

ELIZABETH FINN HOMES LIMITED
exceptional care for the individual

Copies of all Elizabeth Finn Homes Limited (EFHL) HR Policies can be found on the EFHL Intranet. All EFHL employees are subject to EFHL HR Policies. EFHL HR Policies are non-contractual, are reviewed regularly and may be subject to change. All queries on the application or interpretation of this policy should be raised with the Head of Department or HR.

If you have any queries about your rights in relation to how we collect and store your personal information please speak to your manager or HR

10.2 - Information Governance

Policy Statement

Information is a vital asset, both in terms of the clinical management of individual residents 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 are in place and management accountability and structures provide a robust governance framework for information management.

It is equally important that all information is collected, handled and stored in accordance with Data Protection principles.

This policy provides such a framework.

This policy should be read in conjunction with the EFHL Data Protection and Confidentiality Policy, the EFHL IT Use Policy and the EFHL Privacy and Consent Notice.

Factors Underpinning the Information Governance Framework

Information Governance allows organisations and individuals to ensure that personal information is handled legally, securely, efficiently and effectively, in order to deliver the best possible care.

There are 7 key strands to the information governance policy:

- Accountability and responsibility for information governance
- Data protection and confidentiality
- Information security
- Information quality
- Information sharing with third parties
- IG assessment
- Contracts of Employment

Accountability and Responsibility for Information Governance

Elizabeth Finn Homes Ltd's (EFHL) Information Governance Lead is the CEO, supported by the IT Director. These roles will be subject to the overarching advice and guidance as appropriate of the Group Audit and Risk and Governance Committee.

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The Information Governance Lead is responsible for overseeing day to day Information Governance issues; developing and maintaining policies, standards, procedures and guidance, coordinating Information Governance in the company, raising awareness of Information Governance, ensuring that there is ongoing compliance with the policy and its supporting standards and guidelines, and informing staff of the above, as appropriate.

All staff, whether permanent, temporary or contracted are responsible for ensuring that they remain aware of the requirements incumbent upon them for ensuring information governance compliance on a day to day basis. These includes maintaining confidentiality of data, ensuring secure storage of data and being aware of situations where disclosure may be required or may not be required.

Data Protection and Confidentiality

This section of the IG framework is underpinned by EFHL's Data Protection and Confidentiality Policy of which all members of staff are aware.

EFHL's Data Protection and Confidentiality Policy summarises the main provisions of the Data Protection Act 2018 (UK GDPR) and what members of staff must do in order to comply with the Act.

Any new or amended processes or policies in the organisation will be specifically assessed as to their compliance with data protection and confidentiality protocols.

HR and Care audits and spot checks will monitor access to personal confidential information of residents and any potential issues will be raised with the IG Lead.

Data Protection training is mandatory for all staff.

Information Security

It is paramount that information within computerised and paper based systems is held securely. In this way residents will have confidence in EFHL's ability to manage their information securely and are therefore more likely to provide up-to-date information which ultimately improves the quality of care and services they receive.

The following broad steps are required:

- Standardised records creation, including naming and filing
- Appropriate storage of records
- Controlled access to records

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- Speedy location and retrieval of records when and where necessary.

Members of staff should be adequately trained to ensure that these steps are followed.

In addition to these practical steps the IT use policy provides a framework under which all relevant employees and contractors must act.

Information Quality

Information quality is an important part of information governance.

All members of staff will receive appropriate training to ensure that information they record is accurate, complete and appropriate. Residents should be encouraged, where appropriate, to check and verify information held about them and be allowed to point out any mistakes.

Residents should also be encouraged to inform an appropriate member of staff if any of their details have changed.

Consent

Where consent is required for specific information this will be requested on an individual and case by case basis. Consent will never be assumed.

There may be occasion where it will be in the best interests of the individual to process information without consent (such as a medical emergency or safeguarding incident). In such cases consent will be confirmed after the event where appropriate.

Information Sharing with Third Parties

The requirements for sharing resident information are assessed on an individual basis and will only be shared if written consent is obtained from the resident or their representative. This is recorded in the pre-admission assessment questionnaire.

Information may be shared with health and social care professionals and representatives with appropriate powers of attorney. The legal basis behind all requests for information will be assessed.

All uses and sharing of confidential personal information that do not have a clear legal basis are treated as data breaches and reported to the IG Lead.

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Assessment

Compliance with information governance requirements will be informally assessed and updated on an ongoing basis.

More formal information governance assessments will be performed annually to help identify good practice and highlight areas that require improvement. The NHS Data Security and Protection Toolkit will be referred to at this time.

Contracts of Employment

Contracts of Employment specifically reference the requirement for members of staff to comply with the current data protection legislation (the Data Protection Act 2018 (UK GDPR)).

There is also the general requirement within contracts of employment for all staff to comply with company policies and procedures, which includes the IT Use policy.

References:

- Data Protection and Confidentiality Policy
- IT Use Policy
- IT Security Policy
- EU GDPR Regulations 2018
- The Data Protection Act 2018 (UK GDPR)
- The Data Security and Protection Toolkit: <https://www.dsptoolkit.nhs.uk/>