

Market Street Medical Practice

Information Governance Policy

1. Introduction

Information is a vital asset, both in terms of the clinical management of individual patients and the efficient management of services and resources. It plays a key part in clinical governance, service planning and performance management.

It is therefore of paramount importance to ensure that information is efficiently managed, and that appropriate policies, procedures and management accountability and structures provide a robust governance framework for information management.

2. Leads and responsibilities

The Senior Partner, Dr J O'Donovan is the Caldicott Guardian for the Practice.

His responsibility is to ensure that patient data is kept secure and that all data flows, internal and external, are periodically checked against the Caldicott principles.

As Senior Partner it is his role to define the Practice's policy in respect of Information Governance, taking into account legal and NHS requirements. The Senior Partner is also responsible for ensuring that sufficient resources are available to support the requirements of the policy.

Name:	Signature:	Role:	Date:
Dr J O'Donovan		Caldicott Guardian	

The Practice Manager, Stephanie Jackson is the Information Governance Lead for the Practice.

Her key responsibilities are:-

- To develop and regularly maintain an Information Governance Policy and relevant standards, procedures and guidance, and to ensure compliance on a day to day basis.
- To ensure that the Practice's approach to information handling is communicated to all staff and made available to the public.
- To coordinate the activities of staff given data protection, confidentiality, information quality, records management and Freedom of Information responsibilities.
- To ensure that appropriate training necessary to support their roles regarding information is made available to and taken up by staff.

Name:	Signature:	Role:	Date:
Stephanie Jackson		Information Governance Lead	

All staff, whether permanent, temporary or contracted, and contractors are responsible for ensuring that they remain aware of the requirements incumbent upon them for ensuring compliance on a day to day basis with Information Governance policy, standards, procedures, guidance.

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3. Principles

The Practice recognises the need for an appropriate balance between openness and confidentiality in the management and use of information. The Practice 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. The Practice 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.

The Practice believes that accurate, timely and relevant information is essential to deliver the highest quality health care. As such it is the responsibility of everyone in the Practice to ensure and promote the quality of information and to actively use information in decision making processes.

There are 4 key interlinked strands to the information governance policy:

Openness

- Non-confidential information about the Practice and its services should be available to the public through a variety of media.
- The Practice maintains policies to ensure compliance with the Freedom of Information Act 2000.
- The Practice undertakes annual assessments and audits of its policies and arrangements to ensure it meets regulations.
- Patients should have ready access to information relating to their own health care, their options for treatment and their rights as patients. This includes access to their medical records under the Data Protection Act 1998.
- The Practice has a clear procedure and arrangements for liaison with the press and broadcasting media.
- The Practice has clear procedures and arrangements for handling queries from patients and the public.

Legal Compliance

- The Practice regards all person identifiable information, including that relating to patients as confidential.
- The Practice will undertake an annual assessment and audits of its compliance with legal requirements.
- The Practice regards all identifiable personal information relating to staff as confidential except where national policy on accountability and openness requires otherwise.
- The Practice maintains policies to ensure compliance with the Data Protection Act 1998, Human Rights Act 1998 and the common law confidentiality.
- The Practice maintains policies for the controlled and appropriate sharing of patient information with other agencies, taking account of relevant legislation (e.g. Health and Social Care Act 2012, Crime and Disorder Act 1998, Protection of Children Act 1999).

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Information Security

- The Practice maintains policies for the effective and secure management of its information assets and resources.
- The Practice will undertake an annual assessment and audit of its information and IT security arrangements.
- The Practice will promote effective confidentiality and security practice to its staff through policies, procedures and training.
- The Practice maintains incident reporting procedures and will monitor and investigate all reported instances of actual or potential breaches of confidentiality and security.

Information Quality Assurance

- The Practice maintains policies and procedures for information quality assurance and the effective management of records.
- The Practice has a system of ongoing assessment and audit 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.
- The practice promotes information quality and effective records management through policies, procedures/user manuals and training.

4. Associated Policies

Confidentiality Policy

The Practice has adopted a Confidentiality Policy which applies to all employees, all partners and to other people who work at the Practice. At induction after employment all staff must sign an approved form to indicate that they have read, understood and agree to terms and conditions regarding their obligations to respect confidentiality.

Access to Medical Records Protocol

The Practice has adopted a protocol for providing patients with access to their medical records under the terms of the Data Protection Act 1998. A fee of £10 will be charged for a copy of a computerised record and an additional fee may be charged for records held partially on paper.

Freedom of Information Policy

The Practice has adopted a policy on Freedom of Information which meets the requirements of the Freedom of Information Act 2000. Information not exempted will be provided within 20 days of request. Charges may apply if applicable.

Data Entry Policy

The Practice has a policy for entering clinical information, which comes into the Practice into patient medical records.

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Secure Information Handling & Exchange Policy

The practice has adopted a policy to prevent unauthorised access to, loss of, misuse of or unauthorised disclosure of, personal information and to avoid breach of legislation. It covers policy on the various types of information exchange methods that may be used by the Practice and other bodies.

Email Policy

This policy covers all aspects of e-mail use by Practice staff.

Information Security Incident Reporting Policy

This policy defines an information security incident and sets out the procedures for their reporting.

5. Training

All employees of the Practice will undertake initial Information Governance Training within their first month of employment.

Training will be on-line learning through either the Health & Social Care Information Centre (IG Training Tool) or Bluestream Academy on-line learning. The training will comprise the following elements:

- Freedom of Information
- Data Protection
- Health Records
- Patient data
- Confidentiality
- The Caldicott Guardian
- Information Security

After their initial training all employees will undertake annual refresher training on Information Governance. This is provided through the HSCIC training Tool: 'Information Governance: The Refresher Module'.

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