



**INFORMATION GOVERNANCE POLICY & STRATEGY**

**FINAL DRAFT**

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Responsible Person:

Endorsed by: Information Governance Committee

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## 1. Purpose

This document sets out the NHS Lanarkshire (NHSL) approach to Information Governance. This approach will ensure that NHSL works towards meeting its Information Governance requirements as defined in the IG Standards and by the development and implementation of relevant Protocols and Procedures.

## 2. 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.

Information Governance has four 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.

Information Governance covers the following topics:

- Data Protection
- Confidentiality
- Caldicott - Clinical Information
- Freedom of Information
- Information Management
- Information Security
- Health Records
- Administrative Records
- Data Quality.

### 2.1. Regulatory Requirements

NHS Lanarkshire regards all person identifiable information as confidential and NHSL will establish and maintain policies to ensure compliance with common law confidentiality and the Data Protection Act.

NHSL will undertake or commission annual assessments and audits of its compliance with legal requirements.

NHSL has established policies to maintain controlled and appropriate sharing of person identifiable information with other agencies and will continue to monitor and establish new agreements when necessary.

### **3. Information Governance Arrangements**

The information governance committee is responsible for overseeing IG issues and reports through the Clinical Governance Committee to NHS Lanarkshire Board.

The minutes and papers of the IG committee will be forwarded to the Clinical Governance Committee following each meeting of the IG committee.

The terms of reference and the membership of the IG Committee is appended

The Information Governance strategy will be guided by the Scottish Government's Information Governance Toolkit and delivered by the IG Committee.

#### **3.1 Statement of Principles**

This strategy/policy cannot be seen in isolation, it links into all aspects of the organisation. The implementation of this strategy will reduce the level of current risk associated with IG issues

The progress on IG issues will be reported to the Clinical Governance Committee as agreed. There is corporate, clinical and delivery representation on the IG committee to ensure IG is embedded within the organisational structure.

Fundamental to the success of delivering the IG strategy is developing an IG culture within NHS Lanarkshire. Awareness and training to all NHSL staff who utilise information in their day to day work is essential to promote this culture. The methods currently used to facilitate this are detailed in Section 7

#### **3.2 Compliance Process**

The monitoring of NHS Lanarkshire's position in achieving compliance with the IG Standards will be undertaken by employing the IG Toolkit and its reporting facilities.

Improvement, Action and Implementation plans will be devised using the information held in the IG toolkit. Improvement plans will be approved by the IG Committee. Progress reports will be made following each quarterly return.

#### **3.3 IG Toolkit**

Each NHS Board is required to submit a number of documents to supplement and support the information collected in the toolkit. These are:

Information Governance Policy  
Implementation Plan

In addition to this NHS Boards are required to submit, on an annual basis, the following:

Annual Report

Annual Incident Report

### **3.4 Approval and Submission Procedure**

The IG Toolkit will be maintained to support the monitoring of NHS Lanarkshire's compliance with the IG Standards.

An initial assessment will be carried out to establish a baseline of compliance. Areas where inadequate compliance is identified will form the basis of NHS Lanarkshire's Implementation Plan.

The Implementation Plan will further identify what action is required to achieve an acceptable level of compliance, these actions will be prioritised by the IG committee.

The prioritised Implementation Plan will be reviewed annually by the IG Committee and thereafter presented to the Clinical Governance Committee.

Progress reports based on the Implementation Plan will be presented to the Clinical Governance Committee quarterly.

The Quarterly Assessments will be approved by the Information Governance Committee prior to submission to the Information Governance Team at National Services Scotland.

#### **Submission**

NHS Lanarkshires Implementation Plan and Quarterly Assessment will be submitted to the Information Governance Team, NSS to the specified timetable (financial year quarters).

## **4. Openness**

NHS Lanarkshire is obliged to comply with legal and NHS codes of openness, on the operating and performance of business. Access will be provided to enable NHS Lanarkshire employees to make themselves aware of the guidelines and procedures that are in place to deal with requests by staff, patients and members of the public for information.

### **4.1 Statement of Principles**

Non-confidential information on NHS Lanarkshire and its services should be available to the public through a variety of media, in line with legal requirements and NHS codes of openness.

NHS Lanarkshire also makes this information available through its compliance with the Freedom of Information (Scotland) Act 2002.

Patients will have access to information relating to their care under the terms of the Data Protection Act 1998

Procedures and arrangements are in place for handling requests and queries from patients and the public under these Acts.

Procedures and arrangements are also in place for liaison with the press and broadcasting media.

## **5. Information Quality**

Information Quality is an important part of the Information Governance agenda in terms of data quality/integrity. Quality is generally defined, as 'fit for purpose' and all staff need to ensure that data is relevant and accurate. Good data quality means that data is recorded in full, as accurately as possible and in a timely manner. Timely data entry will help avoid discrepancies and inaccuracies. Where it is not possible to record data in real time this data should be recorded as soon after the event as possible.

### **5.1 Statement of Principles**

NHS Lanarkshire will establish and maintain policies and procedures for information quality assurance and the effective management of records.

NHS Lanarkshire 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 and record management within their services

Wherever possible the person responsible for recording information should ensure the quality and accuracy of that information.

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

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

## **6 Information Security**

Information security is the responsibility of managers and staff to ensure they follow approved guidelines and best practice. NHS Lanarkshire maintains an Information Security Policy that sets out in more detail everyone's responsibilities and best practice.

### **6.1 Statement of Principles**

NHS Lanarkshire will establish and maintain policies for the effective and secure management of its information assets and resources.

NHS Lanarkshire will undertake or commission annual assessments and audits of its information and IT security arrangements.

NHS Lanarkshire will promote effective confidentiality and security practices to its staff through policies, procedures and training.

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

## **7 Training**

NHS Lanarkshire provides training and guidance on Information Governance issues. It is the responsibility of managers and staff to ensure that they have adequate knowledge and access to appropriate resources.

### **7.1 Statement of Principles**

NHS Lanarkshire provides guidance and training on IG issues to all new staff at Induction.

Important/new IG issues and information will be communicated and made available on NHS Lanarkshire's intranet site Firstport.

To support the complexities of the organization the use of computer and web-based training material will be promoted.

## **8. Comments**

Any comments on this document should, in the first instance, be addressed to the Information Governance Manager.