Impact Assessment Screening Tool

Name of policy or process:	Information Governance Framework
Purpose of policy or process:	We have a number of Information Governance policies and procedures, which must be adhered to by all employees, members or those who work on behalf of the GOC. This framework outlines the key principles and topics within each policy. The framework and policies are supplemented with local guidance for further information about the operational expectations.
Team/Department:	Compliance Team
Date:	27 May 2016
Screen undertaken by:	Robert Mannall, Information Governance
Approved by:	Philippa Mann, Compliance Manager
Date approved:	14 July 2016
Date last reviewed:	February 2017
Instructions:	• Circle or colour in the current status of the project or policy for each row. • **Do not miss out any rows**. If it is not applicable – put N/A, if you do not know put a question mark in that column. • This is a live tool, you will be able to update it further as you have completed more actions. • Make sure your selections are accurate at the time of completion. • Decide whether you think a full impact assessment is required to list the risks and the mitigating/strengthening actions. • If you think that a full impact assessment is **not** required, put you reasoning in the blank spaces under each section. • You can include comments in the boxes or in the space below. • Submit the completed form to the Compliance Manager for approval.

A) Impacts	High Risk	Medium Risk		Low Risk	? or N/A
1. Reserves	It is likely that reserves may be required	It is possible that reserves may be required		No impact on the reserves / not used	
2. Budget	No budget has been allocated or agreed, but will be required.	Budget has not been allocated, but is agreed to be transferred shortly	Budget has been allocated, but more may be required (including in future years)	Budget has been allocated and it is unlikely more will be required	
3. Legislation, Guidelines or Regulations	Not sure of the relevant legislation	Aware of all the legislation but not yet included within project/process	Aware of the legislation, it is included in the process/project, but we are not yet compliant	Aware of all the legislation, it is included in the project/process, and we are compliant	
4. Future legislation changes	Legislation is due to be changed within the next 12 months	Legislation is due to be changed within the next 24 months		There are no plans for legislation to be changed	
5. Reputation & Media	This topic has high media focus at present or in last 12 months	This topic has growing focus in the media in the last 12 months	This topic has little focus in the media in the last 12 months	This topic has very little or no focus in the media in the last 12 months	
6. Resources (people & equipment)	Requires new resource	Likely to complete with current resource, or by sharing resource	Likely to complete with current resource	Able to complete with current resource	
7. Sustainability	Less than 5 people are aware of the process/project, and it is not recorded centrally nor fully	Less than 5 people are aware of the project/process, but it is recorded centrally and fully	More than 5 people are aware of the process/project, but it is not fully recorded and/or centrally	More than 5 people are aware of the process/ project and it is clearly recorded centrally	
	No plans are in place for training, and/or no date set for completion of training	Training material not created, but training plan and owner identified and completion dates set	Training material and plan created, owner identified and completion dates set	Training completed and recorded with HR	
8. Communication (Comms) / Raising Awareness	No comms plan is in place, and no owner or timeline identified	External comms plan is in place (including all relevant stakeholders) but not completed, an owner and completion dates are identified	Internal comms plan is in place (for all relevant levels and departments) but not completed, and owner and completion dates are identified	Both internal and external comms plan is in place and completed, owner and completion dates are identified	
	Not sure if needs to be published in Welsh	Must be published in Welsh, Comms Team aware.		Does not need to be published in Welsh.	

If you decide that a full impact assessment is **not** required for **section A**) '**Impacts'**, please put the reasons why below:

- The IG policies have been designed in anticipation of new legislation (GDPR) and is a key organisational objective. Legislation may be changing, dependant on the UK's relationship with EU and our international requirements going forward.

Resources

- The workload will need to be monitored, especially with regards to the Records Management part which is an ongoing requirements which is organisation-wide. This is a substantial piece of work that requires resources from all areas. The Information Asset Owners will be responsible for their areas, but will require support from Information Governance and IT.

- IT and Facilities will be required to help improve records management which may take new resource or sharing resource to support this work.

Compliance and Risk

- Further IG impacts will be picked up within the IG Updates, however with regards to the policies and the framework the risks highlighted above are significantly reduced. Our improvements have already been noted by the ICO.

B) Information Governance	High Risk	Medium Risk		Low Risk	?NA
1. What data is involved?	Sensitive personal data	Personal data	Private / closed business data	Confidential / open business data	
2. Will the data be anonymised?	No	Sometimes, in shared documents	Yes, immediately, and the original retained	Yes, immediately, and the original deleted.	
3. Will someone be identifiable from the data?	Yes	Yes, but their name is already in the public domain(SMT/Council)	Not from this data alone, but possibly when data is merged with other source	No – all anonymised and cannot be merged with other information	
4. Is **all** of the data collected going to be used?	No, maybe in future	Yes, but this is the first time we collect and use it	Yes, but it hasn't previously been used in full before	Yes, already being used in full	
5. What is the volume of data handled per year?	Large – over 4,000 records	Medium – between 1,000-3,999 records		Less than 1,000 records	
6. Do you have consent from data subjects?	No	Possibly, it is explained on our website.	Yes, explicitly obtained, not always recorded	Yes, explicitly obtained and recorded/or part of statutory duty/contractual	
7. Do you know how long the data will be held?	No – it is not yet on retention schedule	Yes – it is on retention schedule	Yes – but it is not on the retention schedule	On retention schedule **and** the relevant employees are aware	
8. Where and in what format would the data be held?	Paper; new IT system, or provider, at home/off site; personal computer	Paper; Archive room; office storage (locked)	Scanned in; shared drive; personal drive;	held on H: drive team/dept folder	
9. Is it on the information asset register?	No	Not yet, I've submitted to Information Asset Owner (IAO)	Yes, but it has not been reviewed by IAO	Yes, and has been reviewed by IAO **and** approved by Gov. dept.	
10. Will data be shared or disclosed with third parties?	Yes, but no agreements are in place	Yes, agreement in place	Possibly under Freedom of Information Act	No, all internal use	
11. Will data be handled by anyone outside the EU?	Yes	-	-	No	
12. Will personal or identifiable data be published?	Yes – not yet approved by Compliance	Yes- been agreed with Compliance	No, personal and identifiable data will be redacted	None - no personal or identifiable data will be published	

13. Individuals handling the data have been appropriately trained	No, some people have never trained by GOC in IG.	Yes, all trained in IG but not refreshed for over 12 months		Yes, all trained in IG in the last 12 months	

If you decide that a full impact assessment is **not** required for **section B**) '**Information Governance'**, please put the reasons why below:

This set of policies covers all types of information. It provides guidance on all different areas within this privacy assessment. Within the policy there are a number of processes to mitigate the risks outlined above.

There are no further considerations required for IG within these policies.

The policies have been compared with the 14 ICO policies and are compliant with the themes within their policies.

C) Human Rights, Equality and Inclusion	High Risk	Medium Risk	Medium Risk	Low Risk	? or N/A
Main audience/policy user	Public			Registrants, employees or members	
Participation in a process (right to be treated fairly, right for freedom of expression)	Yes, the policy, process or activity restricts an individual's inclusion, interaction or participation in a process.			No, the policy, process or activity does not restrict an individual's inclusion, interaction or participation in a process.	
The policy, process or activity includes decision-making which gives outcomes for individuals (right to a fair trial, right to be treated fairly)	Yes, the decision is made by one person, who may or may not review all cases	Yes, the decision is made by one person, who reviews all cases	Yes, the decision is made by an panel which is randomly selected; which may or may not review all cases.	Yes, the decision is made by a representative panel (specifically selected). No, no decisions are required.	
	There is limited decision criteria; decisions are made on personal view	There is some set decision criteria; decisions are made on 'case-by-case' consideration.	There is clear decision criteria, but no form to record the decision.	There is clear decision criteria and a form to record the decision.	
	There is no internal review or independent appeal process	There is a way to appeal independently, but there is no internal review process	There is an internal review process, but there is no way to appeal independently	There is a clear process to appeal or submit a grievance to have the outcome internally reviewed and independently reviewed	n/a
	The decision-makers have not received EDI & unconscious bias training, and there are no plans for this in the next 3 months.	The decision-makers are due to receive EDI & unconscious bias training in the next 3 months, which is booked.	The decision-makers are not involved before receiving EDI & unconscious bias training.	The decision-makers have received EDI & unconscious bias training within the last 12 months, which is recorded.	
Training for all involved	Less than 50% of those involved have received EDI training in the last 12 months; and there is no further training planned	Over 50% of those involved have received EDI training, and the training are booked in for all others involved in the next 3 months.		Over 80% of those involved have received EDI training in the last 12 months, which is recorded.	

Alternative forms – electronic / written available?	No alternative formats available – just one option	Yes, primarily internet/computer-based but paper versions can be used		Alternative formats available and users can discuss and complete with a team member.	
Venue where activity takes place	Building accessibility not considered	Building accessibility sometimes considered		Building accessibility always considered	
	Non-accessible building;	Partially accessible buildings;	Accessible buildings, although not all sites have been surveyed	All accessible buildings and sites have been surveyed	
Attendance	Short notice of dates/places to attend	Medium notice (5-14 days)of dates/places to attend		Planned well in advance	
	Change in arrangements is very often	Change in arrangements is not very often		Change in arrangements is rare	
	Only can attend in person	Mostly required to attend in person		Able to attend remotely	
	Unequal attendance / involvement of attendees	Unequal attendance/ involvement of attendees, but this is monitored and managed.		Attendance/involvement is equal, and monitored per attendee.	n/a
	No religious holidays considered; only Christian holidays considered	Main UK religions' holidays considered	Main UK religions' holidays considered, and advice sought from affected individuals if there are no alternative dates.	Religious holidays considered, and ability to be flexible (on dates, or flexible expectations if no alternative dates).	n/a
Associated costs	Potential expenses are not included in our expenses policy	Certain people, evidencing their need, can claim for potential expenses, case by case decisions		Most users can claim for potential expenses, and this is included in our expenses policy; freepost available.	n/a
Fair for individual's needs	Contact not listed to discuss reasonable adjustments, employees not aware of reasonable adjustment advisors.	Most employees know who to contact with queries about reasonable adjustments		Contact listed for reasonable adjustment discussion	
Consultation and Inclusion	No consultation; consultation with internal employees only	Consultation with employees and members	Consultation with employees, members, and wider groups	Consultation with policy users, employees, members and wider groups.	

If you decide that a full impact assessment is **not** required for **section C)** '**Human Rights, Equality and Inclusion'**, please put the reasons why below:

- Reasonable adjustments are included; electronic copies of all policies. **Action: Completed.**

- Glossary is included to help explain technical terms or frequent acronyms. **Action: Completed.**

- Consideration to be given to making an electronic handbook to help the policies be together: **Action: Completed.**

- Consultation completed with MF, ARC, Council. **Action: Completed.**

- Decisions are often made by Governance, Head of Case Progression or Head of IT. All are currently well-trained in IG and the topic. Although exceptions must be approved by Compliance, this can mean the Compliance Team or Head of Governance.

Policy – Impact Assessment

Step 1: Scoping the IA

Name of the policy/function:	IG Framework and policies
Assessor:	IG Specialist
Date IA started:	27 May 2016
Date IA completed:	24 June 2016
Date of next IA review:	October 2016
Purpose of IA:	To review the IG policies and framework
Approver:	Compliance Manager
Date approved:	17 July 2016

Q1. **Screening Assessment**
- *Has a screening assessment been used to identify the potential relevant risks and impacts? Tick all that have been completed:*
    - x Impacts
    - x Information Governance (Privacy)
    - x Human Rights, Equality & Inclusion
    - ☐ None have been completed

Q2. About the policy, process or project
- *What are the main aims, purpose and outcomes of the policy or project?*
- *You should be clear about the policy proposal: what do you hope to achieve by it? Who will benefit from it?*

Aims:
We have a statutory duty under the Opticians Act 1989 ("the Act") to process personal information to enable us to fulfil our statutory functions, including our duty to disclose, share and publish personal information when it is in the public interest to do so. We do this with careful consideration of our Information responsibilities, under the Data Protection Act 1998 (DPA), the Human Rights Act (HRA) and the Freedom of Information Act 2000 (FOIA). We are committed to ensuring that our Information Governance is effective, which will enable us to be transparent, responsible and forward thinking
Purpose and Outcome:
To set out the Information Governance policies and procedures, which must be adhered to by all employees, members or those who work on behalf of the GOC.
Who will benefit:
Employees, members and the general public; all data subjects and data processors.

Q3. Activities or areas of risk or impact of the policy or process
- *Which aspects/activities of the policy are particularly relevant to impact or risk? At this stage you do not have to list possible impacts, just identify the areas.*

Activity/Aspect
• Clarity
• Accessible
• Confidence and Transparency
• Resources

Q4. Gathering the evidence
- *List below available data and research that will be used to determine impact of the policy, project or process.*
- Consider each part of the process or policy and identify where risks or implications might be found for 1) equality, 2) human rights and 3) information governance and privacy.

Available evidence – used to scope and identify impact
• IA Internal Audit – see report
• ICO actions – see IG update report
• Toolbox talks
• Data Breaches learnings
• Organisational culture awareness
• ICO positive feedback regarding our policies (January 2017).

Q5. Evidence gaps
- *Do you require further information to gauge the probability and/or extent of impact? Make sure you consider:*
    1) Impacts
    2) Information Governance and Privacy implications.
    3) Equality implications; and
    4) Human Rights implications.

If yes, note them here:

No current requirement for further information.

Q6. Involvement and Consultation

Consultation has taken place, who with, when and how:
Management Forum (June); ARC (July); Council (July)
Summary of the feedback from consultation:
MF – positive feedback, keen to have a handbook.

ARC – concern raised over length of policies and implementation – Implementation has been considered and is well underway with significant completion of IG training both online and via toolbox briefings.
Link to any written record of the consultation to be published alongside this assessment: n/a
How engagement with stakeholders will continue: Regular reporting to ARC and Council, also through performance reports and annual reports. – This is documented in the framework.

Step 2: Assess impact and opportunity to promote best practice
- Using the evidence you have gathered what if any impacts can be identified. Please use the table below to document your findings and the strand(s) affected.
- What can be done to remove or reduce any impact identified?
- Consider each part of the process or policy and identify where risks might be found for equality, human rights and information governance and privacy.
- Ensure any gaps found in Q5 are recorded as actions and considerations below.

Activity/ Aspect	Potential/actual Impact	Strengthening actions to remove or reduce impact. For actions, include timeframes.
Clarity	Risk that the language is too technical	- Online training has been **completed.** - Toolbox training has been **completed.** - New starter training is ongoing & **in progress**. - Glossary of technical terms included in framework, **completed.**
Clarity	Risk that the remit of the policies is unclear	- Framework used to explain the remit of the policies. - Contact always noted to give further information.
Accessible	Risk that the policies are not accessible or are confusing	- Framework model used with an index. - Framework reduces the length of the policies. **Author** to consider linking index with the policies, or merging to an electronic manual. **Completed.**
Confidence and Transparency	Risk that the organisation's culture will limit the reporting of breaches, and limit learning	- Toolboxes have been delivered in a positive, learning culture. - SMT are encouraging of people reporting the problems so we can fix them. - Investigation process is carefully managed, at a lower level then a higher level for sign off. - Teams are encouraged to talk about breaches and learn from them.
Resources	Risk that resourcing will mean that Records	The workload will need to be monitored, especially with regards to the Records Management part which is an ongoing requirements which is

	Management is not improved	organisation-wide. This is a substantial piece of work that requires resources from all areas. The Information Asset Owners will be responsible for their areas, but will require support from Information Governance and IT. • IT and Facilities will be required to help improve records management which may take new resource or sharing resource to support this work. They have been involved in Management Forum.

Step 3: Monitoring and review

Q6. What monitoring mechanisms do you have in place to assess the actual impact of your policy?

We will report on compliance with this policy to the Senior Management Team and the Audit and Risk Committee on a quarterly basis. Information may also be included in our annual reports or performance reports.

Please provide a review date to complete an update on this assessment (three months from initial completion).

Date: October 2016

This IA was reviewed in October 2016, and February 2017. All actions have now been completed.