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Bwrdd Iechyd Prifysgol  
Caerdydd a'r Fro  
Cardiff and Vale  
University Health Board

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## **INFORMATION GOVERNANCE TRANSPORTATION OF CASENOTES AND PERSONAL IDENTIFIABLE INFORMATION (PII) PROCEDURE**

### **Introduction and Aim**

Cardiff and Vale University Health Board (the UHB) has an Information Governance (IG) Policy that was developed by the Information Governance Sub Committee (IGSC) and approved by the People, Performance and Delivery (PPD) Committee. A key element of the IG policy is to ensure that there are effective arrangements in place for the safe and secure transportation of casenotes and all other personal identifiable information both within and outside the organisation's boundaries. This information may be defined as health and non health records in a paper format. Electronically held information is covered by the IT security policy.

This procedure sets out detailed guidance including individual responsibilities. It clearly defines the transportation arrangements, management organisation and responsibilities of staff. This procedure has been approved by the Information Governance Sub Committee (IGSC).

### **Commitment**

Employees will ensure that:

- Information is transported safely and securely within and without the organisation's boundaries
- Information is held securely and confidentially at the point of pick up and set down
- Information is tracked using the UHBs tracking systems from storage file to storage file where this system is in place.
- Information transport systems are risk assessed and appropriately managed

The UHB has a training programme devised to enable staff to process information including transportation appropriately to ensure that legal requirements, standards and obligations are met by the UHB.

All employees must adhere to this procedure. Inappropriate management of data and information may lead to disciplinary action. Serious breaches, for example disclosure of personal identifiable information, theft and misuse of information technology through acts and omissions of staff may constitute gross misconduct and lead to dismissal and possibly police involvement. All staff, whether permanent, temporary or contracted (including students, contractors or volunteers and those on honorary contracts) are responsible for ensuring they are aware of information governance requirements and that they comply with these on a daily basis on a daily basis.

### **Management Responsibilities**

**Deputy Senior Information Risk Officers (SIROs) Clinical Boards and Corporate**

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**Departments** The Deputy SIROs are responsible for ensuring that staff:

- Are clear about their responsibilities at all levels in the organisation
- receive the required training
- comply with the procedures
- undertake risk assessments as appropriate and
- manage any incidents taking remedial action as necessary to prevent any further incidents..

In addition the Deputy SIROs are responsible for:

- Assuring the UHB SIRO that they have appropriate arrangements in place
- Reporting any inappropriate disclosures or loss of information to the Caldicott Guardian
- Liaising with the Information Governance team for advice and incident reporting.

**Monitoring Arrangements** The UHB shall routinely monitor its performance for.

- Overall compliance – the UHB SIRO
- Local compliance - clinical boards and corporate services
- Corporate arrangements - the IGSC

### **Operational management**

Any data, documents or files which contain personal identifiable information including personal and sensitive information are highly confidential documents. Every care must be taken at all times to ensure their safety and confidentiality when transporting wherever this occurs. All relevant UHB policies and procedures must always be followed.

### **Lifting , Handling and Transportation of Casenotes and other Patient or Personal Identifiable Information**

Staff must be aware of, trained in and employ safe procedures for the manual handling and physical transportation of clinical and all other personal records as set out in the manual handling policy and any local guidelines.

### **Operating procedures for various transportation lines**

The detailed Transportation of Patient Identifiable Information Procedures are attached in appendix 1.

### **Scope**

This procedure applies to all UHB staff in all locations including those with Honorary Contracts.

### **Equality Impact Assessment**

An Equality Impact Assessment has been completed for the overarching IG Policy. The assessment found that there was some impact on the equality groups mentioned in relation to communication. An action plan has been developed to address those areas.

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<b>Documents to read alongside this Procedure</b>	
<b>Approved by</b>	People, Performance and Delivery Committee
<b>Accountable Executive or Clinical Board Director</b>	Senior Information Risk Officer
<b>Author(s)</b>	Head of Information Governance and Assurance

**Disclaimer**

If the review date of this document has passed please ensure that the version you are using is the most to date either by contacting the document author or the Governance Directorate.

Summary of reviews/amendments			
Version Number	Date of Review Approved	Date Published	Summary of Amendments
1	26/02/2015	29/06/2015	New document

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## Appendix 1

### Procedure

#### Transport of Patient / Personal Identifiable Information (PII) Transport or movement within the hospital site

- Casenotes and other personal information are transported from place to place by administrative staff in trolleys.
  - **Always** keep the trolley in a secure place and information safe.
  - **Do not** expose patient details on the notes or other paperwork
  - **Always** track the notes out and in on the PMS tracking module
  - **Always** ensure that they are received safely at the next point of contact
  - **Never** leave the trolley unattended
  
- Casenotes and other personal information are transported from ward to ward and clinicians/secretaries offices by authorised individuals. e.g. porters.
  - **Always** keep the information safe and in your possession/sight when in transit.
  - **Do not expose** patient details on the notes or other paperwork
  - **Always** track the notes out and in on the PMS tracking module
  - **Always** ensure that they are received safely at the next point of contact
  
- Casenotes and other personal information are transported from wards and clinics by authorised individuals.e.g. porters,
  - **Always** keep the information safe and in your possession/sight when in transit.
  - **Always** use strong sealed envelopes with **only** destination to and from on the front
  - **Always** track the notes out and in on the PMS tracking module
  - **Always** ensure that they are received safely at the next point of contact
  
- Casenotes and other personal information are transported within the site by internal post.
  - **Do not** expose patient details on the envelope
  - **Always** use strong sealed envelopes with destination to and from on the front
  - **Always** track the notes out on the PMS tracking module
  - **Always** place in designated pick up points and address clearly to designated safe reception points.

**Key message: Always ensure that you protect information from any loss or disclosure at all times**

**IMPORTANT NOTE:** Safe and secure transport of person identifiable information (PII) is vitally important. If you are unsure what action to take,

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contact your supervisor. Handling and processing of PII requires compliance with the Data Protection Act, Caldicott recommendations and the NHS Code of Confidentiality and you must adhere to the procedure at all times. Deviation from the agreed procedure renders you liable to disciplinary action.

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**Procedure**  
**Transport of Patient / Personal Identifiable Information (PII)**  
**Transport between hospital sites in the UHB**

- The Welsh Ambulance Service Transport (WAST) Health Courier Service (HCS) is contracted by the UHB to provide a routine postal service within the UHB and externally.
  - **Always** use the system **routinely**
  - Place the PII in strong sealed envelopes to ensure integrity.
  - **Attach clear instructions** as to where they are going and where they came from.
  - **Restrict** patient identifiable details to the minimum for safe transfer.
  - **Always** track the notes out and in on the PMS tracking module or equivalent
  - **Always** ensure that they are received safely at the next point of contact
  
- Where there is an **urgent** need to transport PII directly from one site to the other the following options apply:
  - Contact WAST
  - Authorised clinical, managerial or administrative staff

If the WAST HCS service are unable to help the authorised person transporting the PII **must**

- **Transfer** casenotes in the locked boot of a car
- **Maintain** full custody of the casenotes when in transit.
- **Attach clear instructions** on the PII as to where they are going and where they came from.
- **Restrict** patient identifiable details to the minimum for safe transfer.
- **Always** track the notes out and in on the PMS tracking module or equivalent
- **Always** ensure that they are received safely at the next point of contact

**Do not** carry casenotes and other confidential material whilst cycling. If there is no alternative a risk assessment must be carried out and all actions taken to mitigate the risk. A record of the risk assessment must be retained

**Key message: Always ensure that you protect information from any loss or disclosure at all times**

**IMPORTANT NOTE:** Safe and secure transport of person identifiable information (PII) is vitally important. If you are unsure what action to take, contact your supervisor. Handling and processing of PII requires compliance with the Data Protection Act, Caldicott recommendations and the NHS Code

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of Confidentiality and you must adhere to the procedure at all times. Deviation from the agreed procedure renders you liable to disciplinary action.

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**Procedure**  
**Transport of Patient / Personal Identifiable Information (PII)**  
**Transport from the UHB to the community and homeworking environment**

- Where there is an **unavoidable** need to transport patient identifiable information (PII) to a community or homeworking environment.
  - **Secure** the PII in a strong sealed envelope or lockable bag to ensure safety and confidentiality
  - **Restrict** PII details to the minimum for safe transfer.
  - **Do not expose** patient details.
  - **Transport** the PII in a locked car boot
  - **Maintain** full and safe custody of the PII when in transit and use.
  - **Do not** leave PII in the car boot overnight and keep in a safe and confidential area in the home
  - **Ensure** that the PII are returned to the base hospital in as soon as possible

**Do not** carry PII and other confidential material whilst cycling. If there is no alternative a risk assessment must be carried out and all actions taken to mitigate the risk. A record of the risk assessment must be retained

It is recommended that suitable staff migrate to electronic homeworking arrangements wherever necessary and possible.

It is recommended that encrypted electronic media be used where possible. Encrypted memory sticks are available from the IT helpdesk.

Electronic security is covered by the IT Security Policy.

**Key message: Always ensure that you protect information from any loss or disclosure at all times**

**IMPORTANT NOTE:** Safe and secure transport of person identifiable information (PII) is vitally important. If you are unsure what action to take, contact your supervisor. Handling and processing of PII requires compliance with the Data Protection Act, Caldicott recommendations and the NHS Code of Confidentiality and you must adhere to the procedure at all times. Deviation from the agreed procedure renders you liable to disciplinary action.

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**Procedure**  
**Transport of Patient /Personal Identifiable Information (PII)**  
**Transport from the UHB to another Health Board/Trust**

- Routine transfer to another health board or trust is by the WAST or Royal Mail or might accompany the patient on transfer.

By WAST or Royal Mail

- **Always** use this system **routinely**
- Place the casenotes in a strong sealed envelope to ensure safety and confidentiality.
- **Restrict** patient identifiable details to the minimum for safe transfer
- **Attach clear name and address**
- **Do not** expose patient details other than that required by the postal service
- For **urgent** situations contact WAST.
- Recorded or registered post is preferred

If the WAST service are unable to help the authorised person transporting the PII **must**

- **Transfer** casenotes in the locked boot of a car
- **Maintain** full custody of the casenotes when in transit.
- **Attach clear instructions** on the PII as to where they are going and where they came from.
- **Restrict** patient identifiable details to the minimum for safe transfer.
- **Always** track the notes out and in on the PMS tracking module or equivalent
- **Always** ensure that they are received safely at the next point of contact

**Do not** carry casenotes and other confidential material whilst cycling. If there is no alternative a risk assessment must be carried out and all actions taken to mitigate the risk. A record of the risk assessment must be retained

With the patient

- **Always** use this system **routinely**
- Place the casenotes in a strong sealed envelope to ensure safety and confidentiality.
- **Attach clear instructions** as to where they are going and where they came from.
- **Restrict** patient identifiable details to the minimum for safe transfer. Do not expose patient details

It is recommended that encrypted electronic media be used where possible. Encrypted memory sticks are available from the IT helpdesk.

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**Key message: Always ensure that you protect information from any loss or disclosure at all times**

**IMPORTANT NOTE:** Safe and secure transport of person identifiable information (PII) is vitally important. If you are unsure what action to take, contact your supervisor. Handling and processing of PII requires compliance with the Data Protection Act, Caldicott recommendations and the NHS Code of Confidentiality and you must adhere to the procedure at all times. Deviation from the agreed procedure renders you liable to disciplinary action.

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**Procedure**  
**Transport of Patient/ Personal Identifiable Information (PII)**  
**Transport from the UHB to a patient**

- Routine transfer to a patient is by the Royal Mail
  - **Always** use this system **routinely**
  - Place the casenotes in a strong sealed envelope to ensure integrity.
  - **Restrict** patient / personal identifiable details to the minimum for safe transfer
  - **Attach clear name and address and** Do not expose patient details other than that required by the postal service
  - For **urgent** situations contact Information Governance Dept.
  - Recorded or registered post is recommended

If the WAST service are unable to help the authorised person transporting the PII **must**

- **Transfer** casenotes in the locked boot of a car
- **Maintain** full custody of the casenotes when in transit.
- **Attach clear instructions** on the PII as to where they are going and where they came from.
- **Restrict** patient identifiable details to the minimum for safe transfer.
- **Always** track the notes out and in on the PMS tracking module or equivalent
- **Always** ensure that they are received safely at the next point of contact

**Do not** carry PII and other confidential material whilst cycling. If there is no alternative a risk assessment must be carried out and all actions taken to mitigate the risk. A record of the risk assessment must be retained

Managers may wish to deliver information directly to the patient. The secure, safe and confidential packaging of that information must comply with the procedures set out above.

It is recommended that encrypted electronic media be used where possible. Encrypted memory sticks are available from the IT helpdesk.

**Do not** e-mail to non Welsh NHS addresses

**Key message: Always ensure that you protect information from any loss or disclosure at all times**

**IMPORTANT NOTE:** Safe and secure transport of person identifiable information (PII) is vitally important. If you are unsure what action to take, contact your supervisor. Handling and processing of PII requires compliance with the Data Protection Act, Caldicott recommendations and the NHS Code of Confidentiality and you must adhere to the procedure at all times. Deviation from the agreed procedure renders you liable to disciplinary action

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**Procedure**  
**Transport of Patient / Personal Identifiable Information (PII)**  
**Transport from the UHB to solicitors or**  
**other accredited organisations**

- Routine transfer to another Solicitors or other accredited organisations by Royal Mail
  - **Always** use this system **routinely**
  - Place the casenotes in a strong sealed envelope to ensure safety and confidentiality.
  - **Restrict** patient identifiable details to the minimum for safe transfer
  - **Attach clear name and address and** Do not expose patient details other than that required by the postal service
  - **Recorded or registered post is preferred**
  - For **urgent** situations contact WAST

If the WAST service are unable to help the authorised person transporting the PII **must**

- **Transfer** casenotes in the locked boot of a car
- **Maintain** full custody of the casenotes when in transit.
- **Attach clear instructions** on the PII as to where they are going and where they came from.
- **Restrict** patient identifiable details to the minimum for safe transfer.
- **Always** track the notes out and in on the PMS tracking module or equivalent
- **Always** ensure that they are received safely at the next point of contact

**Do not** carry casenotes and other confidential material whilst cycling. If there is no alternative a risk assessment must be carried out and all actions taken to mitigate the risk. A record of the risk assessment must be retained

It is recommended that encrypted electronic media be used where possible. Encrypted memory sticks are available from the IT helpdesk.

**Do not** e-mail to non Welsh NHS addresses

**Key message: Always ensure that you protect information from any loss or disclosure at all times**

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**Procedure**  
**Transport Patient / Personal Identifiable Information (PII)**  
**Transport of from the UHB to another country**

- Routine transfer to another country is by the Royal Mail or might on a rare occasion accompany the patient on transfer.

By Royal Mail

- **Always** use this system **routinely**
- Place the casenotes in a strong sealed envelope to ensure safety and confidentiality.
- **Restrict** patient identifiable details to the minimum for safe transfer
- **Attach clear name and address and**
- Do not expose patient details other than that required by the postal service
- For **urgent** situations contact WAST
- Recorded or registered post is recommended

With the patient

- **Always** use this system **routinely**
- Place the casenotes in a strong sealed envelope to ensure safety and confidentiality.
- **Attach clear instructions** as to where they are going and where they came from.
- **Restrict** patient identifiable details to the minimum for safe transfer. Do not expose patient details

It is recommended that encrypted electronic media be used where possible. Encrypted memory sticks are available from the IT helpdesk.

**Do not** e-mail to non Welsh NHS addresses

**Key message: Always ensure that you protect information from any loss or disclosure at all times**

**IMPORTANT NOTE**

Safe and secure transport of person identifiable information (PII) is vitally important. If you are unsure what action to take, contact your supervisor. Handling and processing of PII requires compliance with the Data Protection Act, Caldicott recommendations and the NHS Code of Confidentiality and you must adhere to the procedure at all times. Deviation from the agreed procedure renders you liable to disciplinary action