

Appendix A – Manor Park Medical Centre is sharing patient information with these organisations where there is a legal basis to do so.

Activity	Rationale
Commissioning and contractual purposes Invoice Validation Planning Quality and Performance	<p>Purpose – Anonymous data is used by the CCG for planning, performance and commissioning purposes, as directed in the practices contract, to provide services as a public authority.</p> <p>Legal Basis – UK GDPR 6 1(b) Contractual obligation as set out in the Health and Social Care Act for Quality and Safety 2015</p> <p>Processor – NHS Frimley CCG – Slough/ ICB</p>
Summary Care Record Including additional information	<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 under UK GDPR :</p> <ul style="list-style-type: none"> • 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 <p>The relevant COPI notice states that its purpose: “...is to require organisations to process confidential patient information for the purposes set out in Regulation 3(1) of COPI to support the Secretary of State’s response to Covid-19 (Covid-19 Purpose). “Processing” for these purposes is defined in Regulation 3(2) and includes dissemination of confidential patient information to persons and organisations permitted to process confidential patient information under Regulation 3(3) of COPI.”</p> <p>Full details of the Summary Care Record supplementary privacy notice can be found here. Patients have the right to opt out of having their information shared with the SCR by completion of the form which can be downloaded here and returned to the practice. Please note that by opting out of having your information shared with the Summary Care Record could result in a delay to care that may be required</p>

	<p>in an emergency.</p> <p>Processor – EMIS XA and Connected Care</p>
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 Joining the dots across health and care

<p>Research</p>	<p>Purpose – We may share anonymous patient information with research companies for the purpose of exploring new ways of providing healthcare and treatment for patients with certain conditions. This data will not be used for any other purpose.</p> <p>Where personal confidential data is shared your consent will need to be sought.</p> <p>Where you have opted out of having your identifiable information shared for this Planning or Research your information will not be shared.</p> <p>Legal Basis – consent is not required to share anonymous data that does not identify a patient.</p> <p>Where identifiable data is required for research, patient consent will be needed, unless there is a legitimate reason under law to do so or there is 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> <p>Processor – NIHR Clinical Research Network: Thames Valley and South Midlands</p>
<p>Individual Funding Requests</p>	<p>Purpose – We may need to process your personal information where we are required to fund specific treatment for you for a particular condition that is not already covered in our standard NHS contract.</p> <p>The clinical professional who first identifies that you may need the treatment will explain to you the information that is needed to be collected and processed in order to assess your needs and commission your care; they will gain your explicit consent to share this. You have the right to withdraw your consent at any time but this may affect the decision to provide individual funding.</p> <p>Legal Basis – Under UK GDPR Article 6 1(a) consent is required Article 9 2 (h) health data</p> <p>Data processor – South Central and West Commissioning Support Unit</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 – in some case consent will be required otherwise</p> <ul style="list-style-type: none">• 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 <p>Data Processor: Berkshire Healthcare Foundation Trust & Practice</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 - in some case consent will be required otherwise</p> <ul style="list-style-type: none">• 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 <p>Data Processor – Berkshire Healthcare Foundation Trust & Practice</p>

<p>Risk Stratification – Preventative Care</p>	<p>Purpose - ‘Risk stratification for case finding’ is a process for identifying and managing patients who have or may be at-risk of health conditions (such as diabetes) or who are most likely to need healthcare services (such as people with frailty). Risk stratification tools used in the NHS help determine a person’s risk of suffering a particular condition and enable us to focus on preventing ill health before it develops.</p> <p>Information about you is collected from a number of sources including NHS Trusts, GP Federations and your GP Practice. A risk score is then arrived at through an analysis of your de-identified information. This can help us identify and offer you additional services to improve your health.</p> <p>If you do not wish information about you to be included in any risk stratification programmes, please let us know. We can add a code to your records that will stop your information from being used for this purpose. Please be aware that this may limit the ability of healthcare professionals to identify if you have or are at risk of developing certain serious health conditions.</p> <p>Type of Data – Identifiable/Pseudonymised/Anonymised/Aggregate Data</p> <p>Legal Basis UK GDPR Art. 6(1) (e) and Art.9 (2) (h). The use of identifiable data by CCGs and GPs for risk stratification has been approved by the Secretary of State, through the Confidentiality Advisory Group of the Health Research Authority (approval reference (CAG 7-04)(a)/2013)) and this approval has been extended to the end of September 2022 NHS England Risk Stratification which gives us a statutory legal basis under Section 251 of the NHS Act 2006 to process data for risk stratification purposes which sets aside the duty of confidentiality. We are committed to conducting risk stratification effectively, in ways that are consistent with the laws that protect your confidentiality.</p> <p>Processors – East Berkshire Clinical Commissioning Group And NHS SOUTH, CENTRAL AND WEST CSU (SCW)</p>
<p>Public Health</p>	<p>Purpose – Personal identifiable and anonymous data is shared.</p>

<p>Screening programmes (identifiable) Notifiable disease information (identifiable) Smoking cessation (anonymous) Sexual health (anonymous)</p>	<p>The NHS provides national screening programmes so that certain diseases can be detected at an early stage. These currently apply to bowel cancer, breast cancer, aortic aneurysms and diabetic retinal screening service. The law allows us to share your contact information with Public Health England so that you can be invited to the relevant screening programme. More information can be found at: https://www.gov.uk/topic/population-screeningprogrammes [Or insert relevant link] or speak to the practice Legal Basis - Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller” And Article 9(2)(h) Health data as stated below Data Processors –Wexham Park Hospital – Slough</p>
<p>Direct Care NHS Trusts Other Care Providers</p>	<p>Purpose – Personal information is shared with other secondary care trusts and providers 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. 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 1 (e) direct care and 9 2 (h) to provide health or social care: In some cases patients may be required to consent to having their record opened by the third party provider before patients information is accessed. Where there is an overriding need to access the GP record in order to provide patients with lifesaving care, their consent will not be required. Processors – FRIMLEY Health NHS Foundation trust</p>
<p>Care Quality Commission</p>	<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. More detail on how they ensure compliance with data protection law (including UK GDPR) and their privacy statement is <u>available on our website: https://www.cqc.org.uk/about-us/our-policies/privacy-statement</u> 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 Processors – Care Quality Commission</p>

<p>Population Health Management</p>	<p>Purpose – Health and care services work together as ‘Integrated Care Systems’ (ICS) and are sharing data in order to:</p> <ul style="list-style-type: none"> Understand the health and care needs of the care system’s population, including health inequalities
	<ul style="list-style-type: none"> Provide support to where it will have the most impact Identify early actions to keep people well, not only focusing on people in direct contact with services, but looking to join up care across different partners. <p>(NB this links to the Risk Stratification activity identified above)</p> <p>Type of Data – Identifiable/Pseudonymised/Anonymised/Aggregate Data. NB only organisations that provide your care will see your identifiable data.</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 Data Processors: Optimum, Interface clinical services</p>
<p>Payments, Invoice validation</p>	<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 amounts 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 (QOF), 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 with a legal obligation to which the controller is subject.” And Article 9(2)(h) ‘as stated below Data Processors – NHS England, CCG, Public Health</p>

<p>Patient Record data base</p>	<p>Purpose – Your medical record will be processed in order that a data base can be maintained, this is managed in a secure way and there are robust processes in place to ensure your medical record is kept accurate, and up to date. Your record will follow you as you change surgeries throughout your life. Closed records will be archived by NHS England</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 – EMIS WEB System [EMIS XA and Connected Care]</p>
<p>Medical reports Subject Access Requests</p>	<p>Purpose – Your medical record may be shared in order that solicitors acting on your behalf can conduct certain actions as instructed by you.</p> <p>Insurance companies seeking a medical report where you have applied for services offered by then can have a copy to your medical history for a specific purpose.</p> <p>Legal Basis – Your explicit consent will be required before a GP can share your record for either of these purposes.</p> <p>Processor – other</p>
<p>Medicines Optimisation OptimiseRX AnalyseRX Oberoi</p>	<p>Purpose – Your anonymous aggregated information will be shared in order to optimise medication. This will enable your GP to provide a more efficient medication regime for your personal care. Some of the anonymous information may be used nationally to drive wider understanding of the medication is used.</p> <p>Legal Basis - Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor –Frimley CCG</p>
<p>Medicines Management Team</p>	<p>Purpose – your medical record is shared with the medicines management team, in order that your medication can be kept up to date and any changes can be implemented.</p> <p>Legal Basis - Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor – Frimley CCG</p>

PCN	<p>Purpose – Your medical record will be shared with the Central Slough Network 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) Health data as stated below</p> <p>Processor –Herschel Medical Centre, Shreeji Medical Centre, Manor Park Medical Centre, Crosby house surgery, 240 Wexham Road Surgery</p>
Smoking cessation	<p>Purpose – personal information is shared in order for the smoking cessation service to be provided.</p> <p>Only those patients who wish to be party to this service will have their data shared</p> <p>Legal Basis – consented</p> <p>Processor: Solutions4health.co.uk</p>
Social Prescribers	<p>Purpose – Access to medical records is provided to social prescribers to undertake a full service to patients dependent on their social care needs.</p> <p>Only those patients who wish to be party to this service will have their data shared</p> <p>Legal Basis – Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor – CSN PCN Social prescriber</p>
Police	<p>Purpose – Personal confidential information may be shared with the Police authority for certain purposes. The level of sharing and purpose for sharing may vary. Where there is a legal basis for this information to be shared no consent will be required.</p> <p>The Police will require the correct documentation in order to make a request. This could be but not limited to, DS 2, Court order, s137, the prevention and detection of a crime.</p> <p>In some cases consent may be required.</p> <p>Legal Basis – UK GDPR – Article 6 1 (f) legitimate interest 6 1 (c) Legal Obligation. Article 9 2 (f) requests for legal reasons</p> <p>Processor – Police Constabulary</p>

Coroner	<p>Purpose – Personal information relating to a patient may be shared with the coroner upon request.</p> <p>Legal Basis – UK GDPR Article 6 1 (c) Legal Obligation 9 2 (h) Health data</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 – UK GDPR Article 6 1 (b) Contract, Article 6 1 (e) Public task, Article 9 2 (h)</p> <p>Provider - AccuRX, Iplato</p>
Remote consultation Including – Video Consultation Clinical photography	<p>Purpose – Personal information including images may be processed, stored and with the patients consent shared, in order to provide the patient with urgent medical advice during the COVID-19 pandemic.</p> <p>Legal Basis – Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p>
	<p>Patients will be asked to provide consent if required to provide photographs of certain areas of concern. There are restrictions on what the practice can accept photographs of. No photographs of the full face, no intimate areas, no pictures of patients who cannot consent to the process. No pictures of children.</p> <p>Processor – e-Consult, AccuRX</p>
MDT meetings	<p>Purpose – For some long-term conditions, such as diabetes, the practice participates in meetings with staff from other agencies involved in providing care, to help plan the best way to provide care to patients with these conditions.</p> <p>During COVID 19 the practice may use secure video meeting platform to discuss patient needs.</p> <p>Legal Basis – Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor – MS Teams</p>

<p>COVID-19 Research and Planning</p>	<p>Purpose – To understand the risks to public health, trends and prevent the spread of infections such as Covid-19 the government has enabled a number of initiatives which include research and planning during the Covid-19 pandemic which may include the collection of personal confidential data has been necessary. This is to assist with the diagnosis, testing, self-isolating, fitness to work, treatment medical, social interventions and recovery from Covid-19.</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.</p> <p>Coronavirus (COVID-19): notice under regulation 3(4) of the Health Service (Control of Patient Information) Regulations 2002, which were made under sections 60 (now section 251 of the NHS Act 2006) and 64 of the Health and Social Care Act 2001 – Biobank - GOV.UK (www.gov.uk)</p> <p>Coronavirus (COVID-19): notification to organisations to share information - GOV.UK (www.gov.uk)</p> <p>Provider – BioBank, NHS Digital, NHS England, other organisations included in the roll out of vaccinations, treatment and care of patients suffering with Covid-19</p>
<p>General Practice Extraction Service (GPES) 1. At risk patients’ data collection Version 3</p>	<p>Purpose – GP practices are required to provide data extraction of their patient’s personal confidential information for various purposes to NHS Digital. The objective of this data collection is on an ongoing basis to identify patients registered at General Practices who fit within a certain criterion, in order to monitor and either provide direct care, or prevent serious harm to those patients. Below is a list</p>

<p>2. Covid-19 Planning and Research data</p> <p>3. CVDPREVENT Audit</p> <p>4. Physical Health Checks for people with Severe Mental Illness</p>	<p>of the purposes for the data extraction, by using the link you can find out the detail behind each data extraction and how your information will be used to inform this essential work:</p> <ol style="list-style-type: none"> 1. At risk patients including severely clinically vulnerable 2. Covid-19 Planning and Research data, to control and prevent the risk of Covid-19 3. NHS England has directed NHS Digital to collect and analyse data in connection with Cardiovascular Disease Prevention Audit 4. GPES Physical Health Checks for people with Severe Mental Illness (PHSMI) data collection. <p>Legal Basis - All GP Practices in England are legally required to share data with NHS Digital for this purpose under section 259(1)(a) and (5) of the 2012 Act</p> <p>Further detailed legal basis can be found in each link.</p> <p>Any objections to this data collection should be made directly to NHS Digital. enquiries@nhsdigital.nhs.uk</p> <p>Processor – NHS Digital</p>
<p>Medication/Prescribing</p>	<p>Purpose: Prescriptions containing personal identifiable and health data will be shared with chemists/pharmacies, in order to provide patients with essential medication or treatment as their health needs dictate. This process is achieved either by face-to-face contact with the patient or electronically. Where patients have specified a nominated pharmacy, they may wish their repeat or acute prescriptions to be ordered and sent directly to the pharmacy making a more efficient process. Arrangements can also be made with the pharmacy to deliver medication</p> <p>Legal Basis: Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Patients will be required to nominate a preferred pharmacy.</p> <p>Processor – Pharmacy of choice</p>

<p>Telephony</p>	<p>Purpose – The practice uses an internet based telephony system that records telephone calls, patients will have the right to decline recordings of calls as is their individual right. The calls will be held on the external server for a duration of 3 years unless requested for them to be removed sooner. The telephone system has been commissioned to assist with the high volume and management of calls into the surgery, which in turn will enable a better service to patients.</p> <p>Legal Basis – While there is a robust contract in place with the processor, the surgery has undertaken this service to assist with the direct care of patients in a more efficient way. Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Provider – Yotelecom</p>
<p>Learning Disability Mortality Programme LeDer</p>	<p>Purpose: The Learning Disability Mortality Review (LeDeR) programme was commissioned by NHS England to investigate the death of patients with learning difficulties to assist with processes to improve the standard and quality of care for people living with a learning disability.</p> <p>Legal Basis: It has approval from the Secretary of State under section 251 of the NHS Act 2006 to process patient identifiable information who fit within a certain criterion.</p> <p>Processor: CCG, NHS England</p>
<p>Technical Solution Pseudonymisation</p>	<p>Purpose: Personal confidential and special category data in the form of medical record, is extracted under contract for the purpose of pseudonymisation. This will allow no patient to be identified within the data set that is created. SCWCSU has been commissioned to provide a data processing service for the GPs, no other processing will be undertaken under this contract.</p> <p>Legal Basis: Under UK GDPR the legitimate purpose for this activity is under contract to provide assistance. Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor: SCW CSU</p>
<p>Shared Care Record</p>	<p>Purpose: In order for the practice to have access to a shared record, the Integrated Care Service has commissioned a number of systems including GP connect, which is managed by NHS Digital, to enable a shared care record, which will assist in patient information to be used for a number of care related services. These may include Population Health Management, Direct Care, and analytics to assist with planning services for the use of the local health population.</p>

	<p>Where data is used for secondary uses no personal identifiable data will be used.</p> <p>Where personal confidential data is used for Research explicit consent will be required.</p> <p>Legal Basis: Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor: NHS Digital</p>
<p>Anticoagulation Monitoring</p>	<p>Purpose: Personal Confidential data is shared with LumiraDX in order to provide an anticoagulation clinic to patients who are on anticoagulation medication. This will only affect patients who are within this criteria.</p> <p>Legal Basis: The legal basis for this activity under UK GDPR is Article 6(1)(e); “necessary... in the exercise of official authority vested in the controller’ And Article 9(2)(h) Health data as stated below</p> <p>Processor: INRStar</p>

We will keep our Privacy Notice under regular review. This notice was last reviewed on 3rd March 2022.

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 UK 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...’

Update: 28/03/2022