



Department  
of Health

# Workforce Information Architecture

Sources of information on Information Governance  
for all providers of NHS-funded services

June 2013

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# Background

1. Meaningful information is essential not only to support the NHS care-giving process, but also to enable every NHS organisation to manage day-to-day governance, to make statutory returns to regulators and contractual returns to commissioners. These activities also inform the wider health system and ensure accountability for public money.
2. The Department of Health's position on the future use of information is set out in *The power of information: Putting all of us in control of the health and care information we need* (2012) <http://informationstrategy.dh.gov.uk/>. There is now an increased emphasis on collecting data that informs public and patient choice, helping clinicians to improve the quality of care, through a clear focus on improving outcomes.
3. The new system through which education and training is planned, commissioned, funded and delivered was outlined in the consultation document *Liberating the NHS: Developing the Healthcare Workforce* (2010) [http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Consultations/Liveconsultations/DH\\_122590](http://webarchive.nationalarchives.gov.uk/+www.dh.gov.uk/en/Consultations/Liveconsultations/DH_122590).
4. Following consultation and the advice from the NHS Future Forum the practical arrangements were described in *Liberating the NHS: Developing the Future Workforce - From Design to Delivery* published in January 2012 [http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH\\_132076](http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_132076).

# The new Workforce Information Architecture

5. The Workforce Information Architecture report (May 2013) outlines the Department of Health and Health Education England's (HEE) shared vision of planning for future workforce needs and securing funding for education and training that is underpinned by accurate, comprehensive, complete and timely workforce information, to ensure the workforce truly reflects the needs of local service users. This will meet the needs of patients, and providers, and commissioners of healthcare.
  
6. Information on the current workforce is a system-wide issue. Fundamental to the operation of the reformed system for the planning, commissioning and delivery of education and training will be the process of securing, analysing and managing information, both about the current workforce and about future workforce needs.

## Information governance guidance for all providers of NHS-funded services

7. What is information governance? Information governance is to do with the way organisations 'process' or handle information. In the NHS, it covers personal information, i.e. that relating to patients/service users and employees, and corporate information, eg financial and accounting records.
  
8. Information Governance provides a way for employees to deal consistently with the many different rules about how information is handled, including those set out in the:
  - Data Protection Act 1998
  - common law duty of confidentiality
  - Confidentiality NHS Code of Practice
  - NHS Care Record Guarantee for England
  - Social Care Record Guarantee for England
  - international information security standard: ISO/IEC 27002: 2005
  - Information Security NHS Code of Practice
  - Records Management NHS Code of Practice and
  - Freedom of Information Act 2000.
  
9. In supplying information to meet their obligations, providers should be aware both of their duties and responsibilities, and of established good practice. These are outlined in the joint letter from Sir David Nicholson, Chief Executive of the NHS in England and Christopher Graham, the Information Commissioner on 5th September 2011 Gateway Reference Number 16607, see: <http://www.nigb.nhs.uk/pubs/igplg/Joint-letter-from-DH-ICO.pdf>.

10. The following links provide more detailed information for all providers of workforce information:
  - For information on the Information Governance Toolkit (a performance tool produced by the Department of Health), see Annex A & <https://www.igt.hscic.gov.uk/>
  - For broad guidance on Information Governance (provided by the Health and Social Care Information Centre, HSCIC), see Annex B.
  - For specific guidance on Information Governance and the Electronic Staff Record (ESR), see Annex C.
11. Providers of NHS-funded services should also be aware of the Caldicott review, published in April 2013. The Caldicott report makes recommendations on the balance between sharing personal information and protecting individuals' confidentiality, taking into account; how to ensure that we improve the sharing of personal information to support the care of individuals; enable the further use of information more widely to improve health and social care services; protect individuals' confidentiality and respect their wishes in relation to how their information is used.
12. For further information, see: <http://caldicott2.dh.gov.uk/>.



# Annex A

## The Information Governance (IG) Toolkit

### What is the IG Toolkit?

The Information Governance Toolkit is a performance tool produced by the Department of Health (DH). It draws together the legal rules and central guidance set out above and presents them in one place as a set of information governance requirements. Further details are available at:

<https://www.igt.hscic.gov.uk/>

### What are the information governance requirements?

There are different sets of information governance requirements for different organisational types. However all organisations have to assess themselves against requirements for:

- management structures and responsibilities (eg assigning responsibility for carrying out the IG assessment, providing staff training, etc);
- confidentiality and data protection; and
- information security.

### What is the purpose of the information governance assessment?

The purpose of the assessment is to enable organisations to measure their compliance against the law and central guidance and to see whether information is handled correctly and protected from unauthorised access, loss, damage and destruction.

Where partial or non-compliance is revealed, organisations must take appropriate measures, (e.g. 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.

## Who has to carry out an information governance assessment?

Assessments must be completed by all organisations that fall under the responsibility of the DH, these are:

- NHS organisations (acute trusts, ambulance trusts, mental health trusts, primary care trusts and strategic health authorities) including foundation trusts
- adult social care
- community pharmacies
- dental practices
- eye care services
- general practices
- DH arms' length bodies (i.e. executive agencies such as the Medicines and Healthcare products Regulatory Agency; special health authorities such as the NHS Business Services Authority; and non-departmental public bodies such as the Health Protection Agency).
- There are additional categories of organisations that must also carry out IG assessments to provide an 'assurance' that they are adhering to good information governance practices. Examples of these are organisations that:
  - have access to NHS patients and/or to their information;
  - provide support services directly to an NHS organisation; or
  - have either direct or indirect access to the HSCIC, including N3 - the NHS National Network.

As stated, these are **examples** of typical organisations and there may be other categories that are also required to provide IG assurance. Depending on the services etc provided, these organisations are referred to in the IG Toolkit as either a Commercial Third Party or an NHS Business Partner.

A **Commercial Third Party** is an organisation external to the NHS, that contracts with an NHS establishment to provide goods, services or business that directly or indirectly support the care provided to patients by that establishment. For example this will include organisations that provide information services to the NHS (eg IT support), and also those that host or manage the N3 connection on behalf of another non-NHS organisation.

An **NHS Business Partner** is an organisation that, whilst remaining independent, works closely with NHS organisations and shares common goals for providing high standards of healthcare directly to patients. The category includes DH Arms Length Bodies (DH ALBs), referred to above, and Independent Treatment Centres. The term Independent Treatment Centre encompasses Independent Sector Treatment Centres (ISTCs), private hospitals, hospices, charitable foundations etc.

NHS Business Partners are distinct (in IG terms) from Commercial Third Parties, as the nature of their service(s) suggest that they are more likely to have a need to actively process patient or personal data on a regular basis. Commercial Third Parties should not under normal circumstances have such a requirement, although in exceptional cases (eg incident investigations) this may be required.

## When does the information governance assessment have to be done?

An assessment can be started at any time after a new version of the IG Toolkit is released (June/July each year) but in all cases the final submission must be made online by 31st March each year. NHS organisations are also required to complete interim assessments during the year - deadlines for interim submissions are publicised when a new version of the Toolkit is released.

The work necessary to make improvements or to maintain compliance should be an on-going process and not left until the year end.

Final submission assessment scores reported by organisations are used by the Care Quality Commission to risk assess outcome 21 - records (and other standards as appropriate) of Essential standards of quality and safety.

## Annex B

### **Broad Guidance on Information Governance provided by the Health and Social Care Information Centre (HSCIC)**

The HSCIC IG policies adhere to the NHS Codes of Practice for Confidentiality, Records Management and Information Security which are available on the DH website at:

<https://www.gov.uk/government/publications/confidentiality-nhs-code-of-practice>

<https://www.gov.uk/government/publications/records-management-nhs-code-of-practice>

<https://www.gov.uk/government/publications/information-security-management-nhs-code-of-practice>

### **Data Flows Transition Manual**

The major re-organisation of health and social care bodies effective from 1 April 2013 will result in significant changes to the current data flows.

To support transition arrangements the HSCIC has developed a manual that describes the practical steps bodies need to take to ensure information flows for purposes other than direct care are handled safely, securely and lawfully. This data flows transition manual is available on the HSCIC website at:

<http://www.hscic.gov.uk/dataflowstransitionmanual>

# Annex C

## **Specific Guidance on Information Governance and the Electronic Staff Record (ESR)**

Across the NHS in England and Wales organisations are using the Electronic Staff Record system (ESR) to plan and manage their workforce.

To help NHS organisations in ensuring that their workforce understands the core principles of Information Governance (IG), three of the core IG e-learning modules are available to all NHS employees in England using ESR.

- 000 Introduction to Information Governance
- 000 Information Governance: The Beginners Guide
- 000 Information Governance Refresher Module

More information on the content of these courses can be found on the ESR Support Website Catalogue pages

<http://www.esrsupport.co.uk/nlms/catalogue.php> or by viewing the course information within ESR if you are already a user.

These courses are managed nationally at no cost to individual Trusts.

Features on the system enable Trusts to report on training and compliance for upload into the IG Toolkit in minutes. This data is also available at a National Level.

Individual managers and employees are also able to keep track of their training needs and renewal dates of training (including Information Governance) both by viewing information on the system on their Learning home page and by the use of automatic reminders.

Working within the NHS you will most likely have HR and Payroll records entered in ESR to manage staff information within your organisation. If you are not yet utilising the e-Learning functionality in the system then contact your ESR Systems Administrator to find out the status of this within your Trust. [Click here](#) for more details on how to access ESR.

Your ESR Account Manager will also be able to assist with this process if it is not already in place. For a full list of ESR Account Managers [click here](#).

## Useful links

Electronic Staff Record website <http://www.esr.nhs.uk/home/>

Electronic Staff Record e-learning website <http://www.esr.nhs.uk/operational-esr/national-learning-management-system/>

ESR Support website <http://www.esrsupport.co.uk/nlms/>

National e-learning course catalogue  
<http://www.esrsupport.co.uk/nlms/catalogue.php>