

How we use your personal information

This privacy notice explains why the practice collects information about patients, members of staff and visitors to the practice, and how we use your information.

So that we can provide you with the best possible service, a variety of information is collected about you from a range of sources, such as your local NHS hospitals. This information is used to support your healthcare. Under the General Data Protection Regulation (GDPR) information about your physical and mental health, racial or ethnic origin and religious belief are considered as special category (sometimes known as sensitive) personal information and is subject to strict laws governing its use. This page explains why the Practice collects personal information about you, the ways in which such information may be used, and your rights under the General Data Protection Regulation. The Practice is legally responsible for ensuring its processing of personal information is in compliance with the general data protection regulation. The practice becomes what is known as the data controller, which simply means that we are responsible for maintaining the security and confidentiality of the personal information that you provide us with.

Security of Information

Confidentiality affects everyone: Lindley Group Practice collects, stores and uses large amounts of personal and sensitive personal data every day, such as medical records, personnel records and computerised information. This data is used by many people in the course of their work.

We take our duty to protect personal information and confidentiality very seriously and we are committed to comply with all relevant legislation and to take all reasonable measures to ensure the confidentiality and security of personal data for which we are responsible, whether computerised or on paper.

The partners have appointed a Senior Information Risk Owner who is accountable for the management of all information assets and any associated risks and incidents, and a Caldicott Guardian who is responsible for the management of patient information and patient confidentiality.

Legal Basis for processing your information

Under GDPR the Practice are mandated to identify a legal basis to process your personal information.

Special Category data (Health Records) under 9(2)(h) – *“Necessary for the reasons of preventative or occupational medicine, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services”* and occasionally 9(2)(c) *“when it is necessary to protect the vital interests of a person who is physically or legally incapable of giving consent”*

Personal data under 6(1)(e) *“Necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the Practice (Data*

Controller)” and occasionally 6(1)(d) “ *when it is necessary to protect the vital interests of a person who is physically or legally incapable of giving consent*”

Personal data under 6 (1) (f) "Processing is necessary for the purposes of the legitimate Interests pursued by the Data Controller or by a third party"

Personal data under 6(1)(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 in so far as it is authorised by Union or Member State law or a collective agreement pursuant to Member State law providing for appropriate safeguards for the fundamental rights and the interests of the data subject;

The Practice may need to keep and process information about you for employment purposes. The information we hold and process will be used for our management and administrative use only. We will keep and use it to enable us to comply with contractual, statutory, and management obligations and responsibilities. We collect information during the recruitment process, whilst you are working for us and at the time when your employment ends. This includes using information to enable us to comply with the employment contract, to comply with any legal requirements, pursue the legitimate interests of the Practice and protect our legal position in the event of legal proceedings.

Why do we collect information about you

All clinicians and health and social care professionals caring for you keep records about your health and any treatment and care you receive from the NHS. These records help to ensure that you receive the best possible care. They may be paper or electronic and they may include:

We will collect information about you as a member of staff or potential member of staff

We may also collect information relating to those people who visit the practice, either in a professional capacity or accompanying a patient

- Basic details about you such as name, address, email address, NHS number, date of birth, next of kin, etc.
- Contact we have had with you such as appointments or clinic visits.
- Notes and reports about your health, treatment and care – A&E visits, in patient spells or clinic appointments
- Details of diagnosis and treatment given
- Information about any allergies or health conditions.
- Results of x-rays, scans and laboratory tests.
- Relevant information from people who care for you and know you well such as health care professionals and relatives.
- Information that you give us when you enquire or apply for a job with us including name, address, contact details (including email address and phone number)
- Information you give to us in connection with your employment,
- Such as bank account details & National Insurance number
- Application form and references

- Employment Contract
- Records of holiday's sickness and other absences.
- Training records
- Any disciplinary or grievance records.
- For visitors to the practice basic information such as name and vehicle registration number

It is essential that your details are accurate and up to date. Always check that your personal details are correct when you visit us and please inform us of any changes to your contact details. This minimizes the risk of you not receiving important correspondence.

By providing the Practice with their contact details, patients are agreeing to the Practice using those channels to communicate with them about their healthcare, i.e. by letter (postal address), by voice mail or voice message (telephone or mobile number), by text message (mobile number) or by email (email address).

How your personal information is used

In general your records are used to direct, manage and deliver the care you receive to ensure that:

- The doctors, nurses and other health or social care professionals involved in your care have accurate and up to date information to assess your health and decide on the most appropriate care for you.
- Health or social care professionals have the information they need to be able to assess and improve the quality and type of care you receive.
- Your concerns can be properly investigated if a complaint is raised.
- Appropriate information is available if you see another clinician or are referred to a specialist or another part of the NHS or social care.

As a member of staff we need to keep and process information about you for employment purposes. The information we hold and process will be used for our management and administrative use only. We will keep and use it to enable us to comply with contractual, statutory, and management obligations and responsibilities. We collect information during the recruitment process, whilst you are working for us and at the time when your employment ends. This includes using information to enable us to comply with the employment contract, to comply with any legal requirements, pursue the legitimate interests of the practice and protect our legal position in the event of legal proceedings

The NHS care record guarantee

The Care Record Guarantee is our commitment that we will use records about you in ways that respect your rights and promote your health and wellbeing. Copies of the full document can be obtained from:

https://digital.nhs.uk/binaries/content/assets/legacy/pdf/1/8/care_record_guarantee.pdf

The Records Management Code of Practice

This Records Management Code of Practice for Health and Social Care 2016 is a guide for the NHS to use in relation to the practice of managing records. It is relevant to organisations who work within, or under contract to NHS organisations in England. This also includes public health functions in Local Authorities and Adult Social Care where there is joint care provided within the NHS.

The Code is based on current legal requirements and professional best practice.

<https://www.gov.uk/government/publications/records-management-code-of-practice-for-health-and-social-care>

How long are records retained

All records are retained and destroyed in accordance with the NHS Records Management Code of Practice.

The Practice does not keep patient records for longer than necessary and all records are destroyed confidentially once their retention period has been met, and the Practice has made the decision that the records are no longer required.

When do we share information about you

We share information about you with others directly involved in your care; and also share more limited information for indirect care purposes, both of which are described below:

Everyone working within the NHS has a legal duty to keep information about you confidential. Similarly, anyone who receives information from us also has a legal duty to keep it confidential.

Direct Care Purposes

- NHS Trusts and hospitals that are involved in your care.
- NHS Digital and other NHS bodies.
- Other General Practitioners (GPs).
- Ambulance Services.
- Clinical Commissioning Groups (CCG)

You may be receiving care from other people as well as the NHS, for example Social Care Services. We may need to share some information about you with them so we can all work together for your benefit if they have a genuine need for it or we have your permission. Therefore, we may also share your information, subject to strict agreement about how it will be used, with:

- Social Care Services.
- Education Services.
- Local Authorities.
- Voluntary and private sector providers working with or for the NHS.

We will not disclose your information to any other third parties without your permission unless there are exceptional circumstances, such as if the health and safety of others is at risk or if the law requires us to pass on information.

Indirect Care Purposes:

We also use information we hold about you to:

- Review the care we provide to ensure it is of the highest standard and quality
- Ensure our services can meet patient needs in the future
- Investigate patient queries, complaints and legal claims
- Ensure the hospital receives payment for the care you receive
- Prepare statistics regarding NHS performance
- Audit NHS accounts and services
- Undertake health research and development (with your consent – you may choose whether or not to be involved)
- Help train and educate healthcare professionals
- Health and social care policy, planning and commissioning purposes
- Public health purposes, including COVID-19

Nationally there are strict controls on how your information is used for these purposes. These control whether your information has to be de-identified first and with whom we may share identifiable information. You can find out more about these purposes, which are also known as secondary uses, on the NHS England and NHS Digital's websites:

- www.england.nhs.uk
- www.digital.nhs.uk

• **Your Data Matters to the NHS**

- Information about your health and care helps us to improve your individual care, speed up diagnosis, plan your local services and research new treatments.
- You can choose whether your confidential patient information is used for research and planning.
- To find out more visit: <https://www.nhs.uk/your-nhs-data-matters>

As a member of staff, we will only share your information for administering your contract of employment or where we are legally required to share your information.

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](https://www.nhs.uk/your-nhs-data-matters) or call 0300 303 5678

Call recording

Telephone calls to the Practice are routinely recorded for the following purposes:

- To make sure that staff act in compliance with Lindley Group Practice procedures.
- To ensure quality control.
- Training, monitoring and service improvement
- To prevent crime, misuse and to protect staff

Data Subject Rights

Under the General Data Protection Regulation (GDPR)

- A right to confirmation that their personal data is being processed and access to a copy of that data which in most cases will be Free of Charge and will be available within 1 month (which can be extended to two months in some circumstances)
- Who that data has or will be disclosed to;
- The period of time the data will be stored for
- A right in certain circumstances to have inaccurate personal data rectified, blocked, erased or destroyed;
- Data Portability – data provided electronically in a commonly used format
- The right to be forgotten and erasure of data does not apply to an individual's health record or for public health purposes
- The right to lodge a complaint with a supervising authority

Your right to object

You have the right to restrict how and with whom we share information in your records that identifies you. If you object to us sharing your information we will record this explicitly within your records so that all healthcare professionals and staff involved with your care are aware of your decision. If you choose not to allow us to share your information with other health or social care professionals involved with your care, it may make the provision of treatment or care more difficult or unavailable.

Please discuss any concerns with the clinician treating you so that you are aware of any potential impact. You can also change your mind at any time about a disclosure decision.

Refusing or withdrawing consent

The possible consequences of refusing consent will be fully explained to the patient at the time and could include delays in receiving care.

In those instances where the legal basis for sharing of confidential personal information relies on the patient's explicit or implied consent, then the patient has the right at any time to refuse their consent to the information sharing, or to withdraw their consent previously given.

In instances where the legal basis for sharing information without consent relies on HRA CAG authorisation under Section 251 of the NHS Act 2006, then the patient has the right to register their objection to the disclosure, and the Practice is obliged to respect that objection.

In instances where the legal basis for sharing information relies on a statutory duty/power, then the patient cannot refuse or withdraw consent for the disclosure.

SMS Text messaging

When attending the Practice for an appointment or a procedure you may be asked to confirm that the Practice has an accurate contact number and mobile telephone number for you. This can be used to provide appointment details via SMS text messages and automated calls to advise you of appointment times.

CCTV

We employ surveillance cameras (CCTV) on and around our practice in order to:

- protect staff, patients, visitors and Practice property
- apprehend and prosecute offenders, and provide evidence to take criminal or civil court action
- provide a deterrent effect and reduce unlawful activity
- help provide a safer environment for our staff
- monitor operational and safety related incidents
- help to provide improved services, for example by enabling staff to see patients and visitors requiring assistance

You have a right to make a Subject Access Request of surveillance information recorded of yourself and ask for a copy of it. Requests should be directed to the address below and you will need to provide further details as contained in the section 'How you can access your records'. The details you provide must contain sufficient information to identify you and assist us in finding the images on our systems.

We reserve the right to withhold information where permissible by the General Data Protection Regulation (GDPR) 2018 and we will only retain surveillance data for a reasonable period or as long as is required by law. In certain circumstances (high profile investigations, serious or criminal incidents) we may need to disclose CCTV data for legal reasons. When this is done there is a requirement for the organisation that has received the images to adhere to the GDPR.

How you can access your health records

The GDPR 2018 gives you a right to access the information we hold about you on our records. Requests must be made in writing to the Practice. The Practice will provide your information to you within one month (this can be extended dependent on the complexity of the request) from receipt of your application.

Data Controller

The Data Controller responsible for keeping your information confidential is:

Dr M Kaye

Data Protection Officer (DPO)

The appointed DPO is Helen McNae. Helen.mcnae@this.nhs.uk

Raising a concern

Patients who have a concern about any aspect of their care or treatment at the Practice or about the way their records have been managed, should contact the Practice Manager.

If you have any concerns about how we handle your information you have a right to complain to the Information Commissioners Office about it.

The GDPR 2018 requires organisations to lodge a notification with the Information Commissioner to describe the purposes for which they process personal information. These details are publicly available from:

Information Commissioner's Office
Wycliffe House, Water Lane
Wilmslow, SK9 5AF

Telephone: **0303 123 1113**

Website: www.ico.org.uk

Freedom of Information

The Freedom of information Act 2000 provides any person with the right to obtain certain information held by the Practice, subject to a number of exemptions. If you would like to request some information from us, please contact us

Please note: if your request is for information we hold about you (for example, your health record), please instead see above, under "How You Can Access Your Records".

Healthy.io

ACR project for patients with diabetes

The data is being processed for the purpose of delivery of a programme, sponsored by NHS Digital, to monitor urine for indications of chronic kidney disease (CKD) which is recommended to be undertaken annually for patients at risk of chronic kidney disease e.g., patients living with diabetes. The programme enables patients to test their kidney function from home. We will share your contact details with Healthy.io to enable them to contact you and confirm that you wish them to send you a test kit. This will help identify patients at risk of kidney disease and help us agree any early interventions that can be put in place for the benefit of your care. Healthy.io will only use your data

for the purposes of delivering their service to you. If you do not wish to receive a home test kit from Healthy.io we will continue to manage your care within the Practice. Healthy.io are required to hold data we send them in line with retention periods outlined in the Records Management code of Practice for Health and Social Care. Further information about this is available at <http://bit.ly/uACRtest>.

Medi2data

Our practice has decided to outsource our medical reporting work to an NHS Digital accredited company called Medi2data.

Medi2data has worked hard to develop their NHS GP IT futures accredited technology, eMR, which interfaces with our GP practices systems to extract your medical record. This means you can receive a full copy of that information securely and share it with others as you wish keep your data safe.

COVID-19 Privacy Notice

(This Privacy Notice is to run alongside our standard Practice Privacy Notice)

Due to the unprecedented challenges that the NHS and we, Lindley Group Practice face due to the worldwide COVID-19 pandemic, there is a greater need for public bodies to require additional collection and sharing of personal data to protect against serious threats to public health.

In order to look after your healthcare needs in the most efficient way we, Lindley Group Practice may therefore need to share your personal information, including medical records, with staff from other GP Practices including Practices within our Primary Care Network, as well as other health organisations (i.e. Clinical Commissioning Groups, Commissioning Support Units, Local authorities etc.) and bodies engaged in disease surveillance for the purposes of research, protecting public health, providing healthcare services to the public and monitoring and managing the Covid-19 outbreak and incidents of exposure.

The Secretary of State has served notice under Regulation 3(4) of the **Health Service (Control of Patient Information) Regulations 2002 (COPI)** to require organisations to process confidential patient information in the manner set out below for purposes set out in Regulation 3(1) of COPI.

Purpose of this Notice

The purpose of this Notice is to require organisations such as Lindley Group Practice 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. This Notice is necessary to require organisations such as Lindley Group Practice to lawfully and efficiently process confidential patient information as set out in Regulation 3(2) of COPI for purposes defined in regulation 3(1), for

the purposes of research, protecting public health, providing healthcare services to the public and monitoring and managing the Covid-19 outbreak and incidents of exposure.

Requirement to Process Confidential Patient Information

The Secretary of State has served notice to recipients under Regulation 3(4) that requires Lindley Group Practice to process confidential patient information, including disseminating to a person or organisation permitted to process confidential patient information under Regulation 3(3) of COPI, renewed 27 January 2021 and September 2021.

Lindley Group Practice is only required to process such confidential patient information:

- where the confidential patient information to be processed is required for a Covid-19 Purpose and will be processed solely for that Covid-19 Purpose in accordance with Regulation 7 of COPI
- from 20th March 2020 until 31 March 2022.

Covid-19 Purpose.

A Covid-19 Purpose includes but is not limited to the following:

- understanding Covid-19 and risks to public health, trends in Covid-19 and such risks, and controlling and preventing the spread of Covid-19 and such risks
- identifying and understanding information about patients or potential patients with or at risk of Covid-19, information about incidents of patient exposure to Covid-19 and the management of patients with or at risk of Covid-19 including: locating, contacting, screening, flagging and monitoring such patients and collecting information about and providing services in relation to testing, diagnosis, self-isolation, fitness to work, treatment, medical and social interventions and recovery from Covid-19
- understanding information about patient access to health services and adult social care services and the need for wider care of patients and vulnerable groups as a direct or indirect result of Covid-19 and the availability and capacity of those services or that care
- monitoring and managing the response to Covid-19 by health and social care bodies and the Government including providing information to the public about Covid-19 and its effectiveness and information about capacity, medicines, equipment, supplies, services and the workforce within the health services and adult social care services
- delivering services to patients, clinicians, the health services and adult social care services workforce and the public about and in connection with Covid-19, including the provision of information, fit notes and the provision of health care and adult social care services
- research and planning in relation to Covid-19.

Recording of processing

A record will be kept by Lindley Group Practice of all data processed under this Notice.

Sending Public Health Messages

Data protection and electronic communication laws will not stop Lindley Group Practice from sending public health messages to you, either by phone, text or email as these messages are not direct marketing.

Digital Consultations

It may also be necessary, where the latest technology allows Lindley Group Practice to do so, to use your information and health data to facilitate digital consultations and diagnoses and we will always do this with your security in mind.

Research and Pandemic Planning

The Secretary of State has directed NHS Digital to collect, process and analyse data in connection with COVID-19 to support the Secretary of State's response to COVID-19 and support various COVID-19 purposes set out in the COVID-19 Public Health Directions 2020, 17 March 2020 (as amended) (COVID-19 Direction) and below. This enables NHS Digital to collect data and analyse and link the data for COVID-19 purposes with other data held by NHS Digital.

The purpose of the data collection is also to respond to the intense demand for General Practice data to be shared in support of vital planning and research for COVID-19 purposes, including under the general legal notice issued by the Secretary of State under Regulation 3(4) of the Health Service (Control of Patient Information) Regulations 2002 (COPI).

NHS Digital has therefore been requested by the joint co-chairs of the Joint GP IT Committee (JGPITC) (the BMA and RCGP) to provide a tactical solution during the period of the COVID-19 pandemic to meet this demand and to relieve the growing burden and responsibility on General Practices. On 15 April 2020 the BMA and RCGP therefore gave their support via JGPITC to NHS Digital's proposal to use the General Practice Extraction Service (GPES) to deliver a data collection from General Practices, at scale and pace, as a tactical solution to support the COVID-19 response in the pandemic emergency period.

It is a requirement of the JGPITC that all requests by organisations to access and use this data will need to be made via the NHSX SPOC COVID-19 request process, that will triage and prioritise these requests and refer appropriate requests on to the NHS Digital Data Access Request Service (DARS). NHS Digital will consult with representatives of the BMA and the RCGP on all requests for access to the data. An outline of the process for this agreed with the BMA and the RCGP is published here. Requests by organisations to access record level data from this collection will also be subject to Independent Group Advising on the Release of Data (IGARD) consideration. Data applicants will need to demonstrate they have a lawful basis to access the data for COVID-19 purposes.

Benefits of this sharing

Organisations, including the Government, health and social care organisations and researchers need access to this vital data for a range of COVID-19 purposes, to help plan, monitor and manage the national response to the COVID-19 pandemic, which will help save lives. COVID-19 purposes for which this data may be analysed and used may include:

- understanding COVID-19 and risks to public health, trends in COVID-19 and such risks, and controlling and preventing the spread of COVID-19 and such risks
- identifying and understanding information about patients or potential patients with, or at risk of COVID-19, information about incidents of patient exposure to COVID-19 and the management of patients with or at risk of COVID-19 including: locating, contacting, screening, flagging and monitoring such patients and collecting information about and providing services in relation to testing, diagnosis, self-isolation, fitness to work, treatment, medical and social interventions and recovery from COVID19
- understanding information about patient access to health services and adult social care services as a direct or indirect result of COVID-19, and the availability and capacity of those services • monitoring and managing the response to COVID-19 by health and social care bodies and the Government including providing information to the public about COVID-19 and its effectiveness and information about capacity,

medicines, equipment, supplies, services and the workforce within the health services and adult social care services

- delivering services to patients, clinicians, the health services and adult social care services workforce and the public about and in connection with COVID-19, including the provision of information, fit notes and the provision of health care and adult social care services; and
- research and planning in relation to COVID-19.

Data may be analysed and linked to other data held by NHS Digital or held by other organisations to which access to the data is granted for COVID-19 purposes, through the process described above.

Data will be collected nationally from all GP Practices by NHS Digital every fortnight. All requests to access this data will be triaged through the NHSX SPOC COVID-19 request process and assessed and fulfilled by NHS Digital through DARS. This will significantly reduce the burden on General Practice at a time when demand on resources is high, enabling General Practice to focus on delivering health care and support to patients. It will also reduce compliance burden and risk for General Practice associated with sharing data and complying with the terms of the general legal notice issued under COPI, which applies to General Practices.

Legal Basis for this collection

NHS Digital has been directed by the Secretary of State under section 254 of the 2012 Act under the COVID-19 Direction to establish and operate a system for the collection and analysis of the information specified for this service: GPES Data for Pandemic Planning and Research (COVID-19). A copy of the COVID-19 Direction is published here: <https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-anddata-provision-notice/secretary-of-state-directions/covid-19-public-health-directions-2020>.

Details of the information to be collected can be found on the NHS Digital website – Specification of this DPN. Type 1 objections will be upheld in collecting this data from General Practices and therefore the data for those patients who have registered a Type 1 objection with their GP will not be collected. The Type 1 objection prevents an individual's personal identifiable confidential information from being shared outside of their GP Practice except when it is being used for the purposes of their direct care. The National Data Opt-Out will not apply to the collection of the data, as this is a collection which is required by law.

This information is required by NHS Digital under section 259(1)(a) of the 2012 Act to comply with the COVID-19 Direction. In line with section 259(5) of the 2012 Act, all organisations in England that are within the scope of this Notice, as identified below under Health and Social Care Bodies within the scope of the collection, must comply with the requirement and provide information to NHS Digital in the form, manner and for the period specified in this Notice. This Notice is issued in accordance with the procedure published as part of NHS Digital's duty under section 259(8) of the 2012 Act.

In August 2020, the NHS announced that the seasonal national flu immunisation programme criteria for 2020 - 2021 will be expanded to include patients on the SPL. Therefore, to provide information that will support the identification of patients at moderate or high risk of

complications from flu, a revision to the weekly extract of data has taken place. This, version three of the extract for the purpose of maintaining and updating the SPL, will continue until the expiry of the COVID-19 Direction. This is currently 31 March 2022 but will be reviewed in September 2021 and every six months thereafter. The frequency of the data collection may change in response to demand.

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| Data collection extracted on a weekly basis week commencing 13 April 2020 | Revised weekly data collection. The first collection is due week commencing 28 September 2020 |
| All patients with defined long-term medical conditions which pose a COVID-19 risk, identified as clinically extremely vulnerable to that risk and/or on certain drug treatments as below: | All patients with defined long-term medical conditions which pose a COVID-19 risk, identified as clinically extremely vulnerable/potentially clinically vulnerable to that risk and/or on certain drug treatments as below: |
| <p>Medical Conditions that provide information on clinically vulnerable patients</p> <ul style="list-style-type: none"> • Severe asthma and dust related lung disease with relevant treatment in the last 12 months (asthma treatment & prednisolone OR high dose corticosteroid safety card) • COPD emphysema, and associated lung diseases with relevant treatment in the last 12 months (COPD drugs OR high dose high dose corticosteroid safety card) • Non-asthma and non-COPD respiratory disease • Cancer(haem and others) • Genetic, metabolic or autoimmune disease • Immunosuppression drugs in the last 12 months • Flu-like symptoms or respiratory tract infections from 1 November 2019 • Transplants with severe Immunosuppression drug treatment in the last 12 months • Pregnant in last 9 months | <p>Medical Conditions that provide information on clinically vulnerable patients</p> <ul style="list-style-type: none"> • Severe asthma and dust related lung disease with relevant treatment in the last 12 months (asthma treatment & prednisolone OR high dose corticosteroid safety card) • COPD emphysema, and associated lung diseases with relevant treatment in the last 12 months (COPD drugs OR high dose high dose corticosteroid safety card) • Non-asthma and non-COPD respiratory disease • Cancer(haem and others) • Genetic, metabolic or autoimmune disease • Immunosuppression drugs in the last 12 months • Flu-like symptoms or respiratory tract infections from 1 November 2019 • Transplants with severe Immunosuppression drug treatment in the last 12 months • Pregnant in last 9 months <p><i>No change</i></p> |
| <ul style="list-style-type: none"> • Patients designated separately as at risk from COVID-19 using high/medium/low risk SNOWED CT Codes, for example | <ul style="list-style-type: none"> • Patients designated separately as at risk from COVID-19 using high/medium/low risk SNOWED CT Codes, for example <p><i>No change</i></p> |
| Patients with a COVID-19 activity code | Patients with a COVID-19 activity code |
| | <i>No change</i> |
| | Clinically vulnerable patients (eligible for |

| | |
|--|---|
| | <p>seasonal flu vaccination)</p> <ul style="list-style-type: none"> • Chronic Respiratory disease • Unresolved asthma with recent asthma drug treatment (in the last 12 months) or has ever had an emergency hospital admission due to asthma • Chronic heart disease • Unresolved chronic kidney disease stage 3,4 and 5 • Unresolved diabetes mellitus • Unresolved immunosuppression diagnosis • Immunosuppression procedure in the last 12 months • Chronic Liver disease • Chronic neurological disease • Pregnant in the last 9 months (different cluster to clinically extremely vulnerable group) • In patients aged 16 and over : BMI of 40+ in the last 12 months • In patients aged 16 and over : Latest BMI in the last 3 years was 40+ • Learning disability (including Down's) • Has a "requires flu vaccination" code • Identified as a healthcare worker in the last 12 months • Household contact of an immunocompromised individual <p>Other Potentially clinically Vulnerable patients</p> <ul style="list-style-type: none"> • Unresolved hypertension • Pulmonary hypertension • Dementia • Systemic lupus • Discoid and non-systemic lupus • Psoriasis • Rheumatoid arthritis and associated disorders |
| | <p>Additional Data items for Patients from the above groups</p> <ul style="list-style-type: none"> • Latest ethnic category code (all groups) • Earliest code indicating that the patient has died (all groups) • Latest smoking status (all groups) • Blood pressure from the last 2 years (all groups) • In patients aged 16 and over: all BMI and weight in last 5 years plus |

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| | <p>height (all groups)</p> <ul style="list-style-type: none"> • IFCC-HbA1c in the last 2 years (for diabetic patients in the flu group only) • Latest COPD resolved and admission codes (for COPD Patients in the clinically extreme vulnerable group only) • ACE inhibitors, ARBs and non-steroidal anti-inflammatory drugs in the last 12 months (all groups) • Latest asthma emergency admission codes (for asthma patients in flu group only) • Asthma-related drug treatments in the last 12 months (for asthma patients in the flu group only) |
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The Secretary of State has directed NHS Digital to collect, process and analyse data in connection with COVID-19 to support the Secretary of State's response to COVID-19 and support various COVID-19 purposes set out in the COVID-19 Public Health Directions 2020, 17 March 2020 (COVID-19 Direction) (as amended) (COVID-19) Direction) and below. This enables NHS Digital to collect data and analyse and link the data for COVID-19 purposes with other data held by NHS Digital. The rationale for changing the data extraction is that the initial data collection was based on an existing specification for flu vaccination eligibility. This data extraction was then refined in order to more accurately reflect the patients who are clinically extremely vulnerable to COVID-19 and also to minimise the data we are collecting. A further refinement of the data extraction has taken place leading to the inclusion of new data being extracted. This will provide information to inform vaccination programmes. This General Practice Extraction

Service (GPES) data will be extracted weekly and be used to assist in producing a weekly update of the SPL. The objective of this collection is on an ongoing basis to identify patients registered at General Practices who may be:

- clinically extremely vulnerable if they contract COVID-19
- at moderate or high risk of complications from flu or COVID-19.

The data collected will be analysed and linked with other data NHS Digital or other organisations hold to identify:

- a list of clinically extremely vulnerable patients who will be advised to take shielding measures to protect themselves. Advice given to these patients has been published by Public Health England and is available here: <https://www.gov.uk/government/publications/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19/guidance-on-shielding-and-protecting-extremely-vulnerable-persons-from-covid-19#what-do-we-mean-by-extremely-vulnerable>
- a list of patients at moderate or high risk of complications from flu to inform the flu call/recall vaccination programme.

Further information on the flu programme can be found here: [Coronavirus \(england.nhs.uk\)](https://www.gov.uk/government/coronavirus/coronavirus-flu-vaccination-programme)

The extract may also be used for future direct care purposes relating to the COVID-19 outbreak. The methodology NHS Digital has used to produce the SPL is explained in detail and is published on the NHS Digital SPL website page here:

<https://digital.nhs.uk/coronavirus/shielded-patient-list> Patients

added to the SPL will be contacted by post, email (and/or SMS message where this is necessary) by the NHS on behalf of the Chief Medical Officer, Chris Whitty, to:

- advise of the measures they can take to reduce their risk of contracting the virus and sign-post them to the Extremely Vulnerable Persons service operated by gov.uk at <https://www.gov.uk/coronavirus-extremely-vulnerable>

- offer a flu vaccination or to contact non-responders who remain unvaccinated (as per NHS England specifications for the service). The SPL will also be used to inform GPs of their individual patients on the SPL, by flagging those patient records on GP patient record systems. The SPL will be shared with a variety of other organisations involved in the care and support of those patients and for planning, commissioning and research purposes associated with COVID-19. Full details of those with whom information has been shared can be found on the NHS Digital SPL website here:

<https://digital.nhs.uk/coronavirus/shielded-patient-list/distribution>.

Requests by organisations to access record level data from this collection will be subject to Independent Group Advising on the Release of Data (IGARD) consideration. Data applicants will need to demonstrate they have a lawful basis to access the data for COVID-19 purposes.

Benefits of the collection

Organisations, including Government, health and social care organisations need to access this vital data for a range of COVID-19 purposes, to help plan, monitor and manage the national response to the COVID-19 pandemic, which will help save lives. COVID-19 purposes for which this data may be analysed and used may include: • understanding COVID-19 and risks to public health, trends in COVID-19 and such risks, and controlling and preventing the spread of COVID-19 and such risks • identifying and understanding information about patients or potential patients with, or at risk of COVID-19, information about incidents of patient exposure to COVID-19 and the management of patients with or at risk of COVID-19 including: locating, contacting, screening, flagging and monitoring such patients and collecting information about and providing services in relation to testing, diagnosis, self-isolation, fitness to work, treatment, medical and social interventions and recovery from COVID19. Data will be analysed and linked to other data held by NHS Digital or held by other organisations to which access to the data is granted for COVID-19 purposes, through the process described above. Data will be collected nationally from all General Practices by NHS Digital every week. All requests to access this data will be through Data Access Request Service (DARS). This will significantly reduce the burden on General Practice at a time when demand on resources is high, enabling General Practice to focus on delivering health care and support to patients. It will also reduce compliance burden and risk for General Practice associated with sharing data and complying with the terms of the general legal notice issued under the National Health Service (Control of Patient Information Regulations) 2002 (COPI), which applies to General Practices Patients facing the greatest risk if they contract COVID-19 and/or are in the moderate to high risk of complications from flu:

- will be identified and known to health organisations
- will have a greater awareness of the recommended preventative shielding measures
- will be able to follow clear advice

- will be able to ask for help and support, including social care support and essential food supplies, through the Extremely Vulnerable Persons service operated by gov.uk.

It will enable the SPL to be updated weekly to identify new patients and changes to patients on the List and will enable support provisions to be more dynamic and responsive to both social and clinical need.

It will also enable vital planning, commissioning, and research to be carried out for COVID-19 purposes. If patients facing the greatest risk follow advice, it is hoped that this will contribute to the delay and mitigation of the spread of COVID-19 and save lives.

Visitors to The Practice

We have an obligation to protect our staff and employees' health, so it is reasonable for staff at Lindley Group Practice to ask any visitors to our practice to tell us if they have visited a particular country, or are experiencing COVID-19 symptoms. This must only be in pre-approved circumstances and we would also ask all patients to consider government advice on the NHS 111 website and not attend the practice.

Where it is necessary for us to collect information and specific health data about visitors to our practice, we will not collect more information than we need, and we will ensure that any information collected is treated with the appropriate safeguards.

Review and Expiry of this Notice

This Notice will be reviewed on or before 30 September 2021 and may be extended by The Secretary of State. If no further notice is sent to Lindley Group Practice by The Secretary of State this Notice will expire on 31 March 2022.