

PORTSMOUTH PRIMARY CARE ALLIANCE

Fair Processing Notice (Privacy Notice)

Policy overview		
Summary	This document supports the Alliance staff in compliance with Data Protection legislation, achieving best practice in the area of Information Governance and in meeting the requirements of the Data Security and Protection Toolkit	
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Target audience	All Service Users	
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Reviewers and contributors		
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1. Your information, what you need to know

This privacy notice explains why we collect information about you, how that information will be used, how we keep it safe and confidential and what your rights are in relation to this.

2. Why we collect information about you

Health care professionals who provide you with care are required by law to maintain records about your health and any treatment or care you have received. These records help to provide you with the best possible healthcare and help us to protect your safety.

We collect and hold data for the purpose of providing healthcare services to our patients and running our organisation which includes monitoring the quality of care that we provide. In carrying out this role we will collect information about you which helps us respond to your queries or secure specialist services. We will keep your information in written form and/or in digital form

3. Our Commitment to Data Privacy and Confidentiality Issues

All of our Clinicians, staff and associated practitioners are committed to protecting your privacy and will only process data in accordance with the Data Protection Legislation. This includes the General Data Protection Regulation (EU) 2016/679 (GDPR), the Data Protection Act (DPA) 2018, the Law Enforcement Directive (Directive (EU) 2016/680) (LED) and any applicable national Laws implementing them as amended from time to time. The legislation requires us to process personal data only if there is a legitimate basis for doing so and that any processing must be fair and lawful.

In addition, consideration will also be given to all applicable Law concerning privacy, confidentiality, the processing and sharing of personal data including the Human Rights Act 1998, the Health and Social Care Act 2012 as amended by the Health and Social Care (Safety and Quality) Act 2015, the common law duty of confidentiality and the Privacy and Electronic Communications (EC Directive) Regulations.

4. Data we collect about you

Records which the PPCA hold or share about you will include the following:

- Personal Data – means any information relating to an identified or identifiable natural person ('data subject'); an identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person.
- Special Categories of Personal Data – this term describes personal data revealing racial or ethnic origin, political opinions, religious or philosophical beliefs, or trade union membership, and the processing of genetic data, biometric data for the purpose of uniquely identifying a natural person, data concerning health or data concerning a natural person's sex life or sexual orientation.
- Confidential Patient Information – this term describes information or data relating to their health and other matters disclosed to another (e.g. patient to clinician) in circumstances where it is reasonable to expect that the information will be held in confidence. Including both information 'given in confidence' and 'that which is owed a duty of confidence'. As described in the Confidentiality: NHS code of Practice: Department of Health guidance on confidentiality 2003.

- Pseudonymised – The process of distinguishing individuals in a dataset by using a unique identifier which does not reveal their ‘real world’ identity.
- Anonymised – Data in a form that does not identify individuals and where identification through its combination with other data is not likely to take place
- Aggregated – Statistical data about several individuals that has been combined to show general trends or values without identifying individuals within the data.

5. How we use your information

Improvements in information technology are also making it possible for us to share data with other healthcare organisations for the purpose of providing you, your family and your community with better care. For example it is possible for healthcare professionals in other services to access your record with your permission when the practice is closed. This is explained further in the Local Information Sharing at Appendix A.

Whenever you use a health or care service, such as attending Accident & Emergency or using Community Care services, important information about you is collected in a patient record for that service. Collecting this information helps to ensure you get the best possible care and treatment. The information collected about you when you use these services can also be used and provided to other organisations for purposes beyond your individual care, for instance to help with:

- improving the quality and standards of care provided
- research into the development of new treatments
- preventing illness and diseases
- monitoring safety
- planning services

This may only take place when there is a clear legal basis to use this information. All these uses help to provide better health and care for you, your family and future generations. Confidential patient information about your health and care is only used like this where allowed by law.

Most of the time, anonymised data is used for research and planning so that you cannot be identified in which case your confidential patient information isn’t needed.

A full list of details including the legal basis, any Data Processor involvement and the purposes for processing information can be found in Appendix A.

6. How long do we hold information for?

All records held by the PPPCA will be kept for the duration specified by national guidance from NHS Digital, [Health and Social Care Records Code of Practice](#). Once information that we hold has been identified for destruction it will be disposed of in the most appropriate way for the type of information it is. Personal confidential and commercially confidential information will be disposed of by approved and secure confidential waste procedures. We keep a record of retention schedules within our information asset registers, in line with the Records Management Code of Practice for Health and Social Care 2016.

7. Individuals Rights under GDPR

Under GDPR 2016 the Law provides the following rights for individuals. The NHS upholds these rights in a number of ways.

1. The right to be informed
2. The right of access
3. The right to rectification
4. The right to erasure (not an absolute right) only applies in certain circumstances
5. The right to restrict processing
6. The right to data portability
7. The right to object
8. Rights in relation to automated decision making and profiling.

8. Your right to opt out of data sharing and processing

The NHS Constitution states 'You have a right to request that your personal and confidential information is not used beyond your own care and treatment and to have your objections considered'.

9. Type 1 Opt Out

This is an objection that prevents an individual's personal confidential information from being shared outside of their general practice except when it is being used for the purposes of direct care, or in particular circumstances required by law, such as a public health emergency like an outbreak of a pandemic disease. If you wish to apply a Type 1 Opt Out to their record they should make their wishes known to the practice manager.

10. National data opt-out

The national data opt-out was introduced on 25 May 2018, enabling patients to opt-out from the use of their data for research or planning purposes, in line with the recommendations of the National Data Guardian in her Review of Data Security, Consent and Opt-Outs.

By 2020 all health and care organisations are required to apply national data opt-outs where confidential patient information is used for research and planning purposes. NHS Digital has been applying national data opt-outs since 25 May 2018. Public Health England has been applying national data opt-outs since September 2018.

The national data opt-out replaces the previous 'type 2' opt-out, which required NHS Digital not to share a patient's confidential patient information for purposes beyond their individual care. Any patient that had a type 2 opt-out recorded on or before 11 October 2018 has had it automatically converted to a national data opt-out. Those aged 13 or over were sent a letter giving them more information and a leaflet explaining the national data opt-out. For more information go to [National data opt out programme](#)

To find out more or to register your choice to opt out, please visit www.nhs.uk/your-nhs-data-matters.

On this web page you will:

- See what is meant by confidential patient information
- Find examples of when confidential patient information is used for individual care and examples of when it is used for purposes beyond individual care
- Find out more about the benefits of sharing data
- Understand more about who uses the data
- Find out how your data is protected
- Be able to access the system to view, set or change your opt-out setting

- Find the contact telephone number if you want to know any more or to set/change your opt-out by phone
- See the situations where the opt-out will not apply

11. Right of Access to your information (Subject Access Request)

Under Data Protection Legislation everybody has the right have access to, or request a copy of, information we hold that can identify you, this includes your medical record, there are some safeguards regarding what you will have access and you may find information has been redacted or removed for the following reasons;

- Does not cause harm to the patient
- That legal confidentiality obligations for the non-disclosure of third-party information are adhered to

You do not need to give a reason to see your data. And requests can be made verbally or in writing. Although we may ask you to complete a form in order that we can ensure that you have the correct information you require.

Where multiple copies of the same information are requested the surgery may charge a reasonable fee for the extra copies.

You will need to provide proof of identity to receive this information.

If you would like to access any information please contact your GP.

12. Change of Detail

It is important that you tell your surgery if any of your contact details such as your name or address have changed especially if any of your other contacts details are incorrect. It is important that we are made aware of any changes **immediately** in order that no information is shared in error.

13. Mobile telephone number

If you provide us with your mobile phone number, we may use this to send you text reminders about your appointments or other health screening information. Please let us know if you do not wish to receive text reminders on your mobile.

14. Email address

Where you have provided us with your email address, with your consent we will use this to send you information relating to your health and the services we provide. If you do not wish to receive communications by email please let us know.

15. Notification

Data Protection Legislation requires organisations to register a notification with the Information Commissioner to describe the purposes for which they process personal and sensitive information.

We are registered as a Data Controller and our registration can be viewed online in the public register at: <http://ico.org.uk/what we cover/register of data controllers>

Any changes to this notice will be published on our website.

16. Data Protection Officer

Should you have any data protection questions or concerns, please contact our Data Protection Officer **Laura Taw** on GPIG-Enquiries.scwcsu@nhs.net and put **FAO Laura Taw** in the subject box.

17. What is the right to know?

The Freedom of Information Act 2000 (FOIA) gives people a general right of access to information held by or on behalf of public authorities, promoting a culture of openness and accountability across the public sector. You can request any non-personal information that the GP Practice holds, that does not fall under an exemption. You may not ask for information that is covered by the Data Protection Legislation under FOIA. However you can request this under a right of access request – see section above ‘Access to your information’.

18. Right to Complain

If you have concerns or are unhappy about any of our services, please contact Denise.fenton1@nhs.net

For independent advice about data protection, privacy and data-sharing issues, you can contact:

The Information Commissioner
Wycliffe House
Water Lane
Wilmslow
Cheshire
SK9 5AF

Phone: 0303 123 1113 Website: <https://ico.org.uk/global/contact-us>

19. The NHS Care Record Guarantee

The NHS Care Record Guarantee for England sets out the rules that govern how patient information is used in the NHS, what control the patient can have over this, the rights individuals have to request copies of their data and how data is protected under Data Protection Legislation.

<http://systems.digital.nhs.uk/infogov/links/nhscrg.pdf>

20. The NHS Constitution

The NHS Constitution establishes the principles and values of the NHS in England. It sets out the rights patients, the public and staff are entitled to. These rights cover how patients access health services, the quality of care you’ll receive, the treatments and programs available to you, confidentiality, information and your right to complain if things go wrong.

<https://www.gov.uk/government/publications/the-nhs-constitution-for-england>

Appendix A – The PPCA will share your information with these organisations where there is a legal basis to do so.

Activity	Rationale
CCG	<p>Purpose – Anonymous data is used by the CCG for planning and performance as directed in the practices contract.</p> <p>Legal Basis – Contractual</p> <p>Processor – Portsmouth CCG</p>
Summary Care Record	<p>Purpose - The NHS in England uses a national electronic record called the Summary Care Record (SCR) to support patient care. It contains key information from your GP record. Your SCR provides authorised healthcare staff with faster, secure access to essential information about you in an emergency or when you need unplanned care, where such information would otherwise be unavailable.</p> <p>Legal Basis – Direct Care</p> <p>Please be aware that if you choose to opt-out of SCR, NHS healthcare staff caring for you outside of this surgery may not be aware of your current medications, allergies you suffer from and any bad reactions to medicines you have had, in order to treat you safely in an emergency. Your records will stay as they are now with information being shared by letter, email, and phone. If you wish to opt-out of having an SCR please return a completed opt-out form to the practice.</p> <p>Processor – NHS England and NHS Digital</p>
Research	<p>Purpose – We many share personal confidential or anonymous information with research companies. Where you have opted out of having your identifiable information shared for this purpose your information will be removed.</p> <p>Legal Basis – consent is required to share confidential patient information for research, unless there is have support under the Health Service (Control of Patient Information Regulations) 2002 ('section 251 support') applying via the Confidentiality Advisory Group in England and Wales</p>
Safeguarding Adults	<p>Purpose – We will share personal confidential information with the safeguarding team where there is a need to assess and evaluate any safeguarding concerns.</p> <p>Legal Basis - Because of public Interest issues, e.g. to protect the safety and welfare of vulnerable adults, we will rely on a statutory basis rather than consent to process information for this use.</p> <p>Data Processor – Portsmouth MASH</p>
Safeguarding Children	<p>Purpose – We will share children’s personal information where there is a need to assess and evaluate any safeguarding concerns.</p> <p>Legal Basis - Because of public Interest issues, e.g. to protect the safety and welfare of Safeguarding we will rely on a statutory basis rather than consent to share information for this use.</p>

	Data Processor – Portsmouth MASH
Direct Care NHS Trusts	<p>Purpose – Personal information is shared with other secondary care trusts in order to provide you with direct care services. This could be hospitals or community providers for a range of services, including treatment, operations, physio, and community nursing, ambulance service.</p> <p>Legal Basis - The processing of personal data in the delivery of direct care and for providers’ administrative purposes in this surgery and in support of direct care elsewhere is supported under the following Article 6 and 9 conditions as stated below:</p> <p>Processors – Solent NHS Trust</p>
Care Quality Commission	<p>Purpose – The CQC is the regulator for the English Health and Social Care services to ensure that safe care is provided. They will inspect and produce reports back to the GP practice on a regular basis. The Law allows the CQC to access identifiable data.</p> <p>More detail on how they ensure compliance with data protection law (including GDPR) and their privacy statement is <u>available on our website</u>: https://www.cqc.org.uk/about-us/our-policies/privacy-statement</p> <p>Legal Basis - Article 6(1) (c) “processing is necessary for compliance with a legal obligation to which the controller is subject.” And Article 9(2) (h) as stated below</p> <p>Processors – Care Quality Commission</p>
Payments, Invoice validation	<p>Purpose - Contract holding GPs in the UK receive payments from their respective governments on a tiered basis. Most of the income is derived from baseline capitation payments made according to the number of patients registered with the practice on quarterly payment days. These amount paid per patient per quarter varies according to the age, sex and other demographic details for each patient. There are also graduated payments made according to the practice’s achievement of certain agreed national quality targets known as the Quality and Outcomes Framework (QUOF), for instance the proportion of diabetic patients who have had an annual review. Practices can also receive payments for participating in agreed national or local enhanced services, for instance opening early in the morning or late at night or at the weekends. Practices can also receive payments for certain national initiatives such as immunisation programs and practices may also receive incomes relating to a variety of non-patient related elements such as premises. Finally there are short term initiatives and projects that practices can take part in. Practices or GPs may also receive income for participating in the education of medical students, junior doctors and GPs themselves as well as research. In order to make patient based payments basic and relevant necessary data about you needs to be sent to the various payment services. The release of this data is required by English laws.</p> <p>Legal Basis - Article 6(1) (c) “processing is necessary for compliance</p>

	<p>with a legal obligation to which the controller is subject.” And Article 9(2)(h) ‘as stated below</p> <p>Data Processors – NHS England, CCG, Public Health</p>
Patient Record data base	<p>Purpose – Your medical record will be shared, in order that a data base can be maintained and managed in a secure way</p> <p>Legal Basis - Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) as stated below</p> <p>Processor – Sytstm1 Adastr</p>
Subject Access Requests - processor	<p>Purpose – Your medical record will be shared in order that a report can be provided to agencies such as insurance companies or solicitors</p> <p>Legal Basis – Your consent will be required to share your record for this purpose</p> <p>Processor – iGPR,</p>
OptimiseRX AnalyseRX	<p>Purpose – Your anonymous information will be shared in order to optimise your medication within your record. This will enable your GP to provide a more efficient medication regime.</p> <p>Legal Basis - Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) as stated below</p> <p>Processor - FDB</p>
PCN	<p>Purpose – Your medical record will be shared with your GP practice in order that they can provide direct care services to the patient population.</p> <p>Legal Basis - Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) as stated below</p> <p>Processor – PPCA member practices.</p>
Smoking cessation	<p>Purpose – personal information is shared in order for the smoking cessation service to be provided.</p> <p>Legal Basis – consented</p> <p>Processor – The Portsmouth wellbeing service.</p>
Subject Access Requests Requestors	<p>Purpose – Personal information will be shared with the person or their representative at their request</p> <p>Legal Basis – Contractual agreement with the patient – and consented</p> <p>Processor – Patients and or their representatives – e.g. family members, solicitors, insurance companies</p>
Medical Reports	<p>Purpose – Personal information will be shared with Insurance companies, or potential or active employers at the patients request</p> <p>Legal Basis – Consented</p> <p>Processor – Patients and or their representatives – e.g. Insurance</p>

	companies, RAF, Navy
Police	<p>Purpose – Medical reports may be requested by the police for criminals</p> <p>Legal Basis – Consented or Article 10 GDPR</p> <p>Processor – Police Constabulary</p>
Coroners	<p>Purpose – Personal information may be shared with the coroner</p> <p>Legal Basis – Legal Obligation</p> <p>Processor – The Coroner</p>
Texting Service	<p>Purpose – Personal identifiable information shared with the texting service in order that text messages including appointment reminders, campaign messages related to specific patients health needs and direct messages to patients</p> <p>Legal Basis – Consent from patients and direct care</p> <p>Provider - AccuRX, Mjog, Iplato</p>
Remote consultation	<p>Purpose – Personal information may be shared, in order to provide the patient with urgent medical advice during the COVID-19 pandemic.</p> <p>Legal Basis – Direct Care</p> <p>Processor – e-Consult</p>
MDT meetings	<p>Purpose – Personal information will be discussed with other providers of care, in order to provide a secure video meeting platform to discuss patients’ needs during the COVID-19 pandemic.</p> <p>Legal Basis – Direct Care</p> <p>Processor – MS Teams</p>
COVID-19 Research and Planning	<p>Purpose – for the collection of Personal confidential data regarding the diagnosis, testing, self-isolating, fitness to work, treatment medical and social interventions and recovery from Covid-19. To enable research and planning during the Covid-19 pandemic.</p> <p>Legal Basis - Notice under Regulation 3(4) of the Health Service (Control of Patient Information) Regulations 2002 (COPI), which were made under sections 60 (now section 251 of the NHS Act 2006) and 64 of the Health and Social Care Act 2001. Data will only be extracted for those patients who have consented to the process.</p> <p>Provider - BioBank</p>

21. Reviews of and Changes to our Privacy Notice

We will keep our Privacy Notice under regular review. This notice was last reviewed in April 2020.

- **Lawful basis for processing:**

The processing of personal data in the delivery of direct care and for providers' administrative purposes in this surgery and in support of direct care elsewhere is supported under the following Article 6 and 9 conditions of the GDPR:

- Article 6(1)(e) '...necessary for the performance of a task carried out in the public interest or in the exercise of official authority...'; and
- Article 9(2)(h) 'necessary for the purposes of preventative 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 and services..."