

## Information Asset Management Procedure

### Introduction and Aim

This Procedure aims to give clear direction to those involved in the management of information assets on the steps required in creating, maintaining and destroying those assets.

### Linked Policies, Procedures and Written Control Documents

All Wales Information Governance Policy

### Scope

This procedure applies to all information assets either physically held by Public Health Wales, or assets which are held by other organisations but on which Public Health Wales depends for the effective discharge of its functions.

<b>Equality and Health Impact Assessment</b>	This is covered by the overarching EHIA required under the Information Governance Policy
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<b>Approved by</b>	Senior Leadership Team
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## 1. Introduction

## 2. Objectives

The objectives of this procedure are to:

- Define and explain an Information Asset, together with Information Asset Owners, Administrators and the Information Asset Register as they relate to Public Health Wales;
- Detail the responsibilities of those involved in Information Asset Management;
- Set out the processes for:
  - creating new assets;
  - removing assets that are no longer required;
  - maintenance of existing assets.

## 3. Terms and definitions

### 3.1 Information Asset

Public Health Wales adopts the definition provided by the National Archives which defines an information asset as...

*...a body of information, defined and managed as a single unit so it can be understood, shared, protected and exploited efficiently. Information assets have recognisable and manageable value, risk, content and lifecycles.*

For the organisation's purposes, information assets are further defined as datasets, databases or other collections of data, however or wherever stored. They may be held by Public Health Wales on our own infrastructure, held by other organisations such as Digital Health and Care Wales (DHCW) or Health Boards, or stored in the National Data Repository (NDR).

The key is that to qualify as an Information Asset it must have value beyond its mere existence and be an asset that can be analysed, manipulated and exploited to further the organisation's objectives.

Information Assets are categorised at three levels or Tiers. This not to signify the importance or otherwise of a particular asset but is based on the amount of control that Public Health Wales has on its management.

Tier 1	Assets wholly within the control and management of Public Health Wales
Tier 2	Assets owned and managed by DHCW, including the NDR
Tier 3	All other Assets

All assets will be either:

- Identifiable to an individual;
- Pseudonymised;
- Anonymised

### 3.2 *Information Asset Owner (IAO)*

The IAO is the senior person responsible and accountable for security of the asset within their control and for compliance with all legal requirements in relation to its storage and use. IAOs are normally assigned at Assistant Director or equivalent level.

### 3.3 *Information Asset Administrators (IAA)*

The IAA is the person who will support the IAO in day to day management of their assets. They can be assigned at any level, provided they have a sound understanding of the asset they are handling and a good knowledge of this Procedure.

### 3.4 *Information Asset Register*

The Public Health Wales Information Asset Register (IAR) is maintained by the Head of Information Governance and can be found on the Information Governance pages on MS Sharepoint. The IAR is a list of Information Assets but is not the asset itself. For access to the asset you will need to contact the Information Asset Owner.

## **4. Roles and responsibilities**

### 4.1 *The Executive Director for each Directorate is responsible for:*

- Ensuring that Information Asset Owners are assigned to each asset within the Directorate's area;
- Ensuring that this Procedure is followed.

### 4.2 *Information Asset Owners (IAO) are responsible for:*

- Controlling access to assets for which they are responsible;
- Determining and ensuring compliance with retention periods for each such asset;
- Approving any data processing activities involving assets for which they are responsible;
- Attending the quarterly Information Risk Management Group meetings;
- Conducting an annual risk assessment on their assets;
- Providing an annual assurance report on their assets to the Senior Information Risk Owner;
- Attending Information Asset Management training every two years.

#### 4.3 *Information Asset Administrators (IAA) are responsible for:*

- Assisting the Information Asset Owners in the day-to-day management of their assets;
- Attending Information Asset Management Training every two years.

#### 4.4 *The Head of Information Governance is responsible for:*

- Maintaining an Information Asset Register for the organisation;
- Maintaining appropriate policies and procedures to enable effective information asset management;
- Supporting the Senior Information Risk Owner.

#### 4.5 *The Senior Information Risk Owner is responsible for:*

- Ownership of Information Risks at Executive and Board level;
- Providing assurances to the Executive and the Audit and Corporate Governance Committee on the status of all information risks
- Chairing the quarterly Information Risk Management Group meetings;

## **5. Procedure**

### 5.1 *Introduction of New Information Assets*

All new Information Assets will be subject to a DPIA Form 1 (Request for Processing) as a minimum (see the DPIA Procedure for further information).

The Director responsible for the Directorate in which the asset is held will assign an IAO to the asset;

The IAO will then assign an IAA to support work on the asset;

If the information is identifiable, the IAO will determine if there is a requirement for it to be retained in that state or if it can be effectively anonymised;

The IAO will ensure that appropriate access controls are implemented for the asset and will determine the retention period for the asset;

The IAO will ensure that a new entry is made on the IAR;

The Head of IG will then review the new Asset and check that all required information is included.

### 5.2 *Maintenance of existing Information Assets*

The IAO will ensure that all Requests for Processing are actioned in line with the DPIA Procedure;

The IAO will conduct an annual review of all Information Assets under their control;

### 5.3 *Removal and destruction of Information Assets*

The IAO will review on a regular basis all assets to monitor those with upcoming retention end dates;

Where appropriate, consideration must be given to anonymisation of those assets which are coming up on being due for destruction in order that they can be retained for future use;

The IAO will ensure that no assets containing personal data are retained beyond their approved retention period and that all such assets are permanently deleted.

## **6. Training requirements**

The Head of Information Governance is responsible for ensuring that training is provided for those with responsibilities under this procedure.

## **7. Monitoring compliance**

The Head of Information Governance will monitor this procedure to ensure it is compliant with current legislation and to ensure it is effectively implemented.

The Information Asset Register will be monitored by the Head of Records Management to ensure it is accurate and up to date.

## **8. Further information**

More detailed guidance on the application of this Procedure is available through the Information Governance Service at [phw.informationgovernance@wales.nhs.uk](mailto:phw.informationgovernance@wales.nhs.uk)