

## Caldicott Principles Policy

### Introduction

The Caldicott Report was commissioned in December 1997 by the Chief Medical Officer of England owing to increasing concern about the ways in which patient information was used in the NHS in England and Wales and the need to ensure that confidentiality was not undermined.

Such concern was largely due to the development of information technology in the service, and its capacity to disseminate information about patients rapidly and extensively.

One of the recommendations of the report stated that all NHS organisations appoint a Caldicott Guardian to ensure patient-identifiable information is kept secure. (Caldicott Guardians are senior members of staff, preferably at partner level).

### Caldicott Principles

The Caldicott standard is based on the following six principles:

- Justify the purpose(s) - Every proposed use or transfer of patient-identifiable information within or from an organisation should be clearly defined and scrutinised, with continuing uses regularly reviewed by an appropriate guardian.
- Don't use patient-identifiable information unless it is absolutely necessary – Patient identifiable information items should not be included unless it is essential for the specified purpose(s) of that flow. The need for patients to be identified should be considered at each stage of satisfying the purpose(s).
- Use the minimum necessary patient-identifiable information - Where use of patient identifiable information is considered to be essential, the inclusion of each individual item of information should be considered and justified so that the minimum amount of identifiable information is transferred or accessible as is necessary for a given function to be carried out.
- Access to patient-identifiable information should be on a strict need-to-know basis - Only those individuals who need access to patient-identifiable information should have access to it, and they should only have access to the information items that they need to see. This may mean introducing access controls or splitting information flows where one information flow is used for several purposes.
- Everyone with access to patient-identifiable information should be aware of their responsibilities - Action should be taken to ensure that those handling patient-identifiable information - both clinical and non-clinical staff - are made fully aware of their responsibilities and obligations to respect patient confidentiality.
- Understand and comply with the law – Every use of patient-identifiable information must be lawful. Someone in each organisation handling patient information should be responsible for ensuring that the organisation complies with legal requirements.

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## Data Protection Requirements

- ✓ Be aware that any recorded information about an individual should be protected – this includes notes, diaries and message books.
- ✓ Remember that comments which you make and information on an individual can be accessed via a Subject Access Request.
- ✓ Do inform clients of their Data protection Act 1998 rights.
- ✓ Never leave information unattended on your desk.
- ✓ Only share information with your Team Manager
- ✓ Never share passwords and ensure passwords are always used.
- ✓ Make sure you log out of your computer when you are not using it, even if leaving your desk for a short period.
- ✓ If you are discussing cases or individuals openly, always ensure clients remain anonymous.
- ✓ Care must be taken when emailing or sending correspondence and where possible retain a read receipt.
- ✓ NEVER leave files or confidential information in your car or on public transport or have on your person when walking home. It is your responsibility to ensure that the information is not accessible to anyone other than yourself. You have a Personal Liability under the Data Protection Act 1998 to adhere to this directive.

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