

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

This policy is intended to be fully consistent and compatible with the policies and practices throughout The Berkshire Clinic's strategy for Information Governance and is developed to achieve compliance to the Care Quality Commission Outcomes.

**NOTE: Mindful of GDPR, if there is ANY doubt about sharing, sending or storing patient information, you must seek advice from the BMA, GMC, or medical indemnity organisation (MDU, Medical Protection etc.).**

## PURPOSE

The purpose of this policy is to provide details of the framework for implementation of the Information Governance (IG) strategy to enable the clinic to meet its responsibilities for the management of information assets and resources.

This policy applies to:

- All information used by The Berkshire Clinic
- All information systems managed by The Berkshire Clinic
- Any individual using information 'owned' by The Berkshire Clinic
- Any individual requiring access to information 'owned' by The Berkshire Clinic

## DEFINITIONS

### **Breach of Confidentiality**

A breach of confidentiality is the unauthorised disclosure of personal information provided in confidence.

### **Confidential Information**

Confidential information can be anything that relates to patients, staff or any other information (such as contracts, tenders etc.) held in any form (such as paper or other forms like electronic, microfilm, audio or video) howsoever stored (such as patient records, paper diaries, computer or on portable devices such as laptops, tablets, smartphones) or even passed by word-of-mouth. Person identifiable information is anything that contains the means to identify an individual.

### **Disclosure**

This is the divulging or provision of access to data.

### **Patient Identifiable Information**

Key identifiable information includes:

- Patient's name, address, full post code, date of birth;
- Pictures, photographs, videos, audio-tapes or other images of patients;

- The Berkshire Clinic patient identifiable codes;
- Anything else that may be used to identify a patient directly or indirectly. For example, rare diseases, drug treatments or statistical analyses which have very small numbers within a small population may allow individuals to be identified.

### **Public Interest**

Exceptional circumstances that justify overruling the right of an individual to confidentiality in order to serve a broader societal interest. Decisions about the public interest are complex and must take account of both the potential harm that disclosure may cause and the interest of society in the continued provision of confidential health services.

### **Sensitive Data**

Data held about an individual which contains both personal and sensitive information. There are only seven types of information detailed in the Data Protection Act 1998 that are deemed as sensitive:

- Racial or ethnic origin
- Religious or other beliefs
- Political opinions
- Trade union membership
- Physical or mental health
- Sexual life
- Criminal proceedings or convictions

## **RESPONSIBILITIES**

### **Medical Director**

The Registered Manager, Dr James Stirrup, is responsible for the management of The Berkshire Clinic and for ensuring appropriate mechanisms are in place to support service delivery and continuity. Maintaining confidentiality is pivotal to The Berkshire Clinic being able to supply a first-class confidential service that provides the highest quality patient care. The Berkshire Clinic has a particular responsibility for ensuring that it corporately meets its legal responsibilities, and for the adoption of internal and external governance requirements.

### **Caldicott Guardian**

The Berkshire Clinic's Caldicott Guardian, Dr Andrew Elkington, has a particular responsibility for reflecting patients' interests regarding the use of patient identifiable information. The Caldicott Guardian is responsible for ensuring patient identifiable information is shared in an appropriate and secure manner.

### **Registered Manager and Other Senior Staff**

It is the responsibility of the LLP Members, Registered Manager and senior staff to ensure the implementation of policies throughout their areas of responsibility. Senior staff should also react in an appropriate manner when informed of instances where behaviour is not in accordance with the policy that is set out herein.

### **All Staff**

All employees and anyone working on behalf of The Berkshire Clinic, involved in the receipt, handling or communication of person identifiable information, must adhere to this policy to support the reputation of The Berkshire Clinic and, where relevant, of their profession. Everyone has a duty to respect a data subject's rights to confidentiality.

### **AIM**

The Berkshire Clinic's Information Governance aims are to:

- Hold information securely and confidentially
- Obtain information fairly and efficiently
- Record information accurately and reliably
- Use information effectively and ethically
- Share information appropriately and lawfully
- Encourage best practice

### **Information Governance Principles**

The Berkshire Clinic recognises the need for an appropriate balance between openness and confidentiality in the management and use of information. The Berkshire Clinic 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 Berkshire Clinic also recognises the need to share patient information with other health providers and other agencies in a controlled manner consistent with the interests of the patient and, in some circumstances, the public interest.

The Berkshire Clinic believes that accurate, timely and relevant information is essential to deliver the highest quality health care. As such, it is the responsibility of all staff to ensure and promote the quality of information and to actively use information in decision-making processes (Appendix 2).

### **Responsibilities at The Berkshire Clinic**

All information used at The Berkshire Clinic is subject to handling by individuals and it is necessary for these individuals to be clear about their responsibilities, and for The Berkshire Clinic to provide and support appropriate education and training.

The Berkshire Clinic **must** ensure that legal requirements are met.

To manage its obligations, The Berkshire Clinic will issue and support standards, policies and procedures ensuring information is held, obtained, recorded, used and shared correctly.

The Berkshire Clinic will continue to report on the management of information risks, to include details of data loss and confidentiality breach incidents, to the Risk Management Committee.

The Berkshire Clinic will ensure an Information Governance audit is carried out at least annually.

### **Responsibilities of Users**

Users of information must:

- Be aware of their responsibilities, both legal and other, and that failure to comply may result in disciplinary action;
- Comply with policies and procedures issued by the Trust, and be aware that failure to comply may result in disciplinary action;
- Work within the principles outlined in the Information Governance framework;
- Undertake annual Information Governance training.

## **KEY ELEMENTS OF THE INFORMATION GOVERNANCE FRAMEWORK**

### **Legal Compliance**

- The Berkshire Clinic regards all identifiable personal information relating to patients as confidential.

- The Berkshire Clinic will undertake annual audits of its compliance with legal requirements.
- The Berkshire Clinic regards all identifiable personal information relating to staff as confidential except where national policy on accountability and openness requires otherwise.
- The Berkshire Clinic has established and will maintain policies to ensure compliance with GDPR, the Data Protection Act and Caldicott Guardian.
- The Berkshire Clinic has established and will maintain policies for the controlled and appropriate sharing of patient information with other agencies, and destruction of medical records taking account of relevant legislation (e.g. Health and Social Care Act).
- The Information Governance legal compliance requirements are linked to The Berkshire Clinic's confidentiality and disciplinary procedures as appropriate.

### **Information Security**

- The Berkshire Clinic has appointed a senior staff member to oversee information security.
- The Berkshire Clinic has appointed an external IT advisor whose remit includes IT security.
- The Berkshire Clinic has established, and will maintain standards and policies for, the effective and secure use and management of its information assets and resources.
- The Berkshire Clinic has established, and will maintain standards and guidance for, the effective and secure transfer of information into and out of The Berkshire Clinic.
- The Berkshire Clinic has established, and will maintain standards and policies for, the procedure for the disclosure of information.
- The Berkshire Clinic will undertake annual assessments and audits of its information and IT security arrangements.
- The Berkshire Clinic promotes effective confidentiality and security practice to its staff through policies, procedures and training.
- The Berkshire Clinic has established and will maintain incident reporting procedures, and monitors and investigates all reported instances of actual or potential breaches of confidentiality and security.

### **Information Quality Assurance**

- The Berkshire Clinic will establish and maintain policies and procedures for information quality assurance.
- The Berkshire Clinic will undertake or commission annual assessments and audits of its information quality.
- Wherever possible, information quality should be assured at the point of collection.
- The Berkshire Clinic will promote information quality through policies, procedures/user manuals and training.

### **Records Management**

- The Berkshire Clinic has established and will maintain policies and procedures for the effective management of records including transfer internally and externally (Appendix 1).
- The Berkshire Clinic will undertake or commission annual assessments and audits of its records management.
- The Berkshire Clinic promotes records management through policies, procedures and training.

### **Information Governance Training**

- The Berkshire Clinic has established and will maintain the Information Governance Training Programme for the effective delivery of Information Governance training, awareness and education.
- The Berkshire Clinic provides Information Governance induction training directed at all new members of staff.
- The Berkshire Clinic will establish annual mandatory Information Governance training.
- The Berkshire Clinic provides general Information Governance awareness on a regular basis through team meetings etc.

- Evaluation of Information Governance training will be undertaken to assess the effectiveness of the training and influence changes to future training.

### **Management of Clinical Governance**

- The Berkshire Clinic's Clinical Governance Committee is responsible for implementing the Information Governance Policy and supporting management framework, and does so via the appointed senior member of staff and the Risk Management Committee. See 'How Risks Are Managed at The Berkshire Clinic CT16'