



Please Note: This policy is currently under review and is still fit for purpose.

3rd Party Access to the Doncaster & Bassetlaw Hospitals NHS Foundation Trust's Network & Core Patient Systems

This procedural document supersedes: CORP/ICT 22 v.2 - Third Party Access to the Doncaster & Bassetlaw Hospitals NHS Foundation Trust's Core Patient Systems



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The Trust discourages the retention of hard copies of policies and can only guarantee that the policy on the Trust website is the most up-to-date version. **If, for exceptional reasons, you need to print a policy off, it is only valid for 24 hours.**

Name of author	Roy Underwood – Information Governance Lead
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Approved by (Committee/Group)	Information Governance Group
Date of approval	17 February 2015
Date issued	10 March 2015
Review date	Jan 2018 – extended to March 2020
Target audience:	Trust-wide & 3 rd Parties

3rd Party Access to DBHFT Network & Core Patient Systems**Amendment Form**

Version	Date	Brief Summary of Changes	Author
Version 3	10 March 2015	<ul style="list-style-type: none"> • Total rewrite to accommodate a new and automated access process. • Amendment to Policy Title 	R Underwood N Hall
Version 2	August 2011	Amendment to include the DBHFT Domain, and other nominated core systems	R Underwood A Khaliq
Version 1	January 2009	This is a new policy	R Underwood

3rd Party Access to DBHFT Network & Core Patient Systems**Contents**

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3rd Party Access to DBHFT Network & Core Patient Systems

1. POLICY AIM

External 3rd Party Organisations who have a legitimate need to access the Doncaster & Bassetlaw Hospitals NHS Foundation Trust's Domain and/or Core Patient Systems must comply with the following protocol in order to permit their staff access.

2. THE PROTOCOL

In permitting 3rd Parties access to its Domain and/or Core Patient Systems, the DBHFT requires that each of those designated 3rd Party Trusts:

- complies with the requirements of the Information Governance Toolkit at a 'Satisfactory Level 2', or they have agreeable actions in place to achieve level 2.
- has in place, specific policies which parallel the DBHFT's for Data Protection, Confidentiality Code of Practice, Information Governance, Safe Haven Guidance, and Information Security and Records Management in line with the requirements of the CfH Information Governance Toolkit (at Level 2 for all standards).
- will only permit access to those members of staff who have a legitimate organisational clinical/business need to access the DBHFT Domain and/or its patient records systems for our patient's continued healthcare management, and that any menu options each member of staff is given, accurately reflects those legitimate organisational needs.

Please note that: logins will not be issued if this protocol is not adhered to

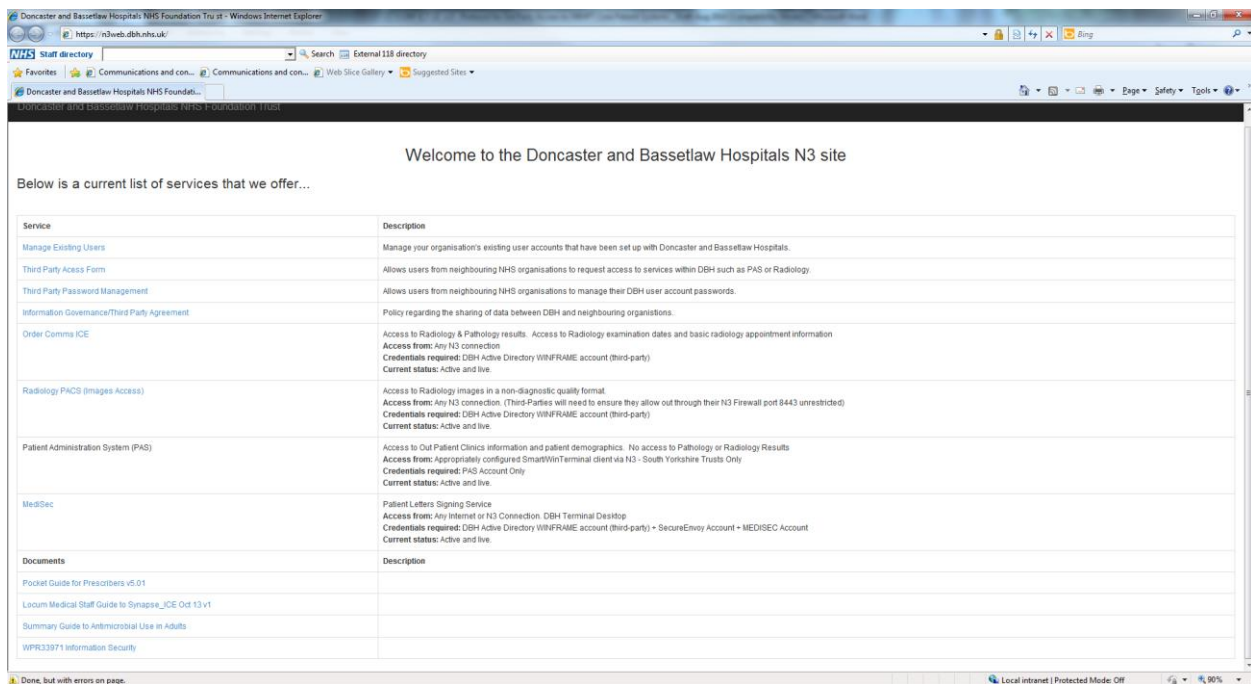
- Users will be expected to hold a current Information Governance training compliance
- access will be terminated as soon as it is no longer needed or in the case of an actual or alleged breach of conduct concerning patient confidentiality. The DBHFT's Caldicott Guardian and Information Governance Lead are to be notified - in Confidence - of such occurrences. Personal details need not be passed on - in any individual case - unless it is necessary and lawful.
- each Trust will agree to pre-arranged independent audit of its internal access control processes by the Doncaster & Bassetlaw Hospitals NHS Foundation Trust's Information Governance Lead.

3. THE PROCESS

The DBHFT will expect each of the 3rd Party Organisation's Caldicott Guardians or Clinical Leads to sign-up to this protocol and to record same in the relevant organisational minutes.

All prospective 3rd Party organisations will be expected to nominate Information Governance Leads from their organisation, who will be registered within the automated system. These are the only 3rd party staff who will be able to authorise the automated creation of an appropriate DBHFT Network/Systems Access Profile for their Users.

3rd Party IG Leads access the DBHFT system through a secure weblink: <https://n3web.dbh.nhs.uk/> where they will be able to customise their own Users access profile.



4. CALDICOTT GUARDIANS APPROVAL

Each organisation requesting access will be expected to seek and note approval of this protocol through their own Information Governance Forums. Copies of those minutes should be forward to the Doncaster & Bassetlaw Hospitals NHS Foundation Trust's Information Governance Lead for Audit purposes.

5. REVIEW

The protocol's effectiveness will be reviewed 3 yearly by the Trust's Information Governance Group and its overarching Controls Assurance sub-Committee.

6. 3RD PARTY SIGN UP

As an authorised 3rd Party to the Doncaster & Bassetlaw Hospitals NHS Foundation Trust Networked Systems, the Organisation identified below confirms that it meets and will continue to meet the requirements at Level 2 identified within HSCIC’s Information Governance Toolkit.

Organisation:

Caldicott Guardian or
Governance Lead:

Signature:

Date:

7. EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment for All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. (See Appendix 1)

8. MONITORING

The Information Governance Group will monitor compliance within each 3rd Parties overall Information Governance Compliance requirements under the Information Governance Toolkit and – where appropriate - MONITOR’s Compliance Framework, and relevant Information Risk Management and Incident Reporting Policies.

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Example: 3 rd Party Need/Usage 3 rd Party Caldicott Sign Up 3 rd Party IG Toolkit Compliance at Level 2	Head of Information Governance	Each Organisation is monitored half annually	On-Site Visits and minuted evidence from relevant IG control groups

9. REFERENCES

Caldicott Report
 HSCIC Information Governance Toolkit
 CORP/ICT 21 - Information Risk Management Policy

APPENDIX 1 – EQUALITY IMPACT ASSESSMENT - PART 1 INITIAL SCREENING

Service/Function/Policy/ Project/Strategy	CSU/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Information Governance	Finance & Infrastructure Directorate	Roy Underwood	Existing policy	17/2/2015
1) Who is responsible for this policy? Finance & Infrastructure Directorate:				
2) Describe the purpose of the service / function / policy / project / strategy? To provide a route for trusted 3 rd parties to gain access to DBH Systems for the safer and on-going management of our patients				
3) Are there any associated objectives?				
4) What factors contribute or detract from achieving intended outcomes? Failure – by the 3 rd Party - to achieve IG Toolkit Level 2 compliance				
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? NO				
<ul style="list-style-type: none"> If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] 				
6) Is there any scope for new measures which would promote equality? NO				
7) Are any of the following groups adversely affected by the policy?				
Protected Characteristics	Affected?	Impact		
a) Age	No			
b) Disability	No			
c) Gender	No			
d) Gender Reassignment	No			
e) Marriage/Civil Partnership	No			
f) Maternity/Pregnancy	No			
g) Race	No			
h) Religion/Belief	No			
i) Sexual Orientation	No			
8) Provide the Equality Rating of the service / function / policy / project / strategy – tick (✓) outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
<i>*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form in Appendix 4</i>				
Date for next review: January 2018				
Checked by: Roy Underwood			Date: 17/2/2015	