

## How we use your information

NHS Lambeth CCG sometimes collects information about you in the course of its work. Accurate and relevant information helps us to design and plan health services, manage budgets and review our decisions.

Here we explain what type of information we hold and why, how it is used and who we may share it with. We also say how we keep your information secure and confidential, and explain your legal rights and choices for opting out. This document is called a 'fair processing notice'.

### 1. What we do

NHS Lambeth CCG is responsible for planning and buying health services from healthcare providers (such as hospitals and GP practices) for our local population to ensure the highest quality of healthcare. Our work includes making sure that:

- contracts and payments are in place with local health service providers
- the best possible services are chosen for our local community, delivering high quality care and value for money
- People in Lambeth have access to routine and emergency NHS services.

This is also known as commissioning. We also monitor how well these services perform, which includes responding to concerns from our patients about services offered. You can read more about what we do at [www.lambethccg.nhs.uk](http://www.lambethccg.nhs.uk)

We are registered with the Information Commissioners Office, reference number Z3608414. You can look us up and read more about how we use information by searching under our reference number here: <https://ico.org.uk/esdwebpages/search>

We do not provide direct care so we do not routinely hold or receive information that could identify patients and service users.

### 2. What types of information do we hold and what do we use it for?

Information about your health and care from your health records is confidential and is not routinely shared with the CCG for direct healthcare purposes. But there are times when we need to hold and use some types of information about you.

#### Types of data

*Primary care and secondary care data*

Primary care is most people's (around 90%) first point of contact with the NHS; Primary care is GP practices, dental practices, community pharmacies and high street optometrists. So primary care data relates to information that comes from these services.

Secondary care is treatment and care provided through specialised medical service by clinicians (for example, specialist care at your local hospital that you are referred to by your GP). Secondary care data comes from these services.

#### *Anonymised data*

Most of the information we hold doesn't identify you (it won't include your name and address, and is called '**anonymised**' data).

#### *De-identified data*

Some data we hold and use, however, has to include more detail. For example, when we investigate an incident or manage a referral from a GP practice to another care provider, or responding to queries, complaints or concerns. This type of work might involve us having access to relevant information you have given us, or information provided on your behalf by relatives or carers who know you well, or from healthcare professionals involved in your treatment

We also hold **identifiable information** that includes your NHS number, as well as '**de-identified**' (also called '**pseudonymised**') data, which is used to help us plan and manage our work and your care. For example:

- Auditing NHS accounts and services
- Determining the general health needs of the population.
- Ensuring our services will meet patient needs in the future.
- Investigating complaints and legal claims.
- Making payments to healthcare providers.
- Preparing statistics on NHS performance.
- Research and development.

Access to this type of identifiable information is strictly controlled and is only used when it is absolutely necessary to use identifiable information.

#### *Personal data*

We only receive or hold personal information that includes details such as your name, address, date of birth, or details about your health, if

- The information is necessary for the direct healthcare of patients
- We have received explicit consent from an individual to use their information (and only for a specific purpose)

- There is an overriding public interest in using the information (for example, to safeguard someone or prevent serious crime)
- There is a legal requirement that will allow us to use or provide information (for example, a formal court order or legislation)
- We have permission from the Secretary of State for Health to use certain confidential information when it is necessary for our work

(A full glossary of terms can be found [here](#)).

Here are some examples of the data we use and what it is used for:

Activity	Type of data	How the CCG uses the data	Legal basis
<p>Commissioning (improving, managing and planning) care services</p>	<p>Care providers such as general practices, acute trusts, mental health trusts, community services, walk-in centres, and nursing homes.</p> <p>It is collected by NHS Digital and is forwarded to us.</p> <p>The datasets are in a format that does not directly identify individuals. They do not include your name, address, NHS number, date of birth or postcode.</p>	<ul style="list-style-type: none"> <li>• To collect and report NHS data that we are responsible for.</li> <li>• To check the quality and efficiency of the health services we commission.</li> <li>• To prepare performance reports on the services we commission.</li> <li>• To review the care provided to make sure it is of the highest standard.</li> <li>• To work out what illnesses people are likely to have in the future, so we can plan services and priorities.</li> </ul>	<p>The law provides some NHS bodies, particularly NHS Digital, ways of collecting sensitive personal data directly from care providers for secondary purposes, such as evaluating care for a population.</p> <p>The data come from NHS Digital and relate to people who are registered to a GP in a Clinical Commissioning Group area.</p>
<p>Complaints</p>	<p>We receive personal identifiable information direct from you or via NHS NEL Commissioning Support Unit (NEL CSU), along with any data from other sources that you allow us to access to process and investigate your complaint.</p>	<p>To process your personal information if it relates to a complaint where you have asked for our help or involvement.</p>	<p>Explicit consent is provided so that we can deal with complaints containing your identifiable information.</p>

Activity	Type of data	How the CCG uses the data	Legal basis
	We hold only the minimum amount of information to process your complaint.		
Conflicts of interest	Details of CCG staff members, members of Governing Body, CCG committees and sub-committees, GP Partners and other practice staff involved in the decision making processes of the CCG – their name, contact details, role and declared interests.	We manage conflicts of interest to ensure patients, taxpayers, healthcare providers and parliament that CCG commissioning decisions are robust, fair transparent and offer value for money. It is essential to protect healthcare professionals and maintain public trust in the NHS.	Section 140 of the National Health Service Act 2006 (as amended by the 2012 Health and Social Care Act 2012) sets out the minimum requirements of what both NHS England and CCGs must do in terms of managing conflicts of interest. NHSE'S Managing Conflicts of Interest: Revised Statutory Guidance for CCGs 2017.
Continuing Healthcare (CHC) applications	If you apply for CHC funding we use the information you provide, and where needed request further information from care providers to assess eligibility for funding.	To allow agreed funding packages to be put in place with appointed care providers for a package of care for people with complex medical needs.	<p>Consent / capacity is sought as part of the initial screening "Checklist" assessment process. A Mental Capacity Assessment will be completed to determine capacity if the individual is unable to consent.</p> <p>Where an individual is screened as needing a full assessment, the assessment will be led a health professional.</p> <p>The assessment process is all part of a nationally defined process. We follow the nationally defined process, and use standard information collection</p>

Activity	Type of data	How the CCG uses the data	Legal basis
Employee information	Various types of information are collected about prospective, current and past employees, including self-employed workers, contract personnel, temporary staff or voluntary workers	<p>We collect information for several purposes, including:</p> <ul style="list-style-type: none"> <li>• recruitment</li> <li>• occupational health</li> <li>• payment and pensions administration</li> <li>• disciplinary matters</li> <li>• staff training and development</li> <li>• vetting checks</li> <li>• managing our business activity</li> <li>• assessing our performance against equality objectives</li> </ul>	<p>tools to decide whether someone is eligible.</p> <p>CCG needs to carry out its responsibilities as an employer and therefore needs to process employee information as part of HR and Payroll purposes.</p> <p>Also as part of the employment contract employees consent to CCG processing this information.</p>
Incident management	Personal Confidential Data is not provided for the management of serious incidents in commissioned services. Incidents reported within the CCG will contain the details of the reporter and any witnesses, to enable investigation and learning.	<p>To discharge our commissioner responsibility to monitor and quality assure serious incident occurring in commissioned services.</p> <p>To ensure the CCG has in place effective governance in place to learn from any CCG incidents that take place.</p>	<p>The Francis Report (February 2013) emphasised that commissioners and providers have a responsibility to ensure the quality of health services provided. Read more about the serious incident framework at <a href="https://www.england.nhs.uk/patientsafety/serious-incident/">https://www.england.nhs.uk/patientsafety/serious-incident/</a></p>

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	Incidents reported by GP's on the National Reporting and Learning System may contain a date of birth.	The CCG shares GP incident reports with the relevant provider so that they can investigate and learn from the incident. The CCG advises the provider to contact the reporter directly for further patient details.	The CCG has a statutory duty to support NHSE with the continuous quality improvement of primary medical services as set out in the HSCA 2012 and the Primary Medical Services assurance framework.
Individual Funding Request (IFR) applications	If you apply for IFR funding we use the information you provide, and where needed request further information from care providers to assess eligibility for funding.	To allow agreed funding packages to be put in place with appointed care providers, for specialist drugs or rare treatments not provided for in our contracts.	An initial assessment is done by a healthcare professional then we will need to get your explicit consent to continue.  This process is nationally defined and we follow a standard process, and use standard information collection tools to decide whether someone is eligible.
Invoice validation – please	Your NHS number, a unique patient event identifier (such as A&E or outpatients attendance identifier), and unique patient identifier (such as your GP practice details)	To verify that we are paying for your care correctly when another healthcare organisation is involved, For example if you need hospital treatment while away from home on holiday, we can be invoiced for your care. A limited amount of data needs to be shared between us and the hospital that treated you.  These data help us establish whether	NHS Lambeth CCG is an accredited Controlled Environment for Finance (CEfF) under a section 251 exemption, which allows us to process patient identifiable information without consent for the purposes of invoice validation.  We use the services of a health partner NHS NEL Commissioning Support Unit (NEL CSU) to process these data on our behalf.

Activity	Type of data	How the CCG uses the data	Legal basis
		<p>the CCG is responsible for paying for your care, ensure the same episode of care isn't paid for more than once, and helps identify you to the healthcare provider.</p> <p>All information is deleted once your treatment has been paid for, so we don't retain records.</p>	
Medicines management	Most of the time no Personal Confidential Data is required. Only in rare circumstances patients hospital number or a local identified only is used	NHS Lambeth CCG's pharmacists provide advice on medicines and prescribing queries to GPs. They might use data to order specialist drugs on behalf of a CCG	
Patient and public involvement	Identifiable information received direct from you if you are actively involved in our engagement and consultation activities or Patient Advisory Group	Varies according to work stream. For example, we might use your comments to inform changes to a work programme, or with your permission quote you in a patient information leaflet.	Explicit consent is only required for quoting you.
Post-infection reviews	Personal Confidential Data such as demographic and medical information	To identify the possible causes of, or factors that contributed to, infections such as MRSA	
Quality alerts	. A patient NHS number may be	The CCG sent the reported quality	The Quality Alerts System (QAS) was



Activity	Type of data	How the CCG uses the data	Legal basis
	<p>provided by the reporter to allow the CCG to ask the relevant provider to investigate.</p>	<p>alert to the provider and ask them to investigate. The provider will respond to the reporter with the outcome, copying in the CCG.</p>	<p>implemented by in response to Francis Recommendation 123, following the Mid-Staffordshire Trust inquiry. The recommendation states that:</p> <p>“GPs need to undertake a monitoring role on behalf of their patients who receive acute hospital and other specialist services. They should be an independent, professionally qualified check on the quality of service, in particular in relation to an assessment of outcomes. They need to have internal systems enabling them to be aware of patterns of concern, so that they do not merely treat each case on its individual merits. They have a responsibility to all their patients to keep themselves informed of the standard of service available at various providers to make patients’ choice reality.”</p> <p>The legal basis in the Quality Alert personal identifiable information is as follows.</p> <ul style="list-style-type: none"> <li>• It should be an expected use of patient data. This has been included in the Care Record Guarantee and NHS Constitution for many years, should be included in GP fair processing notices,</li> </ul>

Activity	Type of data	How the CCG uses the data	Legal basis
			<p>and a 'reasonable man' (this is a legal term) should expect that the quality and safety of their care provision is overseen, monitored and tested. These assumptions go to satisfying the Common Law Duty of Confidentiality, i.e. expected use. We therefore consider the continued processing of limited personal data for this purpose is unlikely to cause substantial damage or substantial distress to the data subjects.</p> <ul style="list-style-type: none"> <li>• To the extent that the data being processed is personal data, it is in the public interest that the quality and safety of healthcare services is monitored and reported on, so that risks to health and well-being can be rapidly identified from trends and individual incidents.</li> <li>• The CCG will be a data controller based on its' statutory duty to support NHSE with the continuous quality improvement of primary medical services as set out in the HSCA 2012 and the Primary Medical Services assurance framework.</li> </ul>
Safeguarding	Access to identifiable information (in some circumstances when legally	We will need to collect and process identifiable information where there are specific safeguarding concerns.	It is not always possible to reply on explicit consent to process information for safeguarding

Activity	Type of data	How the CCG uses the data	Legal basis
	required). The information may be primary care data or information provided from a member of the public or staff.	The information used depends on the case, and is used to ensure that adult and children's safeguarding matters are managed appropriately.	

### **3. Your consent and opting out**

As long as you, the patient, are informed and understand how your information is used throughout your care, and do not raise any concerns, your consent is considered to be implied.

Under the NHS Confidentiality Code of Conduct, all our staff are also required to protect your information, tell you how your information will be used, and allow you to decide if and how your information can be shared. If you are not clear about how your information will be used, ask your GP or healthcare provider and they can explain in more detail.

Everyone working for the NHS is subject to the Common Law Duty of Confidentiality. Generally, this means that if you give information in confidence, that information cannot normally be disclosed without your consent.

In practice, this means that all patient/client information, whether electronic or on paper, must not normally be disclosed without your consent. Therefore, under the common law, a health or social care provider wishing to disclose a patient's/client's personal information to anyone outside the team providing care should first seek the consent of that patient/client.

It is irrelevant how old the patient/client is, or what the state of his/her mental health is; the duty still applies.

Three circumstances make disclosure of confidential information lawful:

- where the individual to whom the information relates has consented
- where disclosure is necessary to safeguard the individual, or others, or is in the public interest
- Where there is a legal duty to do so, for example a court order.

You can read more about this here: <https://www.health-ni.gov.uk/articles/common-law-duty-confidentiality>

There are choices you can make about how your information is used, and you can choose to opt out of having your information shared or used for any purpose beyond providing your care.

If you wish to opt out, please inform your GP practice and they will mark your choice in your medical record.

There are two types of opt-out.

However, there are some circumstances where you cannot object to your information being shared. For example, if there is a safeguarding issue or if an organisation is required by law to share your information.

## **Type 1 opt-out**

If you do not want information that identifies you to be shared outside your GP practice, for purposes beyond your direct care, you can register a type 1 opt-out with your GP practice. This prevents your personal confidential information from being used other than in particular circumstances required by law, such as a public health emergency like an outbreak of a pandemic disease.

## **Type 2 opt-outs**

NHS Digital collects information from a range of places where people receive care, such as hospitals and community services. If you do not want your personal confidential information to be shared outside of NHS Digital, for purposes other than for your direct care, you can register a type 2 opt-out with your GP practice.

You can withdraw either opt-out at any time by informing your GP practice.

If you have consented to your personal data being used, you also have the right to withdraw this consent at any time and you do not need to provide a reason. The possible consequences of withdrawing consent should be explained to you. For example, you might be unable to receive a certain service as a result of withdrawing consent.

If you wish to opt out or withdraw your consent from the CCG processing your data, please contact the patient advice and liaison service (PALS) which is provided by NEL CSU on behalf of Lambeth CCG:

NHS NEL Commissioning Support Unit

1 Lower Marsh

London SE1 7NT

Email: [NELCSU.SEcomplaints@nhs.net](mailto:NELCSU.SEcomplaints@nhs.net)

Telephone: 0800 4561517 (Monday to Friday 9am-5pm)

## **4. Our commitment to keeping your information confidential and safe**

We are committed to protecting your rights to confidentiality, as well as being bound by the Duty of Confidentiality and the NHS Code of Conduct. We have appointed a 'Caldicott Guardian' and Senior Information Risk Owner to monitor how we use information, and support organisations that we buy services from. The Caldicott Guardian oversees and makes decisions about information sharing. Both roles are supported by the Information Governance Working Group which meets regularly to discuss issues related to information governance.

If you wish to contact the Caldicott Guardian please contact the Information Governance Team at the address given above for the CSU, or by email at: [NELCSU.Information-Governance@nhs.net](mailto:NELCSU.Information-Governance@nhs.net)

## 5. How long we will keep your information and how we will destroy information

We keep information for different lengths of time depending on what type of information it is, according to the Information Governance Alliance's Records Management Code of Practice for Health and Social Care. For more information, you can access the document here: <http://systems.digital.nhs.uk/infogov/iga/rmcop16718.pdf>. The retention schedules start on page 53.

When destroying data we ensure that we, or third parties we contract to destroy data on our behalf, meet guidelines set out in the Data Protection Act 1998 (see principle 7 of the European Standard EN 15713 for paper copies and CESG standards [www.cesg.gov.uk](http://www.cesg.gov.uk) for secure destructions of electronic data).

### Useful further information

- NHS Constitution: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/480482/NHS\\_Constitution\\_WEB.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/480482/NHS_Constitution_WEB.pdf)
- NHS Care Record Guarantee: <http://systems.digital.nhs.uk/rasmartcards/strategy/nhscrg>
- NHS Digital's Guide to Confidentiality: <http://systems.digital.nhs.uk/infogov/confidentiality>
- NHS Digital's Records Management Code of Practice 2016: <https://digital.nhs.uk/codes-of-practice-handling-information>
- Information Commissioner's Office: <https://ico.org.uk/>
- Health Research Authority: <http://www.hra.nhs.uk/>
- Health Research Authority Confidentiality Advisory Group (CAG): <http://www.hra.nhs.uk/about-the-hra/our-committees/section-251/>
- For more information about care records and how to access them see NHS Choices <http://www.nhs.uk/NHSEngland/thenhs/records/healthrecords/Pages/overview.aspx>.
- For details about how public bodies must make information available, see the model publication scheme published by the Information Commissioner's Office. <https://ico.org.uk/for-organisations/guide-to-freedom-of-information/publication-scheme/>

- The lawful basis to use this information [population data for planning purposes] has been allowed by s251 NHS Act 2006 and is processed by NEL CSU or other approved providers only. For further information please visit <http://www.hra.nhs.uk/about-the-hra/our-committees/section-251/>

### **Accessing your information held by NHS Lambeth CCG**

Under the Data Protection Act 1998 you have the right to see or be given a copy of personal data held about you. To gain access to your information you will need to make a Subject Access Request (SAR) to NHS Lambeth CCG.

We may charge a reasonable fee for the administration of the request, set down in law as follows:

- Your personal details including your full name, address, date of birth, and NHS number so that your identity can be verified and your records located
- If the information is only held electronically we may charge up to £10 for complying
- If the information is only held wholly or partly in paper format we may charge up to £50 for complying.

If you wish to make a Subject Access Request please contact the Information Governance Team c/o:

NHS NEL Commissioning Support Unit  
1 Lower Marsh  
London SE1 7NT

Email: [NELCSU.Information-Governance@nhs.net](mailto:NELCSU.Information-Governance@nhs.net)

Note: In order to deal with a Subject Access Request, Lambeth CCG will need to share information with the NEL London Commissioning Support Unit (SECSU).

### **Freedom of information requests (FOI)**

The Freedom of Information Act (2000) gives every Individual the right to request information held by Government Agencies. Private Companies are not subject to this act. Please note that a Freedom of Information Request is not the same as a Subject Access Request.

For postal requests, please send to the Freedom of Information Team at:

Freedom of Information Manager  
C/O NHS NEL Commissioning Support Unit  
1 Lower Marsh  
London SE1 7NT

You can also email your request to: [NELCSU.FOI@nhs.net](mailto:NELCSU.FOI@nhs.net)

Your request for information must be made in writing and you are entitled to a response within 20 working days.

### **Decommissioning of services**

The CCG will retain legal responsibility for the information held about you until it is formally dissolved or until agreements are put in place to transfer responsibility.

### **Complaints**

If you have a comment, compliment or complaint about how your information has been used in Lambeth then please contact the complaints team:

Phone: 0800 4561517

Email: [NELCSU.SEcomplaints@nhs.net](mailto:NELCSU.SEcomplaints@nhs.net)

Letter: NEL CSU Complaints Team, 1 Lower Marsh, London SE1 7NT

Records of complaints will not be kept within your clinical file and will be handled in line with the NHS Records Management Code of Practice.

If you are not happy with our responses about your use of information and data and have exhausted all the avenues in the CCG Complaints Process and wish to take your complaint to an independent body, you can do this by contacting the Information Commissioner's Office in writing to the following address:

Wycliffe House  
Water Lane  
WILMSLOW  
Cheshire SK9 5AF

You can also telephone their helpline on 0303 123 1113 (local rate) or 01625 545 745 if you prefer to use a national rate number. Or email: [casework@ico.org.uk](mailto:casework@ico.org.uk)

### **Appendix A: Glossary**

#### Definition of data types

This section provides definitions for key terms which are used throughout the text below to describe different data types.

**Anonymised data**, which is data about you but from which you cannot be personally identified



**De-identified data with pseudonym identifier (pseudonymised)**, which is data about you but we are able to track you through the patient pathway without using your personal information, and you cannot be personally identified.

**De-identified data with weak pseudonym identifier such as the NHS number.** We use this to link two or more types of datasets together using your NHS number. For example, using your NHS number to link and analyse datasets such as acute data with community data to see the full picture of your patient pathway. No other personal information is used during this process and you will not be personally identified. However, there may be times whereby you may be re-identified in the event of patient safety requirements, or re-identified for direct care purposes where we pass on information to your GP to treat you

**Anonymised in Context data (for commissioning purposes)**, which is de-identified data about you but from which you cannot be personally identified within a commissioning (CCG) environment. Like the above, we replace the NHS number with a locally generated pseudonym like hospital number;

**Personal data**, information from which you can be personally identified, for example name, address, postcode, date of birth

**Sensitive personal data**, information about your physical and mental health from which you can be identified