relevant frameworks.

5. REPORTING ARRANGEMENTS

- 5.1. The minutes and papers from this meeting will not be made available to the public or included in the ICB Publication Scheme. Any formal request for these minutes and papers will, however, be considered under the Freedom of Information Act 2000.

6. MEMBERSHIP

- 6.1. The Membership of the Group is listed at Appendix 1.

7. APPOINTMENT OF CHAIR

The Group will be chaired by the Executive Director of Corporate Affairs.

8. QUORACY

- 8.1. The quorum for meetings shall be at least three members including the Chair, Deputy Chair.
- 8.2. If a quorum has not been reached, then the meeting may proceed if those attending agree but the notes should indicate this, and no decisions may be taken by the non-quorate meeting of the Group.
- 8.3. If any member of the Group has been disqualified from participating in an item on the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.

9. DECISION MAKING AND VOTING

- 9.1. The Health and Safety Group has delegated powers of approval in accordance with the Scheme of Reservation and Delegation/ delegated limits of its members and may take decisions on operational matters relating to Health and Safety.
- 9.2. The Group will make recommendations to the ICB Executive Committee on any strategic policies relating to Health and Safety and will provide assurance on compliance to the ICB Audit committee on relevant areas.

10. ATTENDANCE

- 10.1. The Chair of the Group may invite other officers of the ICB, to attend the group, as appropriate.



- 10.2. All members of this group are required to give attendance at this meeting high priority. If they are unable to attend a meeting, any apologies are expected prior to the meeting and a named deputy should attend for continuity purposes.
- 10.3. Attendance will be monitored throughout the year and any concerns raised with the Chair and relevant Member
- 10.4. Other employees may be requested to attend all or part of the meeting in relation to specific topics or the requirement to ensure implementation of appropriate information governance practices and procedures.

11. MEETINGS

- 11.1. The Group shall meet quarterly and on other such occasions as agreed by the Chair. Meetings will be aligned where possible after Place based H&S meetings to enable updates / assurance to the ICB H&S group.
- 11.2. There may be a requirement to meet more frequently, for example, to assure the organisation response after review of a staff related Incident being reported under RIDDOR regulations to the Health and Safety Executive. This will be at the discretion of the Executive Director for Corporate Affairs.
- 11.3. Virtual meetings / recording of meetings are permitted under the ICB Constitution and Standing Orders, subject to the approval of the Chair. The Chair is legally required to inform attendees if the meeting is being recorded and that the purpose of the recording is as an administrative tool to support the provision of clear and accurate minutes. The recording is only retained for the period of drafting the minutes and then subsequently deleted from all systems. No person admitted to a meeting of the Committee will be permitted to record the proceedings in any manner without agreement from the Chair.

12. DECLARATIONS OF INTEREST / CONFLICTS OF INTEREST

- 12.1. Conflicts of interest will be managed in accordance with the ICBs policies and procedures. All committee members and attendees must adhere to the ICB's Constitution and Conflicts of Interest policies. Where the Chair or a member, or attendee, of the committee believes that they have any actual or perceived conflicts of interest in relation to one or more agenda items, they must declare this at the beginning of the meeting wherever possible, and always in advance of the agenda item being discussed. It will be responsibility of the Chair to decide how to manage the conflict and the appropriate course of action.
- 12.2. Any interests which are declared at a meeting must be included within the minutes of the meeting, the individual with the conflict must ensure that the interest is added (if not already the case) to their declaration as soon as is practicable following the meeting.



13. CONFIDENTIALITY, BEHAVIOURS AND STANDARD OF BUSINESS CONDUCT

- 13.1. Members will be expected to conduct business in line with the ICB values and objectives.
- 13.2. The Group will conduct its business in accordance with the codes of conduct set out within the ICB Constitution. All members and attendees will adhere to established standards of business confidentiality.
- 13.3. Members of, and those attending, the Group shall behave in accordance with the ICB's Constitution, Standing Orders, and Code of Conduct and Behaviour policy.

14. REMIT

The H&SG Group will support the Executive Director for Corporate Affairs in discharging delegations under the ICBs Constitution (Scheme of Reservations and Delegations and Standing Orders) including:

- Review ICB Health and Safety policies, systems and procedures advising on strategy and policy decisions and monitoring compliance.
- To encourage a system wide approach to H&S fostering and strengthening the relationship with Place based Health and Safety groups, reducing duplication and ensuring effective communications and engagement approaches are in place for local implementation.
- Agree and monitor the H&S workplan and improvement plans.
- Receive update reports in relation to workplan and improvement plans, identifying and mitigating any associated risks.
- Review audit findings and ensure robust plans are in place to address recommendations.
- Receive and review actions from incident reports particularly RIDDOR reportable incidents.
- Receive and agree the annual H&S report.
- Ensure sufficient H&S capacity within the ICB including appointed and competent person(s).

15. EQUALITY AND DIVERSITY

Members must demonstrably consider the equality and diversity implications of decisions they make.

16. SECRETARIAT AND ADMINISTRATION



The Group shall be supported by the Corporate Affairs team which will include ensuring that:

- The agenda and papers are prepared and distributed having been agreed by the Chair with the support of the ICB Appointed person.
- All papers for submission to the group are to be submitted to the support administrator at least 7 working days ahead of the meeting.
- The papers to be distributed to group members 5 working days ahead of the meeting.

17. REVIEW

The Terms of Reference will be reviewed not less than annually and submitted to the ICB Board for approval as necessary.

18. REPORTING

The Chair of the group will provide assurance reports periodically to the Executive committee and Audit Committee and shall draw to the attention of the relevant committee any issues that require disclosure/ escalation to the Board or require action.

19. SUB-GROUPS

The Health and Safety Group will be supported by the work of the Place based Health and Safety groups, which will be held at a sub geography level (Hull/ East Riding, North/ Northeast Lincolnshire and North Yorkshire/ York). These group's will take their membership from across the relevant ICB Corporate and Place teams.



APPENDIX 1

ICB HEALTH AND SAFETY GROUP MEMBERSHIP

Membership of the group shall be:

- Executive Director Corporate Affairs (Chair)
- Deputy Director of Legal and Regulatory functions or Head of Regulatory Functions (Vice Chair)
- Risk Assurance and Safety Lead - Appointed person
- Responsible Person from Sub system/ Place based H&S Groups
- ICB Staff side representation
- ICB Human resources representation
- ICB Communications and Engagement representative
- ICB EPRR Team representative
- ICB Finance representative
- ICB Nursing & Quality representative
- ICB Clinical and Professional representative
- Any other specialist adviser, who may be invited to attend meetings from time to time, as agreed by the chair in consultation with members of the Group.

**NHS Humber and North Yorkshire
Integrated Care Board
Information Governance Group
Terms of Reference**

June 2023

Terms of Reference:	Information Governance Group
Authorship:	Executive Director of Corporate Affairs/ SIRO
Board / Committee Responsible for Ratifying:	ICB Board
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Review Date:	June 2027
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ICB INFORMATION GOVERNANCE GROUP (IGG) TERMS OF REFERENCE

1. CONSTITUTION

- 1.1. Information Governance & Security is the discipline, which, through the means of a formal framework, robust practices and procedures for handling personal confidential and corporately sensitive information is implemented. The Information Governance Group (IGG) is established by the ICB Board in accordance with the Constitution and the Scheme of Reservation and Delegations.

2. PURPOSE

- 2.1. The Information Governance Group will be the organisation's forum to support and embed the broader information governance agenda. The purpose of the group is to oversee and drive the broader Information Governance agenda and the implementation of the Humber and North Yorkshire Integrated Care Board (HNYICB)'s Information Governance Framework, including identifying lines of accountability to ensure that information governance practices and procedures are embedded at Place and throughout ICB.
- 2.2. The Group supports the organisation in complying with Data Protection legislation.

3. ACCOUNTABILITY

- 3.1. The IGSG is accountable to the ICB Board via the Executive Director for Corporate Affairs/ Senior Information Responsible Officer (SIRO) and will provide Audit Committee (AC) with the assurance that effective information governance best practice mechanisms and controls are in place within the organisation. This will be achieved by the monitoring of key areas in relation to information governance legislation, which will be set out in the IGG workplan.

4. AUTHORITY

- 4.1. The Group is appointed to ensure effective implementation of the ICB Information Governance framework and policies and to investigate any activity within its terms of reference. The Group may seek any information it requires from any employee or persons carrying out work on behalf of the ICB. All employees or persons working on behalf of the ICB are directed to co-operate with any request made by the Group.
- 4.2. The Group may co-ordinate and implement activities in line with these terms of reference, as part of the Information Governance work programme, which shall be approved by the ICB Executive Committee.



- 4.3. The Group may seek independent assurance or other expert advice, as necessary, in order to meet its objectives.
- 4.4. Meetings shall be administered in accordance with the ICB's Constitution, Standing Orders and other relevant frameworks.

5. REPORTING ARRANGEMENTS

- 5.1. Action notes will be maintained, and a summary of decisions submitted to the ICB Board.
- 5.2. The minutes and papers from this meeting will not be made available to the public or included in the ICB Publication Scheme. Any formal request for these minutes and papers will, however, be considered under the Freedom of Information Act 2000.

6. MEMBERSHIP

- 6.1. The Membership of the Group is listed at Appendix 1.
- 6.2. Representation is required from Place.

7. APPOINTMENT OF CHAIR

- 7.1. The Group will be chaired by the Executive Director for Corporate Affairs/ SIRO.

8. QUORACY

- 8.1. The quorum for meetings shall be at least four members including either the Chair, Deputy Chair or the Senior Information Governance Manager, either a Place SIRO, Caldicott Guardian or Data Protection Officer and 2 other Place representatives.
- 8.2. If a quorum has not been reached, then the meeting may proceed if those attending agree but the notes should indicate this, and no decisions may be taken by the non-quorate meeting of the Group.
- 8.3. If any member of the Group has been disqualified from participating in an item on the agenda, by reason of a declaration of conflicts of interest, then that individual shall no longer count towards the quorum.
- 8.4. If the quorum has not been reached, then the meeting may proceed if those attending agree, but no decisions may be taken.

9. DECISION MAKING AND VOTING

- 9.1. The Information Governance Group has delegated powers of approval in accordance with the Scheme of Reservation and Delegations/ delegated limits of its members and may take decisions on policy and operational matters



relating to information governance.

- 9.2 The Group will make recommendations to the ICB Board on any strategic policies relating to information law and will provide assurance on compliance with information law to the ICB Board/ Audit Committee on relevant areas.

10. ATTENDANCE

- 10.1. The Chair of the Group may invite other officers of the ICB, to attend the group, as appropriate.
- 10.2. All members of this group are required to give attendance at this meeting high priority. If they are unable to attend a meeting, any apologies are expected prior to the meeting and a named deputy should attend for continuity purposes.
- 10.3. Attendance will be monitored throughout the year and any concerns raised with the Chair and relevant Member
- 10.4. Other employees may be requested to attend all or part of the meeting in relation to specific topics or the requirement to ensure implementation of appropriate information governance practices and procedures. These may include but is not restricted to, Information Asset Owners (IAO), Audit/Counter Fraud lead, finance, contracting and performance.

11. MEETINGS

- 11.1. The Group shall meet quarterly and on other such occasions as agreed by the Chair. Meetings will be aligned where possible to provide updates / assurance in preparation for the Board. There may be a need to meet more frequently, for example, to review and assure the Data Security and Protection Toolkit prior to submission.
- 11.2. The Corporate Affairs team are responsible for administering the meeting including the production and distribution of the agenda, papers, and action notes. Links to papers will be distributed to group members 7 working days ahead of the meeting.
- 11.3. Virtual meetings / recording of meetings are permitted under the ICB Constitution and Standing Orders, subject to the approval of the Chair. The Chair is legally required to inform attendees if the meeting is being recorded and that the purpose of the recording is as an administrative tool to support the provision of clear and accurate minutes. The recording is only retained for the period of drafting the minutes and then subsequently deleted from all systems. No person admitted to a meeting of the Committee will be permitted to record the proceedings in any manner without agreement from the Chair.



12. DECLARATIONS OF INTEREST / CONFLICTS OF INTEREST

- 12.1. Conflicts of interest will be managed in accordance with the ICBs policies and procedures. All committee members and attendees must adhere to the ICB's Constitution and Conflicts of Interest policies. Where the Chair or a member, or attendee, of the committee believes that they have any actual or perceived conflicts of interest in relation to one or more agenda items, they must declare this at the beginning of the meeting wherever possible, and always in advance of the agenda item being discussed. It will be responsibility of the Chair to decide how to manage the conflict and the appropriate course of action.
- 12.2. Any interests which are declared at a meeting must be included within the minutes of the meeting, the individual with the conflict must ensure that the interest is added (if not already the case) to their declaration as soon as is practicable following the meeting.

13. CONFIDENTIALITY AND CONFLICT OF INTEREST/STANDARD OF BUSINESS CONDUCT

- 13.1. All members must adhere to the ICB's Constitution and Conflicts of Interest policies, together with NHS England statutory guidance on managing conflicts of interest.
- 13.2. Where a member of the group believes that they have a conflict of interest in relation to one or more agenda items, they must declare this at the beginning of the meeting wherever possible, and always in advance of the agenda item being discussed. It will be responsibility of the Chair to decide how to manage the conflict and the appropriate course of action.
- 13.3. The Group will conduct its business in accordance with the codes of conduct set out within the ICB Constitution. All members and attendees will adhere to established standards of business confidentiality.
- 13.4. All attendees will adhere to established standards of business confidentiality.

14. BEHAVIOURS AND CONDUCT

- 14.1. Members will be expected to conduct business in line with the ICB values and objectives.
- 14.2. Members of, and those attending, the Group shall behave in accordance with the ICB's Constitution, Standing Orders, and Code of Conduct and Behaviour policy.

15. REMIT

- 15.1. The IG Group has been established to support the organisation to meet its legal and regulatory responsibilities in terms of the wider Information



Governance agenda and in line with the Data Security and Protection Toolkit (DSPT) and will support the Executive Director for Corporate Affairs in discharging delegations under the ICBs Constitution (Scheme of Reservations and Delegations and Standing Orders) including:

- Reviewing ICB Information Governance policies, systems and procedures advising on strategy and policy decisions and monitoring compliance with the Information Governance Assurance Framework.
- Encouraging a system wide approach to Information Governance (IG) through local Information Governance Steering Groups; with oversight of key activity/ projects relevant to information governance.
- Agreeing and monitoring the Information Governance workplan and improvement plans.
- Receiving update reports in relation to workplan and improvement plans, identifying and mitigating any associated risks.
- Reviewing audit findings and ensuring robust plans are in place to address recommendations.
- Ensuring consistency of arrangements for joint data controllers or multiple data controllers reducing duplication and breaking down any barriers which hinder a system wide approach to information governance.
- Receiving and reviewing actions from incident reports particularly ICO reportable incidents.
- Receiving and agreeing the annual DSPT prior to submission.
- Receiving for assurance the FOI quarterly report including recommendations for destruction of FOI records/ other records management decisions.

16. EQUALITY AND DIVERSITY

16.1. Members must demonstrably consider the equality and diversity implications of decisions they make.

17. SECRETARIAT AND ADMINISTRATION

17.1. The Group shall be supported by the Corporate Affairs team which will include ensuring that:

- The agenda and papers are prepared and distributed having been agreed by the Chair with the support of the Senior Information Governance Manager.
- All papers for submission to the group are to be submitted to the support administrator at least 7 working days ahead of the meeting.
- The papers to be distributed to group members 5 working days ahead of the meeting.



18. REVIEW

- 18.1. The Terms of Reference will be reviewed not less than annually and submitted to the ICB Board for approval as necessary.

19. REPORTING

- 19.1. The Chair of the group will provide assurance reports periodically to the Audit Committee and shall draw to the attention of the committee any issues that require disclosure/ escalation to the Board or require action.
- 19.2. The effectiveness of the IGG will be measured as part of the Data Security and Protection Toolkit assessment and relevant internal audits. An assurance report will be provided to the Audit Committee on an annual basis.

20. SUB-GROUPS

- 20.1. The Information Governance Group will be supported by the work of the Information Governance Steering Groups held at a sub geography level (Hull/ East Riding, North/ North East Lincolnshire and North Yorkshire/ York). These groups will take their membership from across the relevant Place partnerships.



APPENDIX 1

ICB INFORMATION GOVERNANCE GROUP MEMBERSHIP

Membership of the group shall be:

Executive Director for Corporate Affairs/ SIRO (Chair)

ICB DPO

ICB Caldicott Guardian (Deputy Chair)

Senior Information Governance Manager/ Information Governance Officer

Head of Corporate Affairs and System Support

Representation from Place/ sub geography:

Place Senior Information Risk Owners

Place Caldicott Guardians

Place Data Protection Officers

Head of Service/ Corporate Affairs Manager or Corporate Affairs Officer

Associate Director of IT or Digital Programme Support Manager or

IT Representative from each of the 4 providers

Head of Communications and Engagement or senior representative