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Version	Author	Owner	Rationale	Date	Review date
9.2	S Forrester-Wild	Sonia Senior PCN Manager	• Addition of version page • Addition of prospective access section • Major updates	12 December 2022	01 March 2023
9.3	S Forrester-Wild	Sonia Senior PCN Manager	• Removal of prospective access section	12 December 2022	01 March 2023
9.4	S Forrester-Wild	Sonia Senior PCN Manager	• Reinsertion of prospective access section • Update of date of commencement of prospective access	17 April 2023	01 April 2024
9.5	S Forrester-Wild	Sonia Senior PCN Manager	• Change 'practice' to 'organisation' to reflect the diverse companies in receipt of this notice • Added additional bullet point under 'what information we collect' • System C removed and included in third party processors • Patients can obtain a list of the organisation's DSAs under an FOIA request • Added section 'Changes to our privacy policy' • Update to 'Data Processors' section • Update to 'Your Access to your Future Records' section	02 April 2024	01 April 2025
9.6	S Forrester-Wild	Sonia Senior PCN Manager	• Inclusion of AI section • Expansion of third-party data sharing section	02 April 2025	01 April 2026

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			• Inclusion of GP Connect • Dates removed from 'Access to your Future Records' • 'How long will we store your data' section has been updated • Inclusion of 'DPIA' section to comply with DSPT		
9.7	S Forrester-Wild	Sonia Senior PCN Manager	• Update in line with legislation changes to SARs and complaints • Change ICO to Information Commissioner's Office (ICO) • Change 'hidden' to 'redacted'	02 August 2025	01 April 2026
9.8	S Forrester-Wild	Sonia Senior PCN Manager	• Update broken link to Health Research Authority	05 August 2025	01 April 2026
9.9	S Forrester-Wild	Sonia Senior PCN Manager	• Inclusion of OpenSAFELY services under 'Why do we share your data, and who with' • Update of the GP Connect section	28 August 2025	01 April 2026
9.10	S Forrester-Wild	Sonia Senior PCN Manager	• Update of OpenSAFELY text to include link to NHSE Digital platform	December 2025	April 2026
9.11	S Forrester-Wild	Sonia Senior PCN Manager	• Clarified SAR timeframe and fees • Updated complaints wording and ICO naming • Clarified opt-out wording (National Data Opt-out and Type 1) • Added missing data rights sections	January 2026	January 2027

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9.12	S Forrester-Wild	Sonia Senior PCN Manager	• Updated in line with Data (Use and Access) Act 2025 changes effective 5 February 2026 • Added data protection complaint handling requirements • Clarified subject access request time limits and 'reasonable and proportionate' searches	February 2026	February 2027
9.13	S Forrester-Wild	Sonia Senior PCN Manager	• Added 'recognised legitimate interests' (Data (Use and Access) Act 2025) to the lawful basis section.	February 2026	February 2027
9.14	S Forrester-Wild	Sonia Senior PCN Manager	• Update due to latest NHSE AI AVT information	April 2026	April 2027

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This privacy notice explains why Mercian PCN/Mercian GP Network Ltdhereafter known as 'the Organisation', collects information about you, how it is kept secure and how that information is used.

This notice will explain:

- Why we collect your information, what is collected and how we use it
- How we keep your information safe and secure
- Why we share your information and who with
- How to opt out of sharing your data
- Your data rights under UK GDPR
- How long we can legally keep your information
- The lawful basis for processing your personal and sensitive information
- How to complain

Introduction

The General Data Protection Regulation (GDPR) became law on 25 May 2018. This regulation protects the personal and sensitive data of a living individual. It is currently known as the UK GDPR after the United Kingdom withdrew from the European Union on 31 January 2020.

As your registered GP organisation, we are the data controller for any personal and sensitive data we hold about you. We are committed to protecting your privacy and will only use information collected lawfully in accordance with:

- Data Protection Act 2018
- The GDPR 2016 and UK GDPR
- Data (Use and Access) Act 2025 (which updates the UK GDPR, Data Protection Act 2018 and PECR)
- The Human Rights Act 1998
- Common Law Duty of Confidentiality
- Health and Social Care Act 2012
- NHS Codes of Confidentiality, Information Security and Records Management
- The Caldicott Principles

Why do we collect your information?

Healthcare professionals within the NHS and who provide you with care are required by law to maintain your medical records with details of any care or treatment you received. This information will be used to aid clinicians to make decisions, either individually or jointly, about your health and to make sure it is safe and effective. Other reasons include:

- Looking after the health of the public
- Development of future services to better serve the organisation's population
- We will share pseudonymised data so the NHS has access to statistics to its performance and activity
- To help us investigate patients' concerns, complaints or legal claims

- Allow clinicians to review their service of care to ensure it is of the highest standards, and provide a basis of further training of care is not as expected
- Patient medication reviews undertaken by a healthcare professional
- Research Ethics Committee approved research (patient consent will be required)

What information do we collect?

The healthcare professionals who provide you with care maintain records about your health and any treatment or care you have received previously or elsewhere (eg NHS hospital Trust, another GP surgery, Out of Hours service, Accident & Emergency Department, etc). These records help to provide you with the best possible healthcare.

Information we hold about you may include the following:

- Your personal details, ie address, next of kin, contact details, details of those with proxy access, email address
- Contact you have had with the surgery, ie appointments including what kind of appointment, who it was with and what happened during
- Reports about your health, treatment and care
- Results of investigations, ie laboratory test results, x-rays, scan results, etc
- Relevant information from other health professionals, relatives or those who care for your, or information provided to the surgery by you (including information you provide via our surgery website).
- Recordings of telephone conversations between you and the organisation.

How do we keep your information safe and secure?

Every member of staff who works for an NHS organisation has a legal obligation to keep information about you confidential. We maintain our duty of confidentiality by conducting annual training and awareness, ensuring access to personal data is limited to the appropriate staff and information is only shared with organisations and individuals that have a legitimate and legal basis for access.

We will only ever use or pass on information about you if others involved in your care have a genuine need for it.

We will not disclose your information to any third party without your permission unless there are exceptional circumstances, or where the law requires information to be passed on, for example:

- We believe you are putting yourself at risk of serious harm
- We believe you are putting a third party (adult or child) at risk of serious harm
- We have been instructed to do so via court order made against the organisation
- Your information is essential for the investigation of a serious crime
- You are subject to the Mental Health Act (1983)
- UK Health Security Agency and Office for Health Improvement and Disparities needs to be notified of certain infectious diseases
- Regulators use their legal powers to request your information as part of an investigation

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Our organisation policy is to respect the privacy of our patients, their families and our staff, and to maintain compliance with the UK GDPR and all UK specific Data Protection Requirements. Our policy is to ensure all personal data related to our patients will be protected.

All employees must sign a confidentiality agreement as part of their condition of employment. We also ensure that data processors who support us are legally and contractually bound to operate and prove security arrangements are in place where data which could or does identify a person are processed.

Third party processors include:

- Companies which provide core IT services and support to the organisation and its clinical systems
- Systems which manage patient facing services (PFS) – NHS app, MyGP, the organisation website, data hosting service providers, appointment booking systems, electronic prescription services, document management services, text messaging services etc
- Clinical systems (EMIS Web/TPP – SystemOne)
- For more information, please see 'Data Processors' below

We will email or text you regarding matters of medical care, such as appointment reminders and, if appropriate, test results, unless you have separately given the organisation your explicit consent not to do so. We maintain our duty of confidentiality to you and will only use or share information with others if they have a genuine need for it. We will not share your information to a third party without your permission, unless there are exceptional circumstances, ie life and death, or where the law requires us to share your information.

Why do we share your information, and who do we share it with?

Confidential patient data will be shared within the healthcare team at the organisation, including nursing staff, administration staff (prescription, secretaries, reception, finance) and with other healthcare professionals to whom a patient is referred.

Data processors

The organisation uses data processors to perform certain administrative tasks for us, particularly where these involve large numbers of patients. Details of the data processors are listed below:

- Companies that provide IT services and support, including our core clinical systems which manage patient facing services (such as our website and service accessible through the same), data hosting service providers, systems which facilitate appointment bookings or electronic prescription services, prescribing decision support services, document management services.
- The systems that are contracted to maintain and store on our behalf are:
    - EMIS Web
    - Docman clinical systems
    - Accurx

- NHS England has been directed by the government to establish and operate the OpenSAFELY COVID-19 Service and the OpenSAFELY Data Analytics Service. These services provide a secure

environment that supports research, clinical audit, service evaluation and health surveillance for COVID-19 and other purposes.

We remain the controller of our own patient data but are required to let approved users run queries on pseudonymised patient data. This means identifiers are removed and replaced with a pseudonym.

Only approved users are allowed to run these queries, and they will not be able to access information that directly or indirectly identifies individuals.

If you do not wish for your confidential patient information to be used for research and planning (including where permitted for OpenSAFELY queries), you can set a National Data Opt-out. You may also be able to request a Type 1 opt-out via your GP organisation. Opting out will not affect your direct care.

You can find additional information about OpenSAFELY here and on the NHSE Digital platform.

- National screening programmes – The NHS provides national screening programmes so that certain diseases can be detected at an early stage. These screen programmes include:
    - bowel cancer, breast cancer, cervical cancer, aortic aneurysms, diabetic eye screening, e

- **For organisations who undertake accredited research projects–** Where research involves accessing or disclosing identifiable patient information, we will only do so with your explicit consent and with approval from the Research Ethics Committee, or where we have been provided with special authority to do so with consent.

- **For organisations who conduct Medicines Management Reviews of medication prescribed to its patients –** The Medicines Management Reviews service performs a review of prescribed medication to ensure patients receive the most appropriate up to date and cost-effective treatments. If you decide to object to this, please contact the Organisation Manager; however, be aware that the result may cause a delay in the timely provision of your direct care.

- Risk stratification – The Secretary of State for Health and Social Care has granted permission for personal data to be used for the purposes of risk stratification. This is because it would take too long to carry out a manual review of all patients. The following information is used for risk stratification:
    - Age
    - Gender
    - NHS number
    - Diagnosis
    - Existing long-term condition(s)
    - Medication history
    - Patterns of hospital attendance
    - Number of admissions to A&E
    - Periods of access to community care

  This information will be used to:

- Decide if a patient is a greater risk of suffering from a particular condition
- Prevent an emergency admission
- Identify if a patient needs medical help to prevent a health condition from deteriorating
- Review and amend the provision of current health and social care services.

Data sharing schemes

To ensure optimal care delivery, we may share relevant data with carefully selected third parties when it directly supports your treatment or aids in preventing a medical condition. Such data sharing is conducted under strict legal and regulatory controls to safeguard your privacy and rights. These third parties could include specialists, laboratories, or external healthcare services involved in your care pathway. We ensure that all data exchanges comply with the highest standards of data protection.

Several data sharing schemes are active locally, enabling healthcare professionals working outside of the surgery to view information from your GP record. A list of these schemes can be obtained by writing to the PCN Manager and asking for the information under the Freedom of Information Act 2000.

- **Summary Care Record** - NHS England have also created a Summary Care Record which contains information about medication you are taking, allergies you suffer from and any bad reactions to medication that you have had in the past.

  The shared record means patients do not have to repeat their medical history at every care setting.

  Your record will be automatically setup to be shared with the organisations listed above, however you have the right to ask your GP to stop your record from being shared or only allow access to parts of your record.

  Your electronic health record contains lots of information about you. In most cases, particularly for patients with complex conditions and care arrangements, this means that you get the best care and means that the person involved in your care has all the information about you. The shared record means patients do not have to repeat their medical history at every care setting.

- **GP Connect** is a secure NHS England service that allows authorised healthcare professionals involved in your direct care to view and, where appropriate, update your GP record. This helps improve communication between services and ensures you receive safe, consistent treatment, particularly when you are seen outside of your usual GP practice, such as in urgent care, hospital settings, or care homes.

  Through GP Connect, the following functions are enabled:
  - **Access Record (HTML):** allows other NHS professionals to view your GP record in a readable format.
  - **Access Record (Structured):** allows your record to be viewed in a structured, coded format that supports safe transfer of key medical information.
  - **Update Record:** allows consultation summaries from other NHS providers (e.g. hospital or urgent care services) to be sent electronically and integrated into your GP record.

The information shared may include your basic details, medical history, medications, allergies, test results and consultation notes. Only the minimum information necessary for your care is accessed, and only by staff directly involved in providing treatment.

All data sharing is carried out using secure NHS systems, in compliance with UK data protection law. Access is strictly role-based, logged, and audited. We remain responsible for your GP record as the data controller.

Our legal basis for using GP Connect is the performance of a task carried out in the public interest and in the exercise of official authority (UK GDPR Article 6(1)(e)), and the provision of health or social care (UK GDPR Article 9(2)(h)).

You have the right to know how your information is used, and you can ask to view, correct, or limit the sharing of your data. If you have questions or concerns, please contact our Data Protection Officer or practice team.

Using services supported by GP Connect means your information may be securely shared across NHS organisations solely for the purpose of your direct care. For more details, please refer to our full privacy policy or speak to a member of the practice team.

Mandatory disclosure of information

We are sometimes legally obliged to disclose information about patients to relevant authorities. In these circumstances the minimum identifiable information that is essential to serve that legal purpose will be disclosed.

The organisation will also have a professional and contractual duty of confidentiality. Data will be anonymised if possible before disclosure if this would service the purpose for which the data is required.

Organisations which we are legally obliged to release patient data to include:

- NHS Digital (eg the National Diabetes Audit)
- Care Quality Commission (CQC)
- Driver and Vehicle Licensing Agency (DVLA)
- General Medical Council (GMC)
- His Majesty's Revenue & Customs HMRC)
- NHS Counter Fraud
- Police (mandatory or vital interest requests)
- The Courts
- UK Health Security Agency and Office for Health Improvement and Disparities
- Local Authorities (Social Services)
- The Health Service Ombudsman
- Medical defence organisation – in the event of actual or possible legal proceedings

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Permissive disclosure of information

The organisation can release information from your medical records to relevant organisations, only with your explicit consent. These include:

- Your employer
- Insurance companies
- Solicitors
- Local Authorities (the Council)
- Police (non-mandatory requests)
- Community services – district nurses, rehabilitation services, telehealth and OOH hospital services
- Child health services which undertaken routine treatment or health screening
- Urgent care organisations, minor injury units
- Community hospitals
- Palliative care hospitals
- Care homes
- Mental health Trusts
- NHS hospitals
- Social care organisations
- NHS commissioning support units
- Independent contractors, ie dentists, opticians, pharmacists
- Private sector providers
- Voluntary sector providers
- Local ambulance Trust
- Integrated Care Board
- Education services
- Fire and Rescue services

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Don't want to share your information?

You have the right to withdraw your consent at any time for any instance of processing, provided consent is the legal basis for the processing. Please contact your GP Organisation for further information and to raise your objection.

You have a choice about whether you want your confidential patient information to be used in this way. If you are happy with this use of information you do not need to do anything. If you do choose to opt out, your confidential patient information will still be used to support your individual care.

Your organisation has systems and processes in place to comply with the National Data Opt-out and apply your choice to any confidential patient information they use or share for purposes beyond your individual care.

To find out more or to register your choice to *opt out*, please visit https://www.nhs.uk/your-nhs-data-matters/ or telephone 0300 3035678. On the webpage you will:

- See what is meant by confidential patient information
- Find examples of when confidential patient information is used for individual care and examples of when it is used for purposes beyond individual care
- Find out more about the benefits of sharing data
- Understand more about who uses the data
- Find out how your data is protected
- Be able to set or change your opt-out setting
- Find the contact telephone number if you want to know any more or to set/change your opt-out by phone
- See the situations where the opt-out will not apply, i.e. where here is a legal requirement or where it is in the public interest to share (go to more exemptions for further information)

You can also find out more about how patient information is used at:
Health Research Authority: What We Do (which covers health and care research).
https://understandingpatientdata.org.uk/what-you-need-know (which covers how and why patient information is used, the safeguards and how decisions are made)

You can change your mind about your choice at any time.

Data being used or shared for purposes beyond individual care does not include your data being shared with insurance companies or used for marketing purposes and data would only be used in this way with your specific agreement.

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Use of Ambient AI Software During Consultations

To support safe, effective and efficient care, we may use AI-enabled ambient scribing software during some consultations. This technology listens to the conversation between you and your clinician and helps create draft consultation notes or other clinical documentation. Your clinician reviews and checks the content before anything is added to your medical record. NHS England describes these tools as supporting documentation and workflow, not replacing the clinician's professional judgement

Why We Use Ambient AI Software

- **More focus on you:** Using ambient scribing can reduce the time your clinician spends typing or writing notes during the appointment, helping them focus more fully on listening to you.
- **Better quality documentation:** The software can help produce clearer and more structured draft notes, which may improve the quality and completeness of clinical records when reviewed by the clinician.
- **Improved efficiency:** Ambient scribing can reduce administrative workload and support more efficient clinical workflows.

Your Privacy and Consent

Your privacy is very important to us. Where ambient AI software is used for your direct care, NHS England's current guidance is based on transparency and the usual direct care approach, rather than asking for explicit written consent in every case. This means we will tell you when the software is being used, explain what it does, and give you the opportunity to object or ask for it not to be used during your consultation.

- If ambient AI software is used, it will help create draft clinical notes from the conversation during your appointment.
- Your clinician remains responsible for checking, editing and approving the final record.
- If you do not want ambient AI software used, please tell your clinician. Your care will not be affected, and your consultation will be documented in the usual way.
- Your personal information will continue to be handled confidentially and in line with UK data protection law and NHS information governance requirements. NHS England's information governance guidance for ambient scribing is intended specifically for individual care purposes.

Further Information

We use approved processes to assess any ambient scribing product before it is introduced. NHS England also maintains a national self-certified supplier registry to support local assurance, although local checks are still required.

Data Protection Impact Assessments

In primary care settings, protecting patient data and ensuring privacy is a fundamental obligation. One important tool used to uphold this responsibility is the Data Protection Impact Assessment (DPIA). A DPIA is a structured process that helps identify and minimise the data protection risks of a

project, particularly when new technologies or processes involving personal data are introduced. It is an essential part of ensuring that any handling of patient information complies with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.

DPIAs are typically required when data processing is likely to result in a high risk to individuals' rights and freedoms. In primary care, this might include the introduction of a new electronic health record system, sharing patient information with external providers, or deploying new tools for remote consultations. By carrying out a DPIA early in the planning stages, primary care organisations can assess how personal data will be collected, stored, used, and shared, and ensure appropriate safeguards are in place to protect that data.

The purpose of a DPIA is not only to protect patients' privacy, but also to promote transparency and accountability in how data is handled. It ensures that patients' rights are respected and that any potential impact on their privacy is fully considered and mitigated. DPIAs are reviewed and updated regularly as services evolve, making them a key part of continuous improvement in data protection practices within primary care.

Legal basis for processing your personal data

We need to know your personal, sensitive, and confidential data so that we can provide you with healthcare services and advice. Under the UK General Data Protection Regulation (UK GDPR) there are different reasons why we may process your data, however we mostly rely upon:

Article 6(1)(e): Official Authority; and
Article 9(2)(h): Provision of health

For much of our processing, in particular:

- Maintaining your electronic GP record
- Sharing information from, or allowing access to, your GP record, for healthcare professionals involved in providing you with direct medical care
- Referrals for specific healthcare purposes
- The NHS data sharing schemes
- Our data processors
- Organising your prescriptions, including sending them to your chosen pharmacist
- Some permissive disclosures of information

We also rely upon:

- Article 6(1)(d): Vital interests – to share information with another healthcare professional in a medical emergency
- Article 6(1)(c): Legal obligation – Mandatory disclosure of information to NHS Digital and CQC, etc
- Article 6(1)(a): Consent – Certain permissive disclosures of information, ie insurance companies
- Article 6(1)(f): Legitimate interests – for certain non-clinical processing where appropriate, such as keeping our systems and services secure, preventing and detecting misuse or fraud, and managing and improving our services.

- The Data (Use and Access) Act 2025 introduces specific 'recognised legitimate interests'. Where relevant, this can mean we do not need to complete a separate legitimate interests assessment for those activities, but we will still act fairly and transparently and you can object to processing based on legitimate interests.
- Article 9(2)(j): Research – for accredited research undertaken in the surgery, with your explicit consent.

Your data rights

The UK GDPR allows you to ask for any information the organisation holds about you, including your medical records. It also allows you to ask the organisation to rectify any factually inaccurate information and object to how your information is shared with other organisations (opt-out).

Data being used or shared for purposes beyond individual direct care does not include your data being shared with insurance companies or used for marketing purposes and data would only be used in this way with your specific agreement.

Right of access

The organisation holds both personal and sensitive data (health records) about you. If you need to review a copy of your historical medical records, you can contact the surgery to make a '*Subject Access Request*'. Please note, if you receive a copy, there may be information that has been redacted. Under UK GDPR the organisation is legally permitted to apply specific restrictions to the released information. The most common restrictions include:

- Information about other people (known as '*third party'* data) unless you provided the information, or they have consented to the release of their data held within your medical records

- Information which may cause serious physical or mental harm to you or another living person. For some Subject Access Request cases, a GP will perform a '*serious harms test*'. If the GP has any cause to believe that specific information will cause you or someone else serious harm, it will not be released.

In most cases, we will not charge a fee for providing a copy of your records. We may charge a reasonable fee or refuse to act on a request if it is manifestly unfounded or excessive, or if you request further copies.

The timeframe for responding starts when we receive your request. If we need to verify your identity or ask you to clarify your request, the timeframe starts once we have enough information to respond.

The deadline is one month, however, we can pause this if we require more information from you. The deadline can be extended by an additional two months depending on the complexity of the request, the number of requests you make, or if we must process a large amount of data. We will notify you if the extension will be applied.

We will perform reasonable and proportionate searches to locate your personal data in response to a subject access request.

These requirements reflect the Data (Use and Access) Act 2025 updates. If we reasonably need you to clarify what you want (or we need evidence of identity or authority), we may pause the response time until we have what we need to respond.

Right to rectification

You have the right to have any factual inaccuracies about you in your medical record corrected. Please contact the surgery with your request.

Right to object

If you do not wish to share your information with organisations who are not responsible for your direct care, you can opt-out of the sharing schemes. For further information about opting out, please visit Your NHS Matters.

Right to withdraw consent

Where the organisation has obtained your consent to process your personal data for certain activities, (eg preparation for a subject access request for a third party), you have the right to withdraw your consent at any time.

Right to erasure

In some circumstances, you can ask for your personal data to be deleted. This right is not absolute and does not apply where we must keep records to comply with legal and professional obligations, or where deletion could impact your direct care.

Right to restriction of processing

In some circumstances, you can ask us to restrict the use of your information while a concern is investigated, for example while we verify accuracy.

Right to data portability

Where this applies, you can ask for certain information you provided to be supplied to you or another organisation in a commonly used electronic format.

Rights in relation to automated decision-making and profiling

We do not use your data to make decisions about you solely by automated means that produce legal or similarly significant effects. If this changes, we will update this notice and explain your rights.

Right to complain

You can raise concerns with us and you also have the right to complain to the Information Commissioner's Office (ICO) at any time.

Your access to your future health records

If you have online access to your medical records, you will have access to your full records. This means you will have access to free texts, letters, and documents once they have been reviewed and

filed by the GP. Please note that this will not affect proxy access.

If you move organisation, access to your full medical records will commence from the date you register with the new organisation.

There will be limited legitimate reasons why access to prospective medical records will not be given or will be reduced and they are based on safeguarding. If the release of information is likely to cause serious harm to the physical or mental health to you or another individual, the GP could refuse or reduce access to prospective records; third party information may also not be disclosed if deemed necessary. On occasion, it may be necessary for a patient to be reviewed before access is granted, if access can be given without a risk of serious harm.

What should you do if your personal information changes?

It is important that you tell the person treating you if any of your details such as your name or address have changed or if any of your details such as date of birth is incorrect for this to be amended. You have a responsibility to inform us as soon as possible of any changes so our records are accurate and up to date for you.

How long will we store your data?

The NHS Records Management Code of Practice can be accessed at:

https://transform.england.nhs.uk/information-governance/guidance/records-management-code/

How can you complain?

If you have any concerns about how your data is managed, please contact PCN Manager at mercian.pcn@nhs.net in the first instance so we can look into it.

We aim to make it easy for you to raise concerns about how we use your personal information. You can complain to us:

By email: mercian.pcn@nhs.net

We will acknowledge your complaint within 30 days and respond without undue delay, letting you know the outcome and any action we have taken or plan to take.

You can also raise concerns with the Information Commissioner's Office (ICO) at any time.

For independent advice about data protection, privacy and data sharing issues, you can contact the Information Commissioner's Office (ICO) at:

Information Commissioner's Office (ICO)
Wycliffe House
Water Lane
Wilmslow
Cheshire, SK9 5AF
Tel: 0303 123 1113 Web: www.ico.org.uk

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Further information

If you have any concerns about how your data is shared or would like to know more about your rights in respect of your personal data held by the organisation, please contact the Data Protection Officer.

Data Protection Officer

Any queries about data protection issues should be addressed to:

Email: DPO.healthcare@nhs.net

Changes to our privacy policy

We regularly review our privacy policy and any updates will be published on our website, in our newsletter and on posters to reflect the changes. This policy will be reviewed January 2027, or earlier to align it with legislative changes.