

Information Asset Owner and Administrator Training

Kelly Huckvale
Senior Information Governance Manager
Arden & GEM CSU

Aim of this session:

- Responsibilities of the SIRO, IAO, IAA role
- Definition of an Information Asset
- Overview of the Information Asset Register and Data Flow Mapping register

SIRO, IAO, IAA Roles & Responsibilities

Information Asset Approach

NHS organisations required to establish three roles to aid the structured management of their information and associated risks:

- Senior Information Risk Owner (SIRO)
- Information Asset Owners (IAO)
- Information Asset Administrators (IAA)

SIRO

They have overall responsibility for managing organisational information risk and ensuring appropriate assurance mechanisms are in place.

The SIRO leads and fosters a culture that values, protects and uses information for the success of the organisation and benefit of its patients.

IAOs

An IAO is an individual who has been given formal responsibility for the security of an asset (or assets) in their particular work area.

They are responsible for the maintenance of the confidentiality of that asset, ensuring that access to the asset is controlled and that the information is kept securely. They provide assurance that any risks to the information asset are managed effectively.

IAOs are directly accountable to the SIRO. Any information related risks identified by IAOs should be entered onto the relevant risk register to enable significant information risks to be reviewed by the SIRO.

IAOs

An IAO needs to:

- Ensure new information assets assigned to them have had a DPIA carried out and transfers of personal information identified are data flow mapped;
- Know what information assets are held/processed and for what purposes, including the legal basis for any data processing;
- Know what information the asset consists of and what information enters and leaves the asset and why;
- Understand how information is created, amended or added to over time;
- Be responsible for appropriate records management, including retention and disposal of information when no longer required;
- Know who has access and why and ensures access to the asset is audited;
- Ensure staff are appropriately trained and that only authorised staff have the required user access and making sure that staff are trained in using the asset and are aware of the records management procedures for that asset;
- Identify, understand, address, prioritise and review perceived risks to the owned asset and provide assurance to the SIRO on the security and use of assets;
- Have oversight of actions agreed to mitigate these risks;
- Protect the information held within the asset; and
- Ensure all information assets are recorded in the Information Asset Register (IAR).
- Responsible for ensuring incidents are appropriately reported and investigated.
- Some of these tasks will be delegated to and managed on a day to day basis by the Information Asset Administrator, but the IAO will always have overall responsibility.

IAAs

Information Asset Administrators provide support to the IAO.

The IAA is the individual who uses the information asset on a day to day basis. They will generally be more familiar than the IAO with the information, any systems and risks in their area.

What is an Information Asset?

Information Asset

Definition: An information asset is a body of information, which has value to an organisation.

The term information asset is wide ranging in what it can include, but may comprise of a combination of hardware, software, data, paper records, contracts etc. that together support a business activity.

If we do not understand what information we hold, we cannot fully protect it.

NHS Information Assets

Personal/Other Information	Software
•Databases and data files •Back-up and archive data •Audit data •Paper records and reports	•Applications and System Software •Data encryption utilities •Development and Maintenance tools
System/Process Documentation	Hardware
•System information and documentation •Operations and support procedures •Manuals and training materials •Contracts and agreements •Business continuity plans	•Computing hardware including PCs, Laptops, PDA, communications devices eg. blackberry and removable media
	Miscellaneous
	•Environmental services eg. power and air-conditioning •People skills and experience

Information Asset

Assessing every individual file, database entry or piece of information as an information asset isn't realistic.

You need to group your information into manageable portions.

Too broad and you will not have enough detail, too fine and you will have thousands of assets.

Information Asset Register (IAR)

Getting started

- Does the organisation know what information it holds and handles?
- Do you know the relative security, sensitivity and importance of each set of information?
- Do you understand which key systems support the management of key information?
- Do you know how critical the information is for the management of your service area?

Information Ownership

A structured approach is needed for managing information to:

- protect the organisation, its staff and its patients from information risks where the likelihood of occurrence and the consequences are significant
- meet legal or statutory requirements
- assist in safeguarding the organisation's information assets.

- The information an organisation holds is a valuable resource/asset. It's loss can damage reputations and services, it's misuse can cause damage to organisations and individuals.
- The ICO has the statutory ability for levying fines of up to £17,000,000 or 4% of an organisation annual turnover against organisations who lose/misuse information.

Information Asset Register

Definition: An Information Asset Register is a mechanism for understanding and managing an organisation's assets and the risks to them. Including the links between the information assets, their business requirements and technical dependencies.

Items to be recorded

- Title
- Type of data: Personal, Personal Confidential, or Corporate
e.g. HR record falls under all 3 types
- Legal basis for processing
- Format held in
- Location/s
- Category of record retention period
- Managed access
- IAO/IAA
- Risk assessment scores

Information Asset Register

Team	Asset	Receiver Organisation	Historical Data Transferred	Legal Basis for processing	Information Asset Owner*	Information Asset Administrator*	Format	Data Location	3rd Party Access	Access Controls Reviewed	Note	Retention Period
Resilience	On Call Contact details	ICB		Contract	Dave Yates	Nicki Bennett /Dana Richards /Becky Sperry	Electronic files	Secure Network folder with restricted access	N/A	Yes - restricted access	Reviewed in Dec 22 Nicki Bennett	n/a
Resilience	On Call Contact details	ICB		Contract	Dave Yates	Nicki Bennett/Dana Richards/Becky Sperry	Paper Records	On-call Director that requests them. On-call Directors are briefed that the folders need to be kept secure.	N/A	Yes - restricted access	Reviewed in Dec 22 Nicki Bennett	n/a
Resilience	On Call Contact details	ICB		Contract	Dave Yates	Nicki Bennett/Dana Richards/Becky Sperry	Electronic	Stored on the Page 1 system website	N/A	Yes - restricted access to website via login and password	Reviewed in Dec 22 Nicki Bennett	n/a
Resilience	Resilience Direct Files	ICB		Legal Obligation	Dave Yates	Nicki Bennett	Electronic	ICB Resilience Direct Page	Yes - by permission	Yes - restricted access	Reviewed in Dec 22 Nicki Bennett	

SLSP

System Level Security policy need to be in place for all identified information assets.

The purpose is to provide assurance that measures are in place to protect data contained within the information asset.

Asset Identification

- Identify your information assets and their criticality to the organisation
- Identify potential risks and the likelihood using standard risk management approaches
- Create a plan and actions for managing risks
- Ensure responsibilities are clear amongst action owners and staff

Data Flow Mapping (DFM)

Data Flow Mapping

Data Flow Management came out as a result of the Caldicott Management Audit Out-turn report back in 2001/02, which identified that information flows of patient identifiable information were not being controlled or monitored and that breaches of confidentiality have occurred as a result.

Every flow of personal confidential information within and from an organisation should be tested against the Caldicott principles and that each item of information containing personal confidential details should be justified.

Caldicott Principles

- **Justify the purpose before sharing information.**
- **Only use patient identifiable data when absolutely necessary.**
- **Use the minimum that is required, do not share more data than is necessary**
- **Access to the data should be on a strict need to know basis.**
- **Be aware of your responsibilities in complying with organisational policies relating to confidentiality.**
- **Understand the law.**
- **The duty to share information can be as important as the duty to protect patient confidentiality.**
- **Inform patients and service users about how their confidential information is used.**

Data Flow Mapping

Data flow mapping helps us to understand what information we receive, where it is held and how it is transferred.

IAOs will only need to map **regular flows** of information that contain **personal confidential data** (PCD).

Data Flow Mapping

IAOs will need to think about:

Outbound flows:

- What is sent to other departments internally? (outbound internal)
- What is sent outside of the organisation? (outbound external)

Inbound flows:

- What is received from other departments internally? (inbound internal)
- What is received from outside of the organisation? (inbound external)
- What is collected from individuals, e.g. patients, staff, etc.

Data Flow Mapping

- ✓ Email
- ✓ Post/ Courier - hard-copy or electronic media
- ✓ Text messages
- ✓ System to system transfers
- ✓ Transferred by staff

The following should be excluded;

- ✗ Ad-hoc phone calls
- ✗ One-off transfers of information
- ✗ Transfers of anonymised data

Data Flow Mapping

Is the method of transfer 'secure'

- Fax – Safe haven procedure followed
- Email – Encrypted, Safe haven procedure followed
- Post – Tracked, confirmed arrived at destination?

Thank You For Listening



Information Governance Officer
Suzanne Entwistle

Senior Information Governance Manager
Kelly Huckvale

For queries and advice please contact:

agem.covwarks.ig@nhs.net