



National screening and reporting programs

Privacy Notice

Summary

The NHS provides national screening and reporting programmes so that certain diseases can be detected at an early stage. These currently apply to bowel cancer, breast cancer, aortic aneurysms and diabetic retinal screening service as well as other exempt programmes. The law allows us to share your contact information with Public Health England and NHS England so that you can be invited to the relevant screening programme and so that nationally exempted programmes can operate effectively with regards to public and patient health.

More information can be found at: <u>https://www.gov.uk/topic/population-screening-programmes</u> or <u>https://digital.nhs.uk/services/national-data-opt-out/compliance-with-the-national-data-opt-out</u> (select link for Data Uses and Releases Compendium) or speak to the practice.

Details of processing

Purpose of the sharing

The NHS provides several national health screening and reporting programs to detect diseases or conditions earlier such as; cervical and breast cancer, aortic aneurysm and diabetes. More information can be found at https://www.gov.uk/topic/population-screening-programmes The information is shared to ensure only those who should be called for screening are called and or those at highest risk are prioritised.

Lawful basis for processing

The sharing is to support Direct Care which is covered under:

Article 6(1)(e); "necessary... in the exercise of official authority vested in the controller' the processing is necessary to perform a task in the public interest

and

Article 9(2)(h) 'necessary for the purposes of preventative or occupational medicine for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services..."

or

Article 9(2)(i) 'processing is necessary for reasons of public interest in the area of public health, such as protecting against serious cross-border threats to health or ensuring high standards of quality and safety of health care and of medicinal products or medical devices...'





We will also recognise your rights established under UK case law collectively known as the "Common Law Duty of Confidentiality" *

Recipient or categories of recipients of the shared data

The data will be shared with national and research bodies as allowed by law.

Retention period

GP medical records will be kept in line with the law and national guidance e.g., Public Health England

Your rights

Right to object

You have the right to object to this processing of your data and to some or all of the information being shared with the recipients. Contact the Controller or the practice. For national screening programmes: you can opt so that you no longer receive an invitation to a screening programme.

See: <u>https://www.gov.uk/government/publications/opting-out-of-the-nhs-population-</u><u>screening-programmes</u>

Or speak to your practice.

Right to access and correct

You have the right to access the data that is being shared and have any inaccuracies corrected. There is no right to have accurate medical records deleted except when ordered by a court of Law.

Right to Complain

You have the right to complain to the Information Commissioner's Office, you can use this link <u>https://ico.org.uk/global/contact-us</u> or calling their helpline Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate).

National Data Opt Out

Whenever you use a health or care service, such as attending Accident & Emergency or using Community Care services, important information about you is collected in a patient record for that service. Collecting this information helps to ensure you get the best possible care and treatment.

The information collected about you when you use these services can also be used and provided to other organisations for purposes beyond your individual care, for instance to help with:

- improving the quality and standards of care provided
- research into the development of new treatments
- preventing illness and diseases
- monitoring safety
- planning services

This may only take place when there is a clear legal basis to use this information. All these uses help to provide better health and care for you, your family and future generations.





Confidential patient information about your health and care is only used like this where allowed by law.

Most of the time, anonymised data is used for research and planning so that you cannot be identified in which case your confidential patient information isn't needed.

You have a choice about whether you want your confidential patient information to be used in this way. If you are happy with this use of information you do not need to do anything. If you do choose to opt out your confidential patient information will still be used to support your individual care.

To find out more or to register your choice to opt out, please visit <u>www.nhs.uk/your-nhs-data-matters</u>. On this web page you will:

- See what is meant by confidential patient information
- Find examples of when confidential patient information is used for individual care and examples of when it is used for purposes beyond individual care
- Find out more about the benefits of sharing data
- Understand more about who uses the data
- Find out how your data is protected
- Be able to access the system to view, set or change your opt-out setting
- Find the contact telephone number if you want to know any more or to set/change your opt-out by phone
- See the situations where the opt-out will not apply

You can also find out more about how patient information is used at:

<u>https://www.hra.nhs.uk/information-about-patients</u> (which covers health and care research); and <u>https://understandingpatientdata.org.uk/what-you-need-know</u> (which covers how and why patient information is used, the safeguards and how decisions are made)

You can change your mind about your choice at any time.

Data being used or shared for purposes beyond individual care does not include your data being shared with insurance companies or used for marketing purposes. Data would only be used in this way with your specific agreement.

Contact details

| Controller Contact Details | Penrose Health | 3 Kingfisher Square Staunton Street, London SE8 5DA | 020 8318 0190 privacy.penrosehealth.co.uk |
|-------------------------------|-----------------|---|--|
| Data Protection Officer | Claire Clements | 1 Lower Marsh, 3rd Floor, Lower Marsh, Waterloo, London, SE1 7NT | <u>claireclements@nhs.net</u> |





* "Common Law Duty of Confidentiality", common law is not written out in one document like an Act of Parliament. It is a form of law based on previous court cases decided by judges; hence, it is also referred to as 'judge-made' or case law. The law is applied by reference to those previous cases, so common law is also said to be based on precedent.

The general position is that if information is given in circumstances where it is expected that a duty of confidence applies, that information cannot normally be disclosed without the information provider's consent.

In practice, this means that all patient information, whether held on paper, computer, visually or audio recorded, or held in the memory of the professional, must not normally be disclosed without the consent of the patient. It is irrelevant how old the patient is or what the state of their mental health is; the duty still applies.

Three circumstances making disclosure of confidential information lawful are:

- where the individual to whom the information relates has consented;
- where disclosure is in the public interest; and
- where there is a legal duty to do so, for example a court order.