

Information Governance Policy: PQIP

1. Purpose of the policy

The Information Governance policy provides an overview of how the Royal College of Anaesthetists (RCoA) and the Perioperative Quality Improvement Programme (PQIP) project manages information; its approach to information governance; a guide to the procedures in use; details about the Information Governance management structures within the organisation and the PQIP project and how it disseminates the importance of Information Governance to its staff and other stakeholders.

2. The RCoA's approach to Information Governance

The RCoA and the PQIP project undertake to implement information governance effectively and will ensure the following:

- Information will be protected against unauthorised access;
- Confidentiality of information will be assured;
- Integrity of information will be maintained;
- Information will be supported by the highest quality data;
- Regulatory and legislative requirements will be met;
- Business continuity plans will be produced, maintained and tested;
- Information governance training will be available to all staff as necessary to their role;
- All breaches of confidentiality and information security, actual or suspected, will be reported and investigated.

3. Key policies and procedures in use in the RCoA and specifically for PQIP

This Information Governance policy is underpinned by the following procedures:

- **RCoA Archiving Policy** that sets out how records will be created, used, stored and disposed of;
- **PQIP Information Governance Procedures** that sets out procedures for the management of patient level data for PQIP and transfer of confidential information;
- **RCoA Guidelines on Identifying and Reporting Information Incidents** that sets out the procedures for managing and reporting information incidents;
- **RCoA Business continuity plan** that sets out the procedures in the event of unexpected incidents to the premises, key personnel or to any important system that are relied upon for day to day operations.

4. Staff guidance in use in the organisation

Staff compliance with the policies below is supported by guidance/policy material:

- **RCoA Archiving Policy:** guidelines on good record keeping;
- **RCoA Data Protection Policy, PQIP Information Governance Procedures and RCoA Contract of Employment – Confidentiality Clause:** sets out the required standards to maintain the confidentiality of information and obligations around the disclosure of information

- **RCoA Electronic Communications Policy:** guidelines on the appropriate use of computer systems;
- **PQIP Patient Information Leaflet:** guidelines on the secure use of patient information;
- **RCoA Remote Access for Outlook, Removing Temporary Downloads:** guidelines on maintaining confidentiality and security when working with portable or removable computer equipment;
- **RCoA Guidelines on Identifying and Reporting Information incidents;**
- **RCoA Confidentiality Code of Conduct - specifically developed for staff working on the PQIP project:** produced to ensure all staff members at the RCoA, who are working on the PQIP project are aware of their legal duty to maintain confidentiality, to inform staff of the processes in place to protect personal information; and to provide guidance on disclosure obligations

5. Responsibilities and accountabilities

The designated **Information Governance Lead** for the organisation is Sharon Drake, Director of Clinical Quality and Research.

The key responsibilities of the Lead are:

- Data controller for the organisation;
- Developing and implementing IG procedures and processes for the organisation;
- Raising awareness and providing advice and guidelines about IG to all staff;
- Ensuring that any training made available is taken up;
- Coordinating the activities of any other staff given data protection, confidentiality, information quality, records management and Freedom of Information responsibilities;
- Ensuring that patient data is kept secure and that all data flows, internal and external are periodically checked against the Caldicott Principles;
- Monitoring information handling in the organisation to ensure compliance with law, guidance and local procedures;
- Ensuring patients are appropriately informed about the organisation's information handling activities. This will be managed through the teams dealing with the patient information through distribution of advice leaflets and communications with Patient Representative/Liaison Groups.

The day to day responsibilities for providing guidance to staff will be undertaken by Sharon Drake. All staff, whether permanent, temporary or contracted are responsible for ensuring that they are aware of and comply with the requirements of this policy and the procedures and guidelines produced to support it.