

Activities of the CCG

Although this is not an exhaustive detailed listing, the following table lists key examples of the purposes and rationale for why we collect and process information:

Activity	Rationale and Legal Basis
Complaints	<p>Rationale We will process your personal information where it relates to a complaint where you have asked for our help or involvement.</p> <p>The information we will require when you make a complaint will be:</p> <ul style="list-style-type: none">· Your name, address and contact telephone number and those of the person that you may be complaining for; including their date of birth and NHS Number· A summary of what has happened, giving dates where possible· Which organisation provided the care or service· A list of issues that you are complaining about· What you would like to happen as a result of your complaint <p>Legal Basis The CCG has a duty as to the improvement in quality of services under Section 14R NHS Act 2006 and will rely on your explicit consent as the basis to undertake such activities.</p> <p>Complaint Process When we receive a complaint from an individual we make up a file containing the details of the complaint. This normally contains the identity of the complainant and any other individuals involved in the complaint.</p> <p>We will only use the personal information we collect to process the complaint and to check on the level of service being provided.</p> <p>We usually have to disclose the complainant's identity to whoever the complaint is about. This is inevitable where, for example, the accuracy of a person's record is in dispute. If a complainant doesn't want information identifying him or her to be disclosed, we will try to respect that. However, it may not be possible to process a complaint on an anonymous basis.</p> <p>We will keep personal information contained in complaint files in line with NHS retention policy. It will be retained in a secure environment and access to it will be restricted according to the 'need to know' principle.</p> <p>We may use service user stories, following upheld complaints, but the individual will remain anonymous. The service user stories will provide a summary of the concern, service improvements identified and how well the complaints procedure has been applied. Explicit consent will always be sought from the service user or carer or both before we use the service user story.</p> <p>Benefits Managing complaints enables the CCG to continuously improve the quality of the services we commission.</p> <p>Retention Period Information relating to complaints will be retained for 10 years after which time the</p>

	<p>information will be reviewed and if no longer necessary will be destroyed.</p> <p>‘Special Category’ Data Processed: Health</p>
<p>Individual Funding Request (IFR)</p>	<p>Rationale We will collect and process your personal information where we are requested to fund a specific treatment or service for a condition that is not already covered in our contracts.</p> <p>This is called an “Individual Funding Request” (IFR).</p> <p>‘Special Category’ Data Processed: Health</p> <p>Legal Basis The CCG has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as outlined in the National Health Service Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012 (SI 2012 No 2996) (Part 7-34 (1) and (2).</p> <p>The clinical professional who first identifies that you may need the treatment will explain to you the information that we need to collect and process in order for us to assess your needs and commission your care and will ask for your informed consent for personal clinical information to be shared with the CCG.</p> <p>Benefits The Individual Funding Request process allows the CCG to look at evidence for the safety and effectiveness of any treatment and ensures that the services we pay for will give patients the greatest health gains from the resources we have available.</p> <p>Retention Period: <input checked="" type="checkbox"/> NHS Records Management Code of Practice 2016</p> <p>Existence of Automated Decision Making: None</p>
<p>Continuing Healthcare</p>	<p>Rationale We will collect and process your identifiable information where you have asked us to undertake assessments for your continuing healthcare which is a package of care that is arranged and funded solely by the NHS for individuals who are not in hospital but have been assessed as having a “primary health need”.</p> <p>This is called “Continuing Health Care” (CHC)</p> <p>‘Special Category’ Data Processed: Health</p> <p>Legal Basis The CCG has a duty to have regard to the need to reduce health inequalities in access to health services and health outcomes achieved as outlined in the National Health Service Commissioning Board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulations 2012 (SI 2012 No</p>

2996) (Part 6-20-22).

The clinical professional who first sees you to discuss your needs will explain to you the information that they need to collect and process in order for us to assess your needs and commission your care and will ask for your informed consent for personal clinical information to be shared with the CCG.

Benefits

The CCG can arrange a care and support package that meets your assessed needs. The CCG can determine how your needs and care will be managed, where your care will be given e.g. in your own home or in a care home and identify which organization will be responsible for meeting your needs.

Retention Period

Information relating to Continuing Healthcare will be retained for 8 years after which time the information will be reviewed and if no longer necessary will be destroyed.

Existence of Automated Decision Making: None

Medicines Optimisation

Purpose/s of processing

To process a safe and robust service with authorised access to GP clinical systems to enable medicines optimisation pharmaceutical support for practices and patients

Medicines Optimisation is about ensuring that the right patients get the right choice of medicine at the right time. By focusing on patients and their experiences, the goal is to help patients to improve their outcomes, take their medicines correctly, avoid taking unnecessary medicines, reduce wastage of medicine and improve medicines safety. Ultimately medicines optimisation can help encourage patient to take ownership of their treatment.

To achieve the above we will process your personal data for the following purposes:

- To carry out direct patient-facing activities on behalf of or at the request of a GP or General Practice.
- To undertake analysis using specific criteria to identify individual patients that may benefit from a safer, more effective and / or more efficient medicinal regimes and approaches. This analysis may be carried out proactively or at the direct request of a General Practice and may lead to recommendations to the responsible clinician.
- To carry out administrative purposes which are necessary to ensure that the right payments are made and staff are suitably trained to undertake the work safely and effectively

‘Special Category’ Data Processed: Health

Legal Basis

The CCG will rely on the below legal basis to process personal data for the purposes of medicines optimisation:

- Health & Social Care Act 2012 (Section 251b) (duty to share)

	<ul style="list-style-type: none"> · NHS Act 2006 (Section 3a) (duty as to provision of certain services) · GDPR Articles 6(1)(e) and 9(2)(h) · Data Protection Act Schedule 1: health and social care purposes <p>Retention Period The CCG will hold your information for a period of 5 years. Before records are destroyed we will review information held and take into account any further retention periods which may oblige us to hold the information for a further period of time.</p> <p>Benefits The CCG can carry out Medicines Optimisation activities to ensure that patients receive prescribed items which are clinically effective and cost effective based on individual, local and national health population needs. We can also benchmark and share best practice at a practice level, locally and nationally to further improve our patients' experience of prescribed items and to the benefit of our local population.</p> <p>Existence of Automated Decision Making: None</p>
<p>Safeguarding</p>	<p>Rationale Safeguarding means protecting people's health, wellbeing and human rights, and enabling them to live free from harm, abuse and neglect. It is a key part of providing high-quality health and social care. The CCG will participate in Serious Case Reviews undertaken by either the local Children's Safeguarding Boards or the Adult Safeguarding Boards for continued learning, to minimize risk and to improve services.</p> <p>'Special Category' Data Processed: Health</p> <p>Legal Basis The CCG has a statutory responsibility under the Children Act 2004, Care Act 2014 and safeguarding provision within the Data Protection Act 2018 (Schedule 1, Part 2, Subsections 18 and 19) to ensure the safety of all children, and the safety of adults at risk of abuse and neglect.</p> <p>Benefits Safeguarding is a fundamental element of the CCGs commissioning plans and forms a core part of the commissioning assurance process.</p> <p>Retention Period The CCG will hold information for a period of 8 years following the closure of a case. Before records are destroyed we will review information held and take into account any serious incident retentions which may require us to hold the information for a further period of time. Each case will be reviewed on an individual basis.</p> <p>Existence of Automated Decision Making: None</p>
<p>Risk stratification</p>	<p>Rationale Risk stratification is a process that supports your family doctor (GP) to help</p>

you manage your health. By using selected information from your health records, a secure NHS hosted computer system will look at any recent treatments you have had in hospital or in the surgery, and any existing health conditions that you have. This will alert your doctor to the likelihood of a possible deterioration in your health. The clinical team at the surgery will use the information to help you get early care and treatment where it is needed. NHS security systems will protect your health information and patient confidentiality at all times.

The risk stratification process

Risk stratification tools use various combinations of historic information about patients, for example, age, gender, diagnosis, patterns of hospital attendance and admission, and primary care data collected in GP practice systems.

The CCG will use pseudonymised information to understand the local population needs, whereas GPs will be able to identify which of their patients are at risk in order to offer a preventative service to them.

The CCG has commissioned Sollis Partnership Ltd to conduct risk stratification on behalf of itself and its GP practices in partnership with South Central and West Commissioning Support Unity (SCW). There is a contract between the CCG and Sollis Partnership Ltd that requires Sollis to protect the security and confidentiality of the data.

This processing for risk stratification follows these steps:

- The CCG has asked NHS Digital to provide data identifiable by your NHS Number about your Acute Hospital attendances for risk stratification purposes and has signed an NHS Digital data sharing contract for the SUS (secondary use services) data. This data is provided via SCWCSU.
- Your GP practice instructs its GP IT system supplier to provide primary care data identifiable by your NHS Number for those patients that have not objected to Risk Stratification or there is no Type 1 objection made by the patient. The data is sent securely to Sollis Partnership Ltd.
- Within the secure system which is hosted on a SCW platform, the Sollis risk stratification process automatically links and pseudonymises the identifiable data from GPs and NHS Digital.

Sollis analyses the data in pseudonymised form to produce a risk score for each patient.

The risk scores are only made available to authorised users within the GP Practice where you are registered via a secure portal managed by Sollis.

This portal allows only the GPs to view the risk scores for the individual patients registered in their practice in identifiable form.

'Special Category' Data Processed: Health

Legal Basis: The use of identifiable data by CCGs and GPs for risk stratification has been approved by the Secretary of State, through the Confidentiality Advisory Group of the Health Research Authority and this approval has been extended to 2020 which gives us a statutory legal basis under Section 251 of the NHS Act 2006 to process data for risk stratification purposes which sets aside the duty of confidentiality. We are committed to conducting risk stratification effectively, in ways that are consistent with the laws that protect your confidentiality.

Benefits: CCGs and GPs use risk stratification tools as part of their local strategies for supporting patients with long-term conditions and to help and prevent avoidable admissions. Typically this is because patients have a long term

condition such as Chronic Obstructive Pulmonary Disease. NHS England encourages CCGs and GPs to use risk stratification tools as part of their local strategies for supporting patients with long-term conditions and to help and prevent avoidable admissions.

Knowledge of the risk profile of our population will help the CCG to commission appropriate preventative services and to promote quality improvement in collaboration with our GP practices.

Existence of automated decision making: There is profiling involved but no decision is taken about any individual without a 'human view' of the information.

Right to opt out of Risk stratification processing: Patients have a right to object to their information being used for risk stratification. The GP practice must make patients aware that their information is being used for this purpose and that they have a right to object. This information is required for compliance with Data Protection Legislation 'The Right to be informed'. NHS England guidance is that GP practices should provide information to patients explaining how their data will be used and what to do if they have any concerns or objections.

If you do not wish information about you to be included in our risk stratification programme, please contact your GP Practice. They can add a code to your records that will stop your information from being used for this purpose.

Further information about Risk Stratification is available from: [NHS England](#)

Invoice Validation

Rationale

The validation of invoices ensures that those who provide you with care and treatment can be paid the correct amount.

NHS Shared Business Services process invoices on behalf of NHS Gloucestershire CCG. SBS do not require and should not receive any patient confidential data to provide their services. However before payment can be made, the CCG need to validate the invoice – i.e. ensure that the treatment and amount is correct. In order to do this, personal confidential data is submitted by the health care provider to an approved and controlled secure environment within the CCG. Only certain data can be submitted, and only when it is necessary for the validation process. The identifier used for invoice validation is NHS number, or the local provider ID if the NHS number is not known to the provider, e.g. hospital number. We use this information to check that the relevant invoice is correct and ready to be paid by the CCG.

The CCG has a duty to detect, report and investigate any incidents where a breach of confidentiality has been made.

Personal data processed: NHS Number or local provider ID

'Special Category' Data Processed: None

Legal basis

The use of personal confidential data by CCGs for invoice validation has been

	<p>approved the Secretary of State for Health through the Confidentiality Advisory Group of the Health Research Authority and this approval has been extended to September 2018.</p> <p>For more information see: https://www.england.nhs.uk/ourwork/tsd/ig/inval/invoice-validation-faqs/</p> <p>Benefits</p> <p>The invoice validation process supports the delivery of patient care by ensuring that:</p> <ul style="list-style-type: none"> · service providers are paid for patients treatment, · enables services to be planned, commissioned, managed and subjected to financial control, · enables commissioners to confirm that they are paying appropriately for the treatment of patients for whom they are responsible · fulfilling commissioners duties of fiscal probity and scrutiny · enables invoices to be challenged and disputed or discrepancies resolved
<p>Patient and Public Involvement</p>	<p>Rationale</p> <p>If you have asked us to keep you regularly informed and up to date about the work of the CCG or if you are actively involved in our engagement and consultation activities or patient participation groups, we will collect and process personal confidential data which you share with us.</p> <p>This is called ‘Patient and Public Involvement’</p> <p>Where you submit your details to us for involvement purposes, we will only use your information for this purpose. You can opt out at any time by contacting us using our contact details at the end of this document.</p> <p>‘Special Category’ Data Processed: None</p> <p>Legal Basis</p> <p>Under the NHS Act 2006 Section 14Z2, the CCG has a duty, in relation to health services provided (or which are to be provided) under arrangements made by the CCG exercising its functions, to make arrangements so as to secure that individuals to whom the services are being (or may be) provided are involved at various specified stages.</p> <p>We will rely on your explicit consent for this purpose.</p> <p>Where you have agreed to participate in online surveys on our Citizen Space site, your information will be held for 6 months following the publication of survey results after which your information will be deleted.</p> <p>Records Retention</p> <p>Where you have provided us with your contact details for us to keep in touch, we will contact you periodically to ensure you are still happy for us to hold these details. If we do not hear back from you we will delete your information from our database.</p>
<p>Commissioning</p>	<p>Rationale</p> <p>This includes wider NHS purposes beyond the provision of direct care and</p>

treatment to you, such as managing and funding the NHS, monitoring activity to understand and plan the health needs of the population, and to gain evidence that will improve health and care through research.

Legal Basis

Under the Health & Social Care Act 2012 the CCG has a statutory legal basis for collecting and processing information for the purposes of commissioning.

Processing Activities

Hospitals and community organisations that provide NHS-funded care are legally and contractually obliged to submit certain information to NHS Digital about services provided to our service users.

This information is generally known as commissioning datasets. The CCG obtains these datasets from NHS Digital and they relate to service users registered with GP Practices that are members of the CCG.

These datasets are used in a format that does not directly identify you, for wider NHS purposes such as managing and funding the NHS, monitoring activity to understand and plan the health needs of the population, and to gain evidence that will improve health and care through research.

The datasets include information about the service users who have received care and treatment from those services that we are responsible for funding. The CCG is unable to identify you from these datasets. They do not include your name, home address, NHS number, post code or date of birth. Information such as your age, ethnicity and gender, as well as coded information about any clinic or accident and emergency attendances, hospital admissions and treatment will be included.

The specific terms and conditions and security controls that we are obliged to follow when using these commissioning datasets can also be found on the [NHS Digital website](#).

We also receive similar information from GP Practices within our CCG membership that does not identify you.

Benefits

We use these datasets for a number of purposes such as:

- Performance managing contracts;
- Reviewing the care delivered by providers to ensure service users are receiving quality and cost effective care;
- To prepare statistics on NHS performance to understand health needs and support service re-design, modernisation and improvement;
- To help us plan future services to ensure they continue to meet our local population needs;
- To reconcile claims for payments for services received in your GP Practice;
- To audit NHS accounts and services.

If you do not wish your information to be included in these datasets, even though it does not directly identify you to us, please contact your GP Practice and they can apply a code to your records that will stop your information from being included.

Primary and

Rationale

Secondary Care

We commission a number of organisations to provide primary and secondary healthcare services to you. These organisations may be within the NHS or outside the NHS.

Primary Care services cover GP Practices, Dental Practices, Community Pharmacies and high street Optometrists.

Secondary Care services are usually (but not always) delivered in a hospital or clinic with the initial referral being received from Primary Care.

These organisations may share identifiable, pseudonymised, anonymised, aggregated and personal confidential data information with us for the following purposes:

- To look after the health of the general public such as notifying central NHS groups of outbreaks of infectious diseases
- To undertake clinical audit of the quality of services provided
- To carry out risk profiling to identify patients who would benefit from proactive intervention
- To perform case management where the NHS offers intervention and integrated care programmes involving multiple health and social care providers
- To report and investigate, complaints, claims and untoward incidents
- To prepare statistics on our performance for the Department of Health
- To review our care to make sure that it is of the highest standard

Legal Basis

The Health & Social Care Act 2012 allows us to collect your information, which will only be accessed by a limited number of authorised staff and not disclosed to other organisations. We will never share your personal information unless a legal basis has been identified for the different purposes of sharing or we have obtained your explicit consent.

Benefits

Through sharing information ethically and lawfully the NHS is able to improve its understanding of the most important health needs and the quality of the treatment and care provided.