Information Governance Policy

Version - Final

Date for Review: 1 October 2017

Lead Director: Performance, Quality and Cooperate Affairs

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DOCUMENT CONTROL AND AMENDMENT RECORD

Document Name:	Information Governance Policy
Consultation:	SIRO &IGSG and IGC
Approved by:	IGSG & Integrated Governance Committee(IGC)
Description:	Overarching IG policy
Audience:	All Staff
Contact details:	IG Manager
Supersedes	Information Governance Policy 2012-2014

Change History

Version	Date	Author	Approver	Reason
0.1	Oct-14	IG manager		Initial Draft
0.2	Oct-14	SIRO		Review
0.3	Nov 2014	IG manager	IGSG	Approval
0.4	Dec-14	IG manager	IGC	Approval

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1. Introduction

Information Governance is a framework for handling personal information in a confidential and secure manner to appropriate ethical and quality standards in a modern health service. It provides a consistent way for employees to deal with the many different information handling requirements including:

- Information governance management.
- Clinical Information assurance for safe patient care.
- Confidentiality and Data Protection assurance.
- Corporate Information assurance.
- Information Security assurance.
- Secondary use assurance.

The aims of this document are to maximise the value of organisational assets by ensuring that data is:

- Held securely and confidentially
- Obtained fairly and lawfully
- Recorded accurately and reliably
- Used effectively and ethically, and
- Shared and disclosed appropriately and lawfully

2. Roles and Responsibilities

2.1 All Staff

The majority of staff handles information in one form or another. Staff who in the course of their work create, use or otherwise process information have a duty to keep up to date with, and adhere to, relevant legislation, case law and national guidance. WCCG policies and procedures listed in section 10 below will reflect such guidance and compliance with these polices will ensure a high standard of Information Governance practices within the WCCG.

WCCG has a legal obligation to maintain the confidentiality of the personal information it processes and must do so to maintain the trust and confidence of those who use our services.

Breaches of confidentiality may be treated as serious disciplinary incidents which in some circumstances can lead to dismissal or a legal fine by the powers from the Information commissioners as information regulator. All staff should ensure they are aware of the relevant WCCG policies in respect of any information they may process.

2.2 Board

The Board is ultimately responsible for ensuring that the organisation corporately meets it legal responsibilities and for the adoption of internal and external governance requirements. Specifically, the Board will ensure that –

- IG is explicitly referenced within the organisation's statement of internal controls
- A board level Senior Information Risk Owner (SIRO) is identified and an Information Asset Owner designated for each separate database or other major information asset
- A Caldicott Guardian is appointed with responsibility for safeguarding patient confidential data
- Appropriate IG training is undertaken by all staff
- The annual IG assessment, via the Information Governance Toolkit, is submitted by the 31 March each year and shared with the Care Quality Commission and Audit Commission
- Details of serious incidents involving actual or potential loss of personal data or breach of confidentiality are reported in line with HSCIC guidance

2.3 Chief Officer

The Chief Officer as the Accountable Officer in WCCG has overall accountability and responsibility for IG and is required to provide assurance, through the Statement of Internal Control, that all risk to the organisation, including those relating to information, are effectively managed and mitigated. The Chief Officer has delegated operational responsibility for IG to the Director of Corporate Affairs Quality and Performance.

2.3 Senior Information Risk Owner (SIRO)

The Director of Corporate Affairs Quality and Performance is responsible to the Chief Officer for IG and is the designated SIRO, who takes ownership of WCCG's information risk management policy, acts as advocate for information risk on the Board and provides written advice to the Accounting Officer on the content of the Statement of Internal Control in regard to information risk.

2.4 Caldicott Guardian

The WCCG's Caldicott Guardian is a member of the Board who has a particular responsibility for reflecting patients' interests regarding the use of patient confidential information.

2.5 The Information Governance Lead

The IG Lead is accountable to the Director of Corporate Affairs Quality and Performance and responsible for ensuring the development and implementation of this strategy and for delivery of the Information Governance Assurance Framework.

3. Principles

- There should be proactive use of information within the organisation, both for patient care and service management as determined by law, statute and best practice.

- There should also be proactive use of information between Wandsworth Clinical Commissioning Group, other CGGs, NHS Trusts and partner organisations to support patient care as determined by law, statute and best practice.

- Wandsworth Clinical Commissioning Group will establish and maintain policies and procedures to ensure compliance with requirements contained in the NHS Information Governance Toolkit sponsored by NHS Connecting for Health.

- Wandsworth Clinical Commissioning Group will annually assess its performance against the requirements set out in the Toolkit and will report the results of its self-assessment to NHS Connecting for Health in accordance with current guidance.

- Wandsworth Clinical Commissioning Group will follow a program of continual improvement to increase IG compliance year on year.

- Where appropriate the principles of information management and handling outlined in this policy are to be applied to identifiable information about WCCG staff as well as service users.

4. Openness

WCCG recognises the need for an appropriate balance between openness and confidentiality in the management and use of information. Information will be defined and where appropriate kept confidential, underpinning the principles of Caldicott and the regulations outlined in the Data Protection and Freedom of Information Acts.

Non-confidential information on WCCG and its services will be available to the public through a variety of means including the procedures established to meet requirements in the Freedom of Information Act 2000. WCCG will follow established procedures to deal with queries from patients and the public via PPI and patient experience teams.

5. Confidentiality and Data Protection Assurance

The Staff Confidentiality Code of Conduct, and Data Protection Protocol provide staff with clear guidance with regard to best practice and the Law, and all staff are expected to complete the annual IG mandatory training. Confidentiality of staff/service information is of the utmost importance to WCCG and protocols for the sharing of information with third parties are in place to ensure compliance. Appropriate confidentiality and security arrangements will be put in place in contracts with third parties (companies and individuals) who have access to Personal Confidential Data.

6. Information Security Assurance

WCCG will have an appropriate policies and procedures in place to maintain effective and secure management of its information assets and resources.

Audits will be undertaken and commissioned to assess information and IT security arrangements on a regular basis.

The Incident Reporting system is used to report, monitor and investigate all breaches of confidentiality and security across the organisation and is strictly maintained.

7. Clinical Information Assurance

The responsibility for the quality of data and validation of data e.g. primary/secondary care data within WCCG sits with the SECSU for some function and others with the CCG. Wherever possible, information quality will be assured at the point of collection.

Responsibility for records management sits with the WCCG's Business Manager who will liaise with the Information Manager for the effective management, audits and commission of records.

WCCG strives to maintain its information to the highest quality in terms of its accuracy, timeliness and relevance, and will promote data quality through policies, procedures/user manuals and regular training.

8. Corporate Information Assurance

Policies and procedures are in a place to ensure compliance with the Freedom of Information Act and WCCG's commitment to openness.

Policies and procedures are in place to ensure all corporate records are managed, stored and archived in line with Governance standards and legislation.

9. Training

WCCG recognises the importance of an effective training structure and programme to deliver compliant awareness of IG and its integration into the day-to-day work and procedures.

All permanent/contract staff must complete the online mandatory training modules within first week of employment, with further training required for managers / team leaders, staff who process personal information, and staff with specific information roles.

10. Key CCG IG Policy and Guidance Suite

WCCG has implemented the following key IG policies, guidance's, processes and documents

- IG framework Document
- Corporate Information Security Policy
- Information security risk management process(Incorporated in CCG Risk Management Framework)

- Information Incident Reporting procedures(Incorporated in CCG Serious Incident Management Policy)
- FOI policy (Including Environmental Information Regulations)
- Data Protection Protocol (Including access to records requests management)
- Information Life cycle management policy (Inc. safe haven procedures)
- Records retention guidance
- Confidentiality Code of Conduct
- Freedom of Information Policy & Procedure
- Agile working procedures
- Business Continuity plans

Note: there are other IG related guidance's created by the SECSU and apply to CCG staff. These are all available on CCG intranet

11. Information Governance Reporting Structure