



**General Register Office for Scotland**  
*information about Scotland's people*

**Paper NHSCR GB 4/08**

**NHSCR Scotland  
Information Governance Standards**

**November 2008**

**Note**

The attached version of the NHSCR's Information Governance Standards incorporates the comments made at the last meeting of the Board. Subject to further discussion, it will be finalised.

# Contents

Introduction

About Information Governance

## **Information Governance Standards**

Information Governance Policy and Planning

Confidentiality

Administrative Records

Data Protection

Caldicott

Information Security

Data Quality

Risk Assessment

Related Information and acknowledgment

## Introduction

Information Governance standards are in place to ensure that NHSCR Scotland handles and safeguards personal information.

This paper will highlight background to the current position and set out the standards (pages 4 to 11) as agreed with the Scottish Government Health Department and NHS Quality Improvement Scotland (NHS QIS). These standards will:

- Give back office information to Health Care staff to help them to trace patients.  
*We have access to ten electronic NHS, GROS, CR E/W systems. By using these data streams we are able to confirm patient identity and therefore ensure the correct movement of patient medical records.*
- Support the provision of high quality care by promoting the effective and appropriate use of information.  
*We work to Caldicott and CSAGS principles. We operate all confidentiality of data issues on a strictly 'need to know' basis. We work with Dr Lorna Ramsay, Associate Specialist PHM (Health Informatics), ISD Caldicott Guardian, ISD Clinical Lead for eHealth, NCDDP and Information Governance Programme, who acts as a Medical advisor to the Registrar General and Privacy Advisory Committee.*
- Encourage responsible staff to work closely together, preventing duplication of effort and enabling more efficient use of resources.  
*All NHSCR staff continually look for ways to improve our working practices. We also, hold regular meetings with Practitioner Services Divisions and CR England and Wales staff to ensure effective, efficient working.*
- Develop support arrangements and provide staff with the tools they need to discharge their responsibilities to consistently high standards.  
*We achieve a high level by monitoring and revising training, coaching and mentoring of staff all grades.*
- Let NHSCR understand their own performance and manage improvement in a systematic and effective way.  
*As part of our confirmation to Health of our value for money service we count all work in and out. This informs us of areas where we need to take action and adjust priorities.*

NHSCR are currently working to these standards. These help NHS organisations comply with the National Information Governance initiative. We are making the Information Governance standard available to all of our stakeholders.

## About Information Governance

Information Governance means handling information in a confidential and secure manner to appropriate ethical and quality standards. It is important to NHSCR Scotland because we collect and use lots of information for administrative, research and medical purposes, which contribute to improving people's health. Information Governance is a key issue for all organisations and is fundamental to the effective delivery of health and other services.

We take account of:-

- The Data Protection Act 1998
- The Freedom of Information (Scotland) Act 2002
- Confidentiality: NHSScotland Code of Practice (CSAGS)
- Records Management
- Information Security Standard
- NHS Data Quality Assurance (Data Accreditation)
- Caldicott Guardians
- Section 57 of the Local Electoral Administration and Registration Services (Scotland) Act 2006 (LEARS Act)

A governance framework is in place, which promotes the ethical and lawful use of information in enhancing decision-making to support and drive improvement.

## Information Governance Policy and Planning

<b>Standard</b>
There is a designated Director, Register General, with responsibility for the Board's Information Governance policy and implementation plan.
The Board has approved an Information Governance policy.
The Board has agreed a plan for the implementation and monitoring of the Information Governance policy.
The Board's Information Governance plan includes appropriate training for all staff on the elements of Information Governance (e.g. confidentiality, data protection, security and professional standards in information collection and processing).
All staff contracts contain clauses that clearly identify staff responsibilities for confidentiality, data protection and security.
Information Governance is embedded in the Board's business planning cycle and risk management agenda.

### **Confidentiality**

<b>Standard</b>
The NHSCR has mechanisms in place to ensure that all employees and other individuals participating in the delivery of information are aware of their responsibilities described in the NHSScotland Code of Practice on Protecting Patient Confidentiality.
The NHSCR has mechanisms in place to ensure that information is given to inform patients/clients about proposed uses of their personal information.
The NHSCR has an incident reporting procedure, known, accessible and used by all staff.

### **Freedom of Information**

<b>Standard</b>
The GRO(S) has a clearly identified, suitably qualified and supported lead individual, Information Manager (0131 314 4621), and responsible for the Freedom of Information (Scotland) Act 2002 (FoISA).
The GRO(S) has mechanisms in place to meet its statutory duties under FoISA.

A comprehensive system is in place to ensure the secure and confidential management of personal information including how it is obtained, recorded, used, shared, stored and disposed of in line with current legislation.

## Administrative Records

<b>Standard</b>
There is a Senior Manager, Information Manager (0131 314 4621), responsible for the implementation of the GRO(S) Records Management policy and implementation plan.
The GRO(S) has agreed a plan for the implementation and monitoring of the Records Management policy.
There are approved Records Management procedures for the closure, disposal and retention of documents, which may be enforced only by authorised personnel.
All GRO(S) staff are provided with appropriate information, instruction and training on Records Management.

Patients are informed about how their personal information is recorded and used, how to access their personal information, and about their rights to determine how their personal information is shared and protected.

## Data Protection

<b>Standard</b>
There is a clearly identified, suitably qualified and supported lead individual, Information Manager (0131 314 4621), responsible for Data Protection.
The GRO(S) ensures that all formal contractual arrangements include appropriate patient confidentiality, information security and data protection requirements for all contractors and support organisations.

Formal policies are in place to manage situations where consent to share information is withheld, and where disclosure of personal information is required without consent.

## Caldicott

<b>Standard</b>
The NHSCR has a clearly identified, suitably qualified and supported Caldicott Guardian, consultant to the Register General on medical and Health care confidentiality matters.
The NHSCR has mechanisms in place to control, monitor and audit access to confidential patient information.
The NHSCR has agreed protocols governing the sharing of patient-identifiable information with non-health organisations.

## Information Security

Information management links clearly into clinical governance arrangements and engages staff in the development and application of information and communication technology.

Systems are in place to ensure that staff have access to information to supported identity decision-making and facilitate delivery of quality services.

<b>Standard</b>
The GRO(S) has a formal risk assessment and management programme. It is supported by an Information Security Policy and overseen by senior management.
The GRO(S) has a clearly identified, suitably qualified and supported Information Security Officer (ITSO) (0131 314 4621), as part of an active management forum giving direction and visible support for initiatives relating to confidentiality, data protection and security.
The GRO(S)/NHSCR follow standards to reduce the risks of human error, theft, fraud or misuse or abuse of facilities. All its employees contract to abide by the contents of these standards.
The GRO(S) has procedures in place to prevent unauthorised access, damage and interference to its business premises and information.
The NHSCR management of network communications and operations ensures that all responsibilities for operational procedures are fully documented, including personnel roles and responsibilities, and the standards and procedures for the management and operation of Board networking services. All alteration to existing procedures are subject to formal change management and change control procedures.
All NHSCR personnel have defined and documented access rights and other security measures to protect the confidentiality, integrity and availability of any information processed by computers and communications systems. Business requirement for access control are defined and documented.
The NHS Contract Management Team ensures that the development and introduction of new information systems, software, IT projects and IT support activities are conducted in a secure manner.
The NHSCR has clearly defined and documented procedures for managing Information Security incidents.
The NHSCR has a fully managed process in place for developing and maintaining business continuity for all its critical infrastructure components and core services.
The NHSCR has appropriate procedures in place to ensure that information passed to and from other organisations is done so securely.

## Data Quality

Standard
There is an audit trail linking data entered to an individual.
There are agreed processes and timescales for the correction of errors and omissions identified by validation or internal users.
There is a clearly identified, suitably qualified and supported lead individual responsible for data quality, Head of NHSCR, (01387 259820).

## Risk Register

Risks
England and Wales move to the NHS Information Centre for Health and Social Care and migration to the Personal Demographic Spine (PDS).
Witness protection cases on NHSCR moving to the Citizen Account
GROS Extract: That data is used for unauthorised purposes
GROS: That data security is breached and that details fall into the wrong hands and is open to public scrutiny
Unauthorised access to the NHSCR server
Loss of information through destruction of Cairnsmore House by fire
Loss of information through destruction of Cairnsmore House by water
Accidental disclosure of information by staff
Intentional disclosure of information by staff
Accidental disclosure of information on portable media
Intentional disclosure of information on portable media
Accidental disclosure of information by data transfer mechanism
Intentional disclosure of information by data transfer mechanism
Accidental disclosure of information by e-mail
Intentional disclosure of information by e-mail
Accidental disclosure of information by fax
Intentional disclosure of information by fax
Accidental loss of information by courier service
Accidental disclosure of information by Post Office
Accidental disclosure of information to a visitor to Cairnsmore House
Intentional disclosure of information by a visitor to Cairnsmore House
Intruder in Cairnsmore House
Emergency Services personnel accessing Cairnsmore House



## **Related Information**

The source of this document is the NHSScotland Information Governance Standards December 2005.

The NHSScotland Information Governance Website  
[www.isdscotland.org/infogov](http://www.isdscotland.org/infogov)

The NHSCR website

<http://www.gro-scotland.gov.uk/national-health-service-central-register/index.html>

The NHS paper link

[http://www.nhshealthquality.org/nhsqis/files/CGRM\\_CSF\\_Oct05.pdf](http://www.nhshealthquality.org/nhsqis/files/CGRM_CSF_Oct05.pdf)