

## INFORMATION GOVERNANCE FOR 'ANY QUALIFIED PROVIDERS' (AQPs)

1. Information governance refers to all the measures put in place to protect the confidentiality and security of personal information while ensuring that it is accurate, up to date, can be relied on when taking decisions and is available to authorised people where and when needed.
2. Sir David Nicholson (NHS Chief Executive and NHS Commissioning Board CE) has recently confirmed that all organisations that have access to NHS patient data must provide assurances that they are practising good information governance and use the Department of Health's Information Governance Toolkit to evidence this. Where services are commissioned for NHS patients, the commissioner is required to obtain this assurance from the provider organisation and this requirement should be set out in the commissioner-provider contract.

### The Information Governance Toolkit

3. The Department of Health (DH) has developed an Information Governance (IG) Toolkit ([www.igt.connectingforhealth.nhs.uk](http://www.igt.connectingforhealth.nhs.uk)) that helps NHS and partner organisations to assure themselves and others that they are practising good information governance, by measuring their compliance against the law and central guidance and determining whether information is handled correctly and protected from unauthorised access, loss, damage and destruction.
4. Where partial or non-compliance is revealed, the IG Toolkit helps organisations to identify appropriate measures, (eg assign responsibility, put in place policies, procedures, processes and guidance for staff), with the aim of making cultural changes and raising information governance standards through year on year improvements. The ultimate aim is to demonstrate that the organisation can be trusted to maintain the confidentiality and security of personal information. This in-turn increases public confidence that 'the NHS' and its partners can be trusted with personal data.
5. The IG Toolkit contains lists of requirements for each organisation-type, against which organisations assess their attainment level. The attainment levels range from 0 to 3 and loosely correlate to the information in the table below. The levels are cumulative, e.g. you can only score at level 2 if you have all the evidence required for level 1.

ATTAINMENT LEVELS	
0	there is insufficient evidence to attain level 1
1	the organisation has begun to plan the policies, procedures and/or processes that are necessary to become compliant
2	there are approved and implemented IG policies and procedures in place that have been made available to all relevant staff
3	staff compliance and the effectiveness of the policies and procedures is monitored and assured

6. The DH IG Policy team is currently carrying out development and testing work on version 10 of the Toolkit, for which the scheduled release date is end May 2012. AQPs should carry out

an assessment using the appropriate version 10 AQP view. **NB:** there are two AQP views - one for AQPs providing clinical assessments and the other view for those not doing so (the latter view is relevant to those AQPs that are providing services, wheelchair or appliance based on another service's clinical assessment).

7. **To carry out an assessment, you need to be registered on the site.** Registration requests should be made to the National Helpdesk ([exeter.helpdesk@nhs.net](mailto:exeter.helpdesk@nhs.net)) for attention of IG Toolkit 3<sup>rd</sup> line and need to include the following information:
  - The name of the AQP,
  - The type of services provided,
  - The organisation code (if known),
  - The full address (including post code) of the AQP and
  - The contact details (name, phone, email address) of the person requiring registration.
8. Once registered on the site, you should spend a few minutes looking through the following three resources:
  - Select "About" from the top right hand banner for information about Information Governance and the role of the IG Toolkit.
  - Select "Help" from the left-hand menu and have a read through the "Quick Start Guide" for navigation tips, and
  - Also on the "Help" page under the heading *How to Complete Your Assessment*, read through the document for Any Qualified Providers.
9. To carry out an assessment, you should work through each of the requirements and enter evidence and scores that accurately reflect your current attainment level. Once complete, you will need to publish your assessment so that the relevant commissioner can obtain information about your use of the Toolkit. The baseline assessment will help you to identify any requirements on which more work is required. The central expectation is that AQPs will be attaining level 2 on all requirements of the IG Toolkit (ie policies and procedures have been approved, implemented and communicated effectively to all staff) within 12 months of completing the initial baseline assessment. Progress should be monitored by your commissioning organisation. Commissioning organisations may require shorter timescales for attaining level 2, in which case you will need to comply with the contractual requirement and ensure any improvements are implemented in accordance with that contract.
10. The IG Toolkit contains template policies and procedures that have been developed for AQPs and can be adapted for your organisation. These materials can be accessed in two ways:
  - Within each of the IG Toolkit requirement pages, there is a section headed 'Knowledge Base Resources' and within this section are three tabs: 'Key Resources', 'Exemplar Materials' and 'Useful Websites'. The exemplar materials sections contain the templates.
  - Click on 'Resources' on the left-hand side of the page and search within the entire 'Knowledge Base' (e.g. search 'AQP').
11. Should you have any difficulties logging in, or if you have any other queries regarding the IG Toolkit, then please contact the National Helpdesk on 0845 3713671 or [exeter.helpdesk@nhs.net](mailto:exeter.helpdesk@nhs.net)