



# 3<sup>rd</sup> Party Access to the Doncaster and Bassetlaw Teaching Hospital NHS Foundation Trust's Network and Core Patient Systems

**This procedural document supersedes: CORP/ICT 22 v.3 – 3rd Party Access to the Doncaster & Bassetlaw Hospitals NHS Foundation Trust's Core Patient Systems**



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Date written	July 2019
Author/reviewer: (this version)	Information Governance Group
Date of approval	October 2019
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Target audience:	Trust-wide & 3 <sup>rd</sup> Parties

**Amendment Form**

<b>Version</b>	<b>Date</b>	<b>Brief Summary of Changes</b>	<b>Author</b>
Version 4	26 June 2020	<ul style="list-style-type: none"> <li>• Tri-Annual Review</li> <li>• Amendment to current data protection legislation</li> <li>• Review of automated access process based on legitimate relationships, GDPR A 9 2, and Art 6 1, and individual 3<sup>rd</sup> Party Data Security &amp; Protection Toolkit (DSPT) Compliance</li> </ul>	R Underwood - Data Protection Officer (DPO)/ D Linacre – IT Operations – Security and Continuity Manager
Version 3	10 March 2015	<ul style="list-style-type: none"> <li>• Total rewrite to accommodate a new and automated access process.</li> <li>• Amendment to Policy Title</li> </ul>	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

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## 1. POLICY AIM

External 3rd Party Organisations who have a legitimate need to access the Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust's (DBTH) 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 DBTH requires that each of those designated 3rd Party Trusts:

- complies with the requirements of the Data Security & Protection Toolkit (DSPT) at a 'Fully Met or Partially Met' rating, where they have actions agreed and in place with NHS Digital to achieve a 'Fully Met' rating.
- has in place, specific policies which parallel the DBTH's for Data Protection, Confidentiality Code of Practice, Information Governance, Safe Haven Guidance, and Information Security and Records Management.
- will only permit access to those members of staff who have a legitimate organisational clinical/business need<sup>1</sup> - 'a legitimate relationship' - to access the DBTH 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 DBTH'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 a pre-arranged, independent audit of its internal access control processes by the Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust's DPO/Information Governance Lead.

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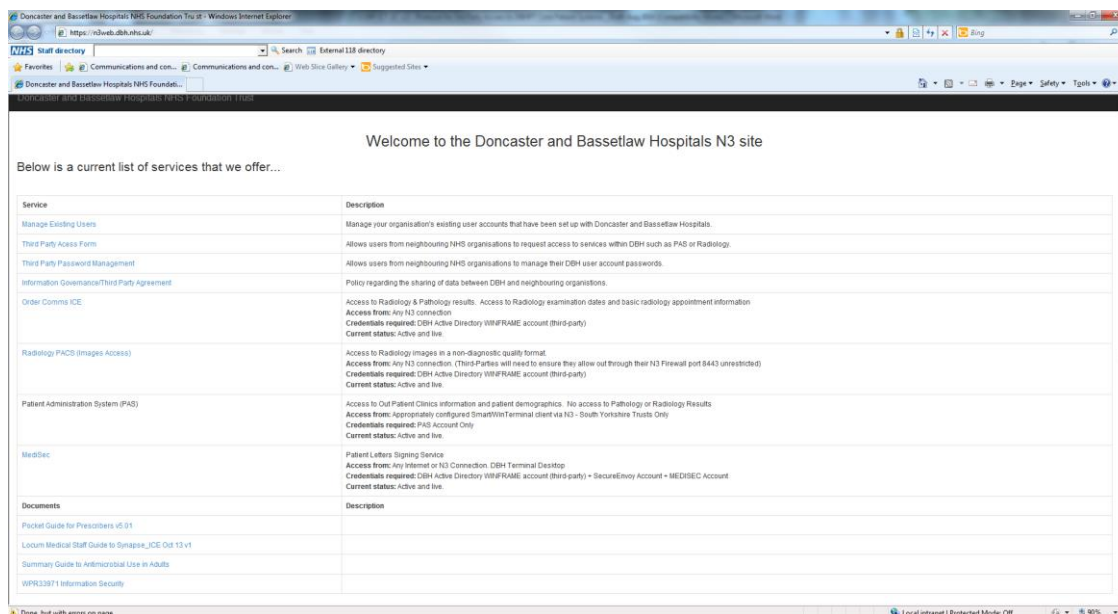
<sup>1</sup> As defined in GDPR Article 9 2(h) or 6 1(a - f)

### 3. THE PROCESS

The DBTH will expect each of the 3<sup>rd</sup> 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 3<sup>rd</sup> 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 3<sup>rd</sup> party staff who will be able to authorise the automated creation of an appropriate DBTH Network/Systems Access Profile for their Users.

3<sup>rd</sup> Party IG Leads access the DBTH system through a secure weblink: <https://n3web.dbh.nhs.uk/> where they will be able to customise their own Users access profile. Please note that the screen shot below is only indicative, and that it will change from time to time.



### 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 Teaching Hospitals NHS Foundation Trust's DPO/Information Governance Lead for Management and Audit purposes at: [dbth.dpo@nhs.net](mailto:dbth.dpo@nhs.net)

### 5. REVIEW

The protocol's effectiveness will be reviewed 3 yearly by the Trust's Information Governance Group and its overarching Controls Assurance Committee (A&RC).

**6. 3<sup>RD</sup> PARTY SIGN UP**



**Doncaster and Bassetlaw  
Teaching Hospitals**  
NHS Foundation Trust

As an authorised 3<sup>rd</sup> Party to the Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust Networked Systems, the Organisation identified below confirms that it meets and will continue to meet the requirements of the NHS Digital: Data Security & Protection Toolkit as ‘fully met’ or as ‘fully met with a plan agreed with NHS Digital’, and also the terms and conditions within this DBTH Policy Statement.

Organisation: .....

Caldicott Guardian or  
Governance Lead: .....

Signature: .....

Date: .....

Please copy this page to the Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust’s DPO/Information Governance Lead for Management and Audit purposes at: [dbth.dpo@nhs.net](mailto:dbth.dpo@nhs.net)

## 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 3<sup>rd</sup> 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
<b>Example:</b> 3 <sup>rd</sup> Party Need/Usage 3 <sup>rd</sup> Party Caldicott Sign Up 3 <sup>rd</sup> Party DSPT Compliance	DPO /Head of Information Governance	Each Organisation is monitored at least annually	On-Site Visits and minuted evidence from relevant 3 <sup>rd</sup> Party IG control groups

## 9. REFERENCES

Caldicott Reports  
 Data Security & Protection Toolkit (DSPT)  
 CORP/ICT 21 - Information Risk Management Policy

## APPENDIX 1 – EQUALITY IMPACT ASSESSMENT - PART 1 INITIAL SCREENING

Service/Function/Policy/ Project/Strategy	Division/Executive Directorate and Department	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Information Governance	IM&T Directorate	Roy Underwood	Existing policy	22/07/2019
<b>1) Who is responsible for this policy?</b> IM&T Directorate:				
<b>2) Describe the purpose of the service / function / policy / project / strategy?</b> To provide a route for trusted 3 <sup>rd</sup> parties to gain access to DBTH Systems for the safer and on-going management of our patients				
<b>3) Are there any associated objectives?</b>				
<b>4) What factors contribute or detract from achieving intended outcomes?</b> Failure – by the 3 <sup>rd</sup> Party - to achieve a Fully Met DSPT compliance				
<b>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?</b> NO				
<ul style="list-style-type: none"> <li>• If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation]</li> </ul>				
<b>6) Is there any scope for new measures which would promote equality?</b> NO				
<b>7) Are any of the following groups adversely affected by the policy?</b>				
<b>Protected Characteristics</b>	<b>Affected?</b>	<b>Impact</b>		
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			
<b>8) Provide the Equality Rating of the service / function / policy / project / strategy – tick (✓) outcome box</b>				
<b>Outcome 1 ✓</b>	<b>Outcome 2</b>	<b>Outcome 3</b>	<b>Outcome 4</b>	
<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>				
<b>Date for next review:</b> July 2022				
<b>Checked by:</b> David Linacre			<b>Date:</b> October 2019	