

CALDICOTT ACIVITIES

REPORT TO TRUST BOARD JUNE 9th 2003

1. **Background**

The Caldicott report was published in December 1997. Its key purpose was to ensure the protection of and respect for information about patients. The primary emphasis of the report and that of the Data Protection Act that followed in 1998, was that of protecting confidentiality. The Act also contains, with some caveats, the requirement to allow patients to access information about themselves.

2. **The Audit Points**

The 18 audit points which outline the structure and extent of Caldicott work are assessed at levels 0,1,2. While there are procedures and documents that are required to be in place, the central plank of Caldicott is to raise awareness of patient information confidentiality within an organisation. For this reason it is not expected that maximum audit levels will be quickly achievable but that year on year improvements may be made.

A number of the audit points are interdependent and to a large extent can only progress in conjunction with each other and at the rate at which the organisation is capable. For example it is not possible simply to institute training of staff without establishing protocols and identifying and assigning responsibilities. Equally it is not possible simply to establish the latter without some degree of awareness training and mapping to allow the information to emerge upon which the protocols will depend.

3. **Information Group**

An Information Sharing and Protection work group began work in April 2003. It comprises staff who have so far been identified to have key roles and responsibilities. The present tasks of this group are to address and progress work on Caldicott and the Freedom of Information Act implementation. The group is coordinated by the Director of Central Services and the Caldicott Guardian. A member of administrative staff has been assigned to 0.2 of her time to service this group. Consideration is being given to a further allocation of 0.2 administrative staff time.

4. **Main Work to be Done**

Following a pilot in the Adolescent Department in 2002, **mapping** of information flows in the rest of the Trust is a priority. This is a time consuming and costly activity. The extent to which this would be required will depend on what may be extrapolated from the pilot to be applicable to the rest of the Trust. This will be part of the work of the information group which expects to report its recommendations to the Chief Executive in Autumn 2003.

Development of **Safe Haven** procedures and awareness.

Commencement of **awareness training** in conjunction with notification to all staff of relevant codes, policies, procedures and changes to contractual obligations.

Assigning Data sets ownerships

Review and re-draft ICT **Security Policy Document** and submit for approval. To build on that to develop a generic Trust Security Policy Document

Richard Davies

Caldicott Guardian May 2003

CALDICOTT RETURNS FOR 2002/03

This return has been approved by the Review of Central Returns Steering Committee –
ref. no ROCR/OR/0107

Full Name of Organisation: TAVISTOCK	
Organisational Code: RNK	
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ORGANISATIONAL PERFORMANCE AT THE END OF 2002/03	
18 Caldicott Management Audit Areas	Score 0,1 or 2 (whole figures only) {Figures in ()=2002}
1. Information for patients/clients on the proposed uses of information about them.	1(1)
2. Staff code of conduct in respect of confidentiality	2(1)
3. Staff Induction Procedures	1(1)
4. Confidentiality & Security Training needs assessment	1(1)
5. Training provision (confidentiality & security)	0(0)
6. Staff Contracts	2(1)
7. Contracts placed with other organisations	1(0)
8. Reviewing information flows containing patient-identifiable data	1(0)
9. Internal information/data "ownership" established	0(0)
10. Safe Haven procedures in place to safeguard information flowing to and from the organisation	1(1)
11. Protocols governing the sharing of patient-identifiable information with other organisations locally agreed.	0(0)
12. Security Policy Document	1(1)
13. Security Responsibilities	1(1)
14. Risk Assessment & Management	1(1)
15. Security Incidents	2(1)
16. Security Monitoring	1(1)
17. User Responsibilities	2(2)
18. Controlling access to confidential patient information	1(1)

NHS Specialist, Ambulance, Mental Health and Acute Trusts are required to submit Caldicott returns to the Information Policy Unit by 18th April 2003. Failure to submit the return in time may result in a zero score for PAF purposes. Returns can be sent electronically via email to: caldicottreturns@doh.gsi.gov.uk or alternatively by fax on 0113 254 6045 or sent via post addressed to Victoria Lowther, Information Policy Unit, Room 1N35C, Department of Health, Quarry House, Quarry Hill, Leeds. LS2 7UE.