

# Norfolk and Waveney Integrated Care Board Privacy Notice

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## Who we are and what do we do

From the 01 October 2025 N&WICB will be working closely with Suffolk and North East Essex (SNEE) ICB, before the proposed forming of the Norfolk and Suffolk ICB on 01 April 2026. Whilst we work together information about both ICB's and their services may be shared to ensure the continuity of services in the transitional time.

NHS Norfolk and Waveney Integrated Care Board (NWICB) has responsibility for:

- securing, planning, designing, and paying for your NHS services,
- including planned and emergency: -
  - hospital care,
  - mental health services,
  - specialist Services
  - rehabilitation and
  - community services.
- Monitoring performance to ensure services are: -
  - safe
  - provide high quality care
  - meet the needs of the local population
- Responding to any concerns regarding services.
- Supporting the system to manage national emergencies



This is known as commissioning. We use information about you to enable us to do this effectively, efficiently, and safely.

NWICB is part of the Norfolk and Waveney Integrated Care System (ICS) which is a collaboration of local health and care organisations working together to improve the health, wellbeing and care of people living in Norfolk and Waveney.

For further information about our ICB and the ICS please refer to the 'About Us' page on our website. [NHS Norfolk and Waveney Integrated Care Board \(ICB\)](https://www.improvinglivesnw.org.uk) ([improvinglivesnw.org.uk](https://www.improvinglivesnw.org.uk))

## What is a Privacy Notice?

This Privacy Notice, tells you:

- what information we collect about you
- why and how we collect it
- what we do with it
- how we will look after it and
- who we might share it with.

This notice applies to all information held by the ICB relating to individuals, whether you are a current or previous patient / service user / workforce etc. It covers information collected directly from you or received from other individuals or organisations.

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This notice is not exhaustive; however, we are happy to provide any additional information or explanation needed. Any requests for this should be sent to our Data Protection Officer.

We revise our Privacy Notice regularly to ensure that it continually provides transparent information about the use of your data. This notice was reviewed in Sept 2025.

## **Our Commitment to Data Protection and Confidentiality**

We are committed to protecting your privacy and will only process personal information in accordance with relevant legislations such as, UK GDPR and the Data Protection Act 2018, the common law duty of confidentiality, Data Use & Access Act 2025 and the Human Rights Act 1998.

NHS Norfolk and Waveney ICB as a data controller is legally responsible for ensuring that all personal information is processed in accordance with data protection legislation, and that you can exercise your rights in respect of your information.

All data controllers must register their processing activities with the Information Commissioner's Office (ICO). Details of our registration can be found at [NHS Norfolk and Waveney ICB – ZB345066](#).

Everyone working for the NHS has a legal obligation to keep information about you confidential. The NHS Constitution provide a commitment that all NHS organisations and those providing care under an NHS contract will use records about you in ways that respect your rights and promote your health and wellbeing.

All of our staff, contractors and committee members receive appropriate annual training on data protection and confidentiality, to ensure that they are aware of their personal responsibilities and have contractual obligations to uphold confidentiality, enforceable through disciplinary procedures.

The ICB works with our data processors, to ensure that information is held in secure locations with restricted access to authorised personnel only. We protect any personal information that is held on our systems with encryption so that it cannot be accessed by those who do not have permission to do so.

## **Overseas Transfers and Marketing**

Your information will not be sent by the ICB outside of the United Kingdom to a country that does not have appropriate legislation to protect your privacy.

We will never sell any information about you.

We will never share your information with a third-party organisation for marketing purposes without your prior written consent.

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## Types of Information We Hold

The ICB uses and process several different types of information such as:

- **Anonymised information** – information about individuals with identifiable details removed, this assists the ICB to understand the use of services in Norfolk and Waveney but cannot identify you personally.
- **Pseudonymised data** – replaced identifiable information with a code which does not reveal an individual’s “real world” identity to the ICB but can be used by your health care provider to identify you using a deciphered code.
- **Aggregated data** – this does not reveal the identity of a person, but group’s health activity data together to provide the ICB with statistical data on trends or gaps in services.
- **Identifiable information** – such as your name, address, date of birth, NHS number, email address

Throughout this Notice you will see reference to an organisation called NHS England. They are the national body responsible for data management and information processing in health and social care. NHS England is legally responsible for receiving identifiable information from Primary Care and Secondary Care Providers in a secure manner, so that it can be reformatted into a dataset that can be legally used by the ICB.

## Where do we get your information from

We receive information in two ways, you could provide it to us directly from an individual, for example when you request Continuing Healthcare Assessment or when you contact us with an enquiry. The majority of the information we hold about you is provided to us by other organisations. This is usually in a pseudonymised format from health care providers such as NHS England, GP’s and Hospitals to help us plan, identify need and evaluate the effectiveness of health and care services and meet the needs of our population.

To support the Integrated Care System, the ICB also processes data on instruction from other organisations. On those occasions it becomes the data processor on behalf of the organisation who has shared the data (the data controller). An example of this is a dedicated team, reducing health inequalities, who contact patients who have been identified as at risk of developing health conditions, signposting them to further support from relevant organisations, and various health initiatives. You can find out more information on our webpages here:

- <https://improvinglivesnw.org.uk/our-work/working-better-together/health-inequalities/>
- [Population Health Management - Protect NoW - Norfolk and Waveney ICS](#)
- [Population Health Management Projects - Norfolk & Waveney ICS](#)

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## Who we share your information with

We work with several other NHS and partner agencies to provide health and social care services to you. We may also share anonymised statistical information with them for the purpose of improving local services, for example understanding how conditions spread across our local area compared against other areas.

We contract with other organisations to provide a range of services to us such as IT services, Payroll, and other support services. In these instances, we ensure that our partner agencies have contracts which outline that your information is processed under strict conditions and in line with the law.

We ensure our external data processors that support us are legally and contractually bound to operate and prove security arrangements are in place where data that could or does identify a person are processed.

Current external data processors:

- NHS Arden and Greater East Midlands CSU – Data Services for Commissioners Regional Offices (DSCRO) this is a regional secure service provided to the ICB by NHS England via the CSU, primary care IT Service Provider, risk stratification, commissioning intelligence analysis,
- Prescribing Services Limited – provider of risk stratification and population health management tools
- NHS Resolution – management of claims
- TIAA – Internal Audit
- Ernst & Young – External Audit – National Fraud Initiative [National Fraud Initiative - GOV.UK \(www.gov.uk\)](#)
- Grant Thornton – Counter Fraud Service
- NHS England
- NHS Improvement
- Public Health England
- Optum Health Solutions (UK) Limited – population health management
- Liaison Group and Xyla – Continuing Healthcare & Invoice Validation
- Norfolk Community Health & Care NHS Trust (NCH&C) – IT Service Provider
- NHS Midlands and Lancashire Commissioning Support Unit – supporting the community deprivation of liberty safeguard applications to the court of protection
- Wavenet System – for telephony systems
- Amazon Web Services – cloud hosting
- Liaison Financial Services – CHC invoicing
- Snowflake software for data processing

Information may be shared with our Health and Social Care partnering organisations, to meet your social and health care needs. Where information sharing is required with third parties, we will not disclose any health information without your explicit consent unless it is to offer a health service to you, or in exceptional circumstances or a legal obligation such as:

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- There is a risk of harm to someone or the wider community
- The prevention or detection of a serious crime
- Where we are required to do so by law
- Reporting some infectious diseases
- Prevention and detection of fraud – National Fraud Initiative (NFI)

If we are obligated to release information as described above, this will be done with the approval of our Caldicott Guardian or Data Protection Officer.

The ICB is party to several information sharing agreements which are drawn up to ensure information is shared in a way that complies with relevant legislation. These NHS and non-NHS organisations may include, but are not restricted to, social services, education services, local authorities, police, voluntary organisations, and public health.

## Why We Process Information about You

If you are receiving services from the NHS, we will need to use your information (paper or electronic) to provide treatment, to check the quality of your care, to help you make good decisions about your health and to investigate complaints and claims. We also use your information to:

- Assess the quality of care provided (a clinical audit)
- Service Evaluation
- Population Health Management – reducing inequalities and identifying need
- Protect the health of the general public
- Monitor how we spend public money
- Train healthcare workers
- Carry out research
- Help the NHS plan for the future

The ICB will use patient data to analyse the health of a population. This is required for the commissioning of health services, or to help target preventive care at certain groups of patients.

If we use your information for the above reasons, we will remove your name and other details which could identify you. However, if we need to use the information in a way that identifies you, we will ensure that we have a fair and lawful basis for doing so, such as:

- You have given us permission
- You have made a complaint to us about the healthcare you have received, and we need to investigate
- We need to provide funding for Continuing Healthcare Services
- You have asked us to assist in sourcing and funding specialised treatment for a particular condition that is not routinely available via the NHS
- You have asked us to keep you regularly informed about the work of the ICB and would like to be actively involved in our engagement and consultation activities.

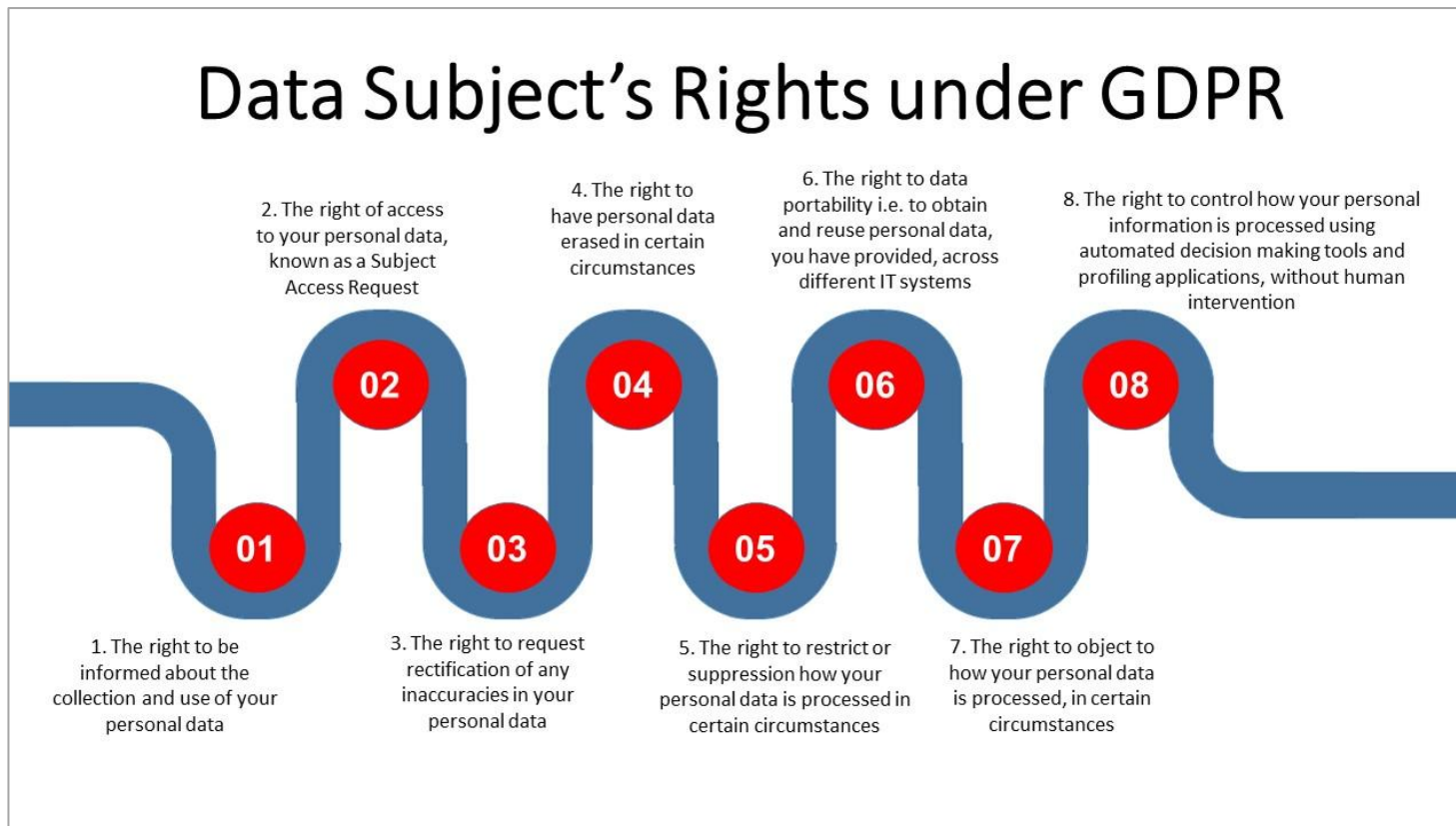
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- To protect children and vulnerable adults
- When a formal court order has been served upon the ICB
- When we are lawfully required to report certain information to the appropriate authorities i.e., for the prevention or detection of a crime
- In an emergency situation to assist us to protect the health and safety of our local population i.e., management of a pandemic
- When permission is given by the Secretary of State for Health or the Health Research Authority on the advice of the Confidential Advisory Group, i.e., to identify groups of patients who are at risk of an unplanned admission or deterioration in health.

As a result of the above processing activities, the information held by the ICBs about you may contain information provided by a relative, carer, health professional, social care provider, or those who are / have been directly involved in your health and social care.

## Your Rights

UK GDPR provides the following rights for individuals:



NHS Norfolk and Waveney ICB observes your rights, as detailed below. To enable the ICB to observe your rights it will be necessary to process your information in the administration of your request.

<b>To be informed</b>	This notice informs you how the ICB will use your information for the purposes of managing the local healthcare system.
<b>To access your information</b>	<p>You have the general right to see or be given a copy of personal data an organisation holds about you. This is known as a Subject Access Request. Full details of how to raise a request can be found in the ICB's Subject Access Request &amp; Information Rights Policy, which is available on our website.</p> <p>Further information on Subject Access Requests can be found via the Information Commissioners Office (ICO): <a href="#">For the public   ICO</a></p>
<b>To limit how your information is processed</b>	<p>The NHS Constitution states, “you have a right to request that your confidential information is not used beyond your own care and treatment, and to have your objections considered”. These are known as opt-outs and available at different levels.</p> <p>Further details of how to opt-out is contained within this Notice.</p>
<b>To have your data corrected</b>	Under UK GDPR you have the right to have inaccurate (i.e. incorrect or misleading) personal data rectified or completed, if you feel that there are omissions (subject to the original purpose for the processing). You can make this request either in writing or verbally, however the ICB has a duty to ensure that we have taken all reasonable steps to check that the information is correct.
<b>To have your data deleted</b>	<p>This is also known as the “right to be forgotten”. You can request that your information is erased if:</p> <ul style="list-style-type: none"> <li>• Your personal data is no longer necessary for the purpose it was originally collected and/or processed by the ICB</li> <li>• You wish to withdraw your consent for the ICB to hold your data and there is no overriding legitimate interest or legal obligation for the ICB to continue to process your data</li> <li>• You consider that the ICB has processed your information unlawfully; or</li> <li>• You have to exercise your right to erasure in order to comply with a legal obligation</li> </ul>

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	<p>We will communicate any erasure of information to anyone to whom it has been disclosed unless this is not possible or involves disproportionate effort. We will tell you who those recipients are if you ask us. We will also ensure that your information is erased from any backup systems as well as live systems.</p> <p>The right to erasure is not an absolute right and so there maybe situations where your request cannot be satisfied, such as:</p> <ul style="list-style-type: none"> <li>• The ICB must retain your data in order to comply with a legal obligation</li> <li>• The ICB is required to process your data to carry out a task in the public interest or in the exercise of an official authority</li> <li>• The ICB must retain your information for archiving purposes in the public interest, such as scientific research, historical research or statistical purposes where erasure is likely to render impossible or seriously hinder our ability to process information for commissioning purposes</li> <li>• Where the ICB needs to retain your data for the purposes of a defence or legal claim; or</li> <li>• In the case of special category data; <ul style="list-style-type: none"> <li>○ where we need to process data to protect the public’s health such as protecting against cross-border health threats and pandemics; and/or</li> <li>○ where a health professional processes data for the purposes of preventative or occupational medicine.</li> </ul> </li> </ul> <p>The ICB can also refuse to comply with your request if it is manifestly unfounded or excessive, taking into account whether the request is repetitive in nature. In these circumstances we can</p> <ul style="list-style-type: none"> <li>• request a “reasonable fee” to deal with your request, based on the administrative costs we may incur; or</li> <li>• inform you within one calendar month that we must refuse your request.</li> </ul> <p>If we are unable to satisfy your request, we will justify our decision.</p>
<b>Data Portability</b>	<p>You have the right to get your personal data from an organisation in a way that is accessible and machine-readable, for example as a csv file.</p>

	<p>You also have the right to ask an organisation to transfer your data to another organisation. They must do this if the transfer is, as the regulation says, “technically feasible”.</p> <p>As ICBs are not health care providers, we are unable to arrange the transfer of your medical files. However, we can arrange to transfer any information you have provided to us with your consent. You can make this request in writing using the contact details below, stating what information you would like transferred and to whom.</p>
<p><b>To object to the use of your data</b></p>	<p>The ICB will not publish any information that identifies you or routinely disclose any information about you without your express permission.</p> <p>You have the right to consent / refuse / withdraw consent to information sharing at any moment in time. There are possible consequences to not sharing but these will be fully explained to you to help you with making your decision. Please note that you can only raise an objection if your information is being processed to:</p> <ul style="list-style-type: none"> <li>• Carry out a task in the public interest</li> <li>• Fulfil the ICB’s legitimate interests</li> <li>• Conduct scientific or historical research or for statistical purposes; or</li> <li>• Conduct direct marketing</li> </ul>
<p><b>To control how decisions are made about you without human involvement</b></p>	<p>When decisions are made about you without people being involved, this is called ‘automated individual decision-making and profiling’ or ‘automated processing’, for short.</p> <p>In many circumstances, you have a right to prevent automated processing.</p> <p>The ICB uses an automated decision-making tool for recruitment purposes, to enable us to short list candidates for interview without revealing the identity of the applicant during the application process. This is to ensure that our selection process is only based on the individual’s suitability for the job, rather than prior knowledge of who the applicant is.</p>

	In addition, an automated decision-making tool is used to identify whether a group of patients is at risk of a deterioration in their health. By exercising an opt-out, your data will be excluded from an automated decision-making tool.
<b>To request information from a public body</b>	This is known as a Freedom of Information Request, under the Freedom of Information Act 2000. This request only relates to information that does not identify a living individual. Further details of how to raise a request can be found in the ICB's Publication Scheme.
<b>To raise a concern</b>	<p>You have the right to be confident that organisations handle your personal information responsibly and in line with good practice. You can raise a concern about the way the ICB is handling your information if you feel:</p> <ul style="list-style-type: none"> <li>• We are not keeping your information secure;</li> <li>• We are holding inaccurate information about you;</li> <li>• We have disclosed information about you;</li> <li>• We are keeping information about you for longer than is necessary; or</li> <li>• We have collected information for one reason and are using it for something else;</li> </ul> <p>Details of our complaints procedure is contained within this Notice.</p>

## Exercising an Opt-Out

There are different opt-outs available to you if you do not wish your data to be shared in an identifiable form.

Type Opt outs	Description and purpose	How to Opt Out
<b>Withdrawing consent</b>  Information given directly to the ICB	<p>Where we have received information from you directly using your consent, you can withdraw this at any time.</p> <p>If there is an overriding legal obligation for us to hold or share your personal information. Meaning we cannot comply with your request, we will provide you with full details of the reason why.</p>	You can withdraw your consent at any point by contacting the ICB contact details below.

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<p><b>Local Opt outs</b></p> <p>Information shared with the ICB for secondary use purposes</p>	<p>To help us manage the local health and social care system, the ICB may use anonymised or pseudonymised data that is shared with us by other health and social care services and ICS partner organisations. As this use of data is not for your direct care this is called secondary use of data.</p> <p><b>Risk stratification</b> An example of this is Risk Stratification. This use allows us to provide the services that are needed, in the right areas, helping to promote good health and social care and reducing health inequalities.</p> <p>Further information on Risk Stratification is available within this notice <a href="#">Risk Stratification</a></p> <p><b>Research</b> Your information is shared with the ICB and pseudonymised, and linked with other information within our Data Hub, once it is pseudonymised the ICB are allowed to use it for Commissioning purposes, planning and evaluation of services, research and evaluation of conditions.</p>	<p>If you do not wish for your personal data to be used for Risk Stratification, or Research you can choose to exercise a local opt out by contacting the ICB as below.</p> <p>Address: NHS Norfolk &amp; Waveney Integrated Care Board 8<sup>th</sup> Floor, County Hall Martineau Lane Norwich NR1 2DH</p> <p>Email address: <a href="mailto:nwicb.contactus@nhs.net">nwicb.contactus@nhs.net</a> Telephone Number: 01603 595857</p>
<p><b>Local Opt out</b></p> <p>Information shared between Health and Social Care organisations for direct care purposes</p>	<p><b>Shared Care Record</b> <a href="#">Shared Care Record (ShCR) - Norfolk and Waveney ICS (improvinglivesnw.org.uk)</a></p> <p>The ICB facilitate a service called the Shared Care Record – where health organisations securely upload specific health data which can then be accessed securely by other health and social care providers. If you do not want your information shared in this way the ICB facilitate these opt outs. The ICB do not have access to your health information but can facilitate your opt out choice.</p>	<p>If you do not wish for your information to be accessed for the purpose of your direct care in this way, you may opt out by emailing : <a href="mailto:nwicb.contactus@nhs.net">nwicb.contactus@nhs.net</a> with your:</p> <ul style="list-style-type: none"> <li>• Full Name,</li> <li>• Date of Birth and</li> <li>• NHS number.</li> </ul> <p>Please be aware that this may create clinical risks as health and care professionals will not see your records as easily.</p>

<p><b>The National Opt out – Research</b></p> <p>can be applied to Information provided to ICB from organisations that provide NHS services.</p>	<p>NHS England share your health data collected from organisations such as Hospitals with the ICB to enable commissioning and planning of services to meet your needs – this information is pseudonymised. The information can also be used as part of research if you allow this.</p> <p>National Opt Out means that your information cannot be used for research but is still used in a pseudonymised format by the ICB for commissioning purposes.</p>	<p>You are able to opt out from the use of your personal data for research and planning purposes. This is known as the National Data Opt Out. See NHS pages for more information <a href="#">National Data Opt-Out - NHS England Digital</a>. Your choice to opt-out will have no negative impact on your individual care.</p> <p>You can check or update your opt-out preference via the following link: <a href="https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/">https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/</a></p>
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## Retention and Destruction of Records

All records held by the ICB will only be kept for the duration specified in the [Records Management Code of Practice for Health and Social Care](#).

## Key Roles in the ICB

The ICB has a number of key roles which support the protection of your data:

- **Caldicott Guardian** - The ICB's Caldicott Guardian is a senior person responsible for protecting the confidentiality of patient and service-user information and enabling appropriate information sharing. The Caldicott Guardian actively supports work to enable information sharing where it is appropriate to share and advises on options for lawful and ethical processing of information. The Caldicott Guardian can be contacted at [nwicb.informationgovernance@nhs.net](mailto:nwicb.informationgovernance@nhs.net) or by using the "Contact Us" section of the website.
- **Senior Information Risk Owner (SIRO)** – The ICB's SIRO is an Executive Director with overall responsibility for an organisation's information risk policy. The SIRO is accountable and responsible for information risk across the organisation. The SIRO ensures that everyone is aware of their personal responsibility to exercise good judgement, and to safeguard and share information appropriately. The SIRO can be contacted at [nwicb.informationgovernance@nhs.net](mailto:nwicb.informationgovernance@nhs.net) or by using the "Contact Us" section of the website.
- **Data Protection Officer (DPO)** – The DPO is responsible for making sure that all information held by the ICBs is collected, stored, and used in accordance with current legislation such as the Data Protection Act 2018 and UK GDPR. The DPO is also responsible for the management and investigation of information breaches and incidents and for ensuring that the rights of individuals in respect of their personal data are upheld within the ICB.

If you wish to contact the ICB's Data Protection Officer regarding your personal information, you can find the details below:

Data Protection Officer  
NHS Norfolk & Waveney Integrated Care Board  
8<sup>th</sup> Floor, County Hall  
Martineau Lane  
Norwich, NR1 2DH

Email address: [nwicb.informationgovernance@nhs.net](mailto:nwicb.informationgovernance@nhs.net)

## What information we have and what we do with it

This is not an exhaustive list; the following pages provide key examples of the personal information ICB collects. Click on the option for more information:

Our lawful Basis for processing personal information are Public Task and Explicit Consent

The General Data Protection Regulation definition for processing

### Public Task

- Articles 6(1)(e) of GDPR: (e) Public task: the processing is necessary for you to perform a task in the public interest or for your official functions, and the task or function has a clear basis in law.
- Article 9(2)(h) of GDPR: (h) Health or social care (with a basis in law): (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 and services)

### Explicit Consent

- Articles 6(1)(a) the data subject has given consent to the processing of his or her personal data for one or more specific purposes.
- Article 9(2)(a) of GDPR: (a) Explicit consent: the data subject has given consent to the processing of his or her personal data for one or more specific purposes

Where the Common Law Duty of Confidentiality applies information is usually shared under Implied or Explicit Consent.

### Care Service Activities

Type of processing	Public Task	Explicit consent
<a href="#">ADHD Patient Transfer</a>	✓	
<a href="#">Assuring Transformation for People with Learning Disability, Autism or Both</a>	✓	
<a href="#">CHC - Handling Continuing Healthcare (CHC) Applications</a>	✓	
<a href="#">CHC - Retrospective Assessment Against CHC Eligibility</a>	✓	
<a href="#">CHC - Appeal against CHC eligibility</a>	✓	
<a href="#">Community Deprivation of Liberty Applications</a>	✓	
<a href="#">Funding Treatments such as IFR(Individual Funding Request)</a>	✓	
<a href="#">Individual Patient Pathway Service (IPP/LDAIPP)</a>	✓	✓
<a href="#">Care Navigators &amp; Mental Health Navigators inc Dynamic Support Register DSR</a>	✓	
<a href="#">Personal Health Budget</a>	✓	✓

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Type of processing	Public Task	Explicit consent
<a href="#">Pharmacy and medicines Optimisation</a>	✓	
<a href="#">Support for Patient Discharges</a>	✓	
<a href="#">Transition Risk Register</a>		
<a href="#">Vaccinations</a>	✓	
<a href="#">PIDMAS – Patient Initiated Digital Mutual Aid System</a>	✓	

## Commissioning and Reporting

Type of processing	Public Task	Explicit consent
<a href="#">Commissioning Assurance and Transformation of Services</a>	✓	
<a href="#">CHC Patient Level Data Set and Data Extractions</a>	✓	
<a href="#">Collaborative Care Market</a>	✓	
<a href="#">Invoice Validation</a>	✓	
<a href="#">Invoice Validation for CHC Care</a>	✓	
<a href="#">Risk Stratification</a>	✓	
<a href="#">Population Health Management</a>	✓	
<a href="#">Sub Licensing</a>	✓	
<a href="#">Service Redesign &amp; Evaluation – Place Working</a>	✓	
<a href="#">ICS Workforce Employee Reporting</a>	✓	

## Corporate Functions

Type of processing	Public Task	Explicit consent
<a href="#">Ernst &amp; Young – External Audit</a>	✓	
<a href="#">Communication</a>	✓	✓
<a href="#">Conflicts of Interest and Declaration of Gifts and Hospitality</a>	✓	
<a href="#">Learning Disabilities Funding Panel</a>	✓	
<a href="#">Management of Complaints</a>		✓
<a href="#">Management of Serious Incident</a>	✓	
<a href="#">National Fraud Initiative</a>	✓	
<a href="#">Patient and Public Involvement</a>	✓	✓
<a href="#">Primary Care Locum Reimbursements</a>	✓	
<a href="#">Recruitment</a>		✓
<a href="#">Emergency Preparedness, resilience, and response (EPRR)</a>	✓	
<a href="#">Workforce</a>		
<a href="#">Training, Expressions of Interest and Apprenticeships</a>	✓	✓
<a href="#">Apprenticeship</a>		✓
<a href="#">Wider Workforce Support, inc Career Intentions</a>		✓
<a href="#">National Dental Recruitment incentive</a>		✓
<a href="#">GP Educators and Learning Organisations</a>	✓	✓

## Quality

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Type of processing	Public Task	Explicit consent
<a href="#">Child Death Review</a>	✓	
<a href="#">LeDeR Programme</a>	✓	
<a href="#">Community keyworking- National Evaluations</a>	✓	
<a href="#">Evaluations</a>		✓
<a href="#">Micro-aggression portal</a>		✓
<a href="#">Management of general Dental Services</a>	✓	
<a href="#">Primary Care – management of Special Allocation Team</a>	✓	
<a href="#">Provision of pharmacy and Ophthalmology Services</a>	✓	
<a href="#">Request for Support / Investigation – Clinical Systems</a>	✓	
<a href="#">Quality, Equality &amp; Safety</a>	✓	✓
<a href="#">Safeguarding – Advice and Guidance</a>	✓	
<a href="#">Safeguarding – Prevent &amp; Protect</a>	✓	
<a href="#">Special Education Needs and Disability (SEND)</a>	✓	

## Research

Type of processing	Public Task	Explicit consent
<a href="#">Applicants for letters of Access (LOA) /Honorary Research Contracts (HRCs)</a>	✓	
<a href="#">Research Grants / Bursaries / Funding and collaboration</a>	✓	

## Care Services Activities

### ADHD Patient Transfer

Purpose	To ensure safe care transition from old provider to new provider.
Legal Basis	Health and Social Care Act 2008 and 2012
Processing Activities	<p>The exiting provider securely sent a list of active patients to NWICB to allow the ICB to find a new alternative service and ensure continuity and continuation of care, particularly for patients with urgent medication.</p> <p>The exiting provide will securely transfer patient records to the new provider. NWICB are overseeing this transfer for Norfolk and Waveney patients, and will also support the transfer of care for SNEE (Suffolk and North East Essex) patients due to the clustering agreement with the partnering ICB.</p> <p>Once the transfer is complete the personal data held by the ICB will be deleted. NWICB</p>

### Assuring Transformation for People with Learning Disability, Autism or Both

Purpose	<p>To ensure people are not in hospital if they would be better looked after in the community. The ICB collects information about people with;</p> <ul style="list-style-type: none"> <li>- a learning disability, autism or both,</li> <li>- who are getting care in hospitals for their mental health or</li> <li>- because they have displayed behaviour that can be challenging.</li> </ul> <p>This is called <b>Assuring Transformation Data</b>. This information tells us:</p> <ul style="list-style-type: none"> <li>• How many people with a learning disability and/or autism registered with a The Norfolk and Waveney GP Practice are in hospital</li> <li>• How long they have been in hospital</li> <li>• When their care and treatment has been checked</li> <li>• What kind of hospital they are in.</li> </ul>
Legal Basis	<p>NHS Act 2006 and Health and Social Care act 2012</p> <p><a href="https://www.england.nhs.uk/learning-disabilities/care/atd/">https://www.england.nhs.uk/learning-disabilities/care/atd/</a></p>
Processing Activities	<p>Every month NHS Norfolk and Waveney ICB securely submits this information to NHS England who publish a report on a monthly basis. <b>No</b> personal information is included in this report.</p> <p>If you are in hospital but do not want the ICB to use your data for the above purpose, you can let us know by contacting us either in</p>

[Link back to the top of the Document](#)

	writing, via email or by telephone. An “Assuring Transformation Easy Read Leaflet” is available from the ICB which explains the process in more detail. This can be obtained from our website.
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### Handling Continuing Healthcare (CHC) Applications

Purpose	If you make an application for CHC funding the ICB will use the information you provide, and where needed request further information from care providers, to identify eligibility for funding. If agreed, arrangements will be put in place to arrange and pay for the agreed funding packages with appointed care providers.
Legal Basis	Direct Care Provision – NHS Act 2006, Health and Social Care Act 2012, National Framework for NHS continuing Healthcare and NHS funded Nursing Care July 2022
Processing Activities	<p>The clinical professional who first sees the patient to discuss their needs will explain what information will be collected and how this will be used to assess and commission a package of care. As information will be required from a variety of sources (i.e., GP, care home, hospital) the assessor will obtain your permission under the common law duty of confidentiality, to contact these organisations to gain the information required to inform the assessment.</p> <p>The ICB has commissioned the services of Liaison Group to conduct CHC reviews. This will enable the ICB to manage its current backlog of reviews and ensure that patients receive appropriate CHC funding to meet their current needs. Liaison Group will act as a Data Processor on behalf of NWICB, processing personal data to our written instructions in accordance with the DPA and UK GDPR.</p>

### Retrospective Assessment Against CHC Eligibility

Purpose	The ICB offers a service to retrospectively assess CHC eligibility if the individual was not assessed at all in the past. This is known as a “previously unassessed periods of care”.
Legal Basis	<p>NHS Act 2006, Health and Social Care Act 2012 and National Framework for NHS continuing Healthcare and NHS funded Nursing Care July 2022</p> <p>Under common law duty of confidentiality, we will seek consent. Your consent will also be requested to access any new health and social care information that may impact on your eligibility status.</p>
Processing Activities	Limited and authorised clinical members of the CHC Team will contact health and social care providers who have been engaged in your care, and request copies of information that are needed to inform an assessment. This will be done with your consent.

	<p>The ICB has commissioned the services of Liaison Group to conduct CHC reviews. This will enable the ICB to manage its current backlog of reviews and ensure that patients receive appropriate CHC funding to meet their current needs. Liaison Group will act as a Data Processor on behalf of NWICB, processing personal data to our written instructions in accordance with the DPA and UK GDPR.</p>
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### Appeal against CHC eligibility

Purpose	<p>The Continuing Healthcare Team provides a “local resolution” service for individuals who wish to appeal against an eligibility decision. The team will use data obtained as part of the application process to check that the original assessment was conducted in accordance with the National Framework for Continuing Healthcare.</p>
Legal Basis	<p>NHS Act 2006, Health and Social Care Act 2012 and National Framework for NHS continuing Healthcare and NHS funded Nursing Care July 2022</p> <p>Under common law duty of confidentiality, we will seek consent. Your consent will also be requested to access any new health and social care information that may impact on your eligibility status.</p>
Processing Activities	<p>Limited and authorised members of the CHC Team will access information already provided as part of the assessment process. This information will be available from our administration system, Broadcare.</p> <p>If insufficient information is available to determine eligibility based on the grounds for appeal, the CHC Team will contact other providers engaged in your care to request further information. Only the minimum information needed to inform the appeal will be requested.</p> <p>All new data and the outcome of the appeal will be recorded within your electronic patient record in Broadcare.</p> <p>The ICB has commissioned the services of Liaison Group to conduct CHC reviews. This will enable the ICB to manage its current backlog of reviews and ensure that patients receive appropriate CHC funding to meet their current needs. Liaison Group will act as a Data Processor on behalf of NWICB, processing personal data to our written instructions in accordance with the DPA and UK GDPR.</p>

### Community Deprivation of Liberty Applications

Purpose	<p>Patients that are in receipt of fully funded continuing health care are appropriately safeguarded via authorisation from the court of protection.</p>
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	<p>A deprivation of liberty is defined as being not free to leave and under continuous supervision and control. Anyone experiencing a deprivation of liberty (DOLS) and lacks capacity to make a decision about their care arrangements must be safeguarded via the appropriate routes. Where people live in their own home or supported living and are in receipt of fully funded continuing health care the responsibility for seeking authorisation of care arrangements which amount to a DOLS is the ICBs responsibility.</p> <p>Decisions on capacity and best interest are made by continuing health care practitioner where the patient is fully funded for NHS continuing health care.</p> <p>In order to make applications to the court of protection information relating to the patient will be shared with legal advice and organisation contracted to provide a community deprivation of liberty services on behalf of the ICB</p>
Legal Basis	<p>Article 5 of the human rights act 1998 describes the right to liberty and security which protects an individual's freedom from unreasonable detention. There are three means of restricting the persons liberty: -</p> <ul style="list-style-type: none"> <li>• mental health act, 2005, schedule (A) 1</li> <li>• criminal justice processes, and</li> <li>• mental capacity act. 2005 see section 14Z31</li> </ul>
Processing Activities	<p>The CHC Team hold information on a recording system called Broadcare, which is collected, stored and processed by the ICBs for the purposes of assessment and administering CHC packages of care this includes DOLS</p> <p>The ICB has identified a third-party data processor NHS Midlands and Lancashire CSU who is under contract to assist the ICB with reviewing the Broadcare records for patients who are potentially eligible for a DOLS applications for court of protection. They will be responsible for completing the all the necessary paperwork for applications for the court of protection and updating the Broadcare system</p>

### Funding Treatments (IFR)

Purpose	<p>Personal information is processed to facilitate Individual Funding Requests (IFR).</p> <p>These can be to fund specialist drugs, Mental Health support, or rare treatments, including dental care, diabetic technology, MyAirVo2 – for the treatment of chronic obstructive pulmonary disease.</p>
Legal Basis	NHS Act 2006 and Health and Social Care Act 2012

Processing Activities	<p>The clinical professional who first identifies that you may need the treatment, will explain to you what information will need to be shared with the ICB and the process in order for us to assess your needs and commission your care.</p> <p>The ICB will use the information you provide and, where needed, request further information from care providers to identify eligibility for funding.</p> <p>This includes the processing of information such as travel expenses and sourcing alternate provides for treatment.</p> <p>Information can be shared with specific companies who will be able to provide the specific product or service requested in the funding application.</p> <p>Mental Health Individual funding requests are discussed at the Clinical Reference Group, redacted information is shared with external health organisations to support decision making.</p> <p>If agreed, arrangements will be put in place to arrange and pay for the agreed funding packages with appointed care providers.</p> <p>Information may be stored within the Blueteq system to facilitate panels and manager records in line with the Records Management Code of Practice.</p>
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### Individual Patient Pathway Service (IPP/LDA IPP)

Purpose	The IPP Team commissions and provides ongoing oversight of individual packages of care for patients where there are either; no mainstream services able to support them; or their needs require specialist provisions due to the highly complex nature of their needs.
Legal Basis	Direct Care Provision – NHS Act 2006 and Health and Social Care Act 2012 Explicit Consent under Common Law Duty of Confidentiality.
Processing Activities	<p>We receive information from: NHS and Private Independent Hospitals. NHS Trusts. Local Authorities. GP Practices. Individual patients, family members and carers and the individual's support staff.</p> <p>As the coordination of care can involve liaising and sharing your personal data with many organisations. Such as:</p> <ul style="list-style-type: none"> <li>• NHS and Private Independent Hospitals, NHS Trusts,</li> <li>• Local Authorities,</li> <li>• GP Practices,</li> <li>• You, your family members and carers and,</li> <li>• Your care and support staff, Care Education and Treatment Review and Scrutiny Panel members</li> </ul>

	<p>The IPP Team will also seek your permission to do so under the common law duty of confidentiality. This will enable the team to fulfil the following functions:</p> <ul style="list-style-type: none"> <li>• Clinical management and oversight of patients on an IPP pathway, including conducting regular care reviews and discharge planning processes</li> <li>• Sourcing appropriate placements</li> <li>• Negotiating Patient Care Agreements (PCAs) with care providers</li> <li>• Monitor the appropriateness and effectiveness of provider contracts</li> </ul> <p>Limited and authorised members of the IPP Team will use your personal information to contact care providers who are able to deliver specialised care. This information will be used to establish a patient care agreement.</p> <p>The IPP Team will record all information within our administration system.</p> <p>The IPP team also manage oversight of the Dynamic Support Register (DSR) and the Non Dynamic Support Register</p> <p>This is managed by explicit consent, information is shared with NHS England and the LDPB Learning and Disabilities Partnership Board. This information does not contain personal details.</p> <p><a href="#">NHS England » Dynamic support registers and Care (Education) and Treatment Review code of practice</a></p>
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## Care Navigators & Mental Health Navigators & DSR

Purpose	<p>The NHS Long Term Plan pledges that children and young people with a learning disability, autism or both with the most complex needs will have a designated keyworker (also known as a Navigator). On the success of this service funding was received to provide a Mental Health Care Navigator Service.</p> <p>The aim of the service is to prevent problems from escalating to the point of crisis and to prevent hospital admission or readmission and ensure services ‘wrap around’ the young person and their family so they are able to access the care and treatment they need at home, or as close to home as possible. Navigators will work closely with children, young people and their families to improve their quality of life, ability</p>
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	<p>to cope and to put in place the confidence, skills and knowledge to sustain a safe and happy home.</p>
<p>Legal Basis</p>	<p>NHS Act 2006 and Health and Social Care Act 2012</p>
<p>Processing Activities</p>	<p>Referrals are made to the Navigators service by Norfolk County Council, Suffolk County Council, Norfolk &amp; Suffolk Foundation Trust (NSFT), Norfolk Community Health &amp; Care (NCH&amp;C), Norfolk &amp; Norwich University Hospital (NNUH), James Paget University Hospital (JPUH), Queen Elizabeth Hospital Kings Lynn (QEHL) and Hertfordshire Partnership University NHS Foundation Trust (HPFT), East of England Provider Collaborative.</p> <p>The organisations working with families are Family Partnerships, Family Action, SENSational families, Family Voice and Norfolk Parent Carer Network.</p> <p>The ICB will not be sharing any clinical or social care notes with these providers. Families will be sharing their information directly with these organisations.</p> <p>The child/young person or their parent/carer is asked to sign a Consent Form to agree to be added to the Dynamic Support Register (DSR) or the Mental Health Dynamic Support Register (MHDSR) and provided with an information leaflet to explain what the DSR is. Service users choose their most preferred method of communication with the Care Navigators; this can sometimes be message / Whatsapp. The method is documented by the team.</p> <p>The consent form also allows appropriate information to be shared between Health, Education &amp; Social Care to enable the child/young person to be safely supported. - <a href="#">Norfolk &amp; Waveney Integrated Care System (ICS) (improvinglivesnw.org.uk)</a>  <a href="#">NHS England » Dynamic support registers and Care (Education) and Treatment Review code of practice</a></p>

	The ICB is required to report progress to NHS England on a quarterly basis. This does not include any Personal Identifiable Data.
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### Personal Health Budget

Purpose	A Personal Health Budget is an amount of money to support the identified healthcare and wellbeing needs of an individual, which is planned and agreed between the individual, or their representative, and the ICB. To support this process, the ICB will process personal confidential data including special category / sensitive data to evaluate, agree and monitor any personal health budgets.
Legal Basis	NHS Act 2006, Health and Social Care Act 2012 and under NHS (Direct Payments) Regulations 2013
Processing Activities	Limited and authorised members of the CHC Team will use your personal information to contact care providers, where you have asked the ICB to support you to arrange your care. We will also process your information to ensure that your care needs are being met in accordance with your care plan and that your budget is appropriate and sufficient to meet your needs.

### Pharmacy and Medicines Optimisation

Purpose	<p>The Medicines Optimisation team supports the ICS with queries and problems concerning medicines. They support the provision of high-quality, evidence-based and cost-effective prescribing and medicines optimisation.</p> <p>They also manage prescriber codes issuing codes for newly registered staff and removal of codes no longer required.</p> <p>Clinical records and reporting in the practice's clinical system is accessed for the purposes of audit or performance.</p>
Legal Basis	NHS Act 2006 and Health and Social Care Act 2012
Processing Activities	<p>Data processing is carried out with agreement from the data controller – usually the GP practice. Access to the system is controlled by the GP practice. Your medical record may be accessed in full or Summary Care Record to process certain requests made to us by the GP practice.</p> <p>For the purposes of auditing, only NHS numbers are documented for data collection where necessary. This information is destroyed once the audit is completed and the results are recorded.</p>

	Data is shared within the Medicines Optimisation team using MedOptimise recording system (CoordinateRx is now the new name for MedOptimise) and the ICB for the purposes of financial and quality monitoring, commissioning and supply of services. Individual patient level data is never shared for these purposes.
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## Support for Patient Discharges

Purpose	<p>To support the hospitals patient discharge process from hospital wards to the appropriate setting.</p> <p>The ICB has a responsibility outlined in the Government's 'Hospital Discharge Service: Policy and Operating Model' first published in March 2020 and <a href="http://www.gov.uk">Hospital discharge and community support guidance - GOV.UK (www.gov.uk)</a></p>
Legal Basis	<p>Public Task - Section 82 of the NHS Act 2006 <a href="#">Section 82 of the NHS Act 2006</a> requires NHS bodies and local authorities to cooperate with one another to secure and advance the health and welfare of their local population. NHS bodies and local authorities must also comply with duties in the Care Act 2014, which requires them to co-operate with each other in the exercise of their respective care and support functions, including those relating to carers and young carers (section 6 and 7).</p>
Processing Activities	<p>The ICB facilitates multi-disciplinary meetings with organisations across the Integrated Care System. Data is processed to enable the health and care system to:</p> <ul style="list-style-type: none"> <li>• Determine how best to support the individuals who are ready for discharge in an appropriate and proportionate way in the community.</li> <li>• Monitor performance at key points for the purposes of: <ul style="list-style-type: none"> <li>○ maintaining system operational flow and Provider performance</li> <li>○ learning lessons from the data to continuously improve services, and</li> <li>○ identifying opportunities to use system capacity and Provider resources in different ways.</li> </ul> </li> </ul> <p>Teams involved in this support are The Central Norfolk UEC and Quality &amp; Care Team, the Home First team, and the Integrated Transfer of Care Team East</p> <p>These teams support the 'Discharge to Assessment' process and manage a referral hubs to signpost referrals to the most appropriate services/teams/beds and monitor the system.</p>

## Transition Risk Register

<p>Purpose</p>	<p>To support the transition from paediatric to adult services for young people and families with profound learning and physical disabilities and young people who are autistic and display complex behaviours which challenge</p> <p>To manage the multiple transitions, through multiple services to support improved outcomes we have adopted a support register model to help case managers work collaboratively and coordinate these complex transitions.</p> <p>The need for improvement has been seen in LeDeR (Learning from Lives and Deaths: People with A Learning Disability and Autistic People), to support the most complex transitions for young people with SEND (Special Educational Needs and Disabilities), whose circumstances posed a significant risk or created significant complexity to their transition. This will be called The Norfolk and Waveney Children and Young People’s Complex Transition Support Register (CYPTSR).</p>
<p>Legal Basis</p>	<p>NHS Act 2006 and Health and Social Care Act 2012</p>
<p>Processing Activities</p>	<p>Referrals to place a young person on the register could be received from:</p> <ul style="list-style-type: none"> <li>- Norfolk County Council,</li> <li>- Suffolk County Council,</li> <li>- Norfolk &amp; Suffolk Foundation Trust (NSFT),</li> <li>- Norfolk Community Health &amp; Care (NCH&amp;C),</li> <li>- Norfolk &amp; Norwich University Hospital (NNUH),</li> <li>- James Paget University Hospital (JPUH),</li> <li>- Queen Elizabeth Hospital Kings Lynn (QEHKL) or</li> <li>- Norfolk and Waveney ICB.</li> </ul> <p>The referrer will remain that person’s case manager and be responsible for them and actioning agreed next steps from the group. They will document updates on their own patient management systems and continue to hold responsibility for the young persons care and support.</p> <p>This process will be open to all young people with complex health needs and/or complex behavioural needs who have a learning disability, autism or fall into the SEND criteria. This process would exclude young people held on the Norfolk and Waveney Dynamic Support Register (DSR)</p>

	<p>Information will be used purely to help the wider group discuss and advise on suitable actions for the case manager to take to coordinate the transition.</p> <p>The support register will contain an agreed minimum dataset to allow the group to meet the aims and objectives. This will include:</p> <ul style="list-style-type: none"> <li>• Name</li> <li>• Date of Birth</li> <li>• NHS Number</li> <li>• Locality</li> <li>• Case Manager/Referrer</li> <li>• Diagnosis</li> <li>• Transition Concerns</li> <li>• Agreed actions and Updates</li> </ul> <p>The information will be shared across organisations as necessary and agreement to this forms part of the consent form.</p> <p>The child/young person or their parent/carer is asked to sign a Consent Form to agree to be added to the Register</p>
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## Vaccinations

Purpose	The ICB supports national vaccine programmes under instruction from NHS England. Currently the remit of the team is Covid, Flu and Monkeypox, but this may expand dependant on instruction from NHS England.
Legal Basis	<p>Regulation 3(1), (5) &amp; (7) of the Health Service (Control of Patient Information) Regulations 2002 (“the COPI Regulations”) to support the response to Covid-19.</p> <p>Data Protection Act 2018 – Schedule 1, Part 1, 2(a) preventative or occupational medicine, (b) provision of healthcare or treatment (f) the management of healthcare systems or services or social care systems or services.</p>
Processing Activities	This involves working with Acute Trusts, Local Authorities, Vaccination Centres, PCN Primary Care Vaccination Hubs to coordinate and deliver vaccination programmes across Norfolk & Waveney. This work will be ongoing due to the updates to JCVI (Joint Committee for Vaccination & Immunisation) guidance regarding patient cohorts and eligibility criteria.

	In line with NHS England direction in relation to programmes of vaccination, the ICB is required to process personal confidential information such as – vaccination status, demographics (e.g., name, address, date of birth, contact number), cohort, any relevant conditions or circumstances which may affect vaccination and dates of any previous vaccination doses given.
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## PIDMAS – Patient Initiated Digital Mutual Aid System

Purpose	To give patient choice for those waiting over 40 weeks without an appointment or an admission data to be invited to move to another provider for quicker treatment via the PIDMAS system.
Legal Basis	NHS E Directive - <a href="#">NHS England » Patient choice</a> NHSE are required to use this information through the Health and Social Care Act 2022 – section 3I Duty as to patient choice. The Board must, in the exercise of its functions, act with a view to enabling patients to make choices with respect to aspects of health services provided to them. <i>From the statutory duties list:</i> To promote a comprehensive health service To arrange the provision of health services in England as well as having regard to impact of services in certain areas and performance of functions outside England.
Processing Activities	When you sign up to the PIDMAS System your information will be shared with the ICB for the purpose of facilitating the transfer.  The ICB receive waiters information from local hospitals this is shared with our virtual support team so they can contact you and advise of offers to transfer to other hospitals to enable reduced wait times. The outcome of this contact will be shared back to the provider to update your records. <a href="#">Patient Initiated Digital Mutual Aid System (PIDMAS) - Norfolk &amp; Waveney Integrated Care System (ICS (improvinglivesnw.org.uk))</a> .  Information will only be held for the purpose of contact and transfer and once the work is complete, the hospitals will be updated and the ICB copies of information will be destroyed.

## Commissioning and Reporting

### Commissioning, Assurance and Transformation of Services

Purpose	To use pseudonymised (Not identifiable) Datasets: - <ul style="list-style-type: none"> <li>• Commissioning Datasets (Hospital and Community data),</li> <li>• GP datasets and</li> <li>• Other provider datasets,</li> </ul>
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	<p>to provide intelligence to support the commissioning of health services. <a href="#">Data sets - NHS England Digital</a></p> <p>The data (containing both clinical and financial information) is analysed so that health care provision can be planned to support the needs of the population within the ICB area.</p> <p>The data is used to:</p> <ul style="list-style-type: none"> <li>• Performance management and monitoring of services;</li> <li>• Ensure patients are receiving quality and cost-effective care;</li> <li>• Prepare statistics on NHS performance for NHS England, and to support service redesign, modernisation and improvement;</li> <li>• design future services;</li> <li>• Validate activity/costs and service delivery to ensure the service commissioned is the one you experience. This could include challenging other NHS organisation about care being delivered and the associated costs.</li> <li>• Thoroughly investigating the needs of the population, to inform the commissioning or appropriate services for that Population's health needs.</li> <li>• Stratify patients and activity based on risk and conditions.</li> <li>• Gain evidence on how we can improve local health services</li> <li>• Audit NHS accounts.</li> </ul>
<p>Legal Basis</p>	<p>Section 251 NHS Act 2006, Health and Social Care Act 2012</p>
<p>Processing Activities</p>	<p>As described by NHS England - <a href="#">NHS England » Data services for commissioners</a>. Hospitals and community organisations that provide NHS-funded care must submit certain information to NHS England about services provided to our local population. NHS England then share this information with the ICB. This information is generally known as commissioning datasets.</p> <p>In addition the ICB receive a range of data as listed in our contract with health care providers, this is called 'local data'.</p> <p>These datasets are used in a format that does not directly identify you. Both are used to support decision making for commissioning.</p> <p>The level of information provided is not sufficient to re-identify you but we can look at usage of services via a unique reference that helps us understand what parts of the system an individual accesses, however we are never aware of who that individual is.</p> <p>ICBs are required to adopt strict security controls when using these commissioning datasets under a Data Processing Contract with NHS England that is reviewed and refreshed on a regular basis.</p>

	<p>We also receive similar (de-identified) information from our GP Practices, via the data processor AGEM. We cannot identify individual patients from this data but can link this information to the 'Commissioning' datasets.</p> <p>If you do not wish to your information to be captured in these datasets, you can raise an opt-out. Further details of how you can do this is contained within this Notice.</p> <p>Information is stored in the Data Hub – follow the below link for more information about the data hub. <a href="https://www.improvinglivesnw.org.uk">Data Hub - Norfolk &amp; Waveney Integrated Care System (ICS (improvinglivesnw.org.uk))</a></p>
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### CHC Patient Level Data Set and Data Extractions

Purpose	<p>The national CHC Strategic Improvement Programme extract data from our patient administration system, Broadcare to understand the variation in content and value of care packages. The ICB are required, under the NHS Continuing Healthcare Directions 2022, enforced by NHS England, to submit a monthly CHC Patient Level Data Set to NHS England.</p> <p>The data will be used by NHS England to:</p> <ul style="list-style-type: none"> <li>• Analyse the cost of CHC packages</li> <li>• Where patients are being placed out of area</li> <li>• Where care packages are changing frequently</li> <li>• Other evidence which may indicate poor outcomes for patients, so that they can be identified and addressed</li> </ul> <p>The data will be used to support better outcomes, better patient experience and better use of resources.</p>
Legal Basis	<p>NHS England's Statutory Functions – NHS Act 2006 and Health and Social Care Act 2012 (specifically Section 254(1) and 254(6))</p>
Processing Activities	<p>The CHC Team will extract data currently held in Broadcare, which is collected, stored and processed by the ICBs for the purposes of assessment and administering CHC packages of care. The data extraction process is conducted between the CHC SIP Team and Broadcare. The extraction will involve pseudonymised data fields to protect the confidentiality of individual service users.</p> <p>The extraction will include an end-to-end data set (from referral to end of service provision) for each patient who has been assessed for CHC funded care. This data set will include patient who are eligible, as well as those who have been assessed and are not eligible.</p>

	<p>Explicit consent to flow data to NHS England under Directions issued by NHS England is not required. As a result, individuals may not opt out or object to use of their data used in this way.</p> <p>Data is pseudonymised and shared into the Data Hub, for operational purposes such as commissioning and reporting as with other datasets.</p>
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## Collaborative Care Market

Purpose	<p>To combine data relating to the commissioning of nursing care across: -</p> <ul style="list-style-type: none"> <li>• Norfolk County Council</li> <li>• ICB</li> <li>• Suffolk County Council</li> </ul> <p>to support the development of a sustainable care market that provides high quality care to people across Norfolk and Waveney, increasing cost efficiencies by delivering closer alignment across the commissioning functions.</p> <p>There is the need to share data containing NHS numbers so that we can generate accurate joint costings</p>
Legal Basis	<p>Exercising its functions effectively, efficiently and economically Section 14Z33 of the NHS Act 2006</p>
Processing Activities	<p>Linking the data from the two systems that are used to support the funding of Continuing Healthcare (CHC) /Funded Nursing Care (FNC) including people who use Personal Health Budgets (PHB) and use Personal assistants (PAs) (over 18 years of age and includes LD&amp;A).</p> <p>The data will be analysed to deliver efficiencies.</p>

## Invoice Validation

Purpose	<p>To ensure that the ICB is paying appropriately for the care given to its residence/population.</p> <p>As we are responsible for paying for care, we may need to ask for evidence of the care provided, to ensure that it was appropriate, provided by the right organisation and to ensure it was the best use of public funding.</p>
Legal Basis	<p>Section 251 NHS Act 2006, Health and Social Care Act 2012</p>
Processing Activities	<p>The use of limited information about individual patients is required when validating invoices received for healthcare provided, in most cases limited data such as the practice code is used to make such payments.</p>

	<p>In some instances, information to confirm that you are registered at a GP Practice within our area is needed to make such payments to ensure the invoice is accurate and genuine.</p> <p>This will be performed in a secure environment and will be carried out by a limited number of authorised staff</p> <p>The Norfolk and Waveney ICB is an accredited Controlled Environment for Finance (CEfF) under a Section 251 exemption, which enables us to process patient identifiable information without consent for the purposes of invoice validation – CAG 7-07(a)(b)(c)/2013</p> <p>Liaison Financial Services LTD <a href="#">CHC Invoice Validation Reviews - Liaison Group</a> are also an accredited CEfF, and processes invoiced on behalf of the ICB for Continuing health care.</p> <p>The process involves a limited number of authorised staff using your NHS number, postcode and/or date of birth to establish whether we are responsible for paying for your care. The minimum information necessary is always used for this purpose.</p>
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### Invoice Validation for CHC Care

Purpose	If you are in receipt of CHC, we will still need to make sure that the care you receive is in accordance with your care plan, and that it is chargeable to our ICB. To do this we will use the records already available to us in our CHC administration system, Broadcare.
Legal Basis	NHS Act 2006, Health and Social Care Act 2012, National Framework for NHS continuing Healthcare and NHS funded Nursing Care July 2022
Processing Activities	<p>When we receive an invoice for your care, we will check that it meets the needs of your care plan. This will be done using a unique identifier. Wherever possible we will not use your person identifiable information to validate invoices.</p> <p>However, if there is a discrepancy, i.e., we have received an invoice for care not mentioned in your care plan, we may review our records and your personal information to assess whether your care needs have changed and your package needs to be reviewed. We will of course contact you if there any changes are required to your care plan.</p>

### Risk Stratification

Purpose	NHS England encourages ICBs and GPs to use risk stratification tools to develop strategies to support patients with long term conditions and to help prevent avoidable admissions, by predicting when a deterioration in health is likely to occur.
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	<p>Risk stratification is part of overall Population Health Management activities which bring together health related data for identifying and managing patients who should be classified as:</p> <ul style="list-style-type: none"> <li>• “at risk of an emergency hospital admission or deterioration in health” or</li> <li>• identify a specific population that health services may then prioritise.</li> </ul> <p>The Purpose is to:</p> <ul style="list-style-type: none"> <li>• Reduce health inequalities and improve overall outcomes.</li> <li>• Help decide if a patient is at greater risk of suffering a particular condition</li> <li>• Prevent an emergency admission to hospital</li> <li>• Identify if a patient needs medical help to prevent a health condition from getting worse.</li> <li>• Help the ICB to commission appropriate preventative services and promote quality improvements in existing services.</li> </ul>
<p>Legal Basis</p>	<p>GDPR Article 6(1)(e) - processing is necessary for the performance of a task carried out in the exercise of official authority vested in the controller.</p> <p>GDPR Article 9(2)(h) - processing is necessary for the purposes of the provision of health or social care or treatment or the management of health or social care systems and services.</p> <p>Section 251 (NHS Act 2006) approval (CAG 7-04(a)/2013) from the Secretary of State, through the <a href="#">Confidentiality Advisory Group</a> of the Health Research Authority, sets aside the Common Law Duty of Confidentiality. This enables pseudonymised information to be sent to the ICB via NHS England (<a href="https://digital.nhs.uk/services/data-services-for-commissioners/data-services-for-commissioners-regional-offices">https://digital.nhs.uk/services/data-services-for-commissioners/data-services-for-commissioners-regional-offices</a>) in order to help us plan the most appropriate health services for our population.</p>
<p>Processing Activities</p>	<p>Risk stratification tools use various combinations of data about patients such as age, gender, diagnoses, hospital attendance, admission and primary care data collected by your GP in practice systems. This data could be pseudonymised, anonymised or aggregated.</p> <p>Risk Stratification is a process which applies algorithms, or calculations to identify those patients who are most at risk from certain medical conditions and who will benefit from clinical care to help prevent or better treat their condition.</p> <p>The ICB has commissioned the services of two authorised Risk Stratification Providers to provide risks stratification tools that have been approved by NHS England:</p>

- Prescribing Services Limited (PSL); and
- Arden & GEM Commissioning Support Unit (AGEM CSU)
- Data processing takes place under a contract to ensure that contractual obligations on the providers are enforceable.
- The ICB has a data sharing contract in place with NHS England which enables PSL to have access to secondary care data (Inpatient, Outpatient, Accident and Emergency, Out of Hours, Urgent Care, Community Nursing, Community Mental Health) at an identifiable level (via the NHS Number) which it can link to primary care data. Subsequent use of data is then pseudonymised.
- AGEM CSU uses a process that converts identifiable data at source and then removes NHS Numbers. This is then handled by the ICB as a commissioning data set. This enables linkage to other data sets provided to the ICB where permitted. (This processing does not require Section 251 approval).
- Our GP Practices also have a data sharing contract in place with PSL and AGEM CSU to flow primary care data into their risk stratification tools. They act as data processor under very specific instructions from the GP practice.

The ICB complies with national opt out processes.

Your details will only be processed if there is a legal basis to do so such as direct health or social care need. This means the data is not identifiable and remains that way until a request is made by a clinician or support team (who already has a direct relationship with you) to re-identify with the intention of offering direct care and support.

If you do not wish for your personal data to be used for Risk Stratification, you can choose to exercise a local opt out by contacting the ICB using the contact details within this Notice. See Contacting Us section at the end of this Notice.

In order for us to comply with your opt-out request, a level of identifiable data will need to be retained by us as a record of your request and our subsequent processing of this. The data retained will be the minimum required for the processing undertaken.

## Population Health Management

Purpose	Population Health Management (PHM) is aimed at improving the health of an entire population. 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
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	<p>reduce the occurrence of ill-health and looks at all the wider factors that affect health and care.</p> <p>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.</p> <p>Examples of how data could be used for a number of healthcare related activities include:</p> <ul style="list-style-type: none"> <li>• improving the quality and standards of care provide</li> <li>• research into the development of new treatments</li> <li>• preventing illness and diseases</li> <li>• monitoring safety</li> <li>• planning services</li> </ul>
<p><b>Legal Basis</b></p>	<p>GDPR Article 6(1)(e) – processing is necessary for the performance of a task carried out in the exercise of official authority vested in the controller</p> <p>GDPR Article 9(2)(h) processing is necessary for the purposes of the provision of health or social care or treatment or the management of health or social care systems and services.</p> <p>In the majority of cases, anonymised data is used so that you cannot be identified. Where identifiable data is used, this is done under contract with the relevant healthcare providers.</p>
<p><b>Processing Activities</b></p>	<p>The ICB has commissioned the services of two providers who conduct Risk Stratification to support PHM:</p> <ul style="list-style-type: none"> <li>• Prescribing Services Limited (PSL); and</li> <li>• Arden &amp; GEM Commissioning Support Unit (AGEM CSU)</li> </ul> <p>For information on this processing activity, please refer to the Risk Stratification section above.</p> <p>As part of the ICB’s PHM work, local health and social care providers may direct the ICB’s Protect NoW Team, to contact patients in relation to population health initiatives.</p> <p>The Protect NoW team uses patient demographic data, consisting of name, address, contact details, and NHS number. This information is sourced from the NHS personal demographics service (PDS) system through our patient engagement platform which is provided by PSL.</p>

	<p>The Protect NoW call handlers signpost patients to additional services commissioned by the ICB, if requested by the patient. They will not have access to medical records. The provider will extract the relevant cohort of patients from their treatment list with the minimum information required for the Protect NoW call handlers to contact the patient. All calls are recorded for quality and audit purposes.</p> <p>Further information regarding the work of Protect NoW can be found on the ICB's website - <a href="https://www.improvinglivesnw.org.uk">Protect Now and Health Improvement Support Teams - Norfolk and Waveney ICS (improvinglivesnw.org.uk)</a> and <a href="https://www.improvinglivesnw.org.uk">Population Health Management Projects - Norfolk &amp; Waveney ICS (improvinglivesnw.org.uk)</a></p>
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## Sub Licensing

Purpose	<p>Sub Licensing brings together care organisations across N&amp;W to collectively deliver health and care services to meet the needs of the Population. It allows the ICB to share data received from NHS England via our commissioning agreement, with members of N&amp;W ICS. This will be limited to pseudonymised commissioning data. The data will only be shared for the purpose of commissioning.</p>
Legal Basis	<p>Health and Social Care Act 2012 - s261(5)(d)</p>
Processing Activities	<p>The Sublicensee will be required to meet certain criteria and then sign up to the standards of use in the data sharing agreement before they will be granted access.</p> <p>Sub licensee requests will be vetted by an ICB hosted approvals group and will require senior sign off by ICB Senior Information Risk Officers.</p> <p>The pseudonymised data sets provided by NHS England are maintained in a data warehouse and will populate Business Intelligence dashboards and routine reports which sublicensees will be granted access to. The ICB can also share this data direct to a sub licensee upon request, all data shared under these terms is logged by the ICB.</p> <p>The Sub-licensee will become a data controller and are not able to share the data outside their organisation.</p> <p>The list of sub-licensees will be updated quarterly and can be found here. - <a href="#">List of Sub-licensees</a></p>

## Service Redesign & Evaluation “Place working”

Purpose	<p>Norfolk &amp; Waveney ICB is a statutory NHS organisation responsible for developing a plan for meeting the health needs of the population, managing the NHS budget and arranging for the provision of health services in a geographical area.</p> <p>As part of its function, the ICB works with partners to design, deliver and evaluate cross-sector, multi-agency projects and services to drive the integration agenda. This includes working alongside system partners to develop and transform pathways and services.</p>
Legal Basis	NHS ACT 2006 and Health and Social Care Act 2012
Processing Activities	<p>Service redesign and evaluation may involve ICB staff shadowing and working with colleagues from system partners to understand pathways, patient flows and patient experiences. As a result, access to or sight of personal identifiable data, where this is relevant to the patient journey and to help improve processes and services/pathways, may occur.</p> <p>Where complex pathways or services are evaluated, it may be necessary to bring providers together to find a solution. The ICB may act as facilitators in multi-disciplinary meetings to ensure a coordinated approach in ensuring the best possible outcomes for patients. As part of this work, an element of personal identifiable data may need to be shared.</p> <p>In all cases, only the minimum amount of personal identifiable information will be shared, necessary for the purpose and only where anonymised themes and trends are insufficient to allow accurate evaluation.</p>

## ICS Workforce/Employee Reporting

Purpose	<p>Centralised workforce data is critical for planning for the ICS and wider NHS. Processing it centrally will save providers time in collating their reports and will enable comparisons.</p> <p>Centralising this data allows the ICB to provide sufficiently detailed workforce data to boards and workstreams such as the Nursing &amp; Midwifery board or in support of preparation for winter pressures.</p> <p>This will support an evidenced based approach to decision making it is important to ensure that we leverage all the data available to us. By making use of aggregated workforce data, we would be able to present information which helps decision makers to understand all the issues and the root cause, for example, accident and emergency reporting should include not just information about patient demand and throughput, but should show more wholistic data sets such as the vacancy rate, sickness rate and relative knowledge of the work force which may have a very significant impact on performance.</p>
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Legal Basis	14Z34Duty as to improvement in quality of services
Processing Activities	<p>The data is collected via the electronic staff record (ESR) as part of the organisation's public task in managing its staff data. On receipt of the data it will be pseudonymised (de-identified) and segregated from any health information held on the system.</p> <p>The data to be shared with the ICB will be used for planning, commissioning and wider PHM purposes. The data shared is already accessible to NHSE who use it for the same purposes. As such there is no substantial change to the way that data is being used which would impact data subjects.</p> <p>The data will be held in a segregated section within the data hub</p> <p><a href="http://improvinglivesnw.org.uk">Data Hub - Norfolk &amp; Waveney Integrated Care System (ICS) (improvinglivesnw.org.uk)</a></p>

## Corporate Function

### Ernst & Young – External Audit

Purpose	NHS Norfolk and Waveney Integrated Care Board (ICB) have a contract with Ernst & Young to provide an external audit service to assist the ICB in meeting their role and responsibilities. This will include the audit of the ICBs annual accounts. This is mandated by the Local Audit and Accountability Act 2014.
Legal Basis	Article 6(1)(b) UK GDPR – contractual obligation Article 6(1)(e) UK GDPR – performance of a public task
Processing Activities	Financial data is shared by the ICB with Ernst & Young. This enables the audit of the ICB annual report and accounts. Data shared also includes pseudonymised data and personal data in the form of payroll data.

### Communication

Purpose	To share information with interested parties about ICB activities, functions, opportunities, events and training.
Legal Basis	NHS Act 2006 and Consent

Processing Activities	<p>You may have expressed an interest and requested to be added to the list or you may have been involved in an event and shared your details.</p> <p>Email contact details are securely retained for communication purposes.</p> <p>You have the right to opt out/un-subscribe of receiving these messages at any time.</p>
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### Conflicts of Interest and Declaration of Gifts and Hospitality

Purpose	All persons who are required to make a declaration of interest(s) or a declaration of gifts or hospitality should be aware that the register(s) may be published on the ICB's website. This information may also be provided to individuals identified in the registers because they are in a relationship with the person making the declaration.
Legal Basis	Section 140 and section 14z8 of the NHS Act 2006
Processing Activities	An annual summary of the register(s) of interests (including the register of gifts and hospitality) are published as part of the ICB's Annual Report and Annual Governance Statement. Where appropriate person identifiable information is excluded from our public registers.

### Learning Disabilities Funding Panel

Purpose	To enable the Learning Disability Funding Panel, and discuss the package of care price split between health and social care for a particular patient.
Legal Basis	Provision and management of care
Processing Activities	<p>Data is received so the ICB can discuss with Norfolk County Council(NCC) ,in the Learning Disability Funding Panel, the package of care price split for a particular patient.</p> <p>The package quality and support needed for the patient are also discussed Information is shared between the ICB and Norfolk County Council.</p> <p>Data is only shared with staff who is directly involved with the patient's care.</p> <p>Data is anonymised as much as possible when referring and discussing the patient.</p>

## Management of Complaints

Purpose	To process your personal information if it relates to a complaint where you have asked for our help or involvement. From 01/07/2023 this included complaints regarding primary medical services.
Legal Basis	Explicit Consent – We will need to rely on your explicit consent in writing to conduct such activities.
Processing Activities	<p>If you have a complaint about the ICB or a service that we commission, we will use your information to communicate with you and to investigate any concern that you raise with the ICB in line with its complaint policy.</p> <p>Where the ICB is investigating a complaint involving several organisations then the information provided by the complainant (including personal details like for example name, address) may need to be shared as appropriate in order for the complaint to be investigated.</p> <p>The ICB will use your postcode for monitoring to understand our community engagement and to ensure equality of service. This information will be anonymised by using Lower layer Super Output Areas <a href="https://datadictionary.nhs.uk">Lower Layer Super Output Area (datadictionary.nhs.uk)</a></p>

## Management of Serious Incidents

Purpose	NHS Norfolk and Waveney ICB is accountable for effective governance and learning following all Serious Incidents (SIs) that occur within Norfolk and Waveney.
Legal Basis	Statutory Obligation – Serious Incident Framework 2015
Processing Activities	NHS Norfolk and Waveney ICB work closely with all provider organisations as well as neighbouring ICBs to ensure all SIs are reported and managed appropriately. The Francis Report (February 2013) emphasised that commissioners, as well as providers had a responsibility for ensuring the quality of health services provided. The ICB investigate, manage and reporting of all SIs.

## National Fraud Initiative

Purpose	NHS Norfolk and Waveney ICB is required by law to protect the public funds it administers. It may share information provided to it with other bodies responsible for auditing, or administering public funds, or where undertaking a public function, in order to prevent and detect fraud.
Legal Basis	The Cabinet Office is responsible for carrying out data matching exercises under its data matching powers set out in Part 6 of the Local Authority and Audit Act 2014 as part of the National Fraud Initiative (NFI).

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Processing Activities	<p>Under this legislation the Cabinet Office:</p> <ul style="list-style-type: none"> <li>• May carry out data matching exercises for the purposes of assisting in the prevention of and detection of fraud;</li> <li>• May require certain bodies to provide data for data matching exercises;</li> <li>• May accept data submissions on a voluntary basis;</li> <li>• Must prescribe a scale or scales of fees for mandatory data matching exercises;</li> <li>• May charge a fee for voluntary data matching exercises; and</li> <li>• Must consult mandatory participants and relevant stakeholders before prescribing the mandatory scale or scales of fees</li> </ul> <p>Data matching involves comparing computer records held by one body against other computer records held by the same or another body to see how far they match. This is usually personal information. Computerised data matching allows potentially fraudulent claims and payments to be identified. Where a match is found it may indicate that there is an inconsistency which requires further investigation. No assumption can be made as to whether there is fraud, error or other explanation until an investigation is carried out.</p> <p>NHS Norfolk and Waveney ICB participates in the Cabinet Office’s National Fraud Initiative to assist in the prevention and detection of fraud. We are required to provide particular sets of data to the Minister for the Cabinet Office for matching for each exercise, as detailed here. The Cabinet Office has published a privacy notice in respect of the National Fraud Initiative below:</p> <p><a href="#">National Fraud Initiative Privacy Notice</a></p> <p>The use of data by the Cabinet Office does not require the consent of the individuals concerned under the Data Protection Act 2018.</p> <p>Data matching by the Cabinet Office is subject to a Code of Practice.</p> <p>For further information on the Cabinet Office’s legal powers and the reasons why it matches particular information, please refer to: <a href="http://www.gov.uk/government/collections/national-fraud-initiative">www.gov.uk/government/collections/national-fraud-initiative</a></p>
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## Patient and Public Involvement

Purpose	<p>If you have asked us to keep you regularly informed about the work of the ICB or if you are actively involved in our engagement and consultation activities, we will collect and process personal information that you have shared with us.</p> <p>You input is invaluable in shaping health and integrated care services.</p>
Legal Basis	<p>Statutory Obligation – 14Z2 of the Health and Social Care Act 2012 Explicit Consent</p>

Processing Activities	We will only use the information you have provided for this purpose. You will be actively informed how your information will be used for engagement and consultation activities. Your personal information will only be accessible by authorised staff from our Engagement Team will be retained for the minimum time necessary to satisfy the original purpose for collection.
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### Locum Reimbursements

Purpose	To provide monetary reimbursements to GP Practices where they must employ a locum GP to cover GP long term sickness /maternity/paternity cover.
Legal Basis	NHS Act 2006, Health and Social Care Act 2012.
Processing Activities	Locum reimbursement applications received and processed from GP Practices containing details of the GP clinician who is off sick/maternity/paternity in order to calculate the reimbursement amount due. Applications may also include invoices from Locum GPs, which may contain Locum GP Name and Address.

### Recruitment

Purpose	When an individual applies to work for NHS Norfolk and Waveney ICB, we will use the information they supply to us to process their application and to monitor the recruitment statistics. Where we want to disclose information to a third party, for example to take up a reference or obtain a “disclosure” from the Disclosure and Barring Service, consent is obtained during the application process, unless the disclosure is required by law.
Legal Basis	Consent: the individual has given clear consent to process their personal data for a specific purpose.
Processing Activities	NHS Norfolk and Waveney ICB uses the Trac Jobs recruitment platform to process its applications. Any information submitted by an applicant in relation to a vacancy within the organisation is provided with the candidate’s consent with a view to potentially entering into a contract of employment.  Further information on how your information is handled can be found <a href="#">here</a> .

	<p>Personal information about unsuccessful candidates will be held for 12 months after the recruitment process has been completed. It will then be securely destroyed using our confidential waste facilities or deleted from our network. We only retain anonymised statistical information about applicants to help inform our recruitment activities.</p> <p>Once an individual has taken up employment with us, we will compile a file relating to their employment. The information contained in this will be kept secure and will only be used for the purposes directly related to the individual's employment. Once their employment has ended, we will retain the file in accordance with the Records Management Code of Practice for Health and Social Care.</p>
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## Emergency Preparedness, resilience and response (EPRR)

Purpose	The NHS needs to plan for, and respond to, a wide range of incidents and emergencies that could affect health or patient care. These could be anything from extreme weather conditions to an outbreak of an infectious disease or a major transport accident. The Civil Contingencies Act (2004) requires NHS organisations, and providers of NHS-funded services, to show that they can deal with such incidents while maintaining services.
Legal Basis	The Civil Contingencies Act 2004, Civil Contingencies Act 2004 (Contingency Planning) Regulations 2005, NHS Act 2006 and Health and Care Act 2022 underpin EPRR within health. All acts place EPRR duties on NHS England and the NHS in England.
Processing Activities	<p>The NWICB can receive information from or send information to health system partners, Local Resilience Forum members, regional and national partners. Depending on the nature of the workstream or incident being dealt with, the extent of organisations or points of contacts is very wide ranging and would be directly related to the incident or emergency which is occurring.</p> <p>The type of information being shared will be employees names, emails and contact details to enable the system to respond to the incident whilst keeping services running as practically as possible.</p>

## Workforce

### Training, Expressions of Interest and admin DPIA 258

Purpose	For the NWICB to manage applications for training courses and expressions of interest to support the ICS workforce in undertaking professional development.
Legal Basis	NHS Act 2006 - 14Z41Duty to promote education and training

Processing Activities

Applications and expressions of interest for specific training courses are collected via a secure MS Form and co-ordinated via the ICB Workforce Team. The form collecting information will be clear in who it is shared with and how long it will be retained.

Records of applications (including personal information), as well as mentorship preferences will be held by the ICB, in line with record keeping standards and only retained for as long as is necessary.

The personal data entered will ensure that your training requests are met and details passed to the most appropriate provider, where necessary.

The information you share with us such as personal contact information, job role, training needs and location, may be shared with the below organisations, if they have courses you wish to attend. Please find the non-exhaustive list of training providers used below.

- University of East Anglia (UEA)
  - Open University
  - City College Norwich
  - West Suffolk College
  - Buttercups Training
  - Poultec
  - Lighthouse Training Group
  - Damar Ltd
  - Cambridge Spark
  - Anglia Ruskin University (ARU)
  - University of Suffolk (UoS)
  - Rotherham Respiratory
  - NHS England
  - Practice Managers Association (PMA)
  - NHS Digital Learning Solutions
  - Cambridge Diabetes Education Programme (CDEP)
  - AMSPAR
  - Norfolk & Norwich University Hospitals NHS Foundation Trust (NNUH)
  - Norfolk Community Health & Care NHS Trust (NCHC)
  - Norfolk & Suffolk Foundation NHS Trust (NSFT)
  - Queen Elizabeth Hospital NHS Foundation Trust (QEH)
  - North of England Pathology and Screening Education Centre (NEPSEC)
  - Maudsley Learning
  - Association of Respiratory Technology & Physiology (ARTP)
  - BBO Training
  - DNA Insight
- The ICB will also receive training feedback and attendance information in relation to courses.

	The ICB will share anonymised data with NHS England for reporting purposes only, to monitor CPD uptake from Primary Care staff within N&W.
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## Apprenticeships

Purpose	<p>The purpose of sharing this information is to enable the ICB to capture and hold information about programmes applicants for us to review prior to sharing with training providers to ensure eligibility.</p> <p>Passing this information onto training providers securely ensures that applicants are put forward for training programmes to support their learning and development as well as career progression. If they were not applying through our team, they would be submitting this information directly to the training providers via online application forms on their websites.</p> <p>The NWICB apprenticeship levy is only for internal ICB staff and range from levels 2-6. The NWICB encourages Primary Care to utilise apprenticeship schemes.</p>
Legal Basis	Consent is obtained for the sharing of information from controller to controller. This is obtained via the application form (Expression of Interest form).
Processing Activities	<p>Data is collected via a Microsoft Office Word form directly from individuals across primary care and ICB workforce, and shared with their preferred training provider. By sharing this information, their application to the apprenticeship programme is progressed and removes requirement for duplicated processes by all parties.</p> <p>The information you share with us such as personal contact information, job role, training needs and location, may be shared with the below organisations, if they an apprenticeship you wish to undertake. Please find the <u>non-exhaustive</u> list of training providers used at present in Primary Care N&amp;W:</p> <ul style="list-style-type: none"> <li>• University of East Anglia</li> <li>• Open University</li> <li>• University of Suffolk</li> <li>• Anglia Ruskin University</li> <li>• City College Norwich</li> <li>• West Suffolk College</li> <li>• Buttercups Training</li> <li>• Poultec</li> <li>• Lighthouse Training Group</li> <li>• Damar Ltd</li> <li>• Cambridge Spark</li> </ul>

## Wider workforce support Career Intentions Information

Purpose	<p>To support and manage recruitment posts for the wider Workforce, Commissioning and Planning. Such as:</p> <ul style="list-style-type: none"> <li>• Supporting newly qualified registered clinicians into roles in general practice, to assist workforce planning, recruitment and retention.</li> <li>• Supporting Volunteer's</li> </ul> <p>The ICB processes individual staff information on initiatives such as Career Intentions Information, and to support Volunteers to Career Applications.</p>
Legal Basis	<p>These incentives are managed under contract and on a consent basis for expressions of interest.</p>
Processing Activities	<p>Depending on the type of recruitment the ICB will hold Expressions of Interests, HR1 forms, and share the information with partners on the recruitment panel, as advised on application.</p> <p>For Career Intention information, the NWICB will hold information entered onto MS Forms from training GP's</p>

## National Dental Recruitment Incentive

Purpose	<p>This programme aims to enhance the recruitment and retention of dental professionals by offering a national incentive. By participating in the National Dental Recruitment incentive programme, individuals consent to the collection and use of their personal data as outlined in National Dental Recruitment Incentive Agreement. Consent is obtained to hold this data by the individual signing the agreement.</p>
Legal Basis	<p>Consent: the individual has given clear consent to process their personal data for a specific purpose.</p>
Processing Activities	<p>Data is collected from service recipients, and aggregated. We share the aggregated data with NHS England to enable them to monitor the appropriate use of incentive funds and outcomes of the project.</p>

## GP Educators and Learning Organisations

<p>Purpose</p>	<p>GP Educators and Learning Organisations responsible for hosting postgraduate GP specialist trainees, undergraduate and postgraduate Nursing students, postgraduate Dental students, Pharmacists, Allied Health Professionals and Advanced Care Practitioners</p> <p>Data is collected by the ICB under a nationally approved and locally agreed Standard Operating Procedure for the approvals and re-approvals of GP Educators and Learning Organisations delivering primary care training. This is a vital process to ensure that learning organisations are of high quality, which protects the safety of the learner, the educator and the service users.</p> <p>NHS England Primary Care School (NHSE PCS) hold the strategic responsibility for the quality assurance and quality management processes of educators and clinical learning environments/organisations. ICB's are required to support this work.</p>
<p>Legal Basis</p>	<p>Article 6(1)a – Consent obtained for Learner Feedback Forms and Educator Self Declaration Forms</p> <p>Article 6(1)e – Public Task</p> <p>Article 9(2)b – To comply with legal obligations for employment</p> <p>Article 9(2)h – Legal obligations to provide or manage health or social care services</p> <p>Common Law Duty of Confidentiality – Explicit consent &amp; Legal Requirement</p>
<p>Processing Activities</p>	<p>The ICB's Primary Care Workforce Team collect, share and store the data. This consists of feedback based on learning experiences whilst training and feedback on the educator.</p> <p>Feedback may be shared with the Learning Organisation and NHS England if permission is given.</p> <p>The data assists in the decision-making process and compliance with the validation/revalidation process for approving/reapproving educators and learning organisations.</p>

## Quality

### Child Death Review

<p>Purpose</p>	<p>In accordance with statutory requirements under the Children's Act 2004, ICBs and local authorities (as child death review partners) are able to make arrangements for child death reviews as they see fit. Data flows are established between partner organisations to support the systematic data capture process:</p> <ul style="list-style-type: none"> <li>• Health services across Norfolk and Waveney (across all sectors: acute, maternity, mental health, primary care and community);</li> <li>• Children's social care services;</li> <li>• Police, including British Transport Police and Royal Military Police;</li> </ul>
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	<ul style="list-style-type: none"> <li>• Coronial services;</li> <li>• Education; and</li> <li>• Public health.</li> </ul>
Legal Basis	Children Act 2004 (the Act), as amended by the Children and Social Work Act 2017[93] in relation to the ICBs statutory responsibility to act as a “child death review partner”.
Processing Activities	<p>The processing is a statutory duty for ICB’s and local authorities. The ultimate goal of the processing activity is to:</p> <ul style="list-style-type: none"> <li>• Satisfy the statutory duty;</li> <li>• Support the family / carers during their bereavement;</li> <li>• To ensure that all systematic collaborative review is conducted when a child dies;</li> <li>• Ensure that information from the child death review process is systematically captured in every case to enable learning to prevent future deaths.</li> </ul> <p>The data will include:</p> <ul style="list-style-type: none"> <li>• Information relating to children;</li> <li>• Information relating to the child’s family and/or carers;</li> <li>• Professionals engaged in the child’s care before their death;</li> <li>• Professional involved in the child’s end of life care;</li> <li>• Special category data including medical records, social care records, police records, education records.</li> </ul> <p>Information will be exchanged via secure email.</p> <p>The geographical area covered will be Norfolk and Waveney.</p> <p>During the process of review and learning on a national and local level, information will also be exchanged with the National Child Mortality Database.</p>

## LeDeR Programme

Purpose	The LeDeR Programme (aka. Learning from lives and deaths of people with a learning disability and autistic people) is a national programme that aims to review the death of any person who lived with learning disabilities or autism, identifying any health and social care factors relating to the death where things could have been done differently, and seeking to ensure that where care and treatment have not been at the expected standard this is not repeated elsewhere.
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Legal Basis	<p>Legal basis for use UKGDPR Art. 6(1)(e) and Art. 9(2)(h) - or processing contact details of family, next of kin, friends</p> <p>The use of personal data for the programme is specifically approved under S251 of the NHS Act 2006. This approval is subject to the National Data Opt-Out, which means that if the patient, or those with a legal relationship to act on their behalf, have opted-out of sharing their confidential information beyond their care and treatment, an independent LeDeR review of the death should not take place</p>
Processing Activities	<p>Type of data: Personal and Special Category Source of data: Primary Care, Secondary Care and Community Care</p> <p>The programme is co-ordinated by NHS England. The ICB participates in the programme by co-ordinating reviews at a local level.</p> <p>Relevant deaths are notified to the programme via a secure web portal. This information is then shared with the ICB for patients who were registered with GPs in Norfolk &amp; Waveney.</p> <p>Trained reviewers in the ICB's LeDeR Team then seek further information about the person who has died from health and care professionals who were involved in supporting the person, including information about their health and care and the circumstances leading up to their death. The LeDeR Team will also contact, where possible, those closest to the patient, including their families and/or carers, so that they can contribute to the review should they wish.</p> <p>The personal identifiable information collected for LeDeR reviews is uploaded, stored and communicated via a secure web platform protected by rigorous processes that meet NHS information governance requirements. Reports shared with local steering groups and other forums for the promotion of improvement and learning are shared in anonymous form. Information relating to LeDeR reviews is retained by NHS England for a period of 5 years from the completion of a review.</p> <p>The ICB does not retain personal identifiable information relating to reviews locally.</p>

### Community Keyworker/Care Navigator - National Evaluations

Purpose	<p>The National Evaluation has been set up to gain a picture of progress of the Keyworker Programme in line with the NHS Long Term Plan.</p> <p>This will support with the management and planning of future developments. NHSE is conducting this national evaluation to understand the impacts and value of the programme.</p>
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	Norfolk and Waveney ICB are a member of NHSE's Keyworking Steering Group Evaluation Sub-group. Norfolk and Waveney ICB are the Lead Provider on behalf of early adopter organisations.
Legal Basis	NHS Act 2006 – Health and Social Care Act 2012
Processing Activities	<p>NHS England (NHSE) have commissioned NHS Arden &amp; GEM Commissioning Support Unit (AGEM CSU), who are working with the National Children's Bureau, to undertake the national evaluation of the Keyworking programme</p> <p>Each Provider, as Data Controller, submits their activity and outcome data, in line with the Data Specification, via the NHSE Data Landing Portal.</p> <p>AGEM CSU and National Children's Bureau will make contact with all Keyworking sites for access to relevant information to enable successful evaluation. AGEM CSU and National Children's Bureau will receive records and documents from these local service contributors for the purpose of evaluation. Participants will be identifiable to the evaluator from this data flow. The dataset will include information on sex, age, information about diagnosis, treatment, and outcomes.</p> <p>AGEM CSU and National Children's Bureau will receive patient/service user, staff identifiable data, along with, where possible and practical to the required outcomes of this process, pseudonymised data. AGEM CSU and National Children's Bureau will also collect information through interviews, which will be anonymised before sharing with NHS England.</p> <p>Only anonymised information for purpose of reporting the recorded aims and objectives will be shared with NHSE by the evaluator.</p>

## Evaluations

Purpose	To support and facilitate evaluations within Norfolk and Waveney ICB/ICS. Evaluations ensure services and initiatives meet their aims, to monitor and improve the quality of health services by gaining patient and service user experience and feelings.
Legal Basis	Whilst you will consent to complete the evaluation and the team will advise you what will happen with the information you provide, the legal basis for processing this information is a task in the public interest, established by statute or University Charter and the NHS Act 2006 <a href="#">14Z34.Duty as to improvement in quality of services</a>
Processing Activities	The evaluation team at the ICB will usually only see Pseudonymised or Anonymised service user/patient information. Where identifiable data is required for evaluation purposes, the service user will only be

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	<p>contacted by the health care organisation who provided the original care. The individual will ask if they wish to participate in the evaluation and will be informed about how their information will be processed for this purpose.</p> <p>For evaluation interviews and focus groups the team will have access to personal data of staff or services users under consent, to conduct the session. Any personal data will only be accessible to the evaluation team and not shared with anyone all reports will be anonymised.</p> <p>Once information is received it will be kept securely and analysed. The analysed data will be presented in reports for patients and the NHS. We might want to use some of your anonymised comments in reports to help us show what has worked well and where it could be improved.</p> <p>Information will be held as per the record keeping standards.</p>
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### Micro-aggression portal

Purpose	To enable citizens to give open and anonymous feedback about any negative experiences they have witnessed or received due to. <a href="http://improvinglivesnw.org.uk">Micro-Aggression Portal - Norfolk and Waveney ICS (improvinglivesnw.org.uk)</a>
Legal Basis	Explicit Consent
Processing Activity	<p>Information submitted may be considered sensitive even though it does not name individuals so will be treated as if it is.</p> <ul style="list-style-type: none"> <li>• No personal information will be collected through the portal</li> <li>• Any personal information provided in error will be redacted before being shared</li> <li>• Anonymised data from the portal will be shared with system providers</li> <li>• The portal explains fully what data will be collected, why we are collecting it and what it will be used for</li> </ul>

### Management of General Dental Services

Purpose	To respond to enquiries and information sent through from the ICB Enquiries team, raising issues through the appropriate channels to reach resolution.
Legal Basis	NHS Act 2006, Health and Social Care Act 2012

Processing Activities	Responding to enquiries received through the Dental generic inbox from Dental Providers or members of the public. Members of the team investigate these matters, which may contain provider details and patient NHS number. Emails are not forwarded on unnecessarily to avoid information being overshared.
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## PRIMARY CARE - Management of Special Allocation Scheme (SAS)

Purpose	To manage patients that have been transferred onto the Norfolk and Waveney SAS Scheme and those patients that are being considered for inclusion and removal from the SAS scheme. <a href="#">NHS England » If you are a patient assigned to the Special Allocation Scheme</a>
Legal Basis	NHS Act 2006, Health and Social Care Act 2012
Processing Activities	Processing and managing requests from GP Practices to transfer patients onto the SAS Scheme. Sharing and working with the GP Practices and Primary Care Support England (PCSE) <a href="#">Primary Care Support England - Primary Care Support England</a> . Supporting general complaint correspondence from patients on the scheme.

## Provision of Pharmacy and Ophthalmology Services

Purpose	Pharmaceutical Services and Local Pharmaceutical Services Functions  Primary Ophthalmic Services Functions  Effective delivery of the services
Legal Basis	NHS England delegates the Delegated Functions to the ICB under section 65Z5 of the NHS Health and Care Act 2022
Processing Activities	NHS Hertfordshire and West Essex ICB are hosting the above services for Norfolk and Waveney patients on behalf of the NWICB.  The NWICB will be in receipt of contract management and performance information. To enable the effective running of these services.  <a href="#">Privacy notice – Hertfordshire and West Essex NHS ICB</a>

## Request for Support / Investigation – Clinical Systems

Purpose	To provide support or investigation of incidents, personal information can be received via email to the secure NHS email system for Digital Clinical Systems Support inbox.
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	This information is required to allow investigation and support to ensure safe care provision.
Legal Basis	Health and Social Care Act – Part 2 Chapter A3 Section 14z34 – 4Z34 Duty as to improvement in quality of services. - Part 9 Chapter 1A Section 251B – Duty to share information
Processing Activities	The team can receive emails from Primary Care, partnering organisation and other healthcare providers. Where there is a query over a system implementation or anomaly it may be necessary to share specific personal information about patients or staff to allow a thorough investigation into the system or the problem to ensure it is resolved and individuals' information is documented correctly or held in the correct place to ensure appropriate processing and access to care etc.

### Quality, Equality & Safety

Purpose	<p>To process your personal information if it relates to a complaint, or provider contract where a quality issue has been raised.</p> <p>If you have asked for our help or involvement or where we have a duty to investigate where a risk to patient safety or potential harm has been highlighted. Such as higher instances of certain infections our Infection Protection and Control team might be asked to investigate.</p>
Legal Basis	<p>NHS Act 2006, Health and Social Care (Safety and Quality) Act 2015.</p> <ul style="list-style-type: none"> <li>• 14Z34Duty as to improvement in quality of services</li> <li>• 14Z35Duties as to reducing inequalities</li> </ul> <p>If you have initiated the request we will ask for your explicit consent to investigate with our providers.</p>
Processing Activities	<p>If you have raised a concern about a provider or a service that we commission, we will use your information to communicate with you and to investigate any concern that you raise in relation to that provider or service.</p> <p>Where a provider raises a concern about another provider, we may use your information (including personal details such as name, NHS number, date of birth) in order to allow an investigation to be undertaken into the concerns raised where this relates to quality and patient safety.</p> <p>Where NHS England has raised concerns to NWICB we may request access to your GP record to investigate.</p> <p>Where we are investigating concerns relating to several organisations, your information may need to be shared with those</p>

	<p>organisations involved in your care in order for any concerns to be investigated.</p> <p>Where a complex issue has been raised and it is necessary to bring providers together to find a solution, we will act as facilitators in multi-disciplinary team meetings to ensure a coordinated approach in ensuring the best possible outcomes for patients.</p> <p>Information gathered can be anonymised and used to analyse trends and equalities across the population</p>
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### Safeguarding Advice and Guidance

Purpose	<p>Advice and guidance will be provided to care providers to ensure that adult and children's safeguarding matters are managed appropriately.</p> <p>Access to identifiable information will be shared in some limited circumstances where it is legally required for the safety of the individuals concerned.</p>
Legal Basis	Statutory Obligation – Care Act 2012
Processing Activities	Due to public interest issues, i.e., the need to protect the safety and welfare of vulnerable children and adults, we will rely on our statutory obligation to process person identifiable information, rather than seek consent.

### Safeguarding – Prevent and Protect

Purpose	<p>The ICB participates in various panels and boards set up across Norfolk &amp; Waveney. These are multi-disciplinary groups including representation from statutory services, wider public services and community and voluntary organisations.</p> <p>To safeguard and support young people at risk of being radicalised or groomed into radicalisation.</p> <p>To protect individuals and the public, information will be shared between organisations</p> <p>Information sharing between organisations is undertaken in line with statutory responsibilities and the appropriate Data Sharing Agreements being in place.</p>
Legal Basis	<p>ICB has a Data Sharing agreement in place with participating organisations which states the legal basis as described below</p> <p><b>The Data Protection Act, Schedule 1, Part 2 (18)</b> Safeguarding of children and of individuals at risk</p> <p><b>UK GDPR, Article 6(1):</b></p>

	<p>(e) Public Task Sections 36-41 of the Counter-Terrorism and Security Act 2015 set out the duty of local authorities and partners to provide support for people vulnerable to being drawn into any form of terrorism.</p> <p>For special category data – the Parties rely on <b>Article 9(2)(g) UK GDPR</b> and <b>paragraph 6 of Part 2, Schedule 1 DPA 2018</b> - necessary for exercise of a function conferred by an enactment or rule of law and necessary for reasons of substantial public interest. The statutory function is as set out in section 36 of the CT&amp;S Act 2015.</p> <p>UK GDPR, Article 9(2)(h) - Health or social care Children Act 2004 Arrangements for the Placement of Children (General) Regulations 1991 Care Act 2014 Section 42 Section 115 of the Crime &amp; Disorder Act 1998 Domestic Violence, Crime and Victims Act 2004 (Section 9(3))</p>
Processing Activities	<p>Staying Together Reforms Programme - ‘Staying Together’ Panels have been set up to review children’s cases where there is a risk of care entry to consider what additional support could help them continue to live safely within their family network.</p> <p>Norfolk Safeguarding Adults Board - where there is specific information or concerns that an adult with care and support needs is being neglected, abused, or exploited or there is a risk of neglect or abuse, information will be shared between the partner organisations in order to investigate the concerns and prevent the risk of neglect or abuse.</p> <p>Multi-Agency Safeguarding Hub (MASH) –</p> <p>The ICB will share information as outlined here <a href="#">Channel and Prevent Multi-Agency Panel (PMAP) guidance - GOV.UK (www.gov.uk)</a>. Information will be discussed/shared at Panel meeting.</p> <p>The Channel Panel forms a key part of the national Prevent Duty. The Channel Panel is multi-agency process under Section 36 of the Counter Terrorism and Security Act 2015 (the CT&amp;S Act 2015) providing support to individuals who are at risk of being drawn into terrorism.</p>

### Special Education Needs and Disability (SEND)

Purpose	To support the processing of data for a child or young person who has special education needs and disabilities. (SEND) The ICB has a
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	<p>role in co-operating with councils and education with multiagency working.</p> <p>The ICB has a Designated Clinical Officer (DCO) role which supports the Integrated Care Board (ICB) to meet our statutory responsibilities for children and young people with SEND. The DCO plays a key part in putting into action the SEND reforms, and in supporting joined up working between health services and local authorities....</p>
<p>Legal Basis</p>	<p>UK GDPR,</p> <p>Article 6(1): (e) Public Task, processing is necessary for the performance of a task carried out in the exercise of official authority vested in the controller.</p> <p>Article 9(2)(h) Health or social care (with a basis in law)</p> <p>Children and Families Act 2014 and SEND Code of Practice 2014.</p> <p>The Children and Families Act (2014) requires Integrated Care Boards and Local Authorities to work together with children and young people with SEND and their families, to ensure that appropriate services are available to meet their needs and enable them to live ordinary lives.</p>
<p>Processing Activities</p>	<p>The processing is a statutory duty for ICB's and local authorities</p> <p>Information is collected by the County Councils to inform the overall SEND process.</p> <p>The ICB has a Designated Clinical Officer role which supports the Integrated Care Board (ICB) to meet our statutory responsibilities for children and young people with SEND. The DCO plays a key part in putting into action the SEND reforms and in supporting joined up working between health services and local authorities.</p> <p>The ICB will have access to information to assist in the co-production of Education Health Care Plans (EHCP) for a child or young person with SEND. Liaising with families and professionals to agree appropriate plans to support their needs.</p> <p>Information will be both personal and special category information</p> <ul style="list-style-type: none"> <li>• Name</li> <li>• Local system ID</li> <li>• Sex/ gender</li> <li>• Age</li> <li>• Date of birth</li> <li>• Address/ postcode</li> <li>• Ethnicity</li> <li>• Early Help and Social Care data (where it applies to or is part of the EHCP application, plan or review).</li> </ul>

	<p>Children’s statutory education school or post-16 education destination information</p> <p>Health (where it applies to or is part of the EHCP application, plan or review, NHS Number). Disability status</p> <p>SEND data, including EHCP and Annual Review information and content, High Needs Funding banding information.</p> <p>The ICB is required as part of SEND legislation to monitor quality and improvements within the multi-agency system for children and young people with SEND. This involves the Auditing of quality and improvement of Statutory health advice for EHCP needs assessments and reviews following any actions from Joint area SEND inspections. The ICB have a duty to ensure CYP health needs are met as part of EHCP which requires joint quality review visits.</p> <p>The ICB will also act as mediator, where there is disagreement resolution and tribunal dispute. It can sit on panels relevant to support required for the child or young person, such as but not limited to, placement panels, exception funding panels, and tripartite funding panels.</p> <p>Local Authorities and NHS also contact the ICB for advice and support and escalate where necessary, Children &amp; Young People with SEND under SEN needs but are not under an EHCP as well as those with medical needs moving around and in and out of our ICB area to and from others.</p>
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## Research

### Applicants for letters of Access (LOA) /Honorary Research Contracts (HRCs)

Purpose	To ensure that individuals hold the appropriate skills/qualifications to participate in research.
Legal Basis	The NHS Act 2006
Processing Activities	<p>We hold and store copies of your applications and Letter of Access (LOA) / Honorary Research Contracts (HRC) we have issued.</p> <p>Where the application is for research at a partner organisation (Norfolk Community Health and Care NHS Trusts (NCH&amp;C) or East Coast Community Healthcare CIC (ECCH)) we will share relevant details with the partner organisation for the purposes of issuing the LOA or HRC.</p>

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## Research Grants / Bursaries / Funding and collaboration

Purpose	To support research across Primary and community care and wider care settings. The ICB Research team support Recipients of Research Capability Funding (RCF) Awards and individuals collaborating on, or applying for, National Institute for Health and Care (NIHR) research grant applications through the ICB.
Legal Basis	The NHS Act 2006
Processing Activities	<p>The ICB hold and store personal details for the purposes of processing applicants, calculating costs, managing appropriate funding payments and progress reports.</p> <p>Where appropriate details of the spending are:</p> <ul style="list-style-type: none"><li>• reported to the Department of Health and Social Care (DHSC) as part of mandatory reporting requirements, for RCF and for NIHR held grants.</li><li>• Shared with the grant funder as part of the application process</li></ul>

## Contacting Us

For general enquiries or to contact the ICB to exercise a local opt out of your personal data, please use the following contact details:

NHS Norfolk & Waveney Integrated Care Board  
8<sup>th</sup> Floor  
County Hall  
Martineau Lane  
Norwich  
NR1 2DH

Email address: [nwicb.contactus@nhs.net](mailto:nwicb.contactus@nhs.net)

Telephone Number: 01603 595857

## Formal Complaints/Appeals

If you feel that NHS Norfolk and Waveney ICB has not complied with current data protection legislation, either in responding to a request or in the way we process your personal information, you can raise your concerns in writing to the Data Protection Officer, using the contact details here [nwicb.informationgovernance@nhs.net](mailto:nwicb.informationgovernance@nhs.net) or at the address above.

We will always endeavour to resolve the matter to your satisfaction. However, if you still remain dissatisfied with our response, you have the right to escalate your concerns to the Information Commissioner by writing to:

Information Commissioner Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF Enquiry Line: 01625 545700

[www.ico.gov.uk](http://www.ico.gov.uk)

## Further Information

This notice does not give a full explanation of the law. If it doesn't answer your questions or you would like more detailed information, please contact the Data Protection Officer.

If you wish to know more about any information that is held about you as a patient, please contact your local health care provider.

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