

Bulk Transfer of (Electronic) Patient Records Policy

Version	2.0
Status	Ratified
Author/Lead	Information Governance & Data Protection Officer
Directorate	Finance and Performance
Ratified By	ICT & Information Governance Programme Group
Implementation Date	03 September 2010
Date of Last Review Date	08 July 2010
Date of Next Review	04 September 2011
Target Audience	All Staff

To be read with:

- Confidentiality and Data Protection Policy
- Acceptable Use of E-mail Policy
- Acceptable Use of The Internet Policy
- Acceptable Use of Information Systems Policy
- Information Security Policy
- Safe Haven Policy
- Serious Untoward Incident Policy

“The PCT incorporates and support the human rights of the individual as set out in the European Convention on Human Rights and the Human Rights Act 1998”

Version Control Record

Version	Description of Change(s)	Reason for Change	Author	Date
1.0	Initial Draft		Business Systems Manager	07/02/2008
1.1	Minor update to reflect requirements of Policy Development Policy	Annual Review	Information Governance and Data Protection Officer	07/04/2009
1.2	Made specific reference to electronic records.	Comments from ICT & IG Programme Group	Information Governance and Data Protection Officer	07/07/2009
1.3	Amendments to bring policy in line with Policy Development Policy Disciplinary and Monitoring and Review Sections added. Form added to Appendix. Minor name change.	Annual Review	Information Governance and Data Protection Officer	21/06/2010
2.0	Comments added from Reviewers	Annual Review and to take into account the Provider/ Commissioning split.	Information Governance & Data Protection Officer	08/07/2010

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1. Introduction

- 1.1 This policy is aimed at:
- All PCT staff who share patient or staff identifiable information as part of their work.
 - All PCT staff who have direct contact with patients as part of their responsibilities.
 - Line Managers and those with supervisory responsibilities.

2. Purpose

- 2.1 The purpose of this policy is to:
- Ensure that confidential electronic information is exchanged using safe, secure, and good practice processes.
 - Ensure compliance with the NHS Information Governance Policy, NHS Confidentiality Code of Conduct and Data Protection Act 1998.
 - To clearly set out guiding steps to follow when using various communications media such as fax, email, post to transfer or transmit bulk electronic information.
- 2.2 In so doing the PCT can:
- Transfer confidential information appropriately and efficiently.
 - Reduce risk of inadvertent loss/disclosure.
 - Protect patient information effectively.
 - Comply with legislation and best practice.

3. Scope

- 3.1 This policy applies to all employees of NHS Brent and Brent Community Services (BCS), including contracted and temporary staff.

4. Process

- 4.1 Bulk transfers of person-identifiable data (50+ records) must be authorised by the Trust's Caldicott Guardian and Business System's Manager. When seeking written authorisation (See Appendix 1) please provide the following details:
- Reason for transfer.
 - Recipients.
 - Format the data will take (i.e. soft copy or hard copy).
 - Data included & frequency of transfer.
 - Mechanisms to secure the data in transit.
 - Mechanisms to confirm receipt of the data.
- 4.2 If you require guidance on securing data please contact the Brent ICT Service Desk on 020 8795 6676 servicedesk@brentpct.nhs.uk.

5. Disciplinary Procedures

- 5.1 All suspected breaches of this policy will be investigated and may be subject to the Trust's formal disciplinary procedures. Serious breaches may result in immediate suspension and/or termination of contract, under the PCT Performance and Conduct Policy and the Serious Untoward Incident Policy.

6. Monitoring and Review

- 6.1 This policy will be reviewed once a year by the ICT & IG Programme Group. Auditing of this document should be done at least every two years based on monitoring the effectiveness of the policy in line with legislation and guidelines etc. An Audit Tool (Appendix 3) will be used for monitoring purposes. The document Assurance Form (Appendix 4) will be used by Managers to document embedding of policies.

Appendix 1 - Authorisation to Transfer Person Identifiable Data Form



This Form is to be filled in by the relevant Service Manager when it is necessary to undertake a Transfer of Person Identifiable Data from the PCT's network. This form should be sent to the Information Governance Officer for authorisation and risk assessment.

Service Area Details	
Service Manager Name:.....	
Email Address:..... Contact Number:.....	
Department:..... Directorate:.....	
Details of Data to be Transferred	
Data Description:	
.....	
.....	
Data contains the following details:	
Name <input type="checkbox"/>	D.o.B <input type="checkbox"/>
	Gender <input type="checkbox"/>
Ethnicity <input type="checkbox"/>	Medical Details <input type="checkbox"/>
	Address <input type="checkbox"/>
Other (please specify)	
.....	
.....	
Data Transfer Recipient or Source:	
.....	
.....	
Reason of Data Transfer	
.....	
.....	
Format of Data Transfer (i.e. electronic/paper based):	
.....	
Frequency of Data Transfer (i.e. One-Off, Monthly, Quarterly, Annually, etc.):	
.....	

Do you consider data to be highly sensitive? (if so please provide reason):

.....

.....

.....

Proposed mechanisms to secure the data in transit:

.....

.....

.....

Proposed mechanisms to confirm receipt of the data:

.....

.....

Service Manager Signature:..... Date:.....

Please return this form prior to commencement of data transfer to:

ICT Department
 Talbot Offices
 Wembley Centre for Health and Care
 116 Chaplin Road
 Wembley
 HA0 4UZ

Fax: 020 8795 6679

Any questions or problems please contact ICT Service Desk on 0208 795 6676.

ICT USE ONLY	
ICT Manager Approval:	
Name (Print):
Position:
Signature:.....	Date:.....

Appendix 2 - Equality Impact Assessment Tool

To be completed and attached to any procedural document when submitted to the appropriate committee for consideration and approval.

Summary

Document Author	Information Governance & Data Protection Officer
Directorate	Finance and Performance
Name of Document / Policy / Strategy / Procedure	Bulk Transfer of (Electronic) Patient Records Policy
Document Status	New Document <input type="checkbox"/> Existing Document <input checked="" type="checkbox"/>
Associated Policies, Strategies or Procedures	<ul style="list-style-type: none"> • Confidentiality and Data Protection Policy • Acceptable Use of E-mail Policy • Acceptable Use of The Internet Policy • Acceptable Use of Information Systems Policy • Information Security Policy • Safe Haven Policy
Date	DATE

Aim/Status

[a] What is the aim/purpose of the policy/strategy/procedure?
[b] Who is intended to benefit from this policy/strategy/procedure and in what way?
[c] How have they been involved in the development of this policy/strategy/procedure?
[d] How does it fit into the broader corporate aims?
[e] What outcomes are intended from this policy/strategy/procedure?
[f] What resource implications are linked to this policy/strategy/procedure?

Impacts

[a] what is the likely impact [whether intended or unintended, positive or negative] of the initiative on individual users or on the public at large?
[b] Is there likely to be differential impact on any group? If yes, please state if this impact may be adverse and give further details [e.g. which specific groups are affected, in what way, and why you believe this to be the case]

[i] Grounds of race, ethnicity, colour, nationality or national origin	Please tick box Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Please tick box Adverse? <input type="checkbox"/> Please give further details
[ii] Grounds of sex or marital Status Women and Men	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[iii] Grounds of gender: Transgender or Transsexual People	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[iv] Grounds of religion or belief: Religious /faith or other Groups with a recognised belief system	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[v] Grounds of disability	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[vi] Grounds of age: Older people, children and Young people	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[vii] Grounds of sexual orientation: Lesbian, gay, bisexual	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[viii] Grounds of carers: Older relatives, children	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
[ix] Grounds of human rights	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Adverse? <input type="checkbox"/> Please give further details
Is the policy directly discriminatory? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Is the policy indirectly discriminatory? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If you said yes, is this objectively justifiable or proportionate in meeting a legitimate aim Yes <input type="checkbox"/> No <input type="checkbox"/>	Is the policy intended to increase equality of opportunity by permitting positive action or action to redress disadvantage Yes <input type="checkbox"/> No <input type="checkbox"/> Please give details.
If the policy is unlawfully discriminatory it must go to a full impact assessment (please Contact the Equality, Diversity & Human Rights Advisor – Human Resources Directorate)		
Persons conducting EqIA		
Signed		Date

If you have identified a potential discriminatory impact of this procedural document, please refer it to the Equality & Diversity Manager together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact the Equality & Diversity Manager.

Appendix 3 - Audit Tool For The Bulk Transfer of (Electronic) Patient Records Policy

The following are five questions to assess your understanding and implementation of this policy

(Score yourself - Yes or No)

Do you understand the different definition of documents within the policy?	Yes / No
Do you understand the requirement for the main body of a document?	Yes / No
Do you understand the Ratification Process for documents?	Yes / No
Do you understand the Guidance on the Checklist required for writing documents?	Yes / No
Do you understand the process for reviewing / Archiving / consultation and version control?	Yes / No

If you score No for any of the questions, please re-read the relevant section of the policy. If you are still unclear please contact the author / service for clarification

A copy of this **should** be kept in your personal file and may be used as part of a continuous profession development folder.

Signed..... **Role**.....

Date.....

Appendix 5 - Policy Ratification and Publication

Policy Title (including version)		Date
Bulk Transfer of (Electronic) Patient Records Policy 2.0		08/07/2010
Reason for Submission (Please Tick)		
Scheduled Review	<input checked="" type="checkbox"/>	New Policy <input type="checkbox"/>
Urgent Amendments (Please specify)	<input type="checkbox"/>	Other <input type="checkbox"/>
<input type="text"/>		
Purpose of Policy		
This policy outlines the process to be used by staff when sending bulk (electronic) personal identifiable data outside of the PCT.		
Supporting Evidence Please state list of reviewers/stakeholders and their job title (use a separate sheet if required) along with evidence of their participation in the review/creation of the policy.		
Reviewers: <ul style="list-style-type: none"> • Head of ICT • Business Systems Manager • Information Governance & Data Protection Officer • Head of Information (NHS Brent) • Head of Governance (BCS) 		
New Policy:		
(Please reference sources of Best Practice used, and list applicable legislation)		
N/A		
Reviewed/Amended Policy:		
(Please provide full details of changes made, reference sources of Best Practice used, and list applicable legislation)		
Sources of Best Practice Used:		
<ul style="list-style-type: none"> • Policy Development Policy Amendments: <ul style="list-style-type: none"> • Policy Development Policy format. • Disciplinary section added. 		
Policy Equality Impact assessed		
TBC		
Policy Approval		
Name:	Chair of ICT & IG Programme Group	
Signature:		
Date:		
Policy Publication		
Date policy is uploaded on the intranet via the Communications Department		
TBC		
Policy to be e-mailed to Heads of Services to discuss at team meetings and staff		
TBC		
Policy to be audited annually		
TBC - Results to be fed back to ICT & IG Programme Group		