

Data Protection Impact Assessment (DPIA) Initiation Checklist

The following DPIA Initiation Checklist should be completed in conjunction with the Data Protection Officer to establish what level of information risk assessment and mitigation is required.

This should be completed for all:

- New or revised data flows of person identifiable data
- New or revised data sharing arrangements
- New or revised access to person identifiable data
- Implementation or change to an IT system used to process person identifiable data (related to patients and/or staff)
- New or revised pathway of care which uses person identifiable data

Name of the project	Community Voices	
Stakeholders involved in the processing of information	<ul style="list-style-type: none"> • Norfolk & Waveney Integrated Care Board (NWICB)– commissioner • Norfolk Office of Data Analytics– Data Processor and Analyst 	
Data Security and Protection (DSP) Toolkit status of any stakeholder processing person identifiable data (PID)	Norfolk & Waveney Integrated Care Board (NWICB)	
DSPT Provider Search	https://improvinglivesnw.org.uk/community-voices-resources/data-protection/	

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Step 1: Identify the need for a DPIA
<p>Explain broadly what the project / change in functionality / new or revised dataflow aims to achieve and what type of processing it involves (i.e. types of personal information).</p> <p>You may find it helpful to refer / link / embed other documents, such as IT system specifications, project proposals, ideas template, project initiation document</p> <p>Explain which organisations will be involved in the sharing of personal information.</p>
<p>Purpose</p> <p>Following the success of the pilot phase of Community Voices, the focus of the programme remains on</p> <ul style="list-style-type: none"> • ensuring that people who experience disadvantage because of where they live or who they are, have a place to share their views about their health and factors that might affect their health (i.e. wider determinants) and

- that they can help shape how health services are designed and delivered.

The approach remains focused on collaborating with trusted communicators, hosted by District Councils or VCSE organizations to gain insights into people's experiences, empower them to leverage existing resources, and identify local actions to enhance health and well-being.

Community Voices projects make grants available for trusted communicators to facilitate structured yet open conversation with members of their community. Depending on the project adjustments are made to the model to focus on specific areas. All insights collected are in the form of anonymised conversations and are used for evaluation and to guide strategic planning, service design, and delivery.

Onboarding and Training -Each Community Champion is required to complete a training programme before embarking on any conversations with the public. The need for confidentiality, the scope of the data to be captured and how to introduce themselves and the role the champions play is strengthened during this training.

Training package can be found here-

<https://improvinglivesnw.org.uk/community-voices-resources/>

Good practice is that participating organisations will be Data Security and Protection compliant or have an equivalent compliance measure in place.

Fair Processing - The trusted communicators will ensure that they explain all conversations are purely voluntary and individuals can choose to participate and/or terminate a conversation at any point. Any objections will have no negative impact on the ability of the individual to secure health and social care support.

The Champions will explain clearly

- Who the Champion is and the purpose of the conversation
- Provide assurance that no personal data will be captured by the Champion
- How the data will be used
- What the intended output will be

Data Capture - The Trusted communicators will capture the information in a SmartSurvey (referred to as the Insight Bank) - <https://www.smartsurvey.co.uk/s/InsightBank/>

The survey contains an opening statement advising and reminding the trusted communicators not to capture any person identifiable data about patients and health and social care professionals in the survey.

The full postcode of the location of the conversation will be captured, only a portion of these maybe be someone's home with the majority being locations out in the community, however the data capture will not state whether it is someone's home.

The reasoning for capturing the full postcode is

- To enable us to identify and contextualise trends
- To be able to do this at a neighbourhood level enables us to identify gaps/assets in services and their accessibility
- Allows for the development of targeted specified public communications campaigns to specific areas (Lower Super Output Areas (LSOA) and above) where knowledge of the local offer does not exist

- Allows for better data quality – we can see how representative trends are of certain areas and cohorts that may experience inequalities.

The postcode will not be linked with any data other than what is on the form itself, specifically designed to be anonymous and non-sensitive. Only LSOA (Lower Super Output Areas) and above is to be used for analysis.

The raw data will be handled by a very small number of people and the Norfolk & Waveney Integrated Care Board will have control over who has access to the Smart Survey. Reports made available to those outside of these strictly controlled data handlers will only show areas by LSOA/neighbourhood/ward level with no access to postcode level data.

An additional fail-safe measure for any personal identifiable data (PID) inadvertently captured on the Insight Bank will be removed by the Community Voices programme lead as a part of regular data cleansing and any full postcodes will be converted into LSOA's.

Norwich City Council have already embarked on this project and will use their existing data capture form via [GForm - Norwich City Council Community Champion Data form](#) to capture data. This form has greater scope for free text, and therefore the training provided must reinforce that the trusted communicators are only required to capture anonymised data. NCC in their capacity as Data Controller will own these risks of using this type of form.

Evaluation- there has been a change in the data handing and processing- Data handlers at Norfolk Office of Data Analytics, Norfolk County Council will be providing the function of analysing project specific data available on the Insight bank.

Norfolk County Council is DSPT compliant. NODA will be provided with project specific as commissioned, to conduct the relevant analysis by identifying themes, trends and findings of conversations. This will be done as and when NODA are commissioned to provide analysis or when reports are requested by partners.

Onward sharing of insights- NHS Organisations and VCSE organisations can request to access reports to gather existing insights from communities facing health disadvantages to shape future engagement and design of (health) services. The ICB can provide PDF reports (a dashboard of the activity) to participating organisations. Access to the PowerBI platform will be assessed on individual requests made to the Community Voices Senior Programme Manager and a list held of those the data has been shared with can be found here - <https://improvinglivesnw.org.uk/community-voices-resources/data-protection/>

After completing Step 1 please forward your DPIA Initiation Checklist to nwccg.informationgovernance@nhs.net. The IG Team will be in contact with you to complete the following sections and establish whether a DPIA is required or not.

TO BE COMPLETED BY THE IG TEAM

Is a DPIA Required?	
If you tick YES to any of the sections below, the DPO will consider whether a DPIA is necessary.	
Does the project / system / process involve any of the following?	
Evaluation or scoring dependent on person identifiable data (i.e. risk stratification)	No <input checked="" type="checkbox"/>
Automated decision-making, including profiling with significant effect on the data subject(s)	No <input checked="" type="checkbox"/>
Processing children’s personal data for profiling or automated decision-making purposes, or for marketing, or to offer online services to be used by children	No <input checked="" type="checkbox"/>
Systematic monitoring involving patient data (i.e. performance data, activity)	No <input checked="" type="checkbox"/>
Systematic monitoring of a publicly accessible area on a larger scale (CCTV, surveillance equipment)	No <input checked="" type="checkbox"/>
Processing of sensitive data or data of a highly personal nature	No <input checked="" type="checkbox"/>
Processing on a large scale of special category data	No <input checked="" type="checkbox"/>
Processing of data concerning children or vulnerable data subjects	No <input checked="" type="checkbox"/>
Innovative technology or organisational solutions	No <input checked="" type="checkbox"/>
Processing that prevents data subjects from exercising their rights / using a service / or entering into a contract	No <input checked="" type="checkbox"/>
Combining, comparing or person identifiable data matching from multiple sources	No <input checked="" type="checkbox"/>
Processing personal data that could result in a risk of physical harm in the event of a security breach	No <input checked="" type="checkbox"/>
Processing biometric or genetic data	No <input checked="" type="checkbox"/>
Processing person identifiable data without providing a publicly available privacy notice	No <input checked="" type="checkbox"/>
Processing personal data in a way that involves tracking individuals’ online or offline location or behaviour	No <input checked="" type="checkbox"/>

Is the processing related to:	
A new process / system / project	Yes <input type="checkbox"/>
An existing process / system / project	Yes <input checked="" type="checkbox"/>

DPO Decision	
No further action required – project / process / system can proceed without a DPIA	No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>
Short Form DPIA should be completed	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>
Full Scale DPIA Required from CCG	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>
Completed by:	Penny Bexon-Symms Emma Chung IG Support Officers
Date:	22//09/2023