

<b>Reference Number:</b> UHB 002	<b>Date of Next Review:</b> 8 <sup>th</sup> Nov 2019
<b>Version Number:</b> 3	<b>Previous Trust/LHB Reference Number:</b> T/57

## DATA PROTECTION ACT POLICY

### Policy Statement

To ensure that Cardiff and Vale University Health Board (the UHB) delivers its aims, objectives, responsibilities and legal requirements transparently and consistently, we will ensure that we fully comply with the requirements of the Data Protection Act 1998 (DPA) and in accordance with the [8 Data Protection Principles](#). Specifically [Section 4\(4\) of the Act](#) which states "it shall be the duty of the data controller to comply with the data protection principles in relation to all personal data with respect to which he/she is the data controller". The purpose of this Data Protection Act Policy is to ensure that the UHB and all UHB employees treat personal information lawfully and correctly thereby complying fully with the legislative requirements of the Act, when processing personal data.

Under DPA the UHB is required to register with the Information Commissioner's Office (ICO) as a data controller. The UHB is also subject to the 7 Caldicott Principles, NHS Guidance and professional codes of conduct. The UHB is therefore required to develop an organisational framework and staff culture to ensure that all patient and personal identifiable (PPI) information is managed sensitively, confidentially, legally and securely.

### Policy Commitment

The UHB is committed to:

- Ensuring that we comply with the eight data protection principles
- Meeting our legal obligations as laid down by the Data Protection Act 1998
- Ensuring that data is collected and used fairly and lawfully
- Processing personal data lawfully in order to meet our operational needs or fulfil legal requirements
- Taking steps to ensure that personal data is up to date and accurate
- Establishing appropriate retention periods for personal data
- Ensuring that data subjects rights can be properly exercised
- Providing adequate security measures to protect personal data
- Ensuring that a nominated officer is responsible for data protection compliance
- Ensuring that all staff are aware of good practice in data protection
- Providing adequate training for all staff
- Ensuring that guidance on handling personal data is available
- Ensuring that queries about data protection are dealt with effectively and promptly
- Regularly reviewing data protection procedures and guidelines
- Ensuring that the UHB complies with its obligations for Privacy Impact Assessments

Fulfilling these commitments will ensure the UHB compliance with the Act. All employees need to be aware of their duties and obligations under the Act, in order to reduce any potential risk of inappropriate/unlawful processing of personal data and may be processed and thereby ensuring that neither staff nor the UHB commit any offences under the Act.

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Approved By: People, Planning and Performance Committee		

## Supporting Procedures and Written Control Documents

This Policy and the supporting procedure describe the following with regard to Data Protection:

- How the UHB will ensure compliance with the DPA
- Responsibilities for all staff in relation to adhering to the Act and its Principles

### Other supporting documents are:

- [Freedom of Information Act Policy](#) and [Procedure](#)
- [Information Governance Policy](#)
- [Information Governance Operational Management and Responsibilities Procedures](#)
- [IT Security Policy](#) and Procedure
- [Data Protection Act Procedure](#)
- [Dealing with Subject Access Requests Procedure](#)
- [Records Management Policy](#) and [Procedures](#)
- [Records Retention and Destruction Protocol](#)
- [Confidentiality Code of Conduct](#)
- [Personal Information Use and Disclosure of and Duty to Share Guidance](#)
- [Transportation of Casenotes and Personal Identifiable Information Procedure](#)

### Scope

This policy applies to:

- All types of personal and patient identifiable data held by the UHB on computer, paper, imaging systems, visual and audio records, photographs, CCTV and any other media that records information traceable to an individual.
- All staff in all locations employed by the UHB including contractors, students, volunteers, honorary contract holders and anyone who provides a service on behalf of the UHB.

<b>Equality Impact Assessment</b>	An Equality Impact Assessment (EqIA) has not been completed as this policy forms part of the overarching <a href="#">Information Governance Policy and Framework</a>
<b>Health Impact Assessment</b>	A Health Impact Assessment (HIA) has not been completed as this policy forms part of the overarching Information Governance Policy and Framework
<b>Policy Approved by</b>	People, Planning and Performance Committee
<b>Group with authority to approve procedures written to explain how this policy will be implemented</b>	Information Governance Sub Committee review
<b>Accountable Executive</b>	Medical Director /Director of Corporate Governance

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<b>or Clinical Board Director</b>	
<b><u>Disclaimer</u></b>	
If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the <a href="#"><u>Governance Directorate.</u></a>	

<b>Summary of reviews/amendments</b>			
<b>Version Number</b>	<b>Date Review Approved</b>	<b>Date Published</b>	<b>Summary of Amendments</b>
1	31/03/2012	31/03/12	New policy superseding documents of predecessor organisations.
2	10/12/13	17/12/13	General title and reference updates. Additional information added regarding personal data security. Appendices incorporated into the policy document. Equality Impact Assessment undertaken and statement included.
3	8/11/16 (PPP)	08/03/2017	Re-structured into new required UHB format. Development of associated procedures to underpin and support the policy.