Print Form

Health
Information
and Quality
Authority

Information Governance Self-Assessment Tool

Introduction

This information governance (IG) self-assessment tool is designed to highlight areas where urgent action is required or where improvements may be made. It is a resource to be used internally for learning and development. The self-assessment and "What you should know about Information Governance, A Guide for health and social care staff" are intended to be a first step in assisting organisations in meeting the baseline requirements in information governance. The assessment tool is available to download on the Authority's website at www.hiqa.ie

The self-assessment is an interactive list of questions to which service providers are asked to simply answer “yes” or “no” to determine their compliance with information governance requirements and practices. Prompts are provided, where appropriate, for the purpose of providing additional information and guidance to service providers to assist them in improving their information governance practices.

The self-assessment should be completed by a member of the organisational management team that holds responsibility for information governance in the organisation. This manager should have knowledge and experience of policy development and implementation. Depending on the size of the organisation, management may feel it is appropriate for the self-assessment to also be conducted at different levels or within different units in order to identify specific areas within the organisation that require further attention - this will also help to identify areas of good practice within specific teams that could be shared across the organisation. The self-assessment tool has been prepared and recommended by the Authority, but management are expected to use their discretion and autonomy to determine how it can best serve the needs of their individual organisations and devise a strategy for regular completion of the self-assessment and a method to monitor improvements in the area of information governance.

The self-assessment contains two separate levels of development. The first level is comprised of the absolute minimum/basic information governance requirements, most of which are provided for in legislation. The second level represents compliance with the more advanced requirements, which all organisations should be working towards achieving. The Authority recognises it may take more time to put these in place, but through a process of completing the self-assessment, putting together an action plan, implementing it and completing the self-assessment again on a continuous basis, each organisation should be aiming to answer "yes" to every question in both levels.

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Information Governance Self-Assessment - Level 1

Date:

Organisation:

Address:

Respondent's

Name:

Position:

Phone:

1. Is the organisation fully compliant with legal requirements on information governance?

○ Yes ○ No

Rollover here for guidance prompt

2. Is there an overarching information governance framework/policy for the organisation?

○ Yes ○ No

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3. Is there a designated information governance lead within the organisation available for consultation on information governance matters?

○ Yes ○ No

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4. Is there a statement of information practices for the organisation?

○ Yes ○ No

Rollover here for guidance prompt

5. Are service users made aware of their rights, including their right to access information held about them, how their information will be used and the safeguards in place to protect it?

○ Yes ○ No Rollover here for guidance prompt

6. Is consent sought from service users before their information is used in ways that do not directly contribute to, or support the delivery of, their care?

○ Yes ○ No Rollover here for guidance prompt

7. Where necessary, are databases/information systems registered with the Office of the Data Protection Commissioner?

○ Yes ○ No Rollover here for guidance prompt

8. Is information governance, including each of the five topics covered, included in the training/induction programme for new staff?

○ Yes ○ No Rollover here for guidance prompt

9. Does a confidentiality agreement form part of all contracts of employment including third party contracts?

○ Yes ○ No Rollover here for guidance prompt

10. Are staff trained in collecting and recording information?

○ Yes ○ No Rollover here for guidance prompt

11. Is there a records management policy in place that complies with national legislation and recognised best practice?

○ Yes ○ No Rollover here for guidance prompt

12. Are records written clearly and legibly and in a manner that identifies the author?

○ Yes ○ No

13. Is access to personal health information restricted to those who need to access it?

○ Yes ○ No

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14. Is there a mechanism in place to audit and validate staff access to personal health information?

○ Yes ○ No

Rollover here for guidance prompt

15. Do all staff members that have access to electronic records have individual login details and passwords?

○ Yes ○ No

Rollover here for guidance prompt

16. Is there a requirement that individual passwords are updated and changed regularly?

○ Yes ○ No

17. Is there a requirement that passwords are of a minimum complexity?

○ Yes ○ No

18. Are all portable electronic devices that are capable of handling or displaying personal health information and databases password protected and encrypted?

○ Yes ○ No

19. Are there clearly defined and controlled back-up procedures for data held electronically that support contingency and archiving purposes?

○ Yes ○ No

20. Do information systems have anti-virus software installed that is kept up-to-date and protects from all sources of possible infection including the internet, USB devices, CD-ROMS and DVDs?

○ Yes ○ No

21. Is there a schedule of routine and preventive maintenance for information system hardware?

○ Yes ○ No

22. Are servers and files, both paper and electronic, securely locked away from unauthorised people when they are not in use?

○ Yes ○ No

Rollover here for guidance prompt

23. Is there a mechanism in place to ensure that all data stored on equipment or devices that have been made redundant are erased?

○ Yes ○ No

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24. Are the buildings and the areas where records are stored physically secure?

○ Yes ○ No

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Information Governance
Self Assessment - Level 2

1. Is information governance a standard agenda item for discussion at senior management meetings?

○ Yes ○ No

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2. Are the information governance policies in place reviewed regularly and updated as appropriate?

○ Yes ○ No

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3. Is compliance with information governance policies/procedures monitored or audited regularly?

○ Yes ○ No

Rollover here for guidance prompt

4. Are records audited for quality and accuracy?

○ Yes ○ No

Rollover here for guidance prompt

5. Is there an information governance breach management action plan in place?

○ Yes ○ No

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6. Is there a procedure in place that enables learning from information governance breaches or "near misses"?

○ Yes ○ No

Rollover here for guidance prompt

7. Is there ongoing/refresher training provided to staff?

○ Yes ○ No

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8. Are the roles of staff considered in terms of the level of training that is provided?

○ Yes ○ No

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9. Is the organisation's statement of information practices clearly displayed?

○ Yes ○ No

10. Are all new projects and initiatives that entail processing personal health information 'privacy proofed' at the planning stage?

○ Yes ○ No

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Notes