

Privacy Advisory Committee – Recommendations Approved by Minister (July 2006)

1. Introduction

Set out below are the 14 recommendations approved by Minister to make improvements in Protecting Personal Information (PPI) in HPSS bodies. Implementation of these recommendations will be taken forward by the PPI Implementation Project under management of the PAC.

2. Recommendations

The recommendations are grouped in 5 broad areas, namely:

- i. **Advice and guidance to inform both service users and staff;**
 - a) The development of model service user information leaflets and posters and for these to be used by HPSS bodies and others for the development of their leaflets and posters;
 - b) Leaflets and posters are displayed in all suitable locations accessed by the public, for example in service user waiting areas;
 - c) The development of a comprehensive Code of Practice on confidentiality, to replace existing guidance;
 - d) The production of a confidentiality booklet for HPSS staff to raise individual awareness of the issue and give general advice on protecting personal information.

- ii. **Procedures to improve working practices;**
 - a) Each HPSS organisation should establish, at a senior level, a “Personal Data Guardian” who would have a role similar to that of the Caldicott Guardians¹ in England, Scotland and Wales;
 - b) HPSS organisations should promote the use by staff and the general public of the new Health and Care number;
 - c) A Northern Ireland Privacy Advisory Committee, including a supporting Project Manager and a small secretariat, should be established to oversee implementation of the recommendations and whose ongoing role would be to authorise and advise on existing and new uses of personal information and to generally advise on confidentiality issues in the HPSS;
 - d) Existing protocols should be reviewed, and new protocols developed, for the sharing of data between HPSS bodies and with other organisations.

¹ Caldicott Guardians are senior staff in the NHS and social services appointed to protect patient information.

- iii. **Training to increase awareness and understanding on confidentiality matters;**
 - a) A training programme for delivery by HPSS bodies to their staff on confidentiality matters;
 - b) Appropriate training for “Personal Data Guardians”.

- iv. **Information and communications technology improvements regarding access and security of personal information; and**
 - a) Privacy Enhancing Technologies should be incorporated into all new ICT developments in the HPSS by ensuring that it is mandatory, for those staff who are developing new systems, to take confidentiality requirements into account;
 - b) All new ICT developments in the HPSS, especially for electronic service user records should incorporate methods to record consent to use and/or disclose personal information, as appropriate, by ensuring that it is mandatory, for those staff who are developing new systems, to take consent issues into account;
 - c) The use of anonymised databases for all secondary users should be encouraged, in particular, those individuals and organisations that require personal information for a purpose other than the purpose for which the personal information was originally collected; and

- v. **Consideration of legislative changes**
 - a) Consideration of the need for legislation in Northern Ireland similar to Section 60² should be deferred until such time as the above recommendations have been implemented and their effectiveness evaluated.

3. Action Required

The Committee is asked to consider the recommendations and discuss these at the meeting to ensure there is a clear understanding of what the recommendations entail.

² Section 60 of the Health and Social Care Act 2001 provides a power to ensure that patient identifiable information needed to support essential NHS activity can be used without the consent of patients.