**Policy Responsibility**

The Practice Manager is responsible for implementation and review of this policy.

**Policy Location**

The Policy is stored in the IG folder on the Practice shared drive and on the Practice website.

**Review Date**

The Policy was reviewed in June 2022 and will be reviewed again in June 2023.

**Information Security Principles:**

The core information security principles are to protect the following information/data asset properties:

* ***Confidentiality (C) – protect information/data from breaches, unauthorised disclosures, loss of or unauthorised viewing***
* ***Integrity (I) – retain the integrity of the information/data by not allowing it to be modified***
* ***Availability (A) – maintain the availability of the information/data by protecting it from disruption and denial of service attacks***

In addition to the core principles of C, I and A, information security also relates to the protection of reputation; reputational loss can occur when any of the C, I or A properties are breached. The aggregation effect, by association or volume of data, can also impact upon the Confidentiality property.

For the NHS, the core principles are impacted, and the effect aggregated, when any data breach relates to patient medical data.

**Terminology**

|  |  |
| --- | --- |
| ***Term*** | ***Meaning/Application*** |
| ***SHALL*** | *This term is used to state a* ***Mandatory*** *requirement of this policy* |
| ***SHOULD*** | *This term is used to state a* ***Recommended*** *requirement of this policy* |
| ***MAY*** | *This term is used to state an* ***Optional*** *requirement* |

**Governance – Roles and Responsibilities**

**All Staff**

Information Security and the appropriate protection of information assets is the responsibility of all users. Individuals are expected at all times to act in a professional and responsible manner whilst conducting Practice business. All staff are responsible for information security and remain accountable for their actions in relation to NHS and other UK Government information and information systems. Staff shall ensure that they understand their role and responsibilities, and that failure to comply with this policy may result in disciplinary action. This will be reinforced by yearly mandatory training.

**Senior Information Risk Owner**

The Senior Information Risk Owner (SIRO) Deirdre Smouna, Practice Manager, is accountable for information risk within The Langton Medical Group and advises on the effectiveness of information risk management across the organisation. All Information Security risks shall be managed in accordance with the Langton Medical Group Risk Management Policy.

### **Information Governance Lead**

The Information Governance Lead (IG Lead) Dr Saptarshi Saha, GP Partner, is responsible for the day to day operational effectiveness of the Information Security Policy and its associated policies and processes. The IG Lead **shall**:

* Lead on the provision of advice to the organisation on all matters concerning information security, compliance with policies, setting standards and ensuring best practice
* Provide a central point of contact for information security
* Ensure the operational effectiveness of security controls and processes
* Monitor and co-ordinate the operation of the Information Security Management System.
* Be accountable to the SIRO and other bodies for Information Security across The Langton Medical Group.
* Monitor potential and actual security breaches with appropriate expert security resource.

**Caldicott Guardian**

The Caldicott Guardian Rosie Jones, Nurse Partner,is responsible for ensuring implementation of the Caldicott Principles and Data Security Standards with respect to Patient Confidential Data.

**Caldicott Principles**

* Principle 1 - Justify the purpose(s) for using confidential information
* Principle 2 - Don't use personal confidential data unless it is absolutely necessary
* Principle 3 - Use the minimum necessary personal confidential data
* Principle 4 - Access to personal confidential data should be on a strict need-to-know basis
* Principle 5 - Everyone with access to personal confidential data should be aware of their responsibilities.
* Principle 6 - Comply with the law
* Principle 7 - The duty to share information can be as important as the duty to protect patient confidentiality
* Principle 8: Inform patients and service users about how their confidential information is used

**Data Protection Officer**

The Appointed Data Protection Officer (DPO) Tara Moylan defined in the GDPR 2016 and UK GDPR 2021.

The Data Protection Officer is responsible for ensuring that The Langton Medical Group and its constituent business areas remain compliant at all times with Data Protection, Privacy & Electronic Communications Regulations, Freedom of Information Act and the Environmental Information Regulations. The Data Protection Officer shall:

* Lead on the provision of expert advice to the organisation on all matters concerning the Data Protection Act, compliance, best practice and setting and maintaining standards
* Provide a central point of contact for both internally and with external stakeholders, including the ICO
* Communicate and promote awareness of the Act across the Langton Medical Group
* Lead on matters concerning individuals right to access information held by The Langton Medical Group and the transparency agenda

**Information Asset Owners**

The Information Asset Owner Dr Saptarshi Saha, GP Partner and IG Lead) s senior/responsible individual involved in running the business area and shall be responsible for:

* Understanding what information is held
* Knowing what is added and what is removed
* Understanding how information is moved
* Knowing who has access and why

**Supporting Policies**

The Information Security Policy has further policies, standards and guides which support this policy. The supporting policies are grouped into 3 areas: Technical Security, Operational Security and Security Management. The Information Security Policy supports, the Langton Medical Group Physical and Personnel Security policies.

**Technical Security**

The technical security policies detail and explain how information security is to be implemented. These policies cover the security methodologies and approaches for elements such as: network security, patching, protective monitoring, secure configuration and legacy IT hardware & software.

**Operational Security**

The operational security policies detail how the security requirements are to be achieved. These policies explain how security practices are to be achieved for matters such as: data handling, mobile & remote working, disaster recovery and use of social media.

**Security Management**

The security management practices detail how the security requirements are to be managed and checked. These policies describe how information security is to be managed and assured for processes such as: information security incident response, asset management and auditing.

**Legislation**

The Langton Medical Groupis obliged to abide by all relevant UK and European Union legislation. The requirement to comply with this legislation shall be devolved to employees and agents of the Langton Medical Group, who may be held personally accountable for any breaches of information security for which they may be held responsible.

The Langton Medical Group shall comply with all relevant legislation appropriate and this includes but is not limited to:

* Data Protection Act 2018
* Freedom of Information Act 2000
* Health & Social Care (Safety & Quality) Act 2015
* Computer Misuse Act 1990
* General Data Protection Regulation (GDPR) 2016 & UK GDPR 2021

**Audit**

Audit will be performed as part of the ongoing the Langton Medical Group Audit Programme and the Information Governance Lead shall ensure appropriate evidence and records are provided to support these activities at least on an annual basis.

**Review**

**This policy will be reviewed annually**

|  |  |
| --- | --- |
| Review Due: | June 2023 |
| Mrs Rosie Jones, Nurse Partner | Caldicott Guardian |
| Dr Saptarshi Saha, GP Partner | Information Governance |
| Data Protection Officer | Tara Moylan |