

## Upholding information rights

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## Data Protection Act 1998 Undertaking follow-up

## The Burnett Practice ICO Reference: ENF0466943

On 17 October 2013 the Information Commissioner's Office (ICO) conducted a follow-up assessment of the actions taken by The Burnett Practice in relation to the undertaking it signed on 26 April 2013.

The objective of the follow-up is to provide the ICO with a level of assurance that the agreed undertaking requirements have been appropriately implemented. We believe that appropriate implementation of the undertaking requirements will mitigate the identified risks and support compliance with the Data Protection Act 1998.

The follow-up assessment consisted of a desk-based review of the documentary evidence The Burnett Practice supplied to demonstrate the action it had taken in respect of the undertaking requirements. This included:

- A copy of their Information Security and Data Handling Policy
- A copy of their Fax and Faxing Prescriptions Protocols
- A copy of an Information Security presentation delivered to staff by an Assistant Information Governance Manager at HSCNI
- A completed Undertaking Follow-up Schedule, detailing the steps taken to meet the requirements of the undertaking

The review demonstrated that The Burnett Practice has taken appropriate steps and put plans in place to address the requirements of the undertaking and to mitigate the risks highlighted.

The Burnett Practice confirmed that it has taken the following steps:

- Internet-based email accounts have been closed, and The Burnett Practice now uses the HSC email system
- Communication of results to patients now takes place by telephone, face-to-face meeting or by post, unless requested specifically by email by the patient. Such requests must be evidenced in writing.

- A new Information Security and Data Handling Policy has been developed by The Burnett Practice. This has been distributed to all staff, who have signed to confirm that they have read it.
- Staff receive annual training on the basis of this policy, and it forms part of the induction programme for new staff.
- New staff will not be permitted to process sensitive information until they have completed the relevant training
- The Practice Manager has been assigned responsibility for promoting awareness (including ensuring staff undertake the annual training) and monitoring compliance with the new policy.
- Beyond addressing those weaknesses identified in the Undertaking, The Burnett Practice is conducting a risk assessment in other areas including office layout, disposal of data and building security to ensure risks are identified and mitigated.

In relation to the security of communicating test results by telephone, The Burnett Practice may wish to:

• Formalise within its security policy the identity checks that will be undertaken to ensure that the test results are delivered to the correct individual.

Date issued: 17 October 2013

## The matters arising in this report are only those that came to our attention during the course of the follow up and are not necessarily a comprehensive statement of all the areas requiring improvement.

The responsibility for ensuring that there are adequate risk management, governance and internal control arrangements in place rests with the management of The Burnett Practice.

We take all reasonable care to ensure that our Undertaking follow up report is fair and accurate but cannot accept any liability to any person or organisation, including any third party, for any loss or damage suffered or costs incurred by it arising out of, or in connection with, the use of this report, however such loss or damage is caused. We cannot accept liability for loss occasioned to any person or organisation, including any third party, acting or refraining from acting as a result of any information contained in this report.