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INFORMATION GOVERNANCE POLICY

1. Summary

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. Information Governance is concerned with the way NHS organisations handles information about patients/clients and employees, in particular personal and sensitive information. It allows organisations and individuals to ensure that personal information is dealt with legally, securely, efficiently and effectively in order to deliver the best possible care. Information Governance is a framework that brings together all of the requirements, standards and best practice that apply to the handling of personal information.

The importance of Information Governance (IG) is reflected in the effort devoted by the NHS Connecting for Health (CfH) to integrating a number of information initiatives and providing a uniform knowledge base, assessment and performance management toolkit across all areas of the health community (see 3).

From 1st April 2005 the Information Governance toolkit (IGT) and its continued development became part of the National Programme for IT (now known as NHS Connecting for Health (CfH)), which is appropriate due to the significant impact national systems will have on the IG at a local level.

The IGT is used as a performance measure and the introduction of national systems increase the importance of maintaining a suitable management framework to progress the IG agenda. The IGT is used by the Healthcare Commission to determine the quality of the PCT’s services.

IG is everyone’s responsibility. To develop information governance within the Trust there are five areas to be addressed: policies, training, operational practices, and audit and compliance and performance measurement.

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.

This document establishes the management framework to develop these areas, but the challenge lies in working at the grass roots level to engender the culture change necessary to comply with Department of health guidelines and legislation.

2. Principles

The Trust recognises the need for an appropriate balance between openness and confidentiality in the management and use of information. The Trust 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 Trust 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 Trust believes that accurate, timely and relevant information is essential to deliver the highest quality health care. As such it is the responsibility of all clinicians and managers 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
- Legal compliance
- Information security
- Quality assurance

2.1. Openness

- The Trust will be open and helpful in making information available to the public in line with the NHS code of openness and the Freedom of Information Act.
- The Trust will establish and maintain policies to ensure compliance with the Freedom of Information Act.
- The Trust will undertake or commission annual assessments and audits of its policies and arrangements for openness.
- Patients should have ready access to information relating to their own health care, their options for treatment and their rights as patients.
- The Trust will have clear procedures and arrangements for liaison with the press and broadcasting media.
- The Trust will have clear procedures and arrangements for handling queries from patients and the public.

2.2. Legal Compliance

- The Trust regards all identifiable personal information relating to patients as confidential.
- The Trust will undertake or commission annual assessments and audits of its compliance with legal requirements.
- The Trust regards all identifiable personal information relating to staff as confidential except where national policy on accountability and openness requires otherwise.
- The Trust will establish and maintain policies to ensure compliance with the Data Protection Act.
- Policies established will take into account the Human Rights Act and the common law confidentiality.
- The Trust will establish and maintain 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, Crime and Disorder Act, Protection of Children Act).
2.3. **Information Security**

- The Trust will establish and maintain policies for the effective and secure management of its information assets and resources.
- The Trust will undertake or commission annual assessments and audits of its information and IT security arrangements.
- The Trust will promote effective confidentiality and security practice to its staff through policies, procedures and training.
- The Trust will establish and maintain incident reporting procedures and will monitor and investigate all reported instances of actual or potential breaches of confidentiality and security.

2.4. **Information Quality Assurance**

- The Trust will establish and maintain policies and procedures for information quality assurance and the effective management of records.
- The Trust will undertake or commission 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.
- The Trust will promote information quality and effective records management through policies, procedures/user manuals and training.

3. **Responsibilities**

It is the role of the Trust Board to define the Trust's 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.

The Information Governance Steering Group is responsible for overseeing day to day Information Governance issues; developing and maintaining policies, standards, procedures and guidance, coordinating Information Governance in the Trust and raising awareness of Information Governance.

Managers within the Trust 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.
INFORMATION GOVERNANCE STRATEGY

4. Introduction

This strategy sets out the approach taken within the Trust to provide a robust Information Governance (IG) Framework for the current and future management of information.

Information Governance currently encompasses the following initiatives or work areas:

- Information Governance Management
- Confidentiality and Data Protection Assurance
- Information Security Assurance
- Clinical Information Assurance
- Secondary Uses Assurance
- Corporate Information Assurance

Others may be included as the scope Information Governance widens.

Information Governance has the following fundamental aims:

- To support the provision of high quality care by promoting the effective and appropriate use of information
- To encourage responsible staff to work closely together, preventing duplication of effort and enabling more efficient use of resources
- To develop support arrangements and provide staff with appropriate tools and support to enable them to discharge their responsibilities to consistently high standards
- To enable organisations to understand their own performance and manage improvement in a systematic and effective way.

The PCT has a statutory responsibility to patients and the public to ensure that the services it provides have effective processes, policies and people in place to deliver its objectives in relation to holding and using confidential and personal information. As a commissioner it will need to be assured that the services the PCT commissions from other organisations also comply with the core Standards for Better Health in relation to information governance.

This Strategy outlines the approach the PCT will take to ensure that it develops effective information governance processes throughout the organisation, which will enable the PCT to deliver its objectives and meet its statutory requirements.

5. The Scope of the Strategy

There are two key components underpinning this strategy, which are:

- The Trust Information Governance Policy, which outlines the objectives for information governance; and
- An annual action plan arising from the annual assessment against the standards set out in the NHS Connecting for Health, Information Governance toolkit and Standards for Better Health
The ultimate responsibility for Information Governance in the PCT lies with the Trust Board. The Information Governance Steering Group will have delegated responsibility from the Board to discharge its functions in this respect. The Information Governance Steering Group will be accountable through the Commissioning and Governance Committee to the Trust Board.

The Information Governance Steering Group has overall responsibility for overseeing the development and implementation of this strategy, the Information Governance Policy and the Information Governance Action Plan. These will be subject to a periodic review and progress reports to the Commissioning and Governance Committee.

A key function of the Information Governance Steering Group will be to monitor and review untoward occurrences and incidents relating to Information Governance and ensure that effective remedial and preventative action is taken.

The membership and terms of reference of the Information Governance Working Group will be agreed through the Commissioning and Governance Committee.

6. **Roles and Responsibilities**

The Director of Information and Corporate Performance has responsibility for Information Governance within the PCT and is responsible for reporting to the Board.

The Director of Quality Assurance is the PCT’s Caldicott Guardian.

The Information Governance Manager is responsible for day to day management of information governance with responsibility for overseeing the implementation of the Information Governance Action Plan.

All staff in the PCT have a responsibility to ensure they comply with the Information Governance Strategy and any associated Policies and Procedures.

This Strategy cannot be seen in isolation as information plays a vital part in the corporate governance, strategic risk, clinical governance, service planning, performance and business management. The strategy therefore links into all these aspects of the organisation and should be reflected in these respective strategies. In addition, the Board should consider Information Governance as a fundamental component within the Assurance Framework.

The over-riding critical success factor for effective Information Governance will be to develop a staff culture of good management of information, information systems and records. This will primarily be achieved by an effective programme of awareness and training identified and implemented by the Information Governance Manager.

The Information Governance Steering Group will identify any associated resource implications incurred by the implementation of the Information Governance Policy and Action Plan. Business cases will then be developed and submitted to the Trust Board for approval.

Performance against the action plan will be monitored by the Information Governance Steering Group and submitted to NHS Connecting for Health on an annual basis through the IG Toolkit.
7. Related Strategies and Policies

The Information Governance Steering Group and related subgroups, will produce strategies, policies and guidance on areas of Information Governance as required.

8. Conclusion

The implementation of the Information Governance Strategy, Policy and Action Plan will ensure that information is more effectively managed in the PCT. Each year the policy will be reviewed and a revised action plan developed against the IG Toolkit, to identify key areas for continuous improvement.

Acknowledgements

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