**Version: 2.2**

**Date: 13/05/2021**

**Parkfield Medical Centre** (the Practice)

**Data Protection Privacy Notice for Patients**

**Introduction:**

This privacy notice lets you know what happens to any personal data that you give to us, or any information that we may collect from you or about you from other organisations.

This privacy notice applies to personal information processed by or on behalf of the practice.

This Notice explains

* Who we are and how we use your information
* Information about our Data Protection Officer
* What kinds of personal information about you we hold and use (process)
* The legal grounds for our processing of your personal information (including when we share it with others)
* What should you do if your personal information changes?
* For how long your personal information is retained / stored by us?
* What are your rights under Data Protection laws

The General Data Protection Regulation (GDPR) and the Data Protection Act 2018 (DPA 2018) became law on 25th May 2018. The GDPR is a single EU-wide regulation on the protection of confidential and sensitive (special) information, the DPA 2018 deals with elements of UK law that differ from the European Regulation, both came into force in the UK on the 25th May 2018, repealing the previous Data Protection Act (1998).

For the purpose of applicable data protection legislation (including but not limited to the General Data Protection Regulation (Regulation (EU) 2016/679) (the "GDPR"), and the Data Protection Act 2018 the practice responsible for your personal data is Parkfield Medical Centre.

This Notice describes how we collect, use and process your personal data, and how in doing so, we comply with our legal obligations to you. Your privacy is important to us, and we are committed to protecting and safeguarding your data privacy rights.

How we use your information and the law.

Parkfield Medical Centre will be what’s known as the ‘Controller’ of your personal data.

We collect basic personal data about you and location-based information. This does include name, address and contact details such as email and mobile number etc.

We will also collect sensitive confidential data known as “special category personal data”, in the form of health information, religious belief (if required in a healthcare setting) ethnicity and sex life information that are linked to your healthcare, we may also receive this information about you from other health providers or third parties.

**Why do we need your information?**

The health care professionals who provide you with care maintain records about your health and any treatment or care you have received previously. These records help to provide you with the best possible healthcare and treatment.

NHS health records may be electronic, paper-based or a mixture of both. We use a combination of working practices and technology to ensure that your information is kept confidential and secure.

Records about you may include the following information;

* Details about you, such as your address, your carer or legal representative and emergency contact details.
* Any contact the surgery has had with you, such as appointments, clinic visits, emergency appointments.
* Notes and reports about your health.
* Details about your treatment and care.
* Results of investigations such as laboratory tests, x-rays etc.
* Relevant information from other health professionals, relatives or those who care for you.
* Contact details (including email address, mobile telephone number and home telephone number)

To ensure you receive the best possible care, your records are used to facilitate the care you receive, including contacting you. Information held about you may be used to help protect the health of the public and to help us manage the NHS and the services we provide. Limited information may be used within the GP practice for clinical audit to monitor the quality of the service we provided.

**How do we lawfully use your data?**

We need your personal, sensitive and confidential data in order to provide you with healthcare services as a General Practice, under the General Data Protection Regulation we will be lawfully using your information in accordance with: -

*Article 6, e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;”*

*Article 9, (h) processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems*

This Privacy Notice applies to the personal data of our patients and the data you have given us about your carers/family members.

We use your personal and healthcare information in the following ways:

* when we need to speak to, or contact other doctors, consultants, nurses or any other medical/healthcare professional or organisation during the course of your diagnosis or treatment or on going healthcare;
* when we are required by law to hand over your information to any other organisation, such as the police, by court order, solicitors, or immigration enforcement.

We will never pass on your personal information to anyone else who does not need it, or has no right to it, unless you give us consent to do so.

# **Legal justification for collecting and using your information**

The law says we need a legal basis to handle your personal and healthcare information.

Contract: We have a contract with NHS England to deliver healthcare services to you. This contract provides that we are under a legal obligation to ensure that we deliver medical and healthcare services to the public.

Consent: Sometimes we also rely on the fact that you give us consent to use your personal and healthcare information so that we can take care of your healthcare needs.

Please note that you have the right to withdraw consent at any time if you no longer wish to receive services from us.

Necessary care: Providing you with the appropriate healthcare, where necessary. The Law refers to this as ‘protecting your vital interests’ where you may be in a position not to be able to consent.

Law: Sometimes the law obliges us to provide your information to an organisation (see above).

# **Special categories**

The law states that personal information about your health falls into a special category of information because it is very sensitive. Reasons that may entitle us to use and process your information may be as follows:

**Public Interest:** Where we may need to handle your personal information when it is considered to be in the public interest. For example, when there is an outbreak of a specific disease and we need to contact you for treatment, or we need to pass your information to relevant organisations to ensure you receive advice and/or treatment

**Consent:** When you have given us consent

**Vital Interest:** If you are incapable of giving consent, and we have to use your information to protect your vital interests (eg if you have had an accident and you need emergency treatment)

**Defending a claim:** If we need your information to defend a legal claim against us by you, or by another party

**Providing you with medical care:** Where we need your information to provide you with medical and healthcare services

**Risk Stratification**

Risk stratification data tools are increasingly being used in the NHS to help determine a person’s risk of suffering a condition, preventing an unplanned or (re)admission and identifying a need for preventive intervention. Information about you is collected from several sources including NHS Trusts and from this GP Practice. The identifying parts of your data are removed, analysis of your data is undertaken, and a risk score is then determined. This is then provided back to your GP as data controller in an identifiable form. Risk stratification enables your GP to focus on preventing ill health and not just the treatment of sickness. If necessary, your GP may be able to offer you additional services. Please note that you have the right to opt out of your data being used in this way in most circumstances, please contact the practice for further information about opt out.

Individual Risk Management at a GP practice level however is deemed to be part of your individual healthcare and is covered by our legal powers above.

# **Anonymised information**

Sometimes we may provide information about you in an anonymised form. Such information is used analyse population- level heath issues, and helps the NHS to plan better services. If we share information for these purposes, then none of the information will identify you as an individual and cannot be traced back to you.

**Medicines Management**

The Practice may conduct Medicines Management Reviews of medications prescribed to its patients. This service performs a review of prescribed medications to ensure patients receive the most appropriate, up to date and cost-effective treatments. The reviews are carried out by the CCGs Medicines Management Team under a Data Processing contract with the Practice.

**GP Connect Service**

The GP Connect service allows authorised clinical staff at NHS 111 to seamlessly access our practice’s clinical system and book directly on behalf of a patient. This means that should you call NHS 111 and the clinician believes you need an appointment with your GP Practice, the clinician will access available appointment slots only (through GP Connect) and book you in. This will save you time as you will not need to contact the practice direct for an appointment.

The practice will not be sharing any of your data and the practice will only allow NHS 111 to see available appointment slots. They will not even have access to your record. However, NHS 111 will share any relevant data with us, but you will be made aware of this. This will help your GP in knowing what treatment / service / help you may require.

Please note if you no longer require the appointment or need to change the date and time for any reason you will need to speak to one of our reception staff and not NHS 111.

**Patient Communication**

Because we are obliged to protect any confidential information we hold about you and we take this very seriously, it is imperative that you let us know immediately if you change any of your contact details.

We may contact you using SMS texting to your mobile phone in the event that we need to notify you about appointments and other services that we provide to you involving your direct care, therefore you must ensure that we have your up to date details. This is to ensure we are sure we are actually contacting you and not another person. As this is operated on an ‘opt out’ basis we will assume that you give us permission to contact you via SMS if you have provided us with your mobile telephone number. Please let us know if you wish to opt out of this SMS service. We may also contact you using the email address you have provided to us. Please ensure that we have your up to date details.

There may be occasions where authorised research facilities would like you to take part in research. Your contact details may be used to invite you to receive further information about such research opportunities.

**Safeguarding**

The Practice is dedicated to ensuring that the principles and duties of safeguarding adults and children are holistically, consistently and conscientiously applied with the wellbeing of all, at the heart of what we do.

Our legal basis for processing For the General Data Protection Regulation (GDPR) purposes is: -

 *Article 6(1)(e) ‘…exercise of official authority…’.*

For the processing of special categories data, the basis is: -

*Article 9(2)(b) – ‘processing is necessary for the purposes of carrying out the obligations and exercising specific rights of the controller or of the data subject in the field of employment and social security and social protection law…’*

**Research**

Clinical Practice Research Datalink (CPRD) collects de-identified patient data from a network of GP practices across the UK. Primary care data are linked to a range of other health related data to provide a longitudinal, representative UK population health dataset. You can opt out of your information being used for research purposes at any time (see below), full details can be found here: -

<https://cprd.com/transparency-information>

##### **The legal bases for processing this information**

CPRD do not hold or process personal data on patients; however, NHS Digital (formally the Health and Social Care Centre) may process ‘personal data’ for us as an accredited ‘safe haven’ or ‘trusted third-party’ within the NHS when linking GP data with data from other sources. The legal bases for processing this data are:

* Medicines and medical device monitoring: Article 6(e) and Article 9(2)(i) - public interest in the area of public health
* Medical research and statistics: Article 6(e) and Article 9(2)(j) - public interest and scientific research purposes

Any data CPRD hold or pass on to bona fide researchers, except for clinical research studies, will have been anonymised in accordance with the Information Commissioner’s Office Anonymisation Code of Practice. We will hold data indefinitely for the benefit of future research, but studies will normally only hold the data we release to them for twelve months.

**Categories of personal data**

The data collected by Practice staff in the event of a safeguarding situation will be as much personal information as is possible that is necessary to obtain in order to handle the situation. In addition to some basic demographic and contact details, we will also process details of what the safeguarding concern is. This is likely to be special category information (such as health information).

**Sources of the data**

The Practice will either receive or collect information when someone contacts the organisation with safeguarding concerns, or we believe there may be safeguarding concerns and make enquiries to relevant providers.

**Recipients of personal data**

The information is used by the Practice when handling a safeguarding incident or concern. We may share information accordingly to ensure duty of care and investigation as required with other partners such as local authorities, the police or healthcare professionals (i.e. their GP or mental health team).

**Third party processors**

In order to deliver the best possible service, the practice will share data (where required) with other NHS bodies such as other GP practices and hospitals. In addition, the practice will use carefully selected third party service providers. When we use a third party service provider to process data on our behalf then we will always have an appropriate agreement in place to ensure that they keep the data secure, that they do not use or share information other than in accordance with our instructions and that they are operating appropriately. Examples of functions that may be carried out by third parties include:

* Companies that provide IT services & support, including our core clinical systems; systems which manage patient facing services (such as our website and service accessible through the same); data hosting service providers; systems which facilitate appointment bookings or electronic prescription services; document management services etc.
* Delivery services (for example if we were to arrange for delivery of any medicines to you).
* Payment providers (if for example you were paying for a prescription or a service such as travel vaccinations).

Further details regarding specific third-party processors can be supplied on request to the Data Protection Officer as below.

How do we maintain the confidentiality of your records?

We are committed to protecting your privacy and will only use information collected lawfully in accordance with:

* Data Protection Act 2018
* The General Data Protection Regulations 2016
* Human Rights Act 1998
* Common Law Duty of Confidentiality
* Health and Social Care Act 2012
* NHS Codes of Confidentiality, Information Security and Records Management
* Information: To Share or Not to Share Review

Every member of staff who works for an NHS organisation has a legal obligation to keep information about you confidential.

We will only ever use or pass on information about you if others involved in your care have a genuine need for it. We will not disclose your information to any third party without your permission unless there are exceptional circumstances (i.e. life or death situations), where the law requires information to be passed on and / or in accordance with the information sharing principle following Dame Fiona Caldicott’s information sharing review (Information to share or not to share) where “The duty to share information can be as important as the duty to protect patient confidentiality.” This means that health and social care professionals should have the confidence to share information in the best interests of their patients within the framework set out by the Caldicott principles.

Our practice policy is to respect the privacy of our patients, their families and our staff and to maintain compliance with the General Data Protection Regulation (GDPR) and all UK specific Data Protection Requirements. Our policy is to ensure all personal data related to our patients will be protected.

All employees and sub-contractors engaged by our practice are asked to sign a confidentiality agreement. The practice will, if required, sign a separate confidentiality agreement if the client deems it necessary. If a sub-contractor acts as a data processor for Parkfield Medical Centre an appropriate contract (art 24-28) will be established for the processing of your information.

In certain circumstances you may have the right to withdraw your consent to the processing of data. Please contact the Data Protection Officer in writing if you wish to withdraw your consent. If some circumstances we may need to store your data after your consent has been withdrawn to comply with a legislative requirement.

Some of this information will be held centrally and used for statistical purposes. Where we do this, we take strict measures to ensure that individual patients cannot be identified. Sometimes your information may be requested to be used for research purposes – the surgery will always gain your consent before releasing the information for this purpose in an identifiable format. In some circumstances you can Opt-out of the surgery sharing any of your information for research purposes.

With your consent we would also like to use your information

There are times that we may want to use your information to contact you or offer you services, not directly about your healthcare, in these instances we will always gain your consent to contact you. We would however like to use your name, contact details and email address to inform you of other services that may benefit you. We will only do this with your consent. There may be occasions where authorised research facilities would like you to take part on innovations, research, improving services or identifying trends, you will be asked to opt into such programmes if you are happy to do so.

At any stage where we would like to use your data for anything other than the specified purposes and where there is no lawful requirement for us to share or process your data, we will ensure that you have the ability to consent and opt out prior to any data processing taking place.

This information is not shared with third parties or used for any marketing and you can unsubscribe at any time via phone, email or by informing the practice DPO as below.

**National Opt-Out Facility**

*You can choose whether your confidential patient information is used for research and planning.*

*Who can use your confidential patient information for research and planning?*

*It is used by the NHS, local authorities, university and hospital researchers, medical colleges and pharmaceutical companies researching new treatments.*

*Making your data opt-out choice*

*You can choose to opt out of sharing your confidential patient information for research and planning. There may still be times when your confidential patient information is used: for example, during an epidemic where there might be a risk to you or to other people’s health. You can also still consent to take part in a specific research project.*

*Will choosing this opt-out affect your care and treatment?*

*No, your confidential patient information will still be used for your individual care. Choosing to opt out will not affect your care and treatment. You will still be invited for screening services, such as screenings for bowel cancer.*

*What should you do next?*

*You do not need to do anything if you are happy about how your confidential patient information is used.*

*If you do not want your confidential patient information to be used for research and planning, you can choose to opt out securely online or through a telephone service.*

*You can change your choice at any time. To find out more or to make your choice visit nhs.uk/your-nhs-data-matters or call 0300 303 5678*

## NHS Digital Data Collection from the Practice

The NHS needs data about the patients it treats to plan and deliver its services and to ensure that care and treatment provided is safe and effective. The General Practice Data for Planning and Research data collection will help the NHS to improve health and care services for everyone by collecting patient data that can be used to do this. For example patient data can help the NHS to:

* monitor the long-term safety and effectiveness of care
* plan how to deliver better health and care services
* prevent the spread of infectious diseases
* identify new treatments and medicines through health research

GP practices already share patient data for these purposes, but this new data collection will be more efficient and effective.

This means that GPs can get on with looking after their patients, and NHS Digital can provide controlled access to patient data to the NHS and other organisations who need to use it, to improve health and care for everyone.

Contributing to research projects will benefit us all as better and safer treatments are introduced more quickly and effectively without compromising your privacy and confidentiality.

NHS Digital has engaged with the [British Medical Association (BMA)](http://www.bma.org.uk/), [Royal College of GPs (RCGP)](http://www.rcgp.org.uk/) and the [National Data Guardian (NDG)](http://www.gov.uk/government/organisations/national-data-guardian) to ensure relevant safeguards are in place for patients and GP practices.

## NHS Digital purposes for processing patient data

Patient data from GP medical records kept by GP practices in England is used every day to improve health, care and services through planning and research, helping to find better treatments and improve patient care. The NHS is introducing an improved way to share this information - called the General Practice Data for Planning and Research data collection.

NHS Digital will collect, analyse, publish and share this patient data to improve health and care services for everyone. This includes:

* informing and developing health and social care policy
* planning and commissioning health and care services
* taking steps to protect public health (including managing and monitoring the coronavirus pandemic)
* in exceptional circumstances, providing you with individual care
* enabling healthcare and scientific research

Any data that NHS Digital collects will only be used for health and care purposes. It is never shared with marketing or insurance companies.

## What patient data NHS Digital collect

This collection will start from 1 July 2021. Patient data will be collected from GP medical records about:

* any living patient registered at a GP practice in England when the collection started - this includes children and adults
* any patient who died after the data collection started, and was previously registered at a GP practice in England when the data collection started

We will not collect your name or where you live. Any other data that could directly identify you, for example NHS number, General Practice Local Patient Number, full postcode and date of birth, is replaced with unique codes which are produced by de-identification software before the data is shared with NHS Digital.

This process is called pseudonymisation and means that no one will be able to directly identify you in the data. The diagram below helps to explain what this means. Using the terms in the diagram, the data we collect would be described as de-personalised.



Image provided by Understanding Patient Data [under licence](https://creativecommons.org/licenses/by/2.0/).

NHS Digital will be able to use the same software to convert the unique codes back to data that could directly identify you in certain circumstances, and where there is a valid legal reason. Only NHS Digital has the ability to do this. This would mean that the data became personally identifiable data in the diagram above. An example would be where you consent to your identifiable data being shared with a research project or clinical trial in which you are participating, as they need to know the data is about you.

More information about when we may be able to re-identify the data is in the [who we share your patient data with](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/general-practice-data-for-planning-and-research/transparency-notice#who-we-share-your-patient-data-with) section below.

## The Data NHD Digital collect

We will only collect structured and coded data from patient medical records that is needed for specific health and social care purposes explained above.

Data that directly identifies you as an individual patient, including your NHS number, General Practice Local Patient Number, full postcode, date of birth and if relevant date of death, is replaced with unique codes produced by de-identification software before it is sent to NHS Digital. This means that no one will be able to directly identify you in the data.

NHS Digital will be able to use the software to convert the unique codes back to data that could directly identify you in certain circumstances, and where there is a valid legal reason. This would mean that the data became personally identifiable in the diagram above. It will still be held securely and protected, including when it is shared by NHS Digital.

**NHS Digital will collect**

* data on your sex, ethnicity and sexual orientation
* clinical codes and data about diagnoses, symptoms, observations, test results, medications, allergies, immunisations, referrals and recalls, and appointments, including information about your physical, mental and sexual health
* data about staff who have treated you

More detailed information about the patient data we collect is contained in the [Data Provision Notice issued to GP practices](https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notices/data-provision-notices-dpns/general-practice-data-for-planning-and-research).

**NHS Digital Does not collect**

* your name and address (except for your postcode in unique coded form)
* written notes (free text), such as the details of conversations with doctors and nurses
* images, letters and documents
* coded data that is not needed due to its age – for example medication, referral and appointment data that is over 10 years old
* coded data that GPs are not permitted to share by law – for example certain codes about IVF treatment, and certain information about gender re-assignment

## Opting out of NHS Digital collecting your data (Type 1 Opt-out)

If you do not want your identifiable patient data (personally identifiable data in the diagram above) to be shared outside of your GP practice for purposes except for your own care, you can register an opt-out with your GP practice. This is known as a Type 1 Opt-out.

Type 1 Opt-outs were introduced in 2013 for data sharing from GP practices, but may be discontinued in the future as a new opt-out has since been introduced to cover the broader health and care system, called the National Data Opt-out. If this happens people who have registered a Type 1 Opt-out will be informed. More about National Data Opt-outs is in the section [Who we share patient data with](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/general-practice-data-for-planning-and-research/transparency-notice#who-we-share-patient-data-with).

NHS Digital will not collect any patient data for patients who have already registered a Type 1 Opt-out in line with current policy. If this changes patients who have registered a Type 1 Opt-out will be informed.

If you do not want your patient data shared with NHS Digital, you can register a Type 1 Opt-out with your GP practice. You can register a Type 1 Opt-out at any time. You can also change your mind at any time and withdraw a Type 1 Opt-out.

Data sharing with NHS Digital will start on 1 July 2021.

If you have already registered a Type 1 Opt-out with your GP practice your data will not be shared with NHS Digital.

If you wish to register a Type 1 Opt-out with your GP practice before data sharing starts with NHS Digital, this should be done by [returning this form](https://nhs-prod.global.ssl.fastly.net/binaries/content/assets/website-assets/data-and-information/data-collections/general-practice-data-for-planning-and-research/type-1-opt-out-form.docx) to your GP practice by **23 June 2021** to allow time for processing it. If you have previously registered a Type 1 Opt-out and you would like to withdraw this, you can also use the form to do this. You can send the form by post or email to your GP practice or call 0300 3035678 for a form to be sent out to you.

If you register a Type 1 Opt-out after your patient data has already been shared with NHS Digital, no more of your data will be shared with NHS Digital. NHS Digital will however still hold the patient data which was shared with us before you registered the Type 1 Opt-out.

If you do not want NHS Digital to share your identifiable patient data (personally identifiable data in the diagram above) with anyone else for purposes beyond your own care, then you can also register a [National Data Opt-out](https://www.nhs.uk/your-nhs-data-matters/). There is more about National Data Opt-outs and when they apply in the [National Data Opt-out section](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/general-practice-data-for-planning-and-research/transparency-notice#national-data-opt-out-opting-out-of-nhs-digital-sharing-your-data-) below.

## NHS Digital legal basis for collecting, analysing and sharing patient data.

When we collect, analyse, publish and share patient data, there are strict laws in place that we must follow. Under the UK General Data Protection Regulation (GDPR), this includes explaining to you what legal provisions apply under GDPR that allows us to process patient data. The GDPR protects everyone's data.

NHS Digital has been directed by the Secretary of State for Health and Social Care under the [General Practice Data for Planning and Research Directions 2021](https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notices/secretary-of-state-directions/general-practice-data-for-planning-and-research-directions-2021) to collect and analyse data from GP practices for health and social care purposes including policy, planning, commissioning, public health and research purposes.

NHS Digital is the controller of the patient data collected and analysed under the GDPR jointly with the Secretary of State for Health and Social Care.

All GP practices in England are legally required to share data with NHS Digital for this purpose under the Health and Social Care Act 2012 (2012 Act). More information about this requirement is contained in the [Data Provision Notice](https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notices/data-provision-notices-dpns/general-practice-data-for-planning-and-research) issued by NHS Digital to GP practices.

NHS Digital has various powers to publish anonymous statistical data and to share patient data under sections 260 and 261 of the 2012 Act. It also has powers to share data under other Acts, for example the Statistics and Registration Service Act 2007.

Regulation 3 of the Health Service (Control of Patient Information) Regulations 2002 (COPI) also allow confidential patient information to be used and shared appropriately and lawfully in a public health emergency. The Secretary of State has issued legal notices under COPI (COPI Notices) requiring NHS Digital, NHS England and Improvement, arm's-length bodies (such as Public Health England), local authorities, NHS trusts, clinical commissioning groups and GP practices to share confidential patient information to respond to the COVID-19 outbreak. Any information used or shared during the COVID-19 outbreak will be limited to the period of the outbreak unless there is another legal basis to use confidential patient information.

 The legal basis under GDPR for General Practice Data for Planning and Research

## How NHS Digital use patient data

NHS Digital will analyse and link the patient data we collect with other patient data we hold to create national data sets and for data quality purposes.

NHS Digital will be able to use the de-identification software to convert the unique codes back to data that could directly identify you in certain circumstances for these purposes, where this is necessary and where there is a valid legal reason. There are strict internal approvals which need to be in place before we can do this and this will be subject to independent scrutiny and oversight by the [Independent Group Advising on the Release of Data (IGARD)](https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/independent-group-advising-on-the-release-of-data).

These national data  sets are analysed and used by NHS Digital to produce national statistics and management information, including public dashboards about health and social care which are published. We never publish any patient data that could identify you. All data we publish is anonymous statistical data.

For more information about data we publish see [Data and Information](https://digital.nhs.uk/data) and [Data Dashboards](https://digital.nhs.uk/dashboards).

We may also carry out analysis on national data sets for data quality purposes and to support the work of others for the purposes set out in [Our purposes for processing patient data](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/general-practice-data-for-planning-and-research/transparency-notice#our-purposes-for-processing-patient-data) section above.

## Who NHS Digital share patient data with

All data which is shared by NHS Digital is subject to robust rules relating to privacy, security and confidentiality and only the minimum amount of data necessary to achieve the relevant health and social care purpose will be shared.

All requests to access patient data from this collection, other than anonymous aggregate statistical data, will be assessed by NHS Digital’s [Data Access Request Service](https://digital.nhs.uk/services/data-access-request-service-dars), to make sure that organisations have a legal basis to use the data and that it will be used safely, securely and appropriately.

These requests for access to patient data will also be subject to independent scrutiny and oversight by the [Independent Group Advising on the Release of Data (IGARD)](https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/independent-group-advising-on-the-release-of-data). Organisations approved to use this data will be required to enter into a data sharing agreement with NHS Digital regulating the use of the data.

There are a number of organisations who are likely to need access to different elements of patient data from the General Practice Data for Planning and Research collection. These include but may not be limited to:

* the Department of Health and Social Care and its executive agencies, including Public Health England and other government departments
* NHS England and NHS Improvement
* primary care networks (PCNs), clinical commissioning groups (CCGs) and integrated care organisations (ICOs)
* local authorities
* research organisations, including universities, charities, clinical research organisations that run clinical trials and pharmaceutical companies

If the request is approved, the data will either be made available within a secure data access environment within NHS Digital infrastructure, or where the needs of the recipient cannot be met this way, as a direct dissemination of data. We plan to reduce the amount of data being processed outside central, secure data environments and increase the data we make available to be accessed via our secure data access environment. For more information read about improved data access in [improving our data processing services](https://digital.nhs.uk/data-and-information/data-insights-and-statistics/improving-our-data-processing-services).

Data will always be shared in the uniquely coded form (de-personalised data in the diagram above) unless in the circumstances of any specific request it is necessary for it to be provided in an identifiable form (personally identifiable data in the diagram above). For example, when express patient consent has been given to a researcher to link patient data from the General Practice for Planning and Research collection to data the researcher has already obtained from the patient.

It is therefore possible for NHS Digital to convert the unique codes back to data that could directly identify you in certain circumstances, and where there is a valid legal reason which permits this without breaching the common law duty of confidentiality. This would include:

* where the data was needed by a health professional for your own care and treatment
* where you have expressly consented to this, for example to participate in a clinical trial
* where there is a legal obligation, for example where the COPI Notices apply - see [Our legal basis for collecting, analysing and sharing patient data](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections/general-practice-data-for-planning-and-research/transparency-notice#our-legal-basis-for-collecting-analysing-and-sharing-patient-data) above for more information on this
* where approval has been provided by the [Health Research Authority](https://www.hra.nhs.uk/) or the Secretary of State with support from the [Confidentiality Advisory Group (CAG)](https://www.hra.nhs.uk/about-us/committees-and-services/confidentiality-advisory-group/) under Regulation 5 of the Health Service (Control of Patient Information) Regulations 2002 (COPI) - this is sometimes known as a ‘section 251 approval’

This would mean that the data was personally identifiable in the diagram above. Re-identification of the data would only take place following approval of the specific request through the Data Access Request Service, and subject to independent assurance by IGARD and consultation with the Professional Advisory Group, which is made up of representatives from the BMA and the RCGP. If you have registered a National Data Opt-out, this would be applied in accordance with the National Data Opt-out policy before any identifiable patient data (personally identifiable data in the diagram above) about you was shared. More about the National Data Opt-out is in the section below.

Details of who we have shared data with, in what form and for what purposes are published on our [data release register](https://digital.nhs.uk/services/data-access-request-service-dars/register-of-approved-data-releases).

## Where NHS digital stores patient data

NHS Digital only stores and processes patient data for this data collection within the United Kingdom (UK).

Fully anonymous data (that does not allow you to be directly or indirectly identified), for example statistical data that is published, may be stored and processed outside of the UK. Some of our processors may process patient data outside of the UK. If they do, we will always ensure that the transfer outside of the UK complies with data protection laws.

**Where do we store your information electronically?**

All the personal data we process is processed by our staff in the UK however for the purposes of IT hosting and maintenance this information may be located on servers within the European Union.

No 3rd parties have access to your personal data unless the law allows them to do so and appropriate safeguards have been put in place such as a Data Processor as above). We have a Data Protection regime in place to oversee the effective and secure processing of your personal and or special category (sensitive, confidential) data.

Who are our partner organisations?

We may also have to share your information, subject to strict agreements on how it will be used, with the following organisations;

* NHS Trusts / Foundation Trusts
* GP’s
* Primary Care Network
* NHS Commissioning Support Units
* Independent Contractors such as dentists, opticians, pharmacists
* Private Sector Providers
* Voluntary Sector Providers
* Ambulance Trusts
* Clinical Commissioning Groups
* Social Care Services
* NHS England (NHSE) and NHS Digital (NHSD)
* Multi Agency Safeguarding Hub (MASH)
* Local Authorities
* Education Services
* Fire and Rescue Services
* Police & Judicial Services
* Voluntary Sector Providers
* Private Sector Providers
* Other ‘data processors’ which you will be informed of

You will be informed who your data will be shared with and in some cases asked for consent for this to happen when this is required.

**Computer System**

This practice operates a Clinical Computer System on which NHS Staff record information securely. This information can then be shared with other clinicians so that everyone caring for you is fully informed about your medical history, including allergies and medication.

To provide around the clock safe care, unless you have asked us not to, we will make information available to our Partner Organisation (above). Wherever possible, their staff will ask your consent before your information is viewed.

**Shared Care Records**

To support your care and improve the sharing of relevant information to our partner organisations (as above) when they are involved in looking after you, we will share information to other systems. You can opt out of this sharing of your records with our partners at anytime if this sharing is based on your consent.

We may also use external companies to process personal information, such as for archiving purposes. These companies are bound by contractual agreements to ensure information is kept confidential and secure. All employees and sub-contractors engaged by our practice are asked to sign a confidentiality agreement. If a sub-contractor acts as a data processor for Parkfield Medical Centre an appropriate contract (art 24-28) will be established for the processing of your information.

**Sharing your information without consent**

We will normally ask you for your consent, but there are times when we may be required by law to share your information without your consent, for example:

* where there is a serious risk of harm or abuse to you or other people;
* Safeguarding matters and investigations
* where a serious crime, such as assault, is being investigated or where it could be prevented;
* notification of new births;
* where we encounter infectious diseases that may endanger the safety of others, such as meningitis or measles (but not HIV/AIDS);
* where a formal court order has been issued;
* where there is a legal requirement, for example if you had committed a Road Traffic Offence.

**How long will we store your information?**

We are required under UK law to keep your information and data for the full retention periods as specified by the NHS Records management code of practice for health and social care and national archives requirements.

More information on records retention can be found online at (<https://digital.nhs.uk/article/1202/Records-Management-Code-of-Practice-for-Health-and-Social-Care-2016>).

**How can you access, amend move the personal data that you have given to us?**

Even if we already hold your personal data, you still have various rights in relation to it. To get in touch about these, please contact us. We will seek to deal with your request without undue delay, and in any event in accordance with the requirements of any applicable laws. Please note that we may keep a record of your communications to help us resolve any issues which you raise.

Right to object: If we are using your data and you do not agree, you have the right to object. We will respond to your request within one month (although we may be allowed to extend this period in certain cases). This is NOT an absolute right sometimes we will need to process your data even if you object.

Right to withdraw consent: Where we have obtained your consent to process your personal data for certain activities (for example for a research project, or consent to send you information about us or matters you may be interested in), you may withdraw your consent at any time.

Right to erasure: In certain situations (for example, where we have processed your data unlawfully), you have the right to request us to "erase" your personal data. We will respond to your request within one month (although we may be allowed to extend this period in certain cases) and will only disagree with you if certain limited conditions apply. If we do agree to your request, we will delete your data but will need to keep a note of your name/ other basic details on our register of individuals who would prefer not to be contacted. This enables us to avoid contacting you in the future where your data are collected in unconnected circumstances. If you would prefer us not to do this, you are free to say so.

Right of data portability: If you wish, you have the right to transfer your data from us to another data controller. We will help with this with a GP to GP data transfer and transfer of your hard copy notes.

**Primary Care Network**

The objective of primary care networks (PCNs) is for group practices together to create more collaborative workforces which ease the pressure of GP’s, leaving them better able to focus on patient care. The aim is that by July 2019, all areas within England will be covered by a PCN.

Primary Care Networks form a key building block of the NHS long-term plan. Bringing general practices together to work at scale has been a policy priority for some years for a range of reasons, including improving the ability of practices to recruit and retain staff; to manage financial and estates pressures; to provide a wider range of services to patients and to more easily integrate with the wider health and care system.

All GP practices are expected to come together in geographical networks covering populations of approximately 30–50,000 patients by June 2019 if they are to take advantage of additional funding attached to the GP contract. This size is consistent with the size of the primary care homes, which exist in many places in the country, but much smaller than most GP Federations.

This means the practice may share your information with other practices within the PCN to provide you with your care and treatment.

**Access to your personal information**

Data Subject Access Requests (DSAR): You have a right under the Data Protection legislation to request access to view or to obtain copies of what information the surgery holds about you and to have it amended should it be inaccurate. To request this, you need to do the following:

* Your request should be made to the Practice. (For information from a hospital or other Trust/ NHS organisation you should write direct to them.
* There is no charge to have a copy of the information held about you
* We are required to provide you with information within one month
* You will need to give adequate information (for example full name, address, date of birth, NHS number and details of your request) so that your identity can be verified, and your records located information we hold about you at any time.

**What should you do if your personal information changes?**

You should tell us so that we can update our records please contact the Practice Manager as soon as any of your details change, this is especially important for changes of address or contact details (such as your mobile phone number), the practice will from time to time ask you to confirm that the information we currently hold is accurate and up-to-date.

## Online Access

You may ask us if you wish to have online access to your medical record. However, there will be certain protocols that we have to follow in order to give you online access, including written consent and production of documents that prove your identity.

Please note that when we give you online access, the responsibility is yours to make sure that you keep your information safe and secure if you do not wish any third party to gain access.

# Third parties mentioned on your medical record

Sometimes we record information about third parties mentioned by you to us during any consultation, or contained in letters we receive from other organisations. We are under an obligation to make sure we also protect that third party’s rights as an individual and to ensure that references to them which may breach their rights to confidentiality, are removed before we send any information to any other party including yourself.

# **Our website**

The only website this Privacy Notice applies to is the Surgery’s website. If you use a link to any other website from the Surgery’s website then you will need to read their respective Privacy Notice. We take no responsibility (legal or otherwise) for the content of other websites.

The Surgery’s website uses cookies. For more information on which cookies we use and how we use them, please see our Cookies Policy.

# **Telephone system**

Our telephone system records all telephone calls. Recordings are retained for up to three years, and are used periodically for the purposes of seeking clarification where there is a dispute as to what was said and for staff training Access to these recordings is restricted to named senior staff.

**Objections / Complaints**

Should you have any concerns about how your information is managed at the GP, please contact the GP Practice Manager or the Data Protection Officer as above. If you are still unhappy following a review by the GP practice, you have a right to lodge a complaint with a supervisory authority: You have a right to complain to the UK supervisory Authority as below.

Information Commissioner:

Wycliffe house

Water Lane

Wilmslow

Cheshire

SK9 5AF

Tel: 01625 545745

<https://ico.org.uk/>

If you are happy for your data to be used for the purposes described in this privacy notice, then you do not need to do anything. If you have any concerns about how your data is shared, then please contact the Practice Data Protection Officer.

If you would like to know more about your rights in respect of the personal data we hold about you, please contact the Data Protection Officer as below.

Data Protection Officer:

The Practice Data Protection Officer is Paul Couldrey of PCIG Consulting Limited. Any queries regarding Data Protection issues should be addressed to him at: -

Email: Couldrey@me.com

Postal: PCIG Consulting Limited

 7 Westacre Drive

 Quarry Bank

 Dudley

 West Midlands

 DY5 2EE

Changes:

It is important to point out that we may amend this Privacy Notice from time to time. If you are dissatisfied with any aspect of our Privacy Notice, please contact the Practice Data Protection Officer.

|  |
| --- |
| **Direct MedicalCare and Administration** |
| **Recipients or categories of recipients of the** **personal orspecial categories of personal data** | **Purpose of the processing** | **Lawful basis****UK General Data Protection Regulation (UK GDPR)*****– Article 6 –******– Article 9 –*****Data Protection Act (DPA) 2018*****– Section 10 –******– Schedule 1 –*** |
| **NHS Trusts – Hospitals, Community or Mental Health Trusts.** | Personal data concerning your health is shared with NHS Trusts to enable their healthcare professionals make the best-informed decision about your health needs, and to provide youwith the best possible care if you visit the hospital for routine care and referrals.Your personal information may also be processed for local administrative purposes such as:* Waiting list management.
* Local clinical audit.
* Performance against local targets.
* Activity monitoring.
* Production of datasets to submit for commissioning purposes and national collections.

Your electronic GP record is the source of information that is shared.In accordance with DPA Part 1, Schedule 1 (2) health or social care purposes means the purposes of preventive or occupational medicine; medical diagnosis; the provision of health care or treatment;the provision of social care, or the management of health care systems or services or social caresystems or services. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Emergency Services (Ambulance trusts, police, A&E departments, out of hoursservices, 111)** | There are circumstances when intervention is necessary in order to save or protect apatient’s life or to prevent them from serious immediate harm, for example, during a collapse or diabetic coma or serious injury or accident. In many of these circumstances the patient may be unconscious or too ill to communicate.Medical professionals have a duty of care to share data in emergencies to protect their patients or other persons. In these circumstances, your GP medical record will be shared with emergencyhealthcare services, the police or fire service in order to enable you receive the best treatment or service.Make pre-determined decisions about the type and extent of care you will receive in an emergency; these are known as “Advance Directives”.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”, and DPA “provisions”:* GDPR Article 6(1) (d) – processing is necessary in order to protect the vital interests ofthe data subject.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “conditions” and DPA “provisions”:* Article 9 (2) (C) – the processing is necessary to protect the vital interests of the datasubject.
* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Pharmacists –**Medicines Optimisation | Medicines optimisation looks at the value which medicines deliver, making sure they areclinically-effective and cost-effective. It is about ensuring patients get the right choice ofmedicines, at the right time, and are engaged in the process by their clinical team.Medicines optimisation enables community pharmacies to request medication electronically from our GPPractice and view relevant information from your GP record in order to provide you with the bestmedicines.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Local Authority – Social Services** | Operose Health Group works closely with Local Authorities to support and care for peopleof all ages to deliver the best possible social care.Personal data concerning your GP medical record may be shared with Local Authorities andMultidisciplinary Team (MDT) delivering social care in order to enable them to make thebest-informed decision about your social care needs if required.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Care Homes** | If you are a residence of a Care Home, personal data concerning your GP record will beshared with your care provider and other Multidisciplinary Team (MDT) looking after you to enablethem to provide you with the best possible care needs.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Other primary care services delivered for the purposes ofdirect care** |
| **Recipients or categories of recipients of the** **personal orspecial categories of personal data** | **Purpose of the processing** | **Lawful basis****UK General Data Protection Regulation (UKGDPR)*****– Article 6 –******– Article 9 –*****Data Protection Act (DPA) 2018*****– Section 10 –******– Schedule 1 –*** |
| **Integrated Urgent Care Service (IUC)** – covering Out of Hours and NHS111 service | **Integrated Urgent Care Service (IUC)** is an urgent care servicedelivered across England for the provision of a functionally integrated 24/7 urgent care access,clinical advice and treatment service for patients. IUC incorporates NHS 111 and Out of Hours (OOH)services, which is often referred to as an IUC Clinical Assessment Service.The purpose of IUC is to ensure that patients receive the best possible healthcare service in theircommunity.If you visit the urgent care centre or call NHS 111 for health-related needs, personal data in yourGP record will be shared with healthcare professionals in order to enable them to make the best thebest-informed decision about your health needs.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Continuing Health Care (CHC)** | NHS Continuing Health Care (CHC) is free care outside of hospital that is arranged andfunded by the NHS to support living with complex medical conditions and on-going healthcare needswhich can be delivered in the patient’s home, at their care home or in non-acute hospitals.CHC is free, unlike support from social services for which a fee may be charged, depending on yourincome and savings. CHC is different from NHS Funded Nursing Care, which some people with lesscomplex needs living in care homes receive.If you require CHC needs personal data concerning your GP medical record will be shared with thecare home or in non-acute hospitals looking after you.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
|    **StatutoryDisclosures of Information** |
| **Recipients or categories of recipients of the** **personal orspecial categories of personal data** | **Purpose of the processing** | **Lawful basis****UK General Data Protection Regulation (UK GDPR)*****– Article 6 –******– Article 9 –*****Data Protection Act (DPA) 2018*****– Section 10 –******– Schedule 1-*** |
| **Safeguarding Concerns** – to prevent an individual, or to prevent aserious crime | Some members of public are recognised as needing safeguarding protection, for examplechildren and vulnerable adults. If an individual is identified as being at risk from harm, we have aduty to do what we can to protect that individual, and we are bound ‘Safeguarding’ laws to do so.Where there is a suspected or actual safeguarding issue, we will share information that we holdabout you with other relevant agencies such as local Ambulance trusts, the police, A&Edepartments, out of hours services, 111 or social services.The source of the information shared in this way is your electronic GP record.[Children Act 1989](https://www.legislation.gov.uk/ukpga/1989/41/section/47) requires local authorities to investigate where a child isthe subject of an emergency protection order, is in police protection or where there is a reasonablecause to suspect that a child is suffering or is likely to suffer harm.[Care Act 2014](https://www.legislation.gov.uk/ukpga/2014/23/contents/enacted) (safeguarding adults) sets out a clear legal framework for howlocal authorities and other parts of the system should protect adults at risk of abuse or neglect.Both Acts for Parliament require local authorities to safeguard and promote the welfare of childrenand adults who are in need, and to request help from specified authorities including GeneralPractices, NHS Trusts, Clinical Commissioning Groups (CCGs) and NHS England. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* UK GDPR Article 9 (2) (c) – the processing is necessary to protect the vital interests ofthe data subject.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:Article 9 (2) (c) – the processing is necessary to protect the vital interests of the data subject.[In accordance with DPA Schedule 1, Part 2 (18) (1a) – the condition is met wherethe processing is necessary for protecting an individual from neglect or physical, mental oremotional harm, or protecting the physical, mental or emotional well-being of an individual](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted).**Related Legislations:**[Section 47 of The Children Act 1989](https://www.legislation.gov.uk/ukpga/1989/41/section/47).[Section 45 of Care Act 2014](http://www.legislation.gov.uk/ukpga/2014/23/section/45/enacted) |
| [The Care QualityCommission (CQC)](http://www.cqc.org.uk/) | The Care Quality Commission (CQC) is a regulatory body established under the Health andSocial Care Act. The CQC regulates health and social care services in England to ensure that safehealth and care are provided. The law allows CQC to access identifiable patient data/medical recordsin our clinical system for the purposes of their assessment and investigation of significant safetyincident.The data may be shared with the CQC, its officers and inspection team that visit us from time totime. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing for legal obligation.
* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **Law Enforcement and Regulatory Bodies** | In some circumstances we may be legally required to share personal information with lawenforcements and regulatory bodies (without the consent of the data subject) such as: the Police;Courts of Justice; HMRC and DVLA for the purposes of prevention or detection of crime; apprehensionor prosecution of offenders; the assessment or collection of any tax or duty or, of any impositionof a similar nature.Our GPs are obliged to notify the DVLA when fitness to drive requires notification, but anindividual cannot or will not notify the DVLA themselves*,*and if there is concern for roadsafety, which would be for both the individual and the wider public.We will review each request based on its merits before deciding whether to release information tothe relevant authorities.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:* Article 9 (2) (G) – the processing is necessary for reasons of substantial public interest.
* In accordance with DPA Schedule 1, Part 2, (10) (1c) – the condition is met where theprocessing is necessary for the prevention or detection of an unlawful act.
 |
| **Medico-Legal** | **Medico-Legal –** Where a medical professional is holding personal datafor the purpose of providing medical reports in connection with legal action.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.
* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:* GDPR Article 9 (2) (f) – the processing is necessary for the establishment, exercise ordefence of legal claims.
* [In accordance with DPA Schedule 1, Part 3, (33) – the conditions forprocessing for legal claims is met where it is in connection with, any legal proceedingsincluding prospective legal proceedings or; for the purpose of obtaining a legal adviceor; establishing exercising or defending legal rights.](https://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| [General Medical Council(GMC)](https://www.gmc-uk.org/) | **General Medical Council** (**GMC**) is a public body thatmaintains the official register of medical practitioners in the United Kingdom. Its primaryresponsibility is ‘to protect, promote and maintain the health and safety of the public’ bycontrolling entry to the register, and suspending or removing members when necessary.Under the Medical Act 1983, the GMC has the power to request access to a patient’s medical recordsfor the purposes of an investigation into a doctor’s fitness to practise.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.
* GDPR Article 6(1) (e) – public interest or in the exercise of official authority;

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

**Related Legislation:**[The Medical Act 1983](https://www.gmc-uk.org/about/legislation/medical_act.asp) |
| [The Parliamentary and Health Service Ombudsman](https://www.ombudsman.org.uk/about-us/who-we-are) | The Parliamentary and Health Service Ombudsman was set up by Parliamentto provide an independent complaint handling service for complaints that have not been resolved bythe NHS in England and UK government departments, where you believe they have not acted properlyor fairly or have provided a poor service. To do this, the Ombudsman will need to collect and useinformation we hold about you and your complaint.The Parliamentary and Health Service Ombudsman is allowed to use your information for the purpose ofhandling your complaint under the [Parliamentary Commissioner Act 1967.](https://www.legislation.gov.uk/ukpga/1967/13/contents) This legislation alsoprotects information obtained for the purposes of investigating your complaint.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “conditions”:* GDPR Article 6(1) (a) – the data subject has given consent to the processing of his or herpersonal data.
* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “conditions”:* GDPR Article 9 (2) (a) – the data subject has given explicit consent to the processing ofthose personal data for one or more specified purposes.

You do not have the right to object to the processing of your personal information, but you have theright to withdraw your consent.**Related Legislation:**[Parliamentary Commissioner Act 1967.](https://www.legislation.gov.uk/ukpga/1967/13/contents) |
| **NHS Counter Fraud** | Under the NHS Act 2006, investigations into fraud in the NHS may require access toconfidential patient information.This means that we are compelled by the law to share your data with the NHS counter fraud team whererequired.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.
* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:* Article 9 (2) (G) – the processing is necessary for reasons of substantial public interest.
* [In accordance with DPA Schedule 1, Part 2, (14) (1a) – the condition ismet where the processing is necessary for the purposes of preventing fraud or aparticular kind of fraud.](https://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

**Related Legislation:**[S10NHS Act 2006](https://www.legislation.gov.uk/ukpga/2006/41/part/10)[Serious Crime Act 2007](https://www.legislation.gov.uk/ukpga/2007/27/contents) |
| [NHS Digital](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets)**– Statutory Data Collection** | NHS Digital is a national information and technology partner to the health and socialcare system. NHS Digital use digital technology to transform the NHS and social care.NHS Digital carries out [National Data collections/ extraction](https://digital.nhs.uk/data-and-information/data-collections-and-data-sets/data-collections) from the GP clinicalsystem. These include:**National Diabetes Audit (NDA)** – A national monitoring system, auditing the care ofpatients with diabetes. The data extracted for the purpose of NDA includes NHS Number, date of birthand postcode, as well as clinical parameters related to diabetes. NDA is a mandatory data extractionunder section [259 of the Health and Social Care Act 2012](http://www.legislation.gov.uk/ukpga/2012/7/section/254/enacted), this means thatwe are compelled by law to share your data**Individual GP Level Data (IGPLD) –**A national monitoring system to enable NHSDigital to provide GPs with clinical information on the care provision for their patients. The dataextracted includes the NHS number. IGPLD is a mandatory data extraction under [259 of the Health and Social Care Act 2012](http://www.legislation.gov.uk/ukpga/2012/7/section/254/enacted), this means that we are compelledby law to share your data**FGM)** – NHS Digital collects data on FGM within the NHS in England on behalf of theDepartment of Health (DH). Data collected is used to produce information that helps improve NHS andlocal authorities to improve on how they support women and girls who have had or, who are at risk ofFGM.FGM Enhanced Dataset is a mandatory data extraction under section [259 of the Health and Social Care Act 2012](http://www.legislation.gov.uk/ukpga/2012/7/section/254/enacted), this means that we are compelledby law to share your data when required.Your electronic GP record is the source of information that is shared.**Data Retention Period**All records held by the Practice will be kept for the duration specified in the [Records Management Codes of Practice for Health and SocialCare](https://www.gov.uk/government/publications/records-management-code-of-practice-for-health-and-social-care) | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.
* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or, themanagement of health or social care systems and services.[DPA Section 10 (1) (c) – processing is necessary for health and social carepurposes;](http://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)[In accordance with DPA Schedule 1, Part 1, (2) – health or social care purposesmeans the purposes of preventive or occupational medicine; medical diagnosis; the provision ofhealth care or treatment; the provision of social care, or the management of health care systemsor services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)**Related Legislation:**S[259 of the Health and Social Care Act 2012](http://www.legislation.gov.uk/ukpga/2012/7/section/254/enacted)The processing is necessary for compliance with a legal and professional obligation to which we aresubject therefore, you do not have the right to object to the processing of your personalinformation. |
| [NHS England](https://www.england.nhs.uk/contact-us/privacy/privacy-notice/your-information/) | NHS England is responsible for securing, planning, designing and paying for Primary Care& Specialised NHS services not otherwise funded by Clinical Commissioning Groups (CCGs) Thisincludes planned and emergency hospital care, mental health, rehabilitation, community and primarymedical care (GP) services.We may often share personal information with NHS England potentially for safeguarding concerns thatneed escalating beyond our borough.The processing is necessary for compliance with a legal and professional obligation to which we aresubject therefore, you do not have the right to object to the processing of your personalinformation.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.
* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or, themanagement of health or social care systems and services.[DPA Section 10 (1) (c) – processing is necessary for health and social carepurposes;](http://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)[In accordance with DPA Schedule 1, Part 1, (2) – health or social care purposesmeans the purposes of preventive or occupational medicine; medical diagnosis; the provision ofhealth care or treatment; the provision of social care, or the management of health care systemsor services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted) |
| [National Cancer Diagnosis Audit (NCDA).](https://www.cancerresearchuk.org/health-professional/diagnosis/national-cancer-diagnosis-audit) | The National Cancer Diagnosis Audit (NCDA) looks at primary and secondary care datarelating to patients diagnosed with cancer. It helps to understand pathways to cancer diagnosis,what works well and where improvements could be made.The audit looks specifically at clinical practice in order to understand:* interval length from patient presentation to diagnosis;
* use of investigations prior to referral;
* what the referral pathways for patients with cancer are and how they compare with thoserecorded by the cancer registry

The processing is necessary for compliance with a legal and professional obligation to which we aresubject therefore, you do not have the right to object to the processing of your personalinformation. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (c) – processing is necessary for compliance with a legal obligation.
* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provision”:GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or, themanagement of health or social care systems and services.[DPA Section 10 (1) (c) – processing is necessary for health and social carepurposes;](http://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)[In accordance with DPA Schedule 1, Part 1, (2) – health or social care purposesmeans the purposes of preventive or occupational medicine; medical diagnosis; the provision ofhealth care or treatment; the provision of social care, or the management of health care systemsor services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted) |
| **Processing for Commissioning, Planning, Research and Risk StratificationPurposes** |
| **Recipients or categories of recipients of the** **personal orspecial categories of personal data** | **Purpose of the processing** | **Lawful basis****UK General Data Protection Regulation (UK GDPR)*****– Article 6 –******– Article 9 –*****Data Protection Act (DPA) 2018*****– Section 10 –******– Schedule 1-*** |
| **Clinical Commissioning Groups (CCGs)** | Clinical Commissioning Group (CCGs) are responsible for securing, planning, designingand paying for your NHS services, including planned and emergency hospital care, mental health,rehabilitation, community and primary medical care (GP) services. This is known as ‘Commissioning’.To enable CCGs in our geographical areas carry out their statutory responsibilities effectively,efficiently and safely, we may share personal data about you with them for the following purposes:* Individual Funding Requests.
* Continuing Health Care.
* Complaints, appeals, queries or, safeguarding concerns.
* Commissioning purposes such as payment for target achievement known as Quality and OutcomesFramework (QOF) and where we participate in agreed national or local enhanced services.

Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| “**Risk Stratification” (Population Health Management and CaseFinding)** | At Operose Health, we perform computerised searches of some or all of our records toidentify individuals who may be at increased risk of certain conditions or diagnoses such asdiabetes, heart disease, risk of falling. Your records may be amongst those searched. This is oftencalled “risk stratification” or “case finding”. These searches are sometimes carried out byProcessors who link our records to other records that they access, such as hospital attendancerecords. The results of these searches and assessment may then be shared with other healthcareworkers, such as specialist, therapists, technicians etc. The information that is shared is toenable the other healthcare workers to provide the most appropriate advice, investigations,treatments, therapies and or care.Risk stratification can be grouped into two purposes namely:**Direct Care** – ‘Case Finding’ where carried out by a health professional (forexample GPs and Provider) involved in an individual’s care or by a Processor acting under contractwith such a provider, it is treated as direct care.**Indirect Care** – to understand the local population needs and plan for futurerequirement.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “condition”:* GDPR Article 6(1) (e) – processing is necessary for the performance of a task carried out inthe public interest.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition”, and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes.](https://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

**Related Legislation**:[Section 251 NHS Act 2006](https://www.legislation.gov.uk/ukpga/2006/41/section/251) |
| **Processing personal data for the purpose of medical research** | We only agree to participate in medical research projects if there is an agreed clearlydefined reasons for the research, and it is likely to benefit healthcare and patients. Suchproposals will have consents of our patients and service users, ethics committee approval, and willbe in line with the safeguards and derogations required under the UK GDPR.Research organisations do not usually approach patients directly but will ask us to make contactwith our suitable patients to seek their consent. Occasionally research can be authorised under lawwithout the need to obtain consent.We may also use your medical records to carry out medical research within our Surgeries with yourexplicit consent.We share information with the medical research organisations if you give your explicit consent.Your electronic GP record is the source of information that is shared. | The processing of **personal data** is permitted under the following UKGDPR “conditions”:* GDPR Article 6(1) (a) – the data subject has given consent to the processing of his or herpersonal data.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “conditions” and DPA “provision”:* GDPR Article 9 (2) (a) – the data subject has given explicit consent to the processing ofthose personal data for one or more specified purposes.
* GDPR Article 9 (2) (j) processing is necessary for archiving purposes in the publicinterest, scientific or historical research purposes or statistical purposes in accordancewith Article 89(1) (as supplemented by section 19 of the 2018 Act) based on domestic law.
* [In accordance with DPA Schedule 1, Part 1, (4) – The condition for theprocessing is met where it is necessary for archiving purposes, scientific or historicalresearch purposes or statistical purposes; carried out in accordance with Article 89(1)of the GDPR and DPA Section 19, and the processing is in the public interest.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

You do not have the right to object to the processing of your personal information, but you have theright to withdraw your consent. |
| **De-identifying/anonymising personal data for the purpose of medical research** | We are currently involved in a research and patient insights programme called the [IQVIA Medical Research Extraction Scheme (MRES)](https://www.iqvia.com/) which weprovide non-identified/anonymised information from patients’ electronic medical records.The data collected is non-identifiable/anonymised which means it DOES NOT include any direct patientidentifiers such as names, addresses, NHS numbers, or full dates of birth, nor any directidentifiers of practices participating in this data extraction scheme. Individual patients’ recordsare added into a much larger non-identified database, containing records from millions of patientsacross the UK and may be linked to other data, such as hospital data.Under the Data Protection Legislation, the principles of data protection do not apply to data thathas been rendered anonymous however, if you would like to opt out of the IQVIA MRES data collectionscheme, please let us know, and no data from your records will be collected/processed for use inresearch. This will not affect your care in any way.The source of the information shared in this way is your electronic GP record. | The processing of **personal data** is permitted under the following UKGDPR “conditions”:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “conditions” and DPA “provision”:* Article 9 (2) (i) – for archiving purposes in the public interest, scientific or historicalresearch purposes or statistical purposes in accordance with Article 89(1) based on thedomestic law.
* [In accordance with DPA Schedule 1, Part 1, (4) – The condition for theprocessing is met where it is necessary for archiving purposes, scientific or historicalresearch purposes or statistical purposes; carried out in accordance with Article 89(1)of the GDPR and DPA Section 19, and the processing is in the public interest.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
| **De-identifying/anonymising personal data for the purpose of medicalresearch** | [Clinical PracticeResearch Datalink (CPRD)](https://www.cprd.com/) is a government organisation that provides anonymised patient datafor research to improve patient and public health. You cannot be identified from the informationsent to CPRD, and the principles of Data Protection Legislation do not apply to data that has beenrendered anonymous however, if you do not want anonymised information from your patient record to beused in research you can opt out by speaking to your doctor. | The processing of **personal data** is permitted under the following UKGDPR “conditions”:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “conditions” and DPA “provision”:* Article 9 (2) (i) – for archiving purposes in the public interest, scientific or historicalresearch purposes or statistical purposes in accordance with Article 89(1) based on thedomestic law.
* [In accordance with DPA Schedule 1, Part 1, (4) – The condition for theprocessing is met where it is necessary for archiving purposes, scientific or historicalresearch purposes or statistical purposes; carried out in accordance with Article 89(1)of the GDPR and DPA Section 19, and the processing is in the public interest.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)
 |
|   **Data Sharing Databases** |
| **Recipients or categories of recipients of the** **personal orspecial categories of personal data** | **Purpose of the processing** | **Lawful basis****UK General Data Protection Regulation (UK GDPR)*****– Article 6 –******– Article 9 –*****Data Protection Act (DPA) 2018*****– Section 10 –******– Schedule 1-*** |
| [NationalNHS Digital Services “Spine” including:](https://digital.nhs.uk/services/spine)* [Patient Demographics Service](https://digital.nhs.uk/services/demographics)
* [e-Referral Service](https://digital.nhs.uk/services/nhs-e-referral-service/)
* [Electronic Prescription Service](https://digital.nhs.uk/services/electronic-prescription-service)
* [GP2GP](https://digital.nhs.uk/services/gp2gp)
* [Summary Care Record](https://digital.nhs.uk/services/summary-care-records-scr)
 | [Spine](https://digital.nhs.uk/services/spine)supports the IT infrastructure for health and social care in England, joining together over 23,000healthcare IT systems in 20,500 organisations.It hosts key services to support the delivery of your care, to enable healthcare professionals,authorised with an NHS smartcard, to view relevant information about you as follows:[PatientDemographics Service](https://digital.nhs.uk/services/demographics) – The Personal Demographics Service (PDS) is the national electronicdatabase of NHS patient details such as name, address, date of birth and NHS Number (known asdemographic information). It helps healthcare professionals to identify patients and match them totheir health records. It also allows them to contact and communicate with patients.[Summary Care Record (SCR](https://digital.nhs.uk/services/summary-care-records-scr)) – is an electronic record of important patientinformation, created from GP medical records. It can be seen and used by authorised staff in otherareas of the health and care system involved in the patient’s direct care.When your personal health records on your GP Record is uploaded to the spine, NHS Digital becomesthe data controller for the uploaded information.The source of the information shared in this way is your electronic GP record.At a minimum, the SCR holds important information about;* current medication
* allergies and details of any previous bad reactions to medicines
* the name, address, date of birth and NHS number of the patient

The patient can also choose to include [additional information in the SCR](https://digital.nhs.uk/services/summary-care-records-scr/additional-information-in-scr), such as details oflong-term conditions, significant medical history, or specific communications needs.[e-Referral Service](https://digital.nhs.uk/services/nhs-e-referral-service/)**–**The NHS e-Referral Service (e-RS)combines electronic booking with a choice of place, date and time for first hospital or clinicappointments. Patients can choose their initial hospital or clinic appointment, book it in the GPsurgery at the point of referral, or later at home on the phone or online.[Electronic Prescription Service](https://digital.nhs.uk/services/electronic-prescription-service)**–**The ElectronicPrescription Service (EPS) sends electronic prescriptions from GP surgeries to pharmacies.Eventually EPS will remove the need for most paper prescriptions.[GP2GP](https://digital.nhs.uk/services/gp2gp)**–**GP2GP allows patients’ electronic health records to be transferred directly, securely, andquickly between their old and new practices, when they change GPs. This improves patient care bymaking full and detailed medical records available to practices, for a new patient’s first and laterconsultations.Your electronic GP record is the source of information that is shared in all of the above instances.**Data Retention Period:**All records held in the Practice EMIS  system are kept for the duration specified in the [Records Management Codes of Practice for Health and SocialCare](https://www.gov.uk/government/publications/records-management-code-of-practice-for-health-and-social-care) | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition” and DPA “provision”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services.
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes;](http://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) – health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

You have the right to raise an objection or opt-out of out of having an SCR by returning a completed[opt-out form](http://webarchive.nationalarchives.gov.uk/20160921135209/http%3A/systems.digital.nhs.uk/scr/library/optout.pdf) to their GP practice. Although we will firstneed to explain how this may affect the care you receive. |
| [NHS Digital – National Data Opt-Out](https://digital.nhs.uk/services/national-data-opt-out-programme/operational-policy-guidance-document/compliance-with-the-national-data-opt-out) | The national data opt-out applies to the disclosure of confidential patient informationfor purposes beyond individual care (research and planning) across the health and adult social caresystem in England. In broad terms the national data opt-out applies unless there is a mandatorylegal requirement or an overriding public interest for the data to be shared. The opt-out does notapply when the individual has consented to the sharing of their data or where the data isanonymised.Any person registered on the Personal Demographic Services (PDS) and who consequently has an NHSnumber allocated to them is able to set a [national data opt-out](https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/). The opt-out is stored in a central repository againsttheir NHS number on the Spine.The national opt-out applies to a number of datasets including:**National Clinical Audit of Rheumatoid and Early Inflammatory –**NHS Digital collectsthis data on behalf of the British Society for Rheumatology to improve the quality of care forpatients with Rheumatoid and early.**National Adult Community Acquired Pneumonia (CAP) Audit –**NHS Digital collects thisdata on behalf of the British Thoracic Society to assess variation in the care of patientshospitalised with pneumonia in the UK.**Trauma Audit & Research Network (TARN) –** NHS Digital collects this ConfidentialPatient Information on behalf (CPI) on behalf TARN.**Invoice Backing Data for Contracted Activity –**NHS Digital collects this data toenable Commissioners to determine if they are the responsible commissioner. It is important to pointout that the national opt-out applies to contracted activity data that has not been renderedanonymous.**Risk Stratification data for Indirect Care –** NHS Digital collects this data fordata processors working on behalf of GPs and CCGs. The GP data is linked to other records that theyaccess, such as hospital attendance records to enable CCGs understand the local population needs andplan for future requirement.Your electronic GP record is the source of information that is shared in all of the above instances. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition” and DPA “provision”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services;
* [DPA Section 10 (1) (c) – processing is necessary for health and socialcare purposes;](http://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)
* [In accordance with DPA Schedule 1, Part 1, (2) – health or social carepurposes means the purposes of preventive or occupational medicine; medical diagnosis;the provision of health care or treatment; the provision of social care, or themanagement of health care systems or services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted)

**Related Legislation**:[Section 251 NHS Act 2006](https://www.legislation.gov.uk/ukpga/2006/41/section/251)You have the right to opt-out of having your data shared for purposes beyond direct care (researchand planning). You can do so via the [national opt-out website](https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/) |
| [Open Exeter](https://digital.nhs.uk/services/systems-and-service-delivery/national-health-application-and-infrastructure-services/open-exeter) | Open Exeter is a web-enabled viewer which provides the facility for healthcareprofessionals to share/access patient data held on the National Health Application andInfrastructure Services (NHAIS) systems, including cervical screening, breast screening, organdonor, blood donor and home oxygen.Access to Open Exeter is only possible on the Health and Social Care Network (HSCN), and viaauthorised logons/passwords provided by NHS Digital.Your electronic GP record is the source of information that is shared. | The processing of **personal data is** permitted under the following UKGDPR “condition”:* [GDPR Article 6(1)(e) – public interest or in the exercise of official authority;](https://gdpr-info.eu/art-6-gdpr/)

The processing of **special categories of personal data**is permitted under thefollowing UK GDPR “condition” and DPA “provisions”:* GDPR Article 9 (2) (h) – processing is necessary for medical or social care treatment or,the management of health or social care systems and services;

[DPA Section 10 (1) (c) – processing is necessary for health and social carepurposes;](http://www.legislation.gov.uk/ukpga/2018/12/section/10/enacted)[In accordance with DPA Schedule 1, Part 1, (1a) – the the processing foremployment, social security and social protection is met where it is for the purposes ofperforming or exercising obligations or rights which are imposed or conferred by law on thecontroller or the data subject in connection with employment, social security or socialprotection;](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted) |
| [Dr. iQ](https://www.dr-iq.com/) | Dr. iQ is a free online consultation platform for NHS patients, providing fast, safe and effective online consultations with your GP, reducing the need to book and wait for a face-to-face GP appointment.Dr. iQ enables our GP Practices to improve patient experience by ensuring that the right people deal with requests at the right time.By using the Dr. iQ platform (via our website or app) patients/service users can:* Register with us as their local GP.
* Book appointments.
* Attend online consultation with their health professional.
* View their medical records online.
* Order repeat prescriptions for collection at their preferred pharmacy.

When you access any of our services (via the Dr. iQ app or our website), we use personal informationabout you (such as name, date of birth, NHS number) and technical information (such as internetprotocol address) to:* Provide you with the best possible healthcare service.
* To allow you to participate in interactive features of our service, when you choose to doso.
* To administer and maintain our website or app for internal operations, includingtroubleshooting, statistical and survey purposes.
* To improve our site to ensure that content is presented in the most effective manner.
 | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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 |
|   **Processors** |
| **Recipients or categories of recipients of the** **personal orspecial categories of personal data** | **Purpose of the processing** | **Lawful basis****UK General Data Protection Regulation (UK GDPR)*****– Article 6 –******– Article 9 –*****Data Protection Act (DPA) 2018*****– Section 10 –******– Schedule 1-*** |
| [EMIS Health](https://www.emishealth.com/home)[SystmOne – TPP](https://www.tpp-uk.com/products/systmone) | [EMIS Health](https://www.emishealth.com/home)and SystmOne – TPP provide clinical systems used by Operose Health Group to securely store andprocess your medical records.Information about your personal health records is stored in your GP electronic record which isaccessed by our registered and regulated health and care professionals to provide you with the verybest care.Your electronic GP record is the source of information that is shared. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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 |
| [Docman and Docmail](https://www.docman.com/what-we-do/primary-care/) | [Docman](https://www.docman.com/what-we-do/primary-care/)**Limited**act as a Processor and provides cloud-basedstorage software for electronic patient document. This includes paper letters that we receive, scanand upload to a patient record, as well as letters that we receive in an electronic format.Generally, Docman enables primary health care organisations capture, file, workflow, view and manageprimary care documents efficiently.**Docmail**enables primary health care organisations send letters, invoices anddocuments directly from computers and other portable devices.Your electronic GP record is the source of information that is shared. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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 |
| [Webpost](https://webpost.com/) | Webpost are hybrid mail providers certified by the NHS and help GP Practices and otherhealth provider with hybrid mail solutions printing letters, reminders, test results with anintegrated secure email service.Unlike conventional mail processes we use Webpost mail service to simplify our mailing process byprinting, folding, enveloping and stamping your appointment and referral letters or other documentsbefore delivering them to the Royal Mail for the final mile delivery.Your electronic GP record is the source of information that is shared. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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| [PS Health](https://pshealth.co.uk/about/) | More than ever healthcare providers need to be able to meet the demand for referralservices and optimise operations while improving patient experience. To do this, [PS Health](https://pshealth.co.uk/about/) iscommissioned by Operose Health to provide automated health referral management services to enablethe organisation to deliver a safe and effective referral management service for its patients.Operose Health e-Referral system is integrated with PS Health digital platform to automate pathwaysof care and connect patients with the right clinician, service and optimise clinical triage.Personal data concerning your health is processed by PS Health to enable you to receive the bestreferral service if you visit the hospital for routine care and referrals. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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 |
| [Redcentric](https://www.redcentricplc.com/ip-telephony/telephony-an-enabler-for-the-public-sector/) | [Redcentric](https://www.redcentricplc.com/ip-telephony/telephony-an-enabler-for-the-public-sector/) is commissioned by Operose Health Group to deliver[telephony](https://www.redcentricplc.com/our-solutions/communications/ip-telephony/) services (including call recording) to enable our GP Practices andReferral Management Centres to deliver a safe and secure patient service by being more responsive tocall demand around appointments, test results and prescription delivery.When you use our services for purposes such as telephone consultation, or you just want to speak toa healthcare professional for advice, your call may be recorded and stored as part of the healthrecord, to enable us to provide you with the best possible care. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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[In accordance with DPA Schedule 1, Part 1, (2) – health or social care purposesmeans the purposes of preventive or occupational medicine; medical diagnosis; the provision ofhealth care or treatment; the provision of social care, or the management of health care systemsor services or social care systems or services.](http://www.legislation.gov.uk/ukpga/2018/12/schedule/1/enacted) |
| [Quality Medical SolutionsUK (QMS-UK)](https://qms-uk.com/) | QMS-UK are commissioned by NHS England to provide secure data processing solutions fortwo services:* Child Health Information Service – information relating to children’s vaccinations.
* National Diabetic Retinal Screening Service.

Your electronic GP record is the source of information that is shared. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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 |
| [AccuRx Video Consultation system](https://support.accurx.com/en/articles/3776579-how-to-do-video-consultations-with-your-mobile-at-a-gp-practice) | [AccuRx is an NHS Digital approved a web-based video consultationsystem](https://support.accurx.com/en/articles/3778850-video-consultations-ig-and-security) allows our healthcare professionals to carry out observations during theirconsultations in the same way they would during a face-to-face appointment, to provide our patientsthe with the best possible care.In the video consultation, healthcare professionals are able record the observations and outcome ofthe consultation in the same way as a face-to-face consultation is recorded in the patient’selectronic record and any agreed actions are carried out.  The connection prioritises ‘peer-to-peer’between our registered health professionals and patient’s communication device, and follows[NHS best practice guidelines](https://digital.nhs.uk/binaries/content/assets/legacy/pdf/t/6/cloud_security_good_practice_guide_final1.pdf) on health and social care cloudsecurity.By using video consultations, it reduces any risk in bring patients to our Surgeries especiallyduring the current circumstances with COVID19. | The processing of **personal data is** permitted under the following UKGDPR condition:* GDPR Article 6(1) (e) – public interest or in the exercise of official authority.

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