

Access to Records (Subject Access Requests) Procedure

under

**Data Protection Act , General Data Protection Regulation and Access to Health
Records Act 1990**

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1. Rights of access to personal data

Individuals have the right, under the Data Protection Act (DPA) and General Data Protection Regulation (GDPR) to make requests (verbally or in writing for a copy of information) an organisation holds about them. This information may be held on computer, in a manual paper system, video, digital image, photograph, x-ray, email, text message or by any other new or existing medium or media. This is called a subject access request (SAR).

Anyone making such a request is also entitled to be given supplementary information including a description of the information held, what it is used for, who might use it, who it may be passed on to, and where the information was gathered from. The CCGs' Privacy Notice (available on the CCG websites) provides much of this supplementary information.

Both the Data Protection Act (DPA) and GDPR apply only to living people but there are limited rights of access to personal data of deceased people under the Access to Health Records Act 1990.

In addition to the above the GDPR provides the following rights for individuals:

- The right to be informed
- The right of access
- The right to rectification
- The right to erasure
- The right to restrict processing
- The right to data portability
- The right to object
- Rights in relation to automated decision making and profiling.

These rights are not absolute: for example, the right to erasure (also known as 'the right to be forgotten') does not apply to health or social care records. Requests from individuals wishing to exercise any of their rights under GDPR/DPA should be referred to the Senior Information Governance Specialist.

2. Personal data held by a Clinical Commissioning Group (CCG)

Personal data is information that relates to an individual who can be identified either directly or indirectly and includes any expression of opinion about the individual and

any indication of the intentions of the information holder or any other person in respect of the individual.

CCGs are a commissioning organisation and do not hold individual medical records except with consent as part of processes such as Personalised Commissioning, Individual Funding Requests and complaints or where there is a specific legal basis for doing so (e.g. s251). The organisation will also hold personal data relating to employees and contractors.

3. Subject Access Requests under the DPA and GDPR

3.1 Requests may be made verbally or in writing.

3.2 The CCG has provided a form for applicants to use which ensures all the relevant information is collected and recorded to assist the applicant and the CCG (see Appendix C) however, there is no requirement in law to use a specific form

3.3 There is no obligation for a subject to explain why they wish to access their own personal data

3.4 GDPR requires the identity of the person making the request to be verified using 'reasonable means' (see section 10.3)

3.5 The CCG must provide a copy of the information free of charge. However the CCG may charge a 'reasonable fee' when a request is manifestly unfounded or excess, particularly if it is repetitive. The fee must be based on the administrative cost of providing the information. Alternatively the CCGs have the right to refuse to respond in these circumstances.

Where the CCG refuse to respond, the CCG must explain the reasons why to the individual, informing them of their right to complain to the supervisory authority and to a judicial remedy without undue delay and at the latest within one month.

The subject access requirements of the DPA and GDPR are for the subject to receive personal data, rather than necessarily the documents that contain the data, although the provision of document copies is usually the best response.

GDPR mandates that the organisations provide requested information without delay and within a maximum of one month of receipt. The CCG may extend the period of compliance by a further 2 months where requests are complex or numerous.

However if this is the case you must inform the individual within one month of the receipt of the request and explain why the extension is necessary.

It should be noted that NHS best practice recommends disclosure within 21 calendar days.

3.6 Remote Access to Records- Where possible, organisations should be able to provide remote access to a secure self-service system which would provide the individual with direct access to his or her information.

The right to obtain a copy of information or to access personal data through a remotely accessed secure system should not adversely affect the rights and freedoms of others.

3.7 Large amounts of personal data - Where you process a large quantity of information about an individual the GDPR permits you to ask the individual to specify the information the request relates to.

The GDPR does not introduce an exemption for requests that relate to large amounts of data, but you may be able to consider whether the request is manifestly unfounded or excessive.

4. Requests under Access to Health Records Act 1990

4.1 Where the DPA and GDPR govern subject access to the personal data of living individuals, the Access to Health Records Act (AHRA) sets out the conditions under which third parties can access the medical records of people who have died.

4.2 The following categories of individuals have limited rights of access to deceased records under the AHRA:

- The patient's personal representative (executor or administrator of the deceased's estate)
- Any person who may have a claim arising out of the patient's death

4.3 A next of kin has no automatic right of access but professional codes of practice allow for a clinician to share information where concerns have been raised.

4.4 Guidance should be sought from the CCGs Caldicott Guardian or Senior Information Risk Owner (SIRO) in relation to requests for deceased records

5 Access requests for minors

5.1 A child of any age may make a Subject Access Request in relation to their own personal data, if they are considered competent under Gillick/Fraser guidelines by a clinician. Further guidance in relation to the rights of children under GDPR is available on the [Information Commissioner's website](#).

5.2 Those with parental responsibility for a child under 13 years may make an access request on their behalf but the information holder must consider whether it is in the best interests of the child to disclose information held. This also applies where

a child age 13 or over, up to the age of 16, is deemed not competent under Gillick/Fraser guidelines by a clinician following assessment.

5.3 Where a child is considered capable of making decisions about access to his or her medical record, the consent of the child must be sought before a parent or other third party can be given access via a SAR.

6. Access requests for those who lack capacity to consent

6.1 In certain circumstances a person acting as an advocate can seek access to personal information in so far as it is necessary or relevant to their role. This includes;

- Persons appointed by the Court of Protection
- Persons holding a registered power of attorney for health and welfare (not just for financial and property matters).
- Persons appointed as independent mental health advocates under the Mental Capacity Act 2005

7. Third party requests for access to personal data

7.1 There are a number of organisations concerned with law enforcement, crime prevention, fraud and taxation who have a right to request information from NHS Organisations under the provisions of Data Protection Act Schedule 2 Part 1 and GDPR Article 23 These requests should be dealt with on an individual basis which balances the public interest against the confidentiality rights of the subject. Any request under Schedule 2(1) or Article 23 should be authorised by an appropriately senior enforcement officer (an Inspector of Police or equivalent rank in other services) and should be accompanied by sufficient information to enable an informed decision to be made within the CCGs either by the Caldicott Guardian or SIRO. (To state a serious crime is not sufficient and more detail must be given.)

The Information Commissioner is expected to produce detailed guidance on Schedule 2(1) request handling.

Detailed guidance on Article 23 request handling:

<http://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32016R0679&from=EN>

7.2 The coroner may request access to medical or staff records and is deemed to be acting in the public interest.

7.3 The CCGs should take a pro-active approach to the sharing of information relevant to the safeguarding of children and vulnerable adults.

7.4 A number of other organisations including the Health and Safety Executive, Health Service Ombudsman and the Care Quality Commission may have rights of access in relation to enquiries being conducted. Advice should be sought from the Caldicott Guardian, SIRO or the eMBED IG Team.

7.5 Follow any locally agreed information sharing protocols and National Guidance

7.6 Information may be shared with local and national counter fraud specialists in relation to actual or suspected fraud in the NHS.

8. Access to Corporate Information

The CCGs are public authorities and are subject to the provisions of the Freedom of Information Act 2000 and the Environmental Information Regulations 2004.

Personal data is usually exempted from public disclosure but in certain circumstances some personal data may be disclosed in the public interest but still subject to the individual's rights under the Data Protection Act and GDPR. Contact the eMBED FOI Team at embed.foi@nhs.net for advice.

9. Procedure

9.1 Receipt of an access request (SAR)

- Advise the Head of Governance who will advise who is the trained lead to oversee and be the point of reference for the processing of the request. The CCG has trained leads for Personalised Commissioning and safeguarding.
- Check that the request relates to personal data of a type likely to be held by the CCGs.
- Consider whether the requester has supplied sufficient information to identify the data required. If not seek clarification before processing further (see section 10.3 and Appendix C).
- Consider whether you have sufficient evidence of identity of either the subject themselves or a third party authorised to act on their behalf. (see section 10.3 and Appendix C).
- In the case of a third party, consider whether they meet the legal criteria to make a request and whether they have supplied evidence to that effect. (See sections 5,6 and 7)

- Record the request in an appropriate spreadsheet or database (see SAR Checklist **Appendix B**) to include date of receipt and due date for a reply.
- Arrangements should be in place for the safe and secure storage of access requests and responses with appropriate limited access provision.

9.2 Acknowledgement of request

- If you have enough information to process the request, send an acknowledgement letter advising the requester of the expected timescale. A template acknowledgement letter is provided at Appendix D.
- If further clarification, information, documentation or fees are required then request these as soon as possible by sending the requester **Appendix C** to complete.
- Make a record of your actions.
- If the CCGs do not hold the information, notify the requester in writing as soon as possible and give advice and assistance where possible as to the possible location of the record.

9.3 Establishing identity

Under GDPR, the identity of the person making the request must be verified using 'reasonable means'. To help establish identity the application must be accompanied by photocopies of **two** official documents which between them clearly show the requester's **name, current postal address, date of birth and signature**. For example: birth certificate, driving licence, passport, medical card, bank statement, utility bill or rent agreement. It will assist with processing the application if one of the proofs is a photographic identity document such as a passport or driving licence.

Additional documents may be required from third parties to establish their legal right to make an Access Request (SAR).

9.4 Collating the data

- Consider where the information may be held and ask the relevant staff to conduct a search within the parameters of the request details
- Ensure both electronic and manual filing systems are considered along with email, digital records, CCTV Images, telephone recordings and other media options
- There is no exemption for potentially embarrassing information to be redacted nor for the removal of personal comments from records. It is a criminal offence to alter, block or destroy information after receipt of a (SAR).

- Information must be in an intelligible form and explanations should be provided for pseudonyms, abbreviations etc.

9.5 Potential redactions or refusals

- All clinical data should be reviewed by a clinician and consideration should be given to redacting any information likely to cause serious harm to the mental or physical health of any individual.
- Information supplied by third parties, e.g. family members, should usually be redacted.
- Data and information held from other agencies may be disclosable but should be discussed with the originating body first.
- Any information subject to Legal Professional Privilege should not be disclosed.
- Information should not be disclosed where there is a statutory or court restriction on disclosure e.g. adoption records.
- References written for current or former employees are exempt (but not those received from third parties).
- In the case of deceased records, information should not be disclosed where the entry in the records makes it clear that the deceased expected the information to remain confidential.
- A personal record may also contain reference to third parties and redaction should be considered by balancing the Data Protection rights of all parties.

9.6 Responding to the request

Use the SAR Checklist at Appendix 3 to ensure that the response complies with all legal requirements. Essentially, this will involve the following steps:

- Check that you have received any additional supporting documentation requested at the time of acknowledgement.
- Send a holding letter with an explanation of if it seems likely that the target date will be breached.
- Send the response to the requester explaining the information supplied using **Appendix E** as a template.

All responses must address the following questions:

- a) Why are we holding your information?
- b) What information are we holding (list all information being held & the source if not collected from the data subject)?

c) Has any of your information been shared with any third parties (a person or group besides the two primarily involved)?

d) The length of time we will be keeping your records?

- If the request is made electronically you should provide the information in a commonly used electronic format.
- Make a record of the response, including any redactions or exempted information and ensure that you have a clear record of documents disclosed including copies of any redacted documents.
- Ensure that the requester is advised of his right to complain about the response given to his request and the way in which he can do this.
- Be prepared to facilitate a meeting to explain the records if necessary.
- Complete the SAR Checklist (**Appendix B**) and provide a copy to Sarah Dick, Head of Governance.

9.7 Summary of procedure

- Determine if it is an Access Request (SAR)
- Confirm the requester's identity
- Ensure that you have sufficient information to find records wanted
- Record the request and note due date
- Acknowledge the request
- Is information held on this person?
- Will the information change from receiving to responding to the request?
- Remove any 3rd party information
- Is the information exempt?
- Explain any codes, complex terms and abbreviations
- Have a health professional check the record before disclosure
- Keep a record of exact information disclosed
- Complete the SAR Checklist (**Appendix B**) and provide a copy to Sarah Dick, Head of Governance

10. Associated Documents (Policies, protocols and procedures)

This policy should be read in conjunction with:

- Information Governance Strategy
- Information Governance Policy and Management Framework
- Records Management and Information Lifecycle Policy
- Freedom of Information Act and Environmental Information Regulations Policy
- Information Security Policy

- Network Security Policy
- Integrated Risk Management Framework
- Incident Reporting Policy
- Business Continuity Plan
- Disciplinary Policy
- Anti-Fraud, Bribery and Corruption Policy
- Raising Concerns Policy
- Internet and Social Media Policy
- Incident Reporting Policy

And their associated procedures (including but not limited to):

- Information Sharing Protocol
- Freedom of Information Procedures
- Privacy Impact Assessment and IG Checklist
- Safe Transfer Guidelines and Procedure
- Incident Management, Investigation and Reporting Procedures

This policy should be read in conjunction with the Information Governance and Data Security User Handbook which has been shared with all staff and for which new staff will need to sign for receipt and confirm that they have read the document.

11. Public Sector Equality Duty

The Equality Act 2010 includes a general legal duty to:

- Eliminate unlawful discrimination, harassment victimisation and any other conduct prohibited under the Act
- Advance equality of opportunity between people who share a protected characteristic and people who do not share it
- Foster good relations between people who share a protected characteristic and people who do not have it

The protected characteristics are:

- Age
- Disability
- Gender reassignment
- Marriage or civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation



Public bodies have to demonstrate due regard to the general duty. This means active consideration of equality must influence the decisions reached that will impact on patients, carers, communities and staff.

It is no longer a specific legal requirement to carry out an Equality Impact Assessment on all policies, procedures, practices and plans but, as described above, the CCGs do need to be able to demonstrate they have paid due regard to the general duty.

The procedure sets out the CCGs' overall approach to the management of Subject Access Requests. It is not believed that this procedure will impact on or affect differently or adversely any of the groups with protected characteristics.

Appendix A- Subject Access Request – Summary Guidance

GENERAL DATA PROTECTION REGULATION

THE RIGHT OF ACCESS (SUBJECT ACCESS REQUESTS)

Questions	Requirements
What is the purpose of the right of access under GDPR?	It allows individuals to access their personal data so that they are aware of and can verify the lawfulness of the processing of their data
Can I charge for dealing with a subject access request?	You must provide a copy of the information free of charge under the new law. However you can charge a 'reasonable fee' when a request is manifestly unfounded or excessive but the fee must be based on the administrative cost of providing the information
How long do I have to comply?	Information must be provided without delay and at the latest within one month of receipt of the request. You can extend the period by a further two months where requests are complex or numerous however you must inform the individual within one month and explain why the extension is necessary
What if the request is manifestly unfounded or excessive?	You can: <ul style="list-style-type: none"> • Charge a reasonable fee taking into account the administrative costs of providing the information; or • You can refuse to respond (you must explain why to the individual and inform them of their right to complain to the ICO and to a judicial remedy)
How should the information be provided?	You must verify the identity of the person using 'reasonable means' If the request is made electronically you should provide the information in a commonly used electronic format Where possible organisations should be able to provide remote access to a secure self-service system which would provide the individual with direct access to his or her information
What about requests for large amounts of personal data?	You are permitted to ask the individual to specify the information the request relates to, however there isn't an exemption for requests that relate to large amounts of data, but you may be able to consider whether the request is manifestly unfounded or excessive

Appendix B- SARS Checklist

Data Protection Act/GDPR and Access to Records Procedures Checklist:

Please send a copy of the completed SAR Checklist to Sarah Dick, Head of Governance and retain a copy for your own records.

SAR Reference Number (<i>contact the Governance Team for reference number:</i>)		
	Yes	No
Is this a valid Subject Access request?		
Has the request been made verbally or in writing?		
Has the request been made verbally or in writing?		
Date received		
Acknowledgment sent to requestor		
Date response sent to requestor		
Number of days taken to respond (1 calendar month)		
Do you have enough information to be sure of the requester's identity?		
Do you have enough information to be sure of the requester's identity?		
Do you have the information the requester wants?		
Do you have the information the requester wants?		
Are you obliged to supply the information?		
Are you obliged to supply the information?		
Basic details of Information requested		
Basic details of Information requested		
Is there any personal data being processed?		
Is there any personal data being processed?		
Has the requestor been supplied with a description of the personal data, the reasons it is being processed, and whether it will be given to any other organisations or people?		
Has the requestor been supplied with a description of the personal data, the reasons it is being processed, and whether it will be given to any other organisations or people?		
Has the requestor been given a copy of the personal data?		
Has the requestor been given a copy of the personal data?		
Has the requestor been given details of the source of the data (which organisation the information has come from)?		
Has the requestor been given details of the source of the data (which organisation the information has come from)?		
Has the requestor been given the reasoning behind any automated decisions taken about him or her, such as a computer-generated decision to grant or deny credit, or an assessment of performance at work?		
Has the requestor been given the reasoning behind any automated decisions taken about him or her, such as a computer-generated decision to grant or deny credit, or an assessment of performance at work?		
Do you need more information from the requester to find what they want?		
Do you need more information from the requester to find what they want?		

Date this request for this information was sent back to requester		
Date the information was received back from requester		
	Yes	No
Will the information be changed between receiving the request and sending the response?		
Does the information requested include information about other people?		
Does the information contain any complex codes or terms?		
Have these codes and terms been explained to the requester?		
Is any of the information exempt from subject access?		
Is redacting required?		
Has the requester sent a SAR before?		
Date of last SAR		
Method of supplying information:		
Online and electronic formats		
Onsite viewing facilities		
Copy differentiation		
Any exemptions or restrictions?		
Details of exemptions or restrictions		
Any information being withheld?		
Reason for information being withheld		
Has the information been reviewed by an appropriate clinician or manager prior to release		
Date of review:		

Appendix C - REQUEST TO ACCESS PERSONAL RECORDS

The form should be filled out in block capitals or in type.

(Subject Access Request under the Data Protection Act / General Data Protection Regulation)

Please note for health records requests: NHS Airedale, Wharfedale and Craven Clinical Commissioning Group, Bradford City Clinical Commissioning Group and NHS Bradford Districts Clinical Commissioning Group are commissioning organisations and not healthcare providers. Health records will be held by the healthcare providers in Bradford and you would need to contact them directly to request records (contact details are shown in section 6 (page 4 of this application form)).

Section 1: Details of person whose records are being requested

Surname:

Former Surname:

First names:

Title: **Mr/Mrs/Ms/Miss**

Date of Birth:

NHS Number:

Current Address:

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.....

Former Address :

(if applicable)

.....

Section 2: Applicant details (if making a request on behalf of the person above)

Name:

Address:
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.....

Relationship to person in section 1:

Section 3: Further Information

Please try and tell us what specific information you wish to see and provide as many details as possible so that we can identify your records as quickly as possible e.g. dates, department, Location

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Section 4: Consent

Please tick **one** of following boxes and sign below:

I confirm I am the person mentioned in section 1 and I require access to my personal records.	
I confirm I am the person mentioned in section 1 and I authorise the release of copies of my personal records (described in section 3) to the person mentioned in section 2.	

I confirm that I am the person mentioned in section 2 and I have parental responsibility for the child in section 1.	
I confirm I am the person mentioned in section 2 and have been authorised to act as an agent/power of attorney for the patient in section 1.	

Print

Name:

Signature:

Date:

Section 5: Evidence

Evidence of the patients and/or the patient's representative identity will be required; this will require **two** items of documentation, examples of which are given below:

Type of applicant	Type of documentation required
An individual applying for their own records.	Two copies of identity required e.g. copy of birth certificate, passport, driving license, medical card etc.
Someone applying on behalf of an individual.	One item of proof of the patient's identity and one items of proof of the patient's representative identity (examples above).
Person with parental responsibility applying on behalf of their child.	Copy of birth certificate, correspondence addressed to the person with parental responsibility relating to the patient.
Power of attorney/agent applying on behalf of an individual.	Copy of court order authorising power of attorney/agent plus proof of the patient's identity (examples above).

Please return the form to:

Sarah Dick, Head of Governance, Douglas Mill, Bowling Old Lane, Bradford BD5 7JR

Or email: sarah.dick@awcccg.nhs.uk

Please note:

- A completed form will contain confidential information, therefore where sending by letter - to provide more security during the transit of a letter it is advisable that the form is sent by recorded or special delivery and the envelope marked "private and confidential".
- If you are intending to send the form via email, the transit of the email (if sending from a home email address or company email) will be in most cases be via insecure email domains and therefore 100% security of the information cannot be assured during transfer.

Section 6: Contact details for Health Records (Health providers)

Please note: this application form is for NHS Airedale, Wharfedale and Craven Clinical Commissioning Group, Bradford City Clinical Commissioning Group and NHS Bradford Districts Clinical Commissioning Group only. The other trusts below will all have their own application process.

Community healthcare services (Bradford District Care Trust)

The records that Bradford District Care Trust hold are community based records such as Health Visiting and District nursing records. They also hold records for specialist community clinics such as speech and language, audiology, Podiatry etc. which can be run from locations such as health centres.

The contact details are:

Information Governance Manager

Bradford District Care Trust

New Mill, Victoria Road,

Saltaire

West Yorkshire

BD18 3LD

Website: <http://www.bdct.nhs.uk/freedom-of-information/>

Email dpa.requests@bdct.nhs.uk

Telephone 01274 363 629

Secondary Care (Bradford Teaching Hospitals Foundation Trust and Airedale NHS Foundation Trust)

Records held by the acute trusts (secondary care provider) will include outpatient attendances; inpatient stays, day care, Accident and Emergency attendance all which usually take place at the hospital. Requests for these types of records should be made to the acute Trust itself.

Bradford Teaching Hospitals Foundation Trust includes Bradford Royal Infirmary, St Luke's Hospital, Westbourne Green, Westwood Park, Shipley Community Hospital and Eccleshill Community Hospital. The Trust also provides other services in the community (doctors, nurses, midwives and physiotherapists) and at various locations, ranging from GP practices to other neighbouring hospitals in Airedale, Halifax and Huddersfield.

The contact details are:

Jane Baxter (Assistant Patient Administration Manager)
Central Services (Medical Records)
St Luke's Hospital
Little Horton Lane
Bradford, West Yorkshire, BD5 0NA

Website: <http://www.bradfordhospitals.nhs.uk/about/freedom-of-information>

Email: ATHR.office@bthft.nhs.uk

Airedale NHS Foundation Trust provides acute, elective and specialist care services from the Trusts main hospital site, Airedale Hospital, as well as other locations across Yorkshire and East Lancashire.

The contact details are:

Airedale NHS Foundation Trust
Skipton Road,
Keighley,
West Yorkshire
BD20 6TD

Website: <http://www.airedale-trust.nhs.uk/contact-us/freedom-of-information/>

Primary care (GP records)

Records from visits to the GP or practice nurse will be held by the practice itself. Requests for these types of records should be made direct to the practice.

Mental Health and Learning Disability Services (Bradford District Care Trust)

The mental health trust provides specialist mental health and learning disability services, their contact details are:

Bradford District Care Trust
New Mill, Victoria Road,
Saltaire
West Yorkshire
BD18 3LD

Website: <http://www.bdct.nhs.uk/find-contact-us/contactus/>

Appendix D – Draft Acknowledgement Letter

SAR Ref: (Unique ID)

DATE

Name

Address

Dear

Access Request under the Data Protection Act, General Data Protection Regulation or Access to Health Records Act 1990.

Thank you for your request for information under the XXXXXX received on

This letter is to acknowledge receipt of the request addressed to NHS CCG on DATE. *In order to process your request I would be grateful if you could complete and return the attached form.*

On receipt of the completed form we would expect to forward a response to you within one calendar month dependent upon whether any clarification is needed and/or whether fees are to be charged. In such circumstances, the CCG will notify you as soon as possible of any fees which may be due.

Under the legislation there may be restrictions which the CCG is obliged to apply but these will be explained to you in our response.

Yours sincerely

SECTIONS IN ITALICS TO BE DELETED IF REQUEST IS ALREADY ON FORM OR IF IT IS COMPLETE IN ANOTHER FORMAT

Appendix E- Response Template

The below should be used as a template for responding to Subject Access Requests

SAR Ref: (Unique ID)

DATE

Name

Address

Dear

a) Why are we holding your information?

b) What information are we holding (list all information being held & the source if not collected from the data subject)?

c) Has any of your information been shared with any third parties (a person or group besides the two primarily involved)?

d) The length of time we will be keeping your records?

Appendix 3 of the Records Management Code of Practice for Health and Social Care 2016 sets out what people working with or in NHS organisations in England need to do to manage records correctly

<https://digital.nhs.uk/article/1202/Records-Management-Code-of-Practice-for-Health-and-Social-Care-2016>

You have the right to request your information be corrected/deleted (if incorrect) and you have the right to object to your information being processed.

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If you have any queries please do contact me again. Alternately should you wish to raise any concerns or wish to make a complaint please contact the Patient Support Team, their contact details as follows;

Telephone number on 01274 237562

email bradfordccgspatientsupport@bradford.nhs.uk

or write to: Patient Support Team, Douglas Mill, Bowling Old Lane, Bradford, BD5 7JR

If we are unable to resolve your complaint locally you can approach the Information Commissioners Office, details as follows:

Information Commissioner's Office

Wycliffe House

Water Lane

Wilmslow

Cheshire

SK9 5AF

Tel: 0303 123 1113 (local rate) or 01625 545 745 if you prefer to use a national rate number

Fax: 01625 524 510

<https://ico.org.uk/for-the-public/raising-concerns/>