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| Population Health Management (or PHM for short) is aimed at improving the health of an entire population. It is being implemented across the NHS and this Practice is taking part in a project extending across Northamptonshire.  PHM is about improving the physical and mental health outcomes and wellbeing of people and making sure that access to services is fair, timely and equal. It helps to reduce the occurrence of ill-health and looks at all the wider factors that affect health and care.  The PHM approach requires health care organisations to work together with communities and partner agencies, for example, GP Practices, community service providers, hospitals and other health and social care providers.  These organisations will share and combine information with each other in order to get a view of health and services for the population in a particular area. This information sharing is subject to robust security arrangements.  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.  You have the right to object to our sharing your data in these circumstances, but we have an overriding responsibility to comply with our legal obligations. Please see below.  We are required by Articles in the UK General Data Protection Regulations to provide you with the information in the following 9 sub-sections. | |
| 1**) Controller** contact details | Chloe Lamont  Chloe.lamont1@nhs.net |
| **2) Data Protection Officer** contact details | Midlands and Lancashire MLU |
| 3) **Purpose** of the processing | In your area, a population health management programme has been introduced to use linked data from primary, secondary and community care to understand population health more effectively. This only uses pseudonymised data i.e. where information that identifies you has been removed and replaced with a pseudonym. This will only ever be re-identified if we discover that you may benefit from a particular health intervention, in which case only the relevant staff within your Practice will be able to see your personal information in order to offer this service to you.  In order to carry out this data linkage, your pseudonymised data will be passed to NEL Commissioning Support Unit (NEL), who are part of NHS England, who will link this to other local and national data sources to be able to carry out appropriate analyses. These linked datasets will also be securely shared with Optum Health Solutions (UK) Limited and Northamptonshire Clinical Commissioning Group to carry out any further analysis needed to support improvements to the local populations health and to target health and social care resources effectively.  Only a small number of staff based within these UK based organisations will be able to access this data, and as this will be pseudonymised in accordance with the ICO Anonymisation Code of Practice, no one within these organisations will be able to identify you. |
| 4) **Lawful basis** for processing | The processing of personal data in the delivery of population health management is supported under the following Article 6 and 9 conditions of the UK GDPR:  To support health and social care:   * Article 6(1)(e) ‘…necessary for the performance of a task carried out in the public interest or in the exercise of official authority…’. 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  For supporting public health:   * Article 6(1)(c) “processing is necessary for compliance with a legal obligation to which the controller is subject.” and * 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”\* |
| 5) **Recipient or categories of recipients** of the processed data | The data will be shared with NEL Commissioning Support Unit and Optum Health Solutions (UK) Limited, as outlined above, health and care professionals, support staff in GP Practices and at hospitals, diagnostic and treatment centres who contribute to your personal care. <https://www.nhs.uk/pages/home.aspx> |
| 6) **Rights to object** | You have the right to object to some or all the information being processed under Article 21. Please contact the Controller. You should be aware that this is a right to raise an objection, which is not the same as having an absolute right to have your wishes granted in every circumstance. |
| 7) **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. |
| 8**) Retention period** | The data will be retained for the duration of the PHM project, which is 22 weeks. Once the project has completed all personal information processed by NEL / Optum will be securely destroyed. This will not affect any personal information held by your GP or other health or social care providers. |
| 9) **Right to Complain**. | You have the right to complain to the Information Commissioner’s Office, you can use this link <https://ico.org.uk/global/contact-us/>  or calling their helpline Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate)  There are National Offices for Scotland, Northern Ireland and Wales, (see ICO website) |

\* “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.