Heathgate Medical Practice
Policy and protocol
Information Governance

Summary

Information is a vital asset, both in terms of the clinical management of patients and the efficient management of services and resources. It also plays a key part in clinical governance, planning and performance management.

It is therefore important to ensure than information is efficiently managed and that policies and procedures are in place to provide a robust governance framework for the management of information.

Principles

The Practice recognises the need for an appropriate balance between openness and confidentiality in the management and use of information. The Partners fully support the principles of corporate governance and recognises the importance of the confidentiality of information, both personal information about patients and staff and commercial information about the Practice itself.

The Practice recognises the need to share patient information with other health organisations and other agencies in a controlled manner to protect the interests of its patients.

The Practice believes that accurate, timely and relevant information is essential to deliver the highest quality of care and so it is the responsibility of everyone in the Practice to ensure high quality information is recorded in patient's records to support decision making processes relating to patient care.

There are four key parts to this information governance policy:

* Openness
* Legal compliance
* Information security
* Quality assurance

Openness

The Practice will have a policy to comply with the Freedom of Information Act and a patient information leaflet to support this.

Patients have the right to access information contained within their medical record and the Practice will have a process for patients to request information from their record. The Practice will provide a

patient information leaflet on how to access copies of their medical record.

The Practice will have clear procedures and arrangements for liaison with the press.

Legal compliance

The Practice will regard all personally identifiable information as confidential.

The Practice will regard all personally identifiable information relating to staff as confidential.

The Practice has processes to comply with the Data Protection Act, Human Rights Act and the Common Law of Confidentiality.

The Practice has a policy and process relating to the sharing of patient information with other providers of health care, the Police, Norfolk County Council (Safeguarding) and other agencies.

Information security

The Practice will establish processes to ensure the secure management of information.

The Practice will promote confidentiality and security of information to its staff through policies, procedures and training.

The Practice will establish and maintain reporting process to deal with reported incidents or potential breaches of confidentiality.

Information quality assurance

The Practice will establish and manage processes relating to the management of medical records.

The Partners will take ownership of and seek to improve the quality of information within the Practice.

The Practice will promote information quality and the management of data entered into medical records through Practice policies and processes.

Responsibilities

It is the responsibility of the managing Partner to manage the Practice policy relating to Information Governance, taking into account all legal and NHS requirements.

The designated Information Governance lead in the Practice is our Managing Partner, Mr Garry Whiting, who is responsible for overseeing day to day information governance issues, managing policies, procedures and guidance.

He is responsible for co-ordinating Information Governance in the Practice and raising the awareness of Information Governance with employees and ensuring that the standards followed in the Practice meet the obligations of the NHS IGSOC tool kit.

All employees, Trainees and Partners are responsible for ensuring their remain aware of the requirements to remain IG complaint on a day to day basis.

Policy created by Garry Whiting   25th March 2011
Reviewed   4th March 2016
For review no later than   4th March 2017