

SUBJECT ACCESS REQUEST POLICY

November 2018

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Sustainability Impact Assessment :	Yes
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Target Audience :	All employees, members, committee and sub-committee members of the group and members of the governing body and its committees. All contractors/volunteers providing services to the CCG.
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The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.

POLICY AMENDMENTS

Amendments to the policy will be issued from time to time. A new amendment history will be issued with each change.

New Version Number	Issued by	Nature of Amendment	Approved by and Date	Date on Internet
0.1	Barry Jackson	First draft for comments	NR	
1.0	Barry Jackson	Approved version		
2.0	H. Sanderson	Addition of guidance for requests from applicants who cannot put an application in writing	SMT – February 2016	Feb 2016
3.0	IG Officer Risk and Assurance Manager	To update for the requirements of the General Data Protection Regulation Align policy format to CCG Policy on Policies template. Specify Executive Officer responsibilities	Exec Committee 20 December 2017	25 Jan 2018
4.0	H. Gillingwater IG Specialist	Updates to : The Data Protection Act 2018 The General Data Protection Regulation Addition of verbal requests Removal of verbal request exemptions	Exec Committee 05 December 2018	24 December 2018

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please contact :**

01904 555 870 or valeofyork.contactus@nhs.net

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1. INTRODUCTION

General

- 1.1. Individuals have the right under Data Protection Legislation, subject to certain exemptions, to have access to their personal records that are held by Vale of York Clinical Commissioning Group (The CCG). This is known as a 'subject access request' (SAR). Requests may be received from members of staff, service users or any other individual who the CCG has had dealings with and holds data about that individual. This will include information held both electronically and manually and will therefore include personal information recorded within electronic systems, spread sheets, databases or word documents and may also be in the form of photographs, x-rays, audio recordings and CCTV images etc.
- 1.2. The CCG has developed this policy to guide staff in dealing with Subject Access Requests that may be received.

2. POLICY STATEMENT

- 2.1. The CCG has a duty as a data controller to respect the rights of individuals to access their personal data. These rights and duties are set out in section 45(1) of the Data Protection Act 2018 (DPA) and in Article 15 of the General Data Protection Regulation (GDPR) and are often referred to as 'the right of subject access.' The Vale of York Clinical Commissioning Group aspires to the highest standards of corporate behaviour and responsibility. All Vale of York Clinical Commissioning Group staff are required to comply with this policy.

3. IMPACT ANALYSES

Equality

- 3.1. As a result of performing the screening analysis, the policy does not appear to have any adverse effects on people who share Protected Characteristics and no further actions are recommended at this stage. The results of the screening are attached.

Sustainability

- 3.2. A Sustainability Impact Assessment has been undertaken. xx positive or negative impacts were identified against the twelve sustainability themes. The results of the assessment are attached.

4. SCOPE

- 4.1. This policy applies to those members of staff that are directly employed by the CCG and for whom the CCG has legal responsibility. For those staff covered by a letter of authority/honorary contract or work experience the organisations policies are also applicable whilst undertaking duties for or on behalf of the CCG. Further, this procedure applies to all third parties and others authorised to undertake work on behalf of the CCG.

5. POLICY PURPOSE / AIMS AND FAILURE TO COMPLY

- 5.1. The aim of this policy is to inform staff regarding the nature of subject access requests, how to recognise a subject access request and know what action to take on receipt.
- 5.2. This policy sets out the processes to be followed to respond to a subject access request. This is based on the Information Commissioner's Office Subject Access Code of Practice : [ICO Subject Access Code of Practice](#)

6. PRINCIPAL LEGISLATION AND COMPLIANCE WITH STANDARDS

Data Protection Act 2018

- 6.1. Chapter 3 of the DPA requires you to process personal data in accordance with the rights the Act gives to individuals. Subject access is one of those rights.

General Data Protection Regulations

- 6.2. Under the GDPR, individuals will have the right to obtain :
 - confirmation that their data is being processed;
 - access to their personal data; and
 - other supplementary information – this largely corresponds to the information that is referenced to in the CCG's privacy notice, (ref Article 15).

The NHS Constitution

- 6.3. The NHS Constitution requires that "You have the right of access to your own health records and to have any factual inaccuracies corrected."

7. ROLES / RESPONSIBILITIES / DUTIES

The Accountable Officer

- 7.1. The CCG Accountable Officer has overall responsibility for the Subject Access Request Policy within the CCG. The implementation of, and compliance with this Policy is delegated to the CCG Caldicott Guardian.

Caldicott Guardian

- 7.2. The Caldicott Guardian is the arbiter in deciding whether there is any additional duty of confidence owed to the child or young person.
- 7.3. All requests for clinical records should be reviewed by the Caldicott Guardian or their nominated representative to decide what extent data can be disclosed or whether the request is to be refused.
- 7.4. The Caldicott Guardian is responsible for approving release of requested personal data.

Staff / Employees

- 7.5. All staff and employees are responsible for supporting implementation of data controller responsibilities and appropriately signposting requests promptly to enable the CCG to comply with statutory time limits.

Contracts, Contractors and their Employees

- 7.6. Where personal data is processed by a third party on behalf of the CCG they are required to support the CCG in discharge of their duties.

8. WHAT IS A SUBJECT ACCESS REQUEST ?

- 8.1. A subject access request (SAR) is simply a written or verbal request made by or on behalf of an individual for the information about them, which is held by the CCG. Data Protection Legislation entitles all individuals to make requests for their own personal data to enable individuals to verify the lawfulness of how their information is being processed. An individual is not entitled to information relating to other people (unless they are acting on behalf of that person).

8.2.

- 8.3. The request does not have to be in any particular form; they can be made verbally or in writing, nor does it have to include the words 'subject access' or make any reference to the Data Protection Legislation . A SAR may be a valid request even if it refers to other legislation, such as the Freedom of Information Act 2000 (FOIA) and should therefore be treated as a SAR in the normal way. The applicant must be informed of how the application is being dealt, under which legislation and free of charge, except where the request is manifestly unfounded or excessive.

- 8.4. Where an individual has made a verbal request it is good practice to have a policy for recording details of the request, particularly those made by telephone or in person

- 8.5. Subject access is most often used by individuals who want to see a copy of the information an organisation holds about them. Subject access, however, goes further than this and an individual is entitled to be :

- told whether any personal data is being processed;
- given a description of the personal data, the reasons it is being processed, and whether it will be given to any other organisations or people;
- given a copy of the personal data; and
- given details of the source of the data (where this is available).

- 8.6. Some types of personal data are exempt from the right of subject access and so cannot be obtained by making a SAR. Information may be exempt because of its nature or because of the effect its disclosure is likely to have. There are also other restrictions on disclosing information in response to a SAR, for example where this would involve disclosing information about another individual.

9. HOW TO RECOGNISE AND ACTION A SUBJECT ACCESS REQUEST

- 9.1. In order for the CCG to action a subject access request the following must be received :

- Under the General Data Protection Regulation requests can be made verbally or in writing. (This may be by letter, fax, email, or even social media, such as Facebook or twitter). It is important to note that responses to SAR requests

must be returned by a secure methodology, i.e., social media must NOT be used to return information requested.

- Any fee levied, fees can only be levied where the request is deemed manifestly unfounded or excessive.
- Proof of identity of the applicant and/or the applicant representative, and proof of right of access to another person's personal information by reasonable means (See Annex A).
- Sufficient information to be able to locate the record or information requested.
- All requests must be responded to without delay and at the latest within one month of receipt of the request. This time can be extended by a further two 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. Failure to do so is an offence under the Data Protection Legislation.

9.2. If the request relates to, or includes information that should not be requested by means of a SAR (e.g. it includes a request for non-personal information) then, the request must be treated accordingly, e.g. as a FOI request where purely non-personal data is being sought or as two requests: one for the requester's personal data made under the Data Protection Legislation; and another for the remaining, non-personal information made under FOIA. If any of the non-personal information is environmental, this should be considered as a request made under the EIR.

9.3. Any requests made for non-personal information must be forwarded to the FOI Team at voyccg.foi@nhs.net. It is important to consider the requested information under the right legislation. This is because the test for disclosure under FOIA or the EIR is to the world at large – not just the requester. If personal data is mistakenly disclosed under FOIA or the EIR to the world at large, this could lead to a breach of the data protection principles.

9.4. All SAR requests received must be forwarded to the relevant head of department, e.g., staff requesting access to personnel records must be sent to Head of HR, without delay in order for it to be processed within the legal timescale.

9.5. Where the CCG processes a large quantity of information about an individual the GDPR permits you to ask the individual to specify the information the request relates to.

9.6. 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.

9.7. Where requests are manifestly unfounded or excessive, in particular because they are repetitive, you can:

- Charge a reasonable fee taking into account the administrative costs of providing the information; or
- Refuse to respond

9.8. Where you refuse to respond you must explain 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.

10. ASSISTING AND ADVISING SERVICE USERS ON HOW TO MAKE A REQUEST.

10.1. Where an individual is verbally making a request you should advise that they will need to :

- Detail the information they are requesting and from which service to enable it to be located.
- Requesters do not have to tell you their reason for making the request or what they intend to do with the information requested, although it may help you to find the relevant information if they do explain the purpose of the request.
- A request is valid even if the individual has not sent it directly to the person who normally deals with such requests. So it is important to ensure that you and your colleagues can recognise a SAR and deal with it in accordance with this procedure and forward immediately to the relevant service head.
- Advise the applicant to send the request to the appropriate head of service, and provide contact details.
- Note that responses to requests should be made in a format requested by the applicant, therefore alternative formats may be needed e.g. braille.

11. REQUESTS MADE ABOUT OR ON BEHALF OF OTHER INDIVIDUALS

General Third Party

11.1. A third party, e.g., solicitor may make a valid SAR on behalf of an individual. If, however, a request is made by a third party on behalf of another living individual, appropriate and adequate proof of that individuals consent or evidence of a legal right to act on behalf of that individual e.g., power of attorney must be provided by the third party.

11.2. If you think an individual may not understand what information would be disclosed to a third party who has made a SAR on their behalf, you may send the response directly to the individual rather than to the third party. The individual may then choose to share the information with the third party after having had a chance to review it.

Requests on Behalf of Children

11.3. Even if a child is too young to understand the implications of subject access rights, information about them is still their personal information and does not belong to anyone else, such as a parent or guardian. So it is the child who has a right of access to the information held about them, even though in the case of young children these rights are likely to be exercised by those with parental responsibility for them.

- 11.4. Before responding to a SAR for information held about a child, you should consider whether the child is mature enough to understand their rights. If the clinician responsible for the child's treatment plan is confident that the child has the capacity to understand their rights and any implications of the disclosure of information, then child's permission should be sought to action the request.
- 11.5. The Information Commissioner has indicated that in most cases it would be reasonable to assume that any child that is aged 12 years or more would have the capacity to make a subject access request and should therefore be consulted in respect of requests made on their behalf.
- 11.6. The Caldicott Guardian or their nominated representative should also be consulted on whether there is any additional duty of confidence owed to the child or young person as it does not follow that, just because a child has capacity to make a SAR, that they also have capacity to consent to sharing their personal information with others as they may still not fully understand the implications of doing so.
- 11.7. What matters is that the child is able to understand (in broad terms) what it means to make a SAR and how to interpret the information they receive as a result of doing so. When considering borderline cases, the following should be taken into account :
- Where possible, the child's level of maturity and their ability to make decisions like this;
 - The nature of the personal data;
 - Any court orders relating to parental access or responsibility that may apply;
 - Any duty of confidence owed to the child or young person;
 - Any consequences of allowing those with parental responsibility access to the child's or young person's information. This is particularly important if there have been allegations of abuse or ill treatment;
 - Any detriment to the child or young person if individuals with parental responsibility cannot access this information; and
 - Any views the child or young person has on whether their parents should have access to information about them.

Requests in respect of Crime and Taxation e.g. from the Police or HMRC

- 11.8. Requests for personal information may be made by the above authorities for the following purposes:
- The prevention or detection of crime;
 - The capture or prosecution of offenders; and
 - The assessment or collection of tax or duty.
- 11.9. A formal documented request signed a senior office from the relevant authority is required before proceeding with the request. This request must make it clear that one of the above purposes is being investigated and that not receiving the information would prejudice the investigation.

- 11.10. These types of requests must be considered by a senior manager and the decision on whether to share the information or not documented before any action is taken. Advice can be sought from the Information Governance Team.

Court Orders

- 11.11. Any Court Order requiring the supply of personal information about an individual must be complied with.

12. RESPONDING TO REQUESTS

- 12.1. It is essential that a log of all requests received is maintained, detailing :
- Date received
 - Date response due (within one calendar month of receipt unless complex)
 - Applicants details,
 - Information requested,
 - Exemptions applied in respect of information not to be disclosed,
 - Details of decisions to disclose information without the data subjects consent,
 - Details of information to be disclosed and the format in which they were supplied,
 - When and how supplied, e.g. Paper copy and postal method used to send them.
- 12.2. Determine whether the person's request is to be treated as a routine enquiry or as a subject access request. If you would usually deal with the request in the normal course of business, e.g., confirming appointment times or details of public meetings planned then do so.
- 12.3. The following are likely to be treated as formal subject access requests:
- Please send me a copy of my HR file or Medical Records.
 - I am a solicitor acting on behalf of my client and request a copy of his medical records. An appropriate authority is enclosed.
 - The police state that they are investigating a crime and provide an appropriate form requesting information signed by a senior officer.
- 12.4. Ensure adequate proof of the identity of both the data subject and the applicant, where this is a third party is obtained before releasing information requested, this may be in the form of documentation as detailed at Appendix 3.
- 12.5. Ensure adequate information has been received to facilitate locating the information requested. Locate the required information from all sources and collate it ready for review by an appropriate senior manager. This review is to ensure that the information is appropriate for disclosure, i.e. to ascertain whether any exemptions apply e.g. it does not contain information about other individuals, it is likely to cause harm or distress if disclosed, or is information to be withheld due to on-going formal investigations. Advice may be sought from the Information Governance Team. Exemptions are detailed at Appendix 4.

- 12.6. In the case of requests for clinical records these should be reviewed by the Caldicott Guardian or a nominated representative who shall decide to what extent data can be disclosed or whether the request is to be refused.
- 12.7. Where information in respect of other individuals is contained within the information requested it should not be disclosed without the consent of that individual. If, however, information contained within the information requested was supplied by health professionals, it may be disclosed without consent if considered appropriate.
- 12.8. Generally the CCG must provide a copy of the information free of charge. However a 'reasonable fee' may be levied 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.
- 12.9. Where it is ascertained that no information is held about the individual concerned, the applicant must be informed of this fact as soon as possible.
- 12.10. It must be determined whether the information is likely to change between receiving the request and sending the response. Routine on-going business additions and amendments may be made to the personal information after a request is received, however the information must not be altered as a result of receiving the request, even if the record contains inaccurate or embarrassing information, as this would be an offence under the Data Protection Act 2018.
- 12.11. Check whether the information collated contains any information about any other individuals and if so, consider :
- Is it possible to comply with the request without revealing information that relates to the third party ?
- Ensure consideration is given what information the requestor may already have or get hold of that may identify the third party**
- 12.12. Where it is not possible to remove third party identifiers you must consider the following :
- Has the third party consented to the disclosure ?
 - Is it reasonable, considering all the circumstances, to comply with the request without the consent of the third party ?
- The following must be considered when trying to determine what reasonable circumstances are;**
- duty of confidence owed to the third party,
 - steps taken to try and obtain consent,
 - whether the third party is capable of giving consent, and
 - any express refusals of consent from the third party.
 - A record of the decision as to what third party information is to be disclosed and why should be made.

- 12.13. Consider whether you are obliged to supply the information, i.e. consider whether any exemptions apply in respect of :
- Crime prevention and detection, including taxation purposes,
 - Negotiations with the requestor,
 - Management Forecasts,
 - Confidential References given by you,
 - Information used in research, historical or statistical purposes; and
 - Information covered by legal professional privilege.
- 12.14. Other exemptions are detailed at Appendix 4.
- 12.15. If the information requested, is held by the organisation and exemptions apply then a decision must be made as to whether you inform that applicant that the information is held but is exempt from disclosure or whether you reply stating that no relevant information is held. A response in these circumstances must be carefully considered and applied as appropriate giving due consideration to the exemptions being applied as it may be appropriate to deny holding information if prejudicing on-going or potential investigations or undue harm or distress is to be avoided.
NB. It may be necessary to reconsider this decision should a subsequent application be made and the circumstances around the use of exemptions have altered.
- 12.16. If the information contains complex terms or codes, you must ensure that these terms and codes are explained in such a way that the information can be understood in lay terms.

Preparing the Response

- 12.17. When the requested information is not held, inform the applicant in writing, as soon as possible, but in any case by the due date.
- 12.18. A copy of the information should be supplied in a format agreed with the applicant for example if the request is received electronically, then the response should be returned in an electronic format. You have one calendar month to comply with the request starting from the date you receive all the information necessary to deal with the request and any fee that is required. It is an offence under the Data Protection Legislation and individuals can complain to the Information Commissioners Office or apply to a court if you do not respond within this time limit.
- 12.19. **NB** Under no circumstances should original records be sent to the applicant.
- 12.20. 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.
- 12.21. 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.

12.22. Ensure that the information to be supplied is reviewed by an appropriate senior manager and written authorisation and / or agreement of exemptions applied is obtained for disclosure or non-disclosure of the information.

13. POLICY IMPLEMENTATION

13.1. Following approval by the Executive Committee the policy will be sent to :

- The Communications Manager who will disseminate to all staff via the team newsletter process
- The Chairs of the Governing Body, the Council of Members and any other committees and sub committees for dissemination to members and attendees, as appropriate.
- The Practice Managers of all member practices for information, (if appropriate).

14. TRAINING AND AWARENESS

14.1. This policy will be published on the CCG's website and staff will be briefed regarding amendments to policy.

14.2. The policy will be brought to the attention of all new employees as part of the induction process.

15. AUDIT

15.1. Subject Access Request provision will be reviewed by Internal Audit under annual audit arrangements for Information Governance.

16. POLICY REVIEW

16.1. This policy will be reviewed on a bi-annual basis. Earlier review may be required in response to exceptional circumstances, organisational change or relevant changes in legislation/guidance.

17. REFERENCES

- DH : Guidance for Access to Health Records Requests.
- Information Commissioner: Subject Access Code of Practice
- Report of the Caldicott2 Review - Information: To share or not to share? The Information Governance Review 2013
- Government Response to Report of the Caldicott2 Review 2013
- The Data Protection Act 2018
- The General Data Protection Regulation

18. ASSOCIATED PROCEDURES

- Subject Access Request Procedure

19. CONTACT DETAILS

Risk and Assurance Manager

Telephone : 01904 555778

Email : valeofyork.contactus@nhs.net

Address : NHS Vale of York Clinical Commissioning Group
West Offices, Station Rise, York. Y01 6GA

20. APPENDIX 1 : EQUALITY IMPACT ANALYSIS FORM

1.	Title of policy/ programme/ service being analysed	
	Subject Access Request Policy	
2.	Please state the aims and objectives of this work.	
	To identify whether this policy may have the potential to affect people differently. The purpose is to identify and address existing or potential inequalities, resulting from policy and practice development.	
3.	Who is likely to be affected? (e.g. staff, patients, service users)	
	Staff, patients, service users.	
4.	What sources of equality information have you used to inform your piece of work?	
	http://www.acas.org.uk/media/pdf/s/n/Acas_managers_guide_to_equality_assessments.pdf	
5.	What steps have been taken ensure that the organisation has paid <u>due regard</u> to the need to eliminate discrimination, advance equal opportunities and foster good relations between people with protected characteristics	
	The analysis of equalities is embedded within the CCG's objectives, policies, procedures, Committee Terms of Reference and project management framework.	
6.	Who have you involved in the development of this piece of work?	
	<p>Internal involvement: Governance Committee</p> <p>Stakeholder involvement: Through eMBED Healthcare Consortium</p> <p>Patient / carer / public involvement: Policy developed in consultation with other CCGs in the local STP and eMBED Healthcare Consortium</p>	
7.	What evidence do you have of any potential adverse or positive impact on groups with protected characteristics? Do you have any gaps in information? Include any supporting evidence e.g. research, data or feedback from engagement activities	
	<p>Disability People who are learning disabled, physically disabled, people with mental illness, sensory loss and long term chronic conditions such as diabetes, HIV)</p>	<p>Consider building access, communication requirements, making reasonable adjustments for individuals etc.</p>

N/A	
Sex Men and Women	Consider gender preference in key worker, single sex accommodation etc.
N/A	
Race or nationality People of different ethnic backgrounds, including Roma Gypsies and Travellers	Consider cultural traditions, food requirements, communication styles, language needs etc.
N/A	
Age This applies to all age groups. This can include safeguarding, consent and child welfare	Consider access to services or employment based on need/merit not age, effective communication strategies etc.
N/A	
Trans People who have undergone gender reassignment (sex change) and those who identify as trans	Consider privacy of data, harassment, access to unisex toilets & bathing areas etc.
N/A	
Sexual orientation This will include lesbian, gay and bi-sexual people as well as heterosexual people.	Consider whether the service acknowledges same sex partners as next of kin, harassment, inclusive language etc.
N/A	
Religion or belief Includes religions, beliefs or no religion or belief	Consider holiday scheduling, appointment timing, dietary considerations, prayer space etc.
N/A	
Marriage and Civil Partnership Refers to legally recognised partnerships (employment policies only)	Consider whether civil partners are included in benefit and leave policies etc.
N/A	
Pregnancy and maternity Refers to the pregnancy period and the first year after birth	Consider impact on working arrangements, part-time working, infant caring responsibilities etc.
N/A	

Carers This relates to general caring responsibilities for someone of any age.	Consider impact on part-time working, shift-patterns, options for flexi working etc.
N/A	
Other disadvantaged groups This relates to groups experiencing health inequalities such as people living in deprived areas, new migrants, people who are homeless, ex-offenders, people with HIV.	Consider ease of access, location of service, historic take-up of service etc.
N/A	
8.	Action planning for improvement Please outline what mitigating actions have been considered to eliminate any adverse impact? Please state if there are any opportunities to advance equality of opportunity and/ foster good relationships between different groups of people? An Equality Action Plan template is appended to assist in meeting the requirements of the general duty

Sign off	
Name and signature of person / team who carried out this analysis	
Date analysis completed	
Name and signature of responsible Director	
Date analysis was approved by responsible Director	

22. APPENDIX 2 : SUSTAINABILITY IMPACT ASSESSMENT

Staff preparing a policy, Governing Body (or Sub-Committee) report, service development plan or project are required to complete a Sustainability Impact Assessment (SIA). The purpose of this SIA is to record any positive or negative impacts that this is likely to have on sustainability.

Title of the document	Subject Access Request Policy
What is the main purpose of the document	
Date completed	
Completed by	

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Travel	Will it provide / improve / promote alternatives to car based transport?	0		
	Will it support more efficient use of cars (car sharing, low emission vehicles, environmentally friendly fuels and technologies)?	0		
	Will it reduce 'care miles' (telecare, care closer) to home?	0		
	Will it promote active travel (cycling, walking)?	0		
	Will it improve access to opportunities and facilities for all groups?	0		
	Will it specify social, economic and environmental outcomes to be accounted for in procurement and delivery?	0		

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Procurement	Will it stimulate innovation among providers of services related to the delivery of the organisations' social, economic and environmental objectives?	0		
	Will it promote ethical purchasing of goods or services?	0		
Procurement	Will it promote greater efficiency of resource use?	0		
	Will it obtain maximum value from pharmaceuticals and technologies (medicines management, prescribing, and supply chain)?	0		
	Will it support local or regional supply chains?	0		
	Will it promote access to local services (care closer to home)?	0		
	Will it make current activities more efficient or alter service delivery models	0		
Facilities Management	Will it reduce the amount of waste produced or increase the amount of waste recycled?	0		
	Will it reduce water consumption?			
Workforce	Will it provide employment opportunities for local people?	0		
	Will it promote or support equal employment opportunities?	0		

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
	Will it promote healthy working lives (including health and safety at work, work-life/home-life balance and family friendly policies)?	0		
	Will it offer employment opportunities to disadvantaged groups?	0		
Community Engagement	Will it promote health and sustainable development?	0		
	Have you sought the views of our communities in relation to the impact on sustainable development for this activity?	N/A		
Buildings	Will it improve the resource efficiency of new or refurbished buildings (water, energy, density, use of existing buildings, designing for a longer lifespan)?	0		
	Will it increase safety and security in new buildings and developments?	0		
	Will it reduce greenhouse gas emissions from transport (choice of mode of transport, reducing need to travel)?	0		
	Will it provide sympathetic and appropriate landscaping around new development?	0		
	Will it improve access to the built environment?	0		
Adaptation to Climate Change	Will it support the plan for the likely effects of climate change (e.g. identifying vulnerable groups; contingency planning for flood, heat wave and other weather extremes)?	0		

Domain	Objectives	Impact of activity Negative = -1 Neutral = 0 Positive = 1 Unknown = ? Not applicable = n/a	Brief description of impact	If negative, how can it be mitigated? If positive, how can it be enhanced?
Models of Care	Will it minimise 'care miles' making better use of new technologies such as telecare and telehealth, delivering care in settings closer to people's homes?	0		
	Will it promote prevention and self-management?	0		
	Will it provide evidence-based, personalised care that achieves the best possible outcomes with the resources available?	0		
	Will it deliver integrated care, that co-ordinate different elements of care more effectively and remove duplication and redundancy from care pathways?	0		

23. APPENDIX 3 : REGISTRATION AND AUTHENTICATION EXAMPLES OF DOCUMENTARY EVIDENCE

Please supply one from each of the following categories (copies only).

Personal identity

- current signed passport
- residence permit issued by Home Office to EU Nationals on sight of own country passport
- current UK photo card driving licence
- current full UK driving licence (old version) – old style provisional driving licences are not acceptable
- current benefit book or card or original notification letter from the Department for Work & Pensions confirming the right to benefit
- building industry sub-contractor's certificate issued by the Inland Revenue
- recent Inland Revenue tax notification
- current firearms certificate
- birth certificate
- adoption certificate
- marriage certificate
- divorce or annulment papers
- Application Registration Card (ARC) issued to people seeking asylum in the UK (or previously issued standard acknowledgement letters, SAL1 or SAL2 forms);
- GV3 form issued to people who want to travel in the UK but do not have a valid travel document
- Home Office letter IS KOS EX or KOS EX2
- police registration document
- HM Forces Identity Card

Active in the Community

“Active in the Community” documents should be recent (at least one should be within the last six months unless there is a good reason why not) and should contain the name and address of the registrant.

- record of home visit
- confirmation from an Electoral Register search that a person of that name lives at that address
- recent original utility bill or certificate from a utility company confirming the arrangement to pay for the services at a fixed address on prepayment terms (note that mobile telephone bills should not be accepted as they can be sent to different addresses and bills printed from the internet should not be accepted as their integrity cannot be guaranteed)

- local authority tax bill (valid for current year)
- current UK photo card driving licence (if not used for evidence of name)
- current full UK driving licence (old version) (if not used for evidence of name)
- bank, building society or credit union statement or passbook containing current address
- recent original mortgage statement from a recognised lender
- current local council rent card or tenancy agreement
- current benefit book or card or original notification letter from the Department for Work & Pensions confirming the rights to benefit
- court order

24. APPENDIX 4 : SUBJECT ACCESS REQUEST EXEMPTIONS

Category	Exemption
National Security	Personal information that is held in respect of the maintenance of national security is exempt from disclosure.
Crime and Taxation	Section of the personal information contained in the records, or individual records that relate to the prevention and detection of crime or the apprehension or prosecution of offenders
Health, Education and Social Work	Health exemptions are mentioned in section 7 Social work records exemptions comes under the Data Protection (Subject Access Modification)(Social Work) Order 2000 relates to personal information used for social work purposes : Where release of information may prejudice the carrying out of social work by causing serious harm to the physical or mental condition of the data subject or others. Certain third party's information can be released if they are a "relevant person " (a list is contained in the order) as long as release of the information does not cause serious harm to the relevant person's physical or mental condition, or with the consent of the third party
Regulatory activity	Personal data processed by the PCT for the purposes of discharging its functions are exempt if the release of such information would prejudice the proper discharge of those functions.
Research, history statistics	Where the personal data is used solely for research purposes and as long as resulting statistics are not made available which identify the person.
Human fertilisation and embryology	Personal information can be withheld in certain circumstances where it relates to human fertilization and embryology.
Legal Professional Privilege	Any correspondence to or from or documentation prepared for or by the Trust's internal or external legal advisors may be exempt from disclosure and advice should always be sought relating this class of information.

This is not an exhaustive list, for comprehensive information on how to apply exemptions see the code of practice.