## INFORMATION GOVERNANCE POLICY

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Information Governance Policy

Equality Statement
This policy applies to all NHS Leeds employees irrespective of age, race, colour, religion, disability, nationality, ethnic origin, gender, sexual orientation or marital status, domestic circumstances, social and employment status, HIV status, gender reassignment, political affiliation or trade union membership. All employees will be treated in a fair and equitable manner and reasonable adjustments will be made where appropriate, e.g. interpreter or signing provision, access arrangements, induction loop, etc.

NHS Leeds will ensure that this policy and guidance is monitored and evaluated by the Information Governance Committee.

1. Introduction
This document focuses on the data handling elements of information governance. A further paper is being developed on how information is managed in NHS Leeds and how decisions about information for world class commissioning and performance management will be made. This will be available once the development work is complete.

Information is a vital asset, both in terms of the clinical management of individual patients and the efficient management of services and resources.

Information Governance is a framework that brings together all of the requirements, standards and best practice that apply to the handling of personal information. It is therefore of paramount importance to ensure that information is efficiently managed, and that appropriate policies, procedures, management accountability and structures are in place to provide a robust governance framework for information management.

This policy gives assurance to NHS Leeds and individuals that personal information is dealt with legally, securely, efficiently and effectively, in order to deliver the best possible care.

Compliance with this policy will be managed through the Information Governance Strategy to ensure the requirements of Connecting for Health’s Information Governance Toolkit are met.

2. Scope
This policy covers all aspects of information within the organisation, including (but not limited to):

- Patient information.
- Personnel information.
- Organisational information.

This policy covers all aspects of handling information, including (but not limited to):
• Structured record systems - paper and electronic.
• Transmission of information – fax, e-mail, post, telephone and by removable media.

This policy covers all information systems purchased, developed and managed by/or on behalf of, the organisation and any individual directly employed or otherwise by the organisation.

3. **Principles**

NHS Leeds believes that accurate, timely and relevant information is essential to deliver the highest quality health care.

NHS Leeds fully supports the principles of corporate governance and recognises its public accountability, but equally places importance on the confidentiality of, and the security arrangements to safeguard, both personal information about patients and staff and commercially sensitive information.

NHS Leeds also recognises the need to share patient information with other health organisations and other agencies in a controlled manner consistent with the interests of the patient and, in some circumstances, the public interest.

There are 4 key interlinked strands to the information governance policy:
• Openness and Transparency
• Legal compliance
• Information security
• Quality assurance

**Openness and Transparency**
• The Trust 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 Act. Non-confidential information on the Trust and its services will be available to the public through a variety of means, in line with the Freedom of Information Act 2000.

• NHS Leeds will undertake annual assessments and audits (through the IG Toolkit) of its policies and arrangements for openness.

• Patients will have ready access to information relating to their own health care under the Data Protection Act 1998 using the Trust’s Subject Access Request procedure.

• NHS Leeds will have clear procedures and arrangements for handling queries from patients and the public.

• NHS Leeds will have clear procedures and arrangements for liaison with the press and broadcasting media.

**Legal Compliance**
• NHS Leeds regards all identifiable personal information relating to patients as confidential. Compliance with legal and regulatory requirements will be achieved, monitored and maintained.

• NHS Leeds regards all identifiable personal information relating to staff as confidential except where national policy on accountability and openness requires otherwise.

• NHS Leeds will establish and maintain policies to ensure compliance with the Data Protection Act, Human Rights Act, Freedom of Information Act and the common law duty of confidentiality.

• Information Governance training including awareness and understanding of Caldicott principles and confidentiality, information security and data protection will be mandatory training for all staff. Information Governance will be included in induction training for all new staff. The necessity and frequency of any further training will be appraisal based.

• NHS Leeds will undertake annual assessments and audits of its compliance with legal requirements.

• NHS Leeds has established and maintains a Pan Leeds Information Sharing Protocol to inform the controlled and appropriate sharing of patient information with other agencies, taking account of relevant legislation (e.g. Data Protection Act, Crime and Disorder Act, Children Act).

Information Security
• NHS Leeds will establish and maintain policies for the effective and secure management of its information assets and resources.

• NHS Leeds will undertake annual assessments and audits of its information and IT security arrangements.

• NHS Leeds will promote effective confidentiality and security practice to its staff through policies, procedures and training.

• NHS Leeds will establish and maintain incident reporting procedures and will monitor and investigate all reported instances of actual or potential breaches of confidentiality and security.

• NHS Leeds will appoint a Senior Information Risk Officer and assign responsibility to Information Asset Owners to manage information risk. A SIRO report will be issued to the Governance and Risk committee as part of the Information Governance Report.

• NHS Leeds will use pseudonymisation and anonymisation of personal data where appropriate to further restrict access to confidential information. Pseudonymisation will be the responsibility of the Associate Director of Information and Technology.

Information Quality Assurance
• NHS Leeds will establish and maintain policies and procedures for information quality assurance and the effective management of records.

• NHS Leeds will undertake annual assessments and audits of its information quality and records management arrangements.
Managers are expected to take ownership of, and seek to improve, the quality of information within their services.

Wherever possible, information quality should be assured at the point of collection.

Data standards will be set through clear and consistent definition of data items, in accordance with national standards.

NHS Leeds will promote information quality and effective records management through policies, procedures/user manuals and training.

4. Responsibilities
It is the role of NHS Leeds Board to agree policy in respect of Information Governance, taking into account legal and NHS requirements. The Board is also responsible for ensuring that sufficient resources are provided to support the requirements of the policy.

Information governance management across the organisation will be co-ordinated by the Information Governance Committee. The structure and Terms of Reference of this Committee can be found in Appendix B.

The Information Governance Committee is responsible for overseeing day to day Information Governance issues; developing and maintaining policies, standards, procedures and guidance, coordinating and raising awareness Information Governance in NHS Leeds.

Managers within NHS Leeds are responsible for ensuring that the policy and its supporting standards and guidelines are built into local processes and that there is on-going compliance.

All staff, whether permanent, temporary or contracted, and contractors are responsible for ensuring that they are aware of the requirements incumbent upon them and for ensuring that they comply with these on a day to day basis.

Some NHS records are public records under the terms of the Public Records Act 1958 and are legal documents. The Chief Executive and senior managers are personally accountable for the records in their care and the quality of records management within their organisation.

5. Training/Awareness
Information Governance will be a part of induction training. All new staff will receive awareness training and information on information governance.

Information Governance will form part of the mandatory training for staff.

NHS Leeds will identify the information governance training needs of key staff groups taking into account role, responsibility and accountability levels.

NHS Leeds will produce appropriate procedures and guidance relating to information governance as required by related policies.
6. Monitoring and review

NHS Leeds will monitor this policy and related strategies, policies and guidance through the Information Governance Toolkit. This will be co-ordinated by the Information Governance Committee.

An assessment of compliance with requirements, within the Information Governance Toolkit (IGT), will be undertaken each year. The Information Governance Committee will ensure implementation of the Information Governance Action Plan and monitor performance.

NHS Leeds will monitor compliance with outcome 21 of the Care Quality Commission standards.

It is assumed that Internal Audit will review this and associated procedures.

Appendix A

NHS Leeds IG Policies

Users are responsible for making themselves aware of NHS Leeds associated policies listed below which are published on the intranet

- Confidentiality Policy
- Safe Haven Policy
- Internet Policy
- Email policy
- Confidentiality Code of Conduct
- Removable Media Interim Position Statement
- Network Security Policy
- Removable Media Policy
- Policy on the Safe Transfer of Paper Records
- Records Management Policy
- Records Management Strategy
- Information Governance Strategy

Legislation & Guidance

- The Data Protection Act 1998
- NHS Confidentiality Code of Practice 2003
- Human Rights Act 1998
- Freedom of Information Act 2000
- Caldicott Report 1997
- Computer Misuse Act 1990
- Public Records Act 1958
- Records Management NHS Code of Practice 2006
- Common Law Duty of Confidence
- Care Quality Commission Standards
Appendix B

Information Governance Committee

Terms of Reference

Aim
The Information Governance Committee will be responsible for ensuring that Leeds Primary Care Trust manages information effectively. That appropriate policies, procedures and structures are in place to provide a robust governance framework for information management thereby ensuring compliance with the National Information Governance Toolkit e.g.:

- Data Protection
- Freedom of Information
- Caldicott
- Confidentiality
- Information Security
- Records Management

Reporting
The Information Governance Committee will report to the Board through the Governance and Risk Committee at quarterly intervals via submission of:

- minutes
- toolkit assessment for sign off prior to submission
- annual action plan
- quarterly updates on the annual improvement plan.

Objectives
The main objectives of the Group will be to:

- Ensure that NHS Leeds satisfies statutory and NHS requirements and standards concerning information governance.

- Ensure that NHS Leeds has effective policies and management arrangements covering all aspects of Information Governance in line with the Information Governance Policy and Strategy.

- Ensure that NHS Leeds undertakes annual assessments and audits of its Information Governance policies and arrangements.

- Establish an annual Information Governance Improvement Plan, secure the necessary implementation resources, and monitor the implementation of that plan.

- Identify and evaluate areas of risk, set priorities and where appropriate undertake or recommend remedial action in relation to information processing issues e.g. breaches of confidentiality or security.
• Advise on the introduction of / changes to, processes and systems within NHS Leeds or shared with partner agencies to ensure the safe and secure processing of personal information.

• Promote education and training programmes for staff in order to support improvements in the information processing practice and culture.

• Liaise with other committees, working groups and programme boards in order to promote Information Governance issues.

• Report to the Governance and Risk Committee on Information Governance issues.

• The Group will meet a minimum of four times a year.

Membership
The core membership of this group will include:

• Lead NHS Leeds Director for Information Governance (the CIO for NHS Leeds)
• Caldicott Guardian (Director of Commissioning)
• Head of Information Governance
• Senior Information Manager
• Head of IT
• Data Quality representative
• Internal Audit representative
• WYCSA representative
• Corporate Governance Section representative
• NHS Leeds provider services representative
• Senior Information Risk Owner

Other members to be co-opted as necessary may include:

• GP and / or Practice Manager
• Other independent contractors
• PPI

The Information Governance Committee will be quorate when either the Chair or Vice Chair plus four other members are present.