



GDPR Practice Privacy Notice

What you can expect from your practice.

This guide tells you what to expect from your general practice (GP) and how you can help them, so you get the best from the National Health Service (NHS). More details can be found through the links below.

When and how can you contact your general practice?

Your general practice is open from **8.00am to 6.30pm, Monday to Friday**.

Throughout these hours you, or your carer on your behalf, can:

- Visit the practice
- Call them
- Go online using the practice's website or the **NHS App**.

You can choose the way you contact your practice based on what is best for you. Some practices may have longer hours or may ask that you contact them via phone or in person for urgent queries.

What if the practice is closed?

If you need urgent help for your physical or mental health when the general practice is closed, and you cannot wait until they open, go online to 111.nhs.uk or call **111**. They will tell you what to do next.

What if it's an emergency?

If it's a serious or life-threatening emergency, go straight to **A&E** (Accident and Emergency) or call **999**.

What happens when you contact your practice to request an appointment?

Whether you make your request by phone, on-line or visiting your practice, you may be asked to give your practice some details so that they can assess what is best for you based on your clinical need. The practice team will consider your request for an appointment or medical advice and tell you **within one working day** what will happen next.

This could be:

- An appointment that day or a subsequent day
- A phone call that day or a subsequent day
- A text message responding to your query



Do you need ID or proof of address?

No, you do not need ID, an NHS number or proof of address. It can help the practice if you do, but it is not needed to register or see a GP. You can also register with a practice if you are homeless.

Can a practice say no to registering you?

They must write to you within **14 days** if they say no and explain why. A practice can only say no for a good reason, like if you live too far away or their patient list is closed. For example, they **cannot** say no for reasons such as immigration status, not having a permanent address, or for reasons connected with other characteristics protected under equalities legislation.

Can you choose which hospital or clinic you are referred to?

If your GP needs to refer you for a physical or mental health condition, in most cases you have the right to choose the hospital or service you'd like to go to. You can get further information on your right to choose [on the nhs.uk website](https://www.nhs.uk).

If you are new to the UK

You can still register with a GP. It's free to use and your **immigration status does not affect your right to register with a GP**.

If you are away from home but still in the UK

If you are away from home for more than 24 hours (but less than 3 months), you can register as a **temporary patient** near where you're staying.

You can also change your nominated pharmacy so you can get your medicine nearby. You can do this by contacting your practice or via the NHS App.

Do general practices charge for anything?

NHS GP services are **free**. Sometimes, if you ask the GP to do private work (like writing a letter for insurance), they may charge a fee.

How should everyone be treated?

The practice should treat everyone fairly, kindly and respectfully. Likewise, you should also treat staff with respect. The practice can remove patients from their list if they are violent or abusive to staff.

To learn more about your rights, you can read the [NHS Constitution](https://www.nhs.uk).

How can you help your general practice?



NHS App

You can access Rapid Health on the NHS App using your NHS login details.

If you sign in using NHS login, we will ask your permission to share your NHS login information with our service. This allows us to fill in some personal details for you, such as your name, date of birth and contact details.

We will not use your NHS login information for any other purposes. You can only share your NHS login information if you have proved your identity to NHS login.

You can choose not to share your NHS login information with Rapid Health but you will need to enter your information yourself whilst using the service.

For more information, see the [NHS login privacy notice](#) and [NHS login terms and conditions](#).

Wootton Medical Centre (the Practice)

Data Protection Privacy Notice for Patients

Introduction:

This privacy notice lets you know what happens to any personal data that you give to us, or any information that we may collect from you or about you from other organisations.

This privacy notice applies to personal information processed by or on behalf of the practice.

This Notice explains

- Who we are and how we use your information
- Information about our Data Protection Officer
- What kinds of personal information about you we hold and use (process)
- The legal grounds for our processing of your personal information (including when we share it with others)
- What should you do if your personal information changes?
- For how long your personal information is retained / stored by us?
- What are your rights under Data Protection laws

The UK General Data Protection Regulation (UKGDPR) and the Data Protection Act 2018 (DPA 2018) became law on 25th May 2018, and 1st January 2021 when the UK exited the EU.

For the purpose of applicable data protection legislation (including but not limited to the General Data Protection Regulation (Regulation (UK) 2016/679) (the "UKGDPR"), and the Data Protection Act 2018 the practice responsible for your personal data is Wootton Medical Centre.



How do we lawfully use your data?

We need your personal, sensitive and confidential data in order to provide you with healthcare services as a General Practice, under the General Data Protection Regulation we will be lawfully using your information in accordance with: -

Article 6, e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller;"

Article 9, (h) processing is necessary for the purposes of preventive 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

This Privacy Notice applies to the personal data of our patients and the data you have given us about your carers/family members.

We use your personal and healthcare information in the following ways:

- when we need to speak to or contact other doctors, consultants, nurses, or any other medical/healthcare professional or organisation during your diagnosis or treatment or ongoing healthcare; this includes the use of telephone or video consultation.
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- when we are required by law to hand over your information to any other organisation, such as the police, by court order, solicitors, or immigration enforcement.
- In a de-identified form to support planning of health services and to improve health outcomes for our population

We will never pass on your personal information to anyone else who does not need it, or has no right to it, unless you give us consent to do so.

Legal justification for collecting and using your information

The law says we need a legal basis to handle your personal and healthcare information.

Contract: We have a contract with NHS England to deliver healthcare services to you. This contract provides that we are under a legal obligation to ensure that we deliver medical and healthcare services to the public.

Consent: Sometimes we also rely on the fact that you give us consent to use your personal and healthcare information so that we can take care of your healthcare needs.



AccuRX

As part of the Digital First National programme of work, GP Practices are required to provide a tool for patients to access primary care services.

The aim of the Accurx platform is to improve communications between healthcare staff and patients resulting in improved outcomes and productivity. The platform facilitates digital communications between the practice and our patients.

Using the Accurx platform will require the processing of special category data by Accurx, their sub-processors and by default the GP Practice as a Controller. This will include; exchanging and storing messages in relation to patients and medical staff, performing video consultations (these will not be recorded or stored) between healthcare staff and their patients. This will allow you to respond to the Practice in multiple ways such as; free text, questionnaires and submitting images/documents.

If you have a non-urgent healthcare concern or need to contact the Practice for any medical or admin reason, click on the online via our website or [via NHS app](#) or [via NHS website](#). Fill out the online form, which will then be reviewed and processed by our healthcare professionals to decide the right care for you. We will respond to every online request 2 working days.

Accurx is approved by NHS England to be used by GP practices and the other systems involved in patient care. NHS England has a lengthy assurance process to make sure they meet the highest standards of safety and security. Your data is safe and is shared only with your GP Practice for the purposes of your direct care. Your data is stored and sent securely using industry best practices, and Accurx only collect the data that is necessary to allow your GP Practice to provide you with care.

The Practice uses the following Accurx features:

- SMS, Friends and Family test, online consultations, video consultations, AccuMail and Record Views

Accurx's privacy notice can be found on their website here: [Accurx - Privacy Policy](#)

Heidi AI

As part of the Digital First National programme of work, GP Practices are required to record accurate data about patient interaction, especially within consultations. To assist with this administrative task, the practice is using a new technology known as Heidi AI.

The primary purposes include improving clinical documentation, aiding healthcare professionals in notetaking, and generating consult summaries. Heidi technology enables clinicians to focus on patients during the consultation, contributing to improved patient care. It



The National Record Locator (NRL)

The National Record Locator (NRL) is one of a number of services that was set up under the NHS Digital Establishment of Systems: Digital Interoperability Platform (DIP) Directions 2019. The purpose of the DIP was to “develop and operate such IT applications, IT infrastructure and IT systems as are necessary to deliver the digital interoperability platform”, The Secretary of State considered (in accordance with Section 254(2)(b) of the Health and Social Care Act 2012), that it was “in the interests of the health service in England or of the recipients or providers of adult social care in England” that these Directions be given. Since NHS Digital has merged with NHS England, all services set up under this Direction are now managed by NHS England.

The NRL is a national index of pointers to the location of Patient Records of patients who live in England and/or who are registered with a GP in England. Providers that hold a relevant Patient Record will create a Pointer to the record, which can then be accessed by Consumers for the Agreed Purpose.

Information permitted to share on the NRL (where the document type exists for the patient) is as follows:

- Care plans*
- NEWS2 Report – National Early Warning Scores
- Shared Care Record Summary document
- International Patient Summary

* Care plans:

- mental health crisis plan
- end of life care plan
- emergency health care plan
- treatment escalation plans
- personalised care and support plans
- contingency plans

The Pointer is limited to:

- patient NHS Number
- ODS code for the Holder
- the name of the care setting
- what type of information is held
- A URL to contact details for the Holder (optional)
- A URL to retrieve the information (this is a spine secure proxy for the patient record)
- A location for the record which allows the information to be retrieved via a link or up to date contact details

Access by Consumers is currently view only. Once the Consumer closes the PDF, the Shared Personal Data is no longer accessible to them and if still required must be requested again through the same process.



- Eradicate costly paper based data flows with more efficient electronic interfaces to receive the information more quickly

Our CHIS services adhere to the latest NHS England Service Specification and through our innovation and passion to improve the health of children, we meet the aims and objectives of the NHS Child Health Digital Strategy.

The local CHIS service is managed by [SCW @ scwcsu.northants.chis@nhs.net](mailto:SCW@scwcsu.northants.chis@nhs.net)

GP Connect System and Data Sharing

Wootton Medical Centre has reviewed the National Data Sharing Arrangement (NDSA) for GP connect. GP Connect helps clinicians gain access to GP patient records during interactions away from a patient's registered practice and makes their medical information available to appropriate health and social care professionals when and where they need it, to support the patient's direct care.

From a privacy, confidentiality and data protection perspective, GP Connect provides a method of secure information transfer and reduces the need to use less secure or less efficient methods of transferring information, such as email or telephone.

GP Connect - key points.

- GP Connect can only be used for direct care purposes.
- Individuals can opt out of their GP patient record being shared via GP Connect by contacting their GP practice.
- Access to GP Connect is governed by role-based access control (RBAC) and organisational controls; only people who need to see the GP patient record for a patient's direct care should be able to see it
- All systems that allow the use of GP Connect must undergo a robust compliance process and the organisations involved must sign a connection agreement holding them to high standards of information security.

GP Connect products can help health and social care professionals share, view or act on information that could be required for a patient's direct care, but they would otherwise have difficulty accessing easily (for example if they are using different IT systems).

Organisations can have access to relevant information in GP patient records to provide direct care to patients only.

Type of organisations that use GP Connect

Examples of organisations that may wish to use GP connect to view GP patient records include:

- GP surgeries that patients are not registered at - for example, if they need to see a doctor when they are away from home
- secondary care (hospitals) if they need to attend A&E or are having an operation



Full details about GP connect can be found here: -

<https://digital.nhs.uk/services/gp-connect/gp-connect-in-your-organisation/transparency-notice>.

Confidentiality

Confidentiality and trust are essential to the relationship between GPs and their patients.

The information a patient provides to their GP is confidential, and they can expect that any information that is shared for their direct care will remain confidential.

GP Connect relies on 'implied consent'.

Explicit consent is not required when information is shared for a direct care purpose. If a patient does not want their information to be shared using GP Connect, they can opt out.

The NDSA and its terms and conditions stipulate that any information received or accessed about a patient for direct care purposes must remain confidential.

In addition to the NDSA, health and social care professionals are also subject to their own professional codes of confidentiality and are aware that any information received via GP Connect is provided in confidence, which must be respected.

Organisations using GP Connect are notified of their duty as 'controllers' to be fair and transparent about their processing of their patients' information and to ensure that their transparency notices are fully updated with how they may be using GP Connect functionality.

NHS England helps support the mitigation of information sharing risks by ensuring that:

- NHS England audit data access is subject to two-factor authentication and role-based access controls - only certain assured users can have access to the full audit logs
- a completed Supplier Conformance Assessment List (SCAL) which covers service and capability specific compliance requirements and controls of the consumer system is in place

It is the responsibility of organisations using GP Connect to ensure that they comply with the NDSA, and their statutory and legal obligations regarding data protection and confidentiality.

Opting out of GP Connect



Data Shared with NHSE

NHSE may request and be provided with information from our telephone system for national requirements, investigations or audits. NHSE may request and be provided with information from our online consultation system for national requirements, investigations or audits.

Anonymised information

Sometimes we may provide information about you in an anonymised form. Such information is used to analyse population-level health issues and helps the NHS to plan better services. If we share information for these purposes, then none of the information will identify you as an individual and cannot be traced back to you.

Medicines Management

The Practice may conduct Medicines Management Reviews of medications prescribed to its patients. This service performs a review of prescribed medications to ensure patients receive the most appropriate, up to date and cost-effective treatments. The reviews are carried out by the ICBs Medicines Management Team under a Data Processing contract with the Practice.

Research - National Institute for Health & Social Care Research (NIHR) - Clinical Research Network

Clinical Research Network West Midlands (CRN WM) provides a research delivery service to GP practices across the West Midlands. All CRN WM Delivery Support staff are employed by The Royal Wolverhampton NHS Trust. All NHS Staff members who have been allocated to work within the Practice will be issued with a Letter of access or assurance to confirm individual study placements and pre-employment checks.

The legal bases for processing this information

CRN WM processes data under the instruction of the individual research protocol, as delegated by the practice (data controller). You can opt out of being invited to participate in research at any time, please inform a member of the practice team and we will add the appropriate opt out code to your record.

Prior to informed consent:

The legal basis which allows us to process your personal data for research is GDPR article 6 (1)(f) ...legitimate interests...except where such interests are overridden by the interests or fundamental rights and freedoms of the data subject...'



Change to information held in your Summary Care Record

In light of the current emergency, the Department of Health and Social Care has removed the requirement for a patient's prior explicit consent to share Additional Information as part of the Summary Care Record.

This is because the Secretary of State for Health and Social Care has issued a [legal notice to healthcare bodies requiring them to share confidential patient information with other healthcare bodies where this is required to diagnose, control and prevent the spread of the virus and manage the pandemic](#). This includes sharing Additional Information through Summary Care Records, unless a patient objects to this.

If you have already expressed a preference to only have Core information shared in your Summary Care Record, or to opt-out completely of having a Summary Care Record, these preferences will continue to be respected and this change will not apply to you. For everyone else, the Summary Care Record will be updated to include the Additional Information. This change of requirement will be reviewed after the current coronavirus (COVID-19) pandemic.

Why we have made this change

In order to look after your health and care needs, health and social care bodies may share your confidential patient information contained in your Summary Care Record with clinical and non-clinical staff in other health and care organisations, for example hospitals, NHS 111 and out of hours organisations. These changes will improve the healthcare that you receive away from your usual GP practice.

Your rights in relation to your Summary Care Record

Regardless of your past decisions about your Summary Care Record preferences, you will still have the same options that you currently have in place to opt out of having a Summary Care Record, including the opportunity to opt-back in to having a Summary Care Record or opt back in to allow sharing of Additional Information.

You can exercise these rights by doing the following:

1. **Choose to have a Summary Care Record with all information shared.** This means that any authorised, registered and regulated health and care professionals will be able to see a detailed Summary Care Record, including Core and Additional Information, if they need to provide you with direct care.
2. **Choose to have a Summary Care Record with Core information only.** This means that any authorised, registered and regulated health and care professionals will be able to see limited information about allergies and medications in your Summary Care Record if they need to provide you with direct care.
3. **Choose to opt-out of having a Summary Care Record altogether.** This means that you do not want any information shared with other authorised, registered and regulated health and care professionals involved in your direct care. You will not be able to change this preference at the time if you require direct care away from your GP



Article 9(2)(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...’

Child protection information sharing system

The Child Protection - Information Sharing (CP-IS) service is a national system (across England) that securely links health and social care records to help protect children who:

- **Are looked after by local authorities.**
- **Are subject to a child protection plan (including unborn child protection plans).**
- **Have been in either category within the previous 12 months**

It enables health professionals to access key safeguarding information when a child presents at a healthcare setting, especially when they are outside their home local authority area.

In England, since 2014, the Child Protection Information Sharing System (CP-IS) has been sharing information between Local Authorities (LAs), unscheduled settings, and ambulance services about unborn babies & children who have a child protection plan and children who are looked after. This information sharing is intended to enable frontline staff who are working with children at risk of abuse or neglect to make well-informed assessments, identify emerging problems, and streamline interagency working to support the children and their families when and where they need it.

CP-IS is currently used across the following unscheduled healthcare settings:

- **Emergency Departments (NHS Trusts)**
- **Minor Injury Units (NHS Trusts)**
- **Walk in Centres (CCGs/Primary Care)**
- **Urgent Care Centres/Urgent Treatment Centres**
- **GP Out of Hours only**

The information CP-IS provides comes from and is managed and updated by Local Authorities (Councils) across England with the use of the child's or mother's NHS number. It does not include information from health or educational systems such as GP practices, schools, or health visitors (HVs), who continue to use Summary Care Records (SCRs) or the Primary Care Records to access health information.

As part of the NHS Long-Term Plan, it is now a target to make CP-IS available NHS-wide in England. So, the GP **in hours** service via the National Care Records Service, CP-IS data will be available and used 2 by December 2025.

This is to support decision-making processes undertaken by front-line NHS health practitioners, CP-IS will provide a limited amount of child protection indicator information (NHS Number, Type, start and end date of any child protection plan a child is on, name and contact details of the responsible LA, and an access history [including date and time] of the previous



health practitioners (in unscheduled and now scheduled care settings) can see CP-IS information about a child anywhere in England, they will be better equipped to make the right decision about that child's care.

- **Increased workforce efficiency and effectiveness – Doing the most for children with the resources we have** - Because CP-IS automatically sends information to the NHS Spine daily, it is always up to date.

Research

Clinical Practice Research Datalink (CPRD) collects de-identified patient data from a network of GP practices across the UK. Primary care data are linked to a range of other health related data to provide a longitudinal, representative UK population health dataset. You can opt out of your information being used for research purposes at any time (see below), full details can be found here: -

<https://cprd.com/transparency-information>

The legal bases for processing this information

CPRD do not hold or process personal data on patients; however, NHS Digital (formally the Health and Social Care Centre) may process 'personal data' for us as an accredited 'safe haven' or 'trusted third-party' within the NHS when linking GP data with data from other sources. The legal bases for processing this data are:

- Medicines and medical device monitoring: Article 6(e) and Article 9(2)(i) - public interest in the area of public health
- Medical research and statistics: Article 6(e) and Article 9(2)(j) - public interest and scientific research purposes

Any data CPRD hold or pass on to bona fide researchers, except for clinical research studies, will have been anonymised in accordance with the Information Commissioner's Office Anonymisation Code of Practice. We will hold data indefinitely for the benefit of future research, but studies will normally only hold the data we release to them for twelve months.

Categories of personal data

The data collected by Practice staff in the event of a safeguarding situation will be as much personal information as is possible that is necessary to obtain in order to handle the situation. In addition to some basic demographic and contact details, we will also process details of what the safeguarding concern is. This is likely to be special category information (such as health information).

Sources of the data



NOA data will be used for the purposes of informing policy and guidelines for managing obesity across the NHS and local authorities. It will also be used for benchmarking and to enable NHS providers to maximise the use of their resources and to improve patient outcomes.

NHS England will analyse the data held in the NOA to carry out data quality checks, to pseudonymise the data (de-identify) and to derive values, for example turn date of birth into age.

Data in the NOA may also be linked to other data that NHS England holds, including the Hospital Episode Statistics (HES), Cardiovascular Disease Prevention Audit (CVD Prevent) and the Community Services Data Set (CSDS).

NOA data is used to create regular statistical publications on the NHS England website including dashboards and an annual report. All data published is anonymous and aggregate so that patients cannot be identified from the data.

The data collected for the NOA from the CVD Prevent Audit will not be used for performance management of GPs.

NOA legal basis

Data protection law requires NHS England to have a legal basis before we can use your personal data.

Our legal basis is:

Legal obligation

Article 6(1)(c) of UK GDPR. This is because the Secretary of State for Health and Social Care has issued NHS England with a Direction to analyse this data for NOA purposes. This Direction is called the National Obesity Audit Directions 2023

We also need an additional legal basis in the UK GDPR and the Data Protection Act 2018 (DPA 2018) to use data which is extra sensitive. This is known as 'special categories of personal data'. Our legal basis to use data relating to your health and ethnicity is:

Substantial public interest

Article 9(2)(g) of UK GDPR, plus Schedule 1, Part 2, Paragraph 6 "statutory etc and government purposes" of DPA 2018

Health or social care