

Customer Information Policy & Procedures



SUPPORT SERVICES

All Welcome All Supported All Together

Title of Policy: Customer Information

Effective Date: November 2018

Review Date: November 2021

Policy Number: 1

Policy Administrator: Tracy Kinghorn

Policy authorised by: Nicola Williams

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Introduction

Allsorts Support Services CIC & Allsorts Community (Which will be referred to as the organisation throughout this policy).

We want all service users to have successful and fulfilling lives.

This policy document should be considered in conjunction with all other relevant duties, policies and guidance.

Aim of the Policy

This policy is intended to set out the values, principles and policies underpinning the organisation's approach to customer information for all staff.

The policy has the following aims:

- To maintain a safe and healthy environment for all service users and employees.
- To comply with applicable laws and legislation.

This policy is informed by the organisation's understanding of its statutory duties as an employer.

Having effective, up to date and easy to follow policies and written documents minimises risk to service user's, employees and the organisation itself and can ensure that statutory requirements, standards and regulations are understood and provides a framework to monitor compliance. To ensure the organisation provides a robust and clear framework, the organisation has developed this policy to manage processes to achieve compliance and effective co-ordination across the organisation.

Through this policy the organisation will ensure that there is a process whereby all policy documentation is consistent. In addition, there will be an effective process for managing and reviewing policies and any associated written documents on a regular basis, to ensure that documentation remains legally compliant and actions are undertaken in a safe and efficient manner.

This policy will ensure that the organisation meets its legal responsibilities and provides a clear organisational approach to documentation.

Policy Statement

The organisation will provide a structure for the development of policies and other written documents.

This will include:

- Ensuring that staff has access to the most recent copies of the organisation's documents.
- Establishing a control procedure for all policies and other written documents to ensure that those in use are current and relevant.
- Ensuring that the equality impact assessment process is completed on all policies and procedures.

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- Ensuring systems exist to monitor the use of, and compliance with, all written documents.
- Developing and maintaining a central database of policies, procedures and written documents.
- Maintaining an archive of past written documents, for reference and to meet legal requirements.

This policy will ensure that the organisation meets its legal responsibilities and provides a clear organisational approach to documentation.

Scope

This policy relates to:

All information recorded, disclosed and used by the organisation, including information relating to service users, staff, volunteers and organisational information.

All information systems managed by the organisation, including paper and electronic records.

Any individual using information owned by the organisation.

Any individual requiring access to information owned by the organisation.

Any information system purchased, developed and managed by/or on behalf of the organisation and any individual directly employed or otherwise by the organisation.

Introduction

Information is a vital asset and resource, both in terms of the management of service users and the efficient management of the services. It plays a key part in service planning, funding and performance management.

It is of paramount importance that information is efficiently managed, that appropriate accountability, standards, policies and procedures provide a robust framework for information management.

Data should be

- Held securely and confidentially;
- Obtained fairly and lawfully;
- Recorded accurately and reliably;
- Used effectively and ethically;
- Shared and disclosed appropriately and lawfully.

There needs to be an appropriate balance between openness and confidentiality in the management and use of information.

At times there is a need to share information with other health organisations and other agencies in a controlled manner consistent with the interests of the service users.

Equally important is the need to ensure high standards of data protection and confidentiality to safeguard personal and commercially sensitive information. Underpinning this is the

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requirement for electronic and paper information to be accurate, relevant, and available to those who need it on a “need to know” basis.

All staff, including volunteers, must ensure at all times that high standards of data quality, data protection, integrity, confidentiality and records management are met in compliance with the relevant legislation. It is the responsibility of the organisation to ensure that all staff familiarize themselves with this policy and adhere to its principles.

Legal Responsibilities

This policy is informed by:

- The Data Protection Act (GDPR) 2018
- The Freedom of Information Act 2014
- The Health and Social Care Act 2014

Duties

Final responsibility and accountability for Information will rest with the manager.

The policy administrator will undertake the role of Data Protection Officer and maintain registration under the Data Protection Act

Policies

The policy administrator will develop policies and procedures on:

- Information management.
- Use of e-mail.
- Use of the Internet.
- Use of social media sites.
- Confidentiality.
- Data Protection.

Training

The organisation will:

- Provide advice and guidance to all staff and relevant volunteers.
- Develop awareness and training programmes.
- Foster a culture of openness and honesty in reporting significant incidents.
- Establish and maintain a system for reporting significant incidents.
- Ensure that confidentiality issues are appropriately reflected in contracts and working procedures for staff and relevant volunteers.
- Undertake risk assessments in relation to Information at least annually.
- Establish and review an Information action plan at least annually.

Staff Responsibility

All staff and relevant volunteers should:

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- Values, protects and uses information responsibly and ultimately for the benefit of service users.
- Adhere to the organisation's regulations related to information.
- Attend training related to information at least annually.
- Use e-mails, the Internet and social media sites in accordance with the organisation's Policies and Procedures.
- Be open and honest in informing the manager of any inadvertent failure to conform with the organisation's policies.

All policy and written document development should be undertaken in line with current legislation, national and professional guidance.

All policies and other written documents

It is the responsibility of the Policy administrator to ensure that when a document is revised, a copy of the original is forwarded to the Manager.

Once revised policies and other written documents are approved, the Manager will pass on to all employees.

Staff will be notified of newly approved/revised policies, procedures and guiding documents within one week of approval by the manager.

Non-compliance with this Policy

In the unlikely event of a member of staff not respecting the policy, the organisation's manager should attempt to resolve the situation informally in the first instance. Ultimately, repeated breaches of the policy will result in disciplinary procedures and may lead to dismissal.

Policy Implementation

It is the responsibility of the Policy administrator to keep all policies and procedures up to date. The manager will identify how any policy or written document will be implemented. This will include liaising directly with the policy administrator in order to ensure that staff training requirements have been highlighted. Overall responsibility for ensuring the policy is implemented, monitored and reviewed rests with the organisation's Manager.

Information on the policy will be:

- Circulated to all staff
- Provided to all new employees

Training

All new staff will be required to read all policies as part of their induction process.

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Review Process

The Manager requires that certain policies must be reviewed annually. These are:

- Safeguarding policy
- All other policy documents must be reviewed no later than three years after initial approval and regularly reviewed on the same basis thereafter.
- Documents will be reviewed more frequently if changes in legislation or the service requires it.
- It is the responsibility of the policy administrator will ensure that documents are reviewed in line with their review dates.

Where a review necessitates considerable change to the previous document, the process will be treated as though it is a new document.

Minor amendments can be notified by distributing copies of the policy to appropriate recipients, with a cover sheet with the changes are and their implications. This sheet should be kept with the original.

Review of Policy

This policy will be reviewed on a three yearly basis or at an earlier date if changes are required due to changes in government advice.