

**INTERNAL ONLY**  
**ISLHD POLICY**  
**COVER SHEET**



**Health**  
Illawarra Shoalhaven  
Local Health District

<b>NAME OF DOCUMENT</b>	Data Governance Policy
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<b>EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR</b>	Executive Director, Integrated Care, Mental Health, Planning Information and Performance
<b>AUTHOR</b>	Manager, Information Management Unit
<b>KEY TERMS</b>	Data Governance, Data Quality, Data Integrity, Data Privacy, Data Security
<b>SUMMARY</b>	<p>ISLHD's Data Governance Framework provides an overview of the data governance arrangements within the District for all ISLHD staff, contractors and partners.</p> <p>This policy outlines the responsibilities of all staff when using, storing, presenting, disseminating, disclosing and analysing data.</p>

**COMPLIANCE WITH THIS DOCUMENT IS MANDATORY**

Feedback about this document can be sent to [ISLHD-CorporateGovernance@health.nsw.gov.au](mailto:ISLHD-CorporateGovernance@health.nsw.gov.au)

## 1. POLICY STATEMENT

Data governance is the overall management of data owned and managed within the organisation. The purpose of developing a Data Governance Framework and Data Governance Policy for ISLHD is to develop best practices for effective data management, improve the quality and consistency of data, reduce the risk of internal and external breaches of privacy and confidentiality, and maximise the value of data within ISLHD.

Data Governance within ISLHD is informed by, and designed to ensure compliance with the legal, regulatory and governance environment. All persons employed and contracted by, or providing a service on behalf of, ISLHD have legislative obligations. ISLHD management have a role in ensuring compliance with applicable legislation, the general law, and local and NSW Health policies and procedures.

## 2. AIMS

Robust data governance is critical for promoting data quality, integrity, privacy and security, and for identifying clear roles and responsibilities in relation to managing data across the Illawarra Shoalhaven Local Health District (ISLHD).

The Data Governance Framework aims to govern both clinical and corporate data, and address local data governance in the context of Australian and State policies and procedures and guidelines.

## 3. TARGET AUDIENCE

The data governance principles and requirements described throughout the Framework are relevant to all employees, contractors, administrators and partners of ISLHD. The ways in which data are used and disclosed, and the responsibilities that staff have over data vary across different corporate and clinical roles.

## 4. RESPONSIBILITIES

### 4.1 Board, Chief Executive & Chief Information Officer

Responsible for the data governance of the District, and have data accountability and authority responsibilities.

### 4.2 Executive, Data Custodians, Data Officers, System Administrators & Data Committees

Responsible for ensuring staff comply with data governance policies and are competent in fulfilling data responsibilities, follow work procedures and assist in defining data controls.

### 4.3 All staff, contractors & partners of ISLHD

Responsible for maintaining the privacy, quality, integrity & security of data collected and managed by ISLHD.

A description of roles and responsibilities across the District, including examples and key reference documents, are included in the [Data Governance Framework](#).

All staff are responsible for reporting breaches in Data Governance, please refer to the [Data Governance Framework](#) for more information.

## 5. KEY PRINCIPLES

When collecting, using and storing data, all staff are required to be:

- **Responsible:**
  - only access information relevant to their job
  - always de-identify information, unless otherwise required
  - comply with privacy legislation, confidentiality policies and de-identification processes
  - correctly label documents and communications containing sensitive information.
- **Accountable:**
  - clearly record how and when data-related decisions and controls are made
  - appropriate authorisation for use and disclosure of data is obtained
  - take practical steps to safeguard data from unauthorised or accidental use
  - notify appropriate managers if they see unauthorised access to and the misuse of information
  - ensure data are circulated in an appropriate manner, suitable to the intended audience, considering potential risks.
- **Accurate**
  - ensure data collected and entered are accurate, including amendments
  - ensure any data extracted and analysed are checked and validated for reliability, accuracy and consistency prior to publication, presentation and/or disclosure
  - ensure data are standardised, with consistent and common definitions to facilitate information sharing.

## 6. DEFINITIONS

There are many terms, definitions and concepts related to Data Governance. It is important to have a consistent understanding of the terms and concepts to ensure a standardised approach across the District. Concise descriptions of these have been provided in the Data Governance Framework, with additional information, including examples, references and key documents.

## 7. DOCUMENTATION

- [ISLHD CORP DOC 05 - ISLHD Data Governance Framework](#)

## 8. REFERENCES

- [NSW Health Code of Conduct](#)
- [NSW Health PD2018\\_001 Disclosure of unit record data by Local Health Districts for research or contractor services](#)

- Key legislation ISLHD staff are required to comply with are:
  - [NSW Privacy and Personal Information Protection \(PPIP\) Act 1998](#), which regulates the collection, use and disclosure of personal information in the public sector.
  - [The NSW Health Records and Information Privacy \(HRIP\) Act 2002](#), which regulates the collection, use and disclosure of personal health information.
  - Government Information (Public Access) Act 2009
  - [The State Records Act 1998](#) applies to all records maintained by ISLHD and provides for the creation, management and protection of public records, and the public access to those records.
  - [The Health Practitioner Regulation National Law \(NSW\)](#) which applies to some health professional groups provides a basis for clinical and professional standards based on definitions of 'unsatisfactory professional conduct' and 'professional misconduct'.
  - [The Health Services Act 1997](#) which requires all public health organisations to comply with policy directives issued by the Director General and the Ministry of Health (MoH).

## 9. REVISION & APPROVAL HISTORY

Date	Revision No.	Author and Approval
20/2/2017	1	Manager, Information Management Unit
01/08/2017	1	Approved by Executive Director, Integrated Care, Mental Health, Planning Information and Performance
27/6/2018	2	Updated by Manager, Information Management Unit
18/07/2018	2	Approved by District Manager Corporate Governance and Risk