CHILDREN'S HOSPICE SOUTH WEST

DATA PROTECTION POLICY HR/DP/18

Section 1 Policy administration

Approved By / Include Date: Approved by Executive: Sept 2013

(Note: This policy replaces Employment Data

Protection Policy HR/DP/18)

Approved by the Board: March 2017 Approved by the Board: November 2018

Policy Sponsor: Chief Executive

Originator: Director of HR

Responsibility for Dissemination: Senior and Line managers

<u>Compliance:</u> All employees, managers, volunteers or

anyone else processing information on behalf

of CHSW.

Policy Monitoring and Review: The Director of HR will meet with SMT at 4 yearly

intervals and review the effectiveness and quality

of this policy or sooner if appropriate.

Policy Version: November 2018

Expected Review Date: November 2022

Policy ref: D18

Section 2 – Policy scope

C	This policy applies to all OUGH
a c a v c	This policy applies to all CHSW employees and volunteers including Trustees, contractors, consultants and temporary appointments and any other representative who collects and processes data on behalf of CHSW, and all data held electronically or in manual files.
T c	 Complies with the law (Data Protection Act 1998 (DPA), General Data Protection Regulations (GDPR) May 2018 and subsequent legislation) follows good practice protects clients, staff and other individuals protects the organisation This policy also sets out CHSW's approach to dealing with Data Protection Subject Access Requests and breaches.
Related hospice policies/procedures: P P P P P P P P P P P P P	Acceptable Use of IT policy Policy & Procedure for Children & Families: Access to Health records / Care/015 Policy & procedure for Health records: Creation, Management, Storage and Destruction / Care/016 Records Retention Policy & Procedure Social Media Policy Employee Handbook/Induction Handout Volunteer Handbook/Induction Handout Training Programme(s) Recruitment and Selection Policy Employment References Policy Confidentiality Agreements for Third Party Suppliers; Information Governance Policy
	GDPR May 2018 DPA 1998 ICO Data Protection Employment Practices Code Regulatory of Investigatory Powers Act 2000 Crime and Disorder Act 1998
E P A	Human Rights Act 1998 Equality Act 2010 Police and Criminal Records Act 1984 Access to Health Records Act 1990 Access to Medical Reports Act 1988 Low Risk – no full DIPA required

Policy ref: D18 Policy Version: Nov 2018

Section 3 – Contents

Contents	page
1. Policy administration	1
2. Policy scope	
3. Contents	3
4. Policy	4
4.1 Introduction	4
4.2 Policy Statement	4
4.3 Key Definitions	5
4.4 Principles	7
4.5 Responsibilities	8
5. Procedure	
5.1 Checklist before processing data	10
5.2 Personal data security	10
5.3 Accuracy of data	11
5.4 Revision and destruction of data	11
5.5 Access, use and disclosure of personal information	11
5.6 Non-disclosure exemptions	12
5.7 Right of access to personal information – subject access	12
5.8 Fair processing of personal information	13
5.9 Training and acceptance of responsibility	13
5.10 Third party processing	14
5.11 Data Breach	14
5.12 Monitoring and Audit	15
6. Further Guidance	15
Appendix 1 – Subject access request	
Appendix 2 – Guidance on handling personal information	20
Appendix 3 – CHSW Data Breach Flowchart	22

Policy ref: D18 Policy Version: Nov 2018

Section 4 - Policy

4.1 Introduction

The General Data Protection Regulation (GDPR) came into force on 25th May 2018. The regulation replaces the current Data Protection Act 1998 (DPA). After Britain leaves the European Union, a new UK Data Protection Act supplemented by the GDPR, will ensure that the GDPR principles remain in UK law.

The GDPR requires a more proactive, systematic and accountable attitude towards data protection compliance and is concerned with the rights of individuals when processing their information. This is achieved by being open and honest with employees about the use of information about them and by following good data handling procedures.

The regulation is mandatory and all organisations that hold or process personal data must comply. Both employers and employees have new responsibilities to consider, to help ensure compliance. Organisations must have a valid reason for having personal data and the data should not be held for any longer than necessary.

4.2 Policy statement

Under the GDPR CHSW, is a data controller, registered with the Information Commissioners Office (ICO). CHSW collects and processes personal data CHSW and is committed to being transparent about how it collects and uses the data and to meeting its data protection obligations.

CHSW regards the lawful and correct treatment of personal information as extremely important to successful working and to maintaining the confidence of those with whom we deal.

- a) CHSW is committed to:
 - having a valid reason for having personal data and not holding onto it any longer than is necessary;
 - respecting individuals' rights when processing their information and preventing harm to individuals;
 - complying with both the law, European Regulations, and good practice;
 - applying Data Protection Impact Statements (DPIA) when processing is "likely to result in a
 high risk to the rights and freedoms of natural persons" in particular when looking at new
 processing activities, a new system or where an activity may be outsourced to a third party;
 - being open and honest with individuals whose data is held;
 - providing training and support for individuals who handle personal data for CHSW, so that they can act confidently and consistently.
- b) CHSW recognises that its first priority under the DPA/GDPR is to avoid causing harm to individuals. In the main this means:
 - keeping information securely in the right hands;
 - holding good quality information.

Secondly the DPA/GDPR aims to ensure that the legitimate concerns of individuals about the ways in which their data may be used are taken into account. In addition to being open and transparent, CHSW will seek to give individuals as much choice as is possible and reasonable over what data is held and how it is used.

- c) This policy applies to all personal data and special category personal data collected and processed by CHSW in the conduct of its business and applies to both automated personal data and to manual filing systems.
- d) This policy applies to all CHSW employees and volunteers including Trustees, contractors, consultants and temporary appointments and any other representative who collects and processes data on behalf of CHSW, and all data held electronically or in manual files.
- e) The day to day management of data protection rests with the managers holding or processing personal data.
- f) Subject Access Requests will be initially dealt with by Human Resources who will work with the specific department(s) where the requested data is held.
- g) CHSW staff should be aware that a breach of this policy could result in disciplinary action being taken.
- h) All contractors, consultants, partners or agents of CHSW should be made aware that any breach of any provision of the DPA/GDPR will be deemed as being a breach of any contract between CHSW and that individual, company, partner or firm and may be reported to the Information Commissioners Office (ICO).
- i) CHSW will carry out spot checks across all sites from time to time as part of its monitoring and audit process.
- j) A relevant Privacy Notice will be made available to all CHSW staff and volunteers. The most recent version will always be available on CHSW's intranet/internet.
- k) A copy of the Data Protection Policy is also available on the intranet under HR Policies, or from the local HR Office.
- In addition, staff and volunteers have access to CHSW's Privacy Policy on the public website www.chsw.org.uk

4.3 Key Definitions

a) Personal Data

Personal data means any information relating to an identified or identifiable living individual person (data subject); an identifiable person is one who can be identified, directly or indirectly, in particular by reference to an identification number or to one or more factors specific to physical, physiological, mental, economic, cultural or social identity.

Personal information can be factual i.e. address and date of birth, or it can be an opinion i.e. information relating to the services which individuals receive from CHSW or comments in a staff's personal development review.

Staff should note that any personal data in their possession is also subject to the regulation e.g. if a manager has a written copy of contact details of their team or an employee keeps family names and numbers on post it notes on their desk.

Policy ref: D18

Individuals who hold data about another individual on a personal level, e.g. family members telephone number stored in a phone, will not need to consider GDPR.

b) Special categories of personal data

Data relating to an identifiable, living individual relating to racial or ethnic origin; political opinions; religious or philosophical belief; trade union membership; genetics; biometrics; physical or mental health condition; sexual life; sexual orientation criminal offences.

Such data is given higher levels of protection.

- c) **Processing** any activity that involves the data i.e. collecting, holding, recording, sending, analysing, using, retrieving, storing, updating, disclosing or destroying the data.
- d) **Data Controller** CHSW is the Data Controller under the GDPR which means that it determines how and why personal data is processed.
- e) **Data Subject** an individual who is subject of personal data e.g. employees, former employees or job applicants.
- f) **Data Processor** any person or organisation that process information on behalf of the Data Controller (CHSW).
- g) **ICO** The Information Commissioners Office, the authority within the UK which is tasked with the protection of personal data and privacy. The ICO is the UK's supervisory authority for the purposes of GDPR.
- h) DPO Data Protection Officer plays a crucial role in helping CHSW fulfil its data protection obligations and is involved closely and in a timely manner, in all Data Protection matters i.e. assists to monitor internal compliance, informs and advises on CHSW's data protection obligations, provides advice regarding DPIAs and acts as a point of contact for data subjects and the ICO.

4.4 Principles

- a) As CHSW keeps information about individuals we must comply with the DPA/GDPR. These outline principles which underpin the handling of personal data. CHSW must ensure that personal data is:
 - 1. Processed fairly, lawfully and in a transparent manner in relation to individuals Individuals should be advised why the information about them is required, how it will be used and anyone the information may be disclosed to.
 - Collected for specified and lawful purposes and not further processed in a manner that is incompatible with those purposes
 Personal information should only be used for the purpose it was intended for, it should not be used for other purposes unless a legal exemption applies or if further consent/ permission has been provided;
 - 3. Adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed

Policy ref: D18

CHSW must be able to objectively justify the relevance of personal information held and should not be excessive in relation to the purposes for which it is held;

4. Accurate and where necessary kept up to date

CHSW is obliged to ensure the data it holds is accurate and up to date; every reasonable step is taken to ensure that personal data that are inaccurate, having regard to the purposes for which they are processed, are erased or rectified without delay;

5. Not kept longer than is necessary

Personal information should be reviewed on a regular basis and out-of-date or irrelevant information should be deleted or destroyed. Please see CHSW's Records Retention Policy and Procedure for further guidance and retention periods;

- 6. Processed in a manner that ensures security of personal data including protection against unauthorised, or unlawful processing and against accidental loss, destruction or damage, using appropriate technical and organisational measures Manual information should be locked, in some cases locked within a cabinet within an attended or locked office. Electronic information should be protected by passwords and USB sticks encrypted. Personal information should not be discussed or disclosed to other individuals who do not have a legal right to know;
- 7. **Processed in accordance with the rights of the data subject**As a data subject, individuals have a number of rights. They can:
 - Obtain a copy of information held about them that identifies them as an individual. This right is called 'Subject Access' and CHSW is expected to provide a copy of their information upon request (see Section 5.7). There may be some exemptions to this, and it is important to advise Human Resources of any Subject Access requests to be handled;
 - Individuals also have the right to have inaccurate or incomplete data held about them changed, deleted or destroyed and could claim compensation for any damage or distress caused;
 - Require CHSW to delete or stop processing their data, for example where data is no longer necessary for the purposes of processing;
 - Object to the processing of their data where the organisation is relying on its legitimate interests as the legal ground for processing;
 - Lodge a complaint with a supervisory authority;
 - Not be subject to automated decision making, including profiling, which has
 legal or other significant effects on them; there are some exceptions e.g.
 where explicit consent has been given or where it is necessary for entering
 into or performing a contract. However, even where an exception is relied
 upon, additional safeguards are required e.g. the right to require human
 intervention in the process.

7

Policy ref: D18

8. Transferred only to countries with adequate security.

Personal information will not be transferred to a territory outside the European Economic Area (EEA) unless that country ensures an adequate level of protection for the rights and freedoms of the data subjects in relation to the processing of their personal data.

4.5 Responsibilities

- a) Trustees:

 Recognise their overall responsibility for ensuring that CHSW complies with its legal obligations.
- b) Department Heads and Line Managers:
 - Managers have a responsibility for the type of personal data they collect and how they use it;
 - Managers of departments where personal data is handled, are responsible for drawing up their own departmental operational procedures (including departmental induction and training) to ensure that good data protection practice is established and followed;
 - must ensure that Human Resources is informed of any changes in their uses of personal data that might affect the organisation's registration;
 - demonstrate their commitment and support to this policy;
 - reflect the policy and procedure within their own management practice and regularly review and audit the way they hold, manage and use personal information;
 - know when and where to seek additional advice and support.
- c) Individual staff and volunteers are expected to:
 - Ensure that their activities comply with the data protection principles.
 - Read, understand and accept any policies and procedures that relate to the personal data they may handle in the course of their work;
 - Communicate effectively with their manager on an ongoing basis and raise any issues
 of concerns or data protection incidents as and when they occur;
 - Co-operate fully with any organisations that provide support to CHSW and its employees in relation to this policy and procedure;
 - Not disclose personal data outside the organisation's procedures, or use personal data held on others for their own purposes.
 - Ensure their own personal data held by CHSW is accurate and up to date, for example, title, name, address, contact details, next of kin, emergency contact(s) etc. via their self- service access of the HR System (Cascade), and/or informing their line manager of any changes.

- d) CHSW has a responsibly to make any Contractor, Agent or anyone else processing information on behalf of CHSW aware that:
 - They must comply with this policy, with specific regard to section 5.10;
 - All third parties who are users of personal information supplied by CHSW will be required to confirm that they will abide by the requirements of the DPA/GDPR with regard to information supplied by CHSW;
 - They must allow data protection audits by CHSW of data held on its behalf (if requested).

Section 5 - Procedure

5.1 Checklist before processing data

Before processing personal data individuals should consider:

- Is it necessary to record this information?
- Has the data subject been told that this information will be processed and why? Eg Privacy Notice)
- Is the data accurate?
- Is the data secured? (see section on 5.2 Security)
- If you are processing personal data on behalf of another Data Controller for example, the police, fire or probation service, you should process their data only in accordance with their instructions.

5.2 Personal data security

- a) All personal data whether manual or electronic must be kept secure to prevent accidental loss, damage or destruction. The extent of the security measures required will depend on the sensitivity of the data.
- b) Paper records should be locked away in desks, filing cabinets or cupboards when they are not in use. The keys should be kept in a safe place.
- c) If the data is electronic, access should be password protected. CHSW IT users must not share their user ID or passwords. PC screens should be situated so that they cannot be viewed by unauthorised personnel and users must log out of PC's when not in use, or lock PC using the Ctrl, Alt and Delete keys.
- d) When records containing personal information have reached the end of their life, they will be disposed of by shredding, incineration or using confidential waste bins.
- e) Personal data should not be sent by email where its security cannot be guaranteed

- f) All USB sticks must be encrypted before they are used.
- g) If CHSW users are required within the course of their duties to transfer personal data between sites or take it home (including laptops etc.), upmost care must be taken to keep the information secure and out of sight, and stored securely when left unattended.
- h) If personal data is to be sent externally ensure the information is made secure and clearly marked 'Confidential' and where possible use registered post or courier service to transport the data.
- i) We must at all times treat people's personal information as we would wish our own to be treated.

Further information regarding the retention, storage and disposal of personal data can be found in the CHSW policies on Data Retention and the Acceptable Use of IT Policy.

5.3 Accuracy of data

- a) It is the responsibility of those who receive and process information to ensure, as far as possible, that it is accurate, valid and up to date;
- b) Individuals who input or update personal information must ensure it complies with the principles of data protection described at 4.3. If an individual is aware that information recorded is inaccurate they must take steps to rectify it;
- c) Individuals must be aware that any information which they record about someone (whether in a handwritten note, email or more formal document) may be disclosed to that person upon request (Please see 5.7 Subject Access).

5.4 Revision and destruction of data

a) Personal information should not be kept for longer than is necessary. Information and associated retention periods should be reviewed at frequent intervals to ensure they are up to date and still relevant. If personal data is no longer needed and there is no legal or other reason to hold the information it should be destroyed. Please also refer to CHSW's Records Retention Policy.

5.5 Access, use and disclosure of personal information

- a) Access to and use of personal information on behalf of CHSW must only be done in relation to individual official duties. Use of this information for any other purpose is prohibited and improper use or disclosure may result in disciplinary action.
- b) Personal information held by CHSW must not be disclosed to anyone internally, or externally, unless the disclosing individual is fully satisfied that the enquirer is fully authorised and legally entitled to the information. If possible, requests for information should be in writing stating their reasons and legal entitlement to the information. Checks on the identity of the enquirer should also be made. Individuals should be aware that other individuals or organisations may try to trick CHSW into giving away information. If you are not sure you must seek guidance from your line manager or Human Resources.

- c) In response to a lawful request, only the minimum of personal data should be disclosed. The information should be adequate for the purpose of the disclosure, relevant and not excessive.
- d) Individuals must take particular care when disclosing personal data to third parties, to ensure that there is no breach of the DPA/GDPR or of confidence. Disclosure may be unlawful even if the third party is a family member of the data subject, or a local authority, government department or the police. A key point to consider is whether the disclosure is relevant to and necessary for the conduct of CHSW's business. For example, it would generally be appropriate to disclose a staff member's work contact details in response to an enquiry relating to a function for which they are responsible, but it would not be reasonable or appropriate to disclose a staff member's personal address or bank account details.

5.6 Non-disclosure exemptions

There may be occasions when CHSW obtains personal information for one purpose then needs to use it or disclose it for another purpose. The DPA/GDPR also allows personal data to be disclosed to third parties without the consent of the data subject, in the following circumstances:

- The disclosure is necessary for safeguarding national security;
- The disclosure is necessary for the prevention or detection of crime, or the apprehension or prosecution of offenders;
- The disclosure is necessary for the assessment or collection of any tax or duty;
- The disclosure is necessary for the discharge of regulatory functions (including the health, safety and welfare of people at work);
- The data to be disclosed are to be used for research purposes, subject to the rules governing the use of personal data in research;
- The data are information which CHSW is obliged by legislation to provide to the public;
- The disclosure of the data is required by legislation, rule of law or the order of a court.

In these cases, advice should always be sought from Human Resources before making a disclosure.

5.7 Right of access to personal information: subject access

- a) Individuals (data subjects) have a right to receive a copy of personal information held about them (subject access right) by CHSW subject to certain exemptions.
- b) Individuals should complete CHSW's subject access request form (Appendix 2) when making any request and forward to Human Resources, although this is not compulsory.
- c) All CHSW staff must know how to recognise a subject access request and realise that it must be dealt with urgently. The request may not mention the DPA/GDPR, it may just say 'I want to see all the information you hold about me'. Any member of staff who receives a subject access request must immediately contact Human Resources and provide details of the request.
- d) CHSW is obliged to provide a copy of the requested information, subject to certain exemptions, within one month of receiving the request.
- e) CHSW may request a fee should an individual make repeated or excessive requests.

5.8 Fair processing of information

- a) Whenever personal data is collected, we must provide the Data Subject with information about our intentions with their data, this is known as a Privacy Notice.
- b) We must inform the Data Subject of the identity of the Data Controller (CHSW), the purpose(s) for which the information is to be used and with whom the information may be shared.
- c) The Data Subject should be given the opportunity to opt out of having their data used for other purposes. This can be achieved by use of an opt out 'tick box'.
- d) A list of individuals who have opted out should be kept and checked whenever necessary. If an individual receives information after specifying that they do not want it, the DPA/GDPR have been breached.
- e) Standard privacy statements will be provided for use on forms where data is collected.
- f) Whenever data is collected, the number of mandatory fields will be kept to a minimum and Data Subjects will be informed which fields are mandatory and why.
- g) When using mailings (electronic or postal) from CHSW e.g. for marketing purposes, CHSW will make our identity clear, provide a valid address for opt-out requests and not send unsolicited marketing material unless the recipient has previously consented to receiving such material.

5.9 Awareness, training and acceptance of responsibilities

- a) CHSW will ensure responsibility for maintaining awareness of confidentiality and data protection for all staff and volunteers including:
 - Personal responsibilities;
 - Confidentiality of personal information;
 - Relevant CHSW policies and procedures;
 - Individual rights (access to information and compliance with the principles);
 - General good practice guidelines covering security and confidentiality;
 - Awareness to all staff about who the DPA/GDPR Leads are and how they can be contacted.
- b) Information for staff is contained in the staff handbook and both staff and volunteers in the guidance leaflet *Guidance for all staff, volunteers and contractors on handling personal information (Appendix 2)*
- c) All staff and volunteers who have access to any kind of personal data will have their responsibilities outlined during their induction procedures.
- d) Data protection and security will be included in mandatory training for all staff and volunteers of CHSW.
- e) Staff agree to comply with this policy under the terms of their employment contract.

5.10 Third party processing

a) Where a third-party processes personal data on behalf of CHSW, e.g. web site hosting, service provider, CHSW must:

- obtain a 'Confidentiality Agreement' (or other) for Third Party Suppliers which will
 provide a contract under which the data processor is to act only on instruction from
 CHSW;
- choose a data processor providing sufficient guarantees in respect of the security measure they take.
- b) Take reasonable steps to ensure compliance with those measures.
- c) Personal data must not be transferred to a country outside of the European Economic Area (EEA) unless that country ensures an adequate level of protection. If you are required to deal with such arrangements seek advice from the Human Resources.
- d) Where we are processing data on behalf of another Data Controller for example the police, fire or probation service, we should process their data only in accordance with their instructions.

5.11 Data Breach

- a) A personal data breach means a breach of security leading to the accidental or unlawful destruction, loss, alteration, unauthorised disclosure of, or access to, personal data. This includes breaches that are the result of both accidental and deliberate causes. Simple mistakes can lead to breaches, for example, losing a memory stick, leaving a laptop on a train or sending an email to the wrong person. A breach is more than just about losing personal data for example, confidential information left on printers, personal information left in cars on view.
- b) Under the GDPR CHSW has a duty to report certain types of personal data breach to the relevant supervisory authority and the affected individuals. This must be done within 72 hours of becoming aware of the breach, where feasible. Failing to notify a breach when required to do so can result in a significant fine up to 10 million Euros or 2% of turnover. CHSW must therefore, keep a record of any personal data breaches regardless of whether notification is required. For non-care related breaches, staff must complete a Data Breach Form which can be accessed via the CHSW intranet http://intranet/GDPR/default.aspx, along with the flow chart, on each occasion a data breach occurs; this then informs key people who make a decision as to whether the breach needs to be reported. For care related breaches recording is made via the Accident Incident and Near Misses (AINMS) system and highlighted immediately as such to management.
- c) An individual who suffers damage or distress as the result of any breach of the requirements of the DPA/GDPR by a Data Controller, is entitled to seek compensation through the Courts.
- d) An individual who believes they have been affected by the processing of personal data, may ask the Information Commissioner to assess whether or not the processing of the data has been carried out in compliance with the DPA/GDPR.

5.12 Monitoring and audit

- a) This Policy and Procedure will be monitored by the Director of Human Resources and the Information Governance Committee and will meet with SMT at 4 yearly intervals and review the effectiveness and quality of this policy or sooner if appropriate.
- b) Managers and those responsible for their departmental procedures and guidelines will review the effectiveness of their processes annually or where required e.g. introduction of changes to what data is accessed or processed.

<u>Section 6 – Further Guidance</u>

Further information on the DPA/GDPR can be found at:

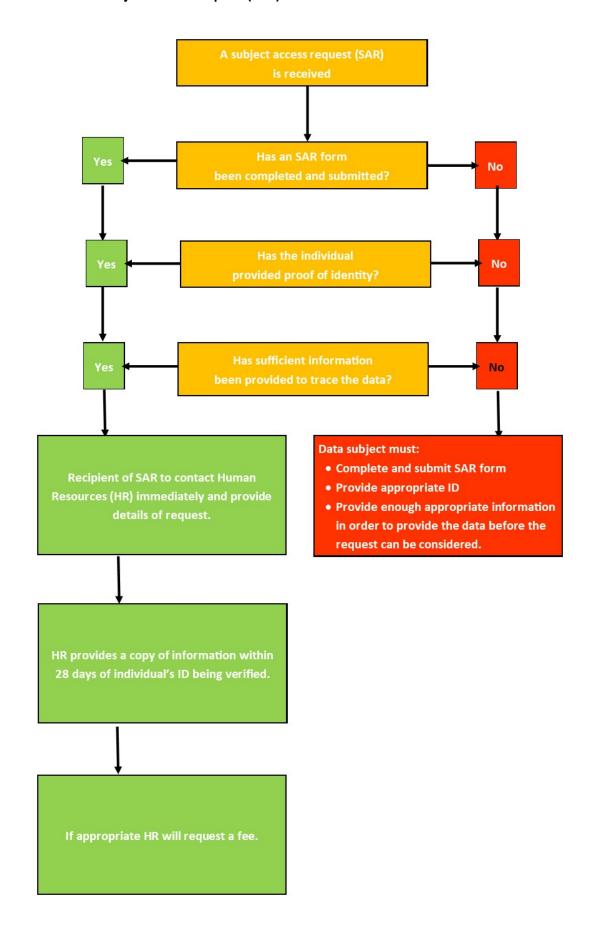
Information Commissioner's Office (the UK's independent authority set up to promote access to official information and to protect personal information) website: www.ico.gov.uk

Policy History

Policy Date	Summary of Change	Contact	Version/Date	Review
				Date
Sept 2013	New Policy: This policy + Data	HR	Sept 2013	Sept 2106
	Protection Procedure: Subject			
	Access request replaces			
	Employment Data Protection			
	Policy HR/DP/18)			
Sept 2013	Review only. Minor tweaks to	Daphne	March 2017	Mar 2021
	job titles and associated	Sands		
	policies.	HR		
March 2017	Review following the GDPR	Daphne	November	July 2022
	which came into force on 25 th	Sands	2018	
	May 2018	HR		

Policy ref: D18

Appendix 1 – CHSW Subject Access Request (SAR) Flow Chart



Policy ref: D18 Policy Version: Nov 2018

Appendix 1 - Subject Access Request Guidance and Form

Guidance:

- a) **About Yourself** asks you to give information about yourself which will help Children's Hospice South West to confirm your identity. We have a duty to ensure that the information we hold is secure and so we must be satisfied that you are who you say you are.
- b) **Proof of Identity** asks you to provide evidence of your identity by producing TWO official documents (which, between them, show your name, date of birth and current address). Photocopies are acceptable.
- c) Information Requested you must indicate what type of information you are looking for.
- d) **Declaration** must be signed by you or someone authorised on your behalf. Any third party making a request on your behalf CHSW will need to be satisfied that they have the authority to do this. This would normally be via written authority or power of attorney.
- e) When you have completed and checked this form, send it together with copies of the required identification to the appropriate HR Team member.

Policy ref: D18

Subject Access Request Form

About Yourself

Postcode:

The information requested below is to help Children's Hospice South West satisfy itself of your identity and to find any personal data held about you.

Title (tick box if appropriate): Mr Mrs Miss Ms Other Title (e.g. Dr, Rev etc.): Surname / Family Name: First Name: Maiden / Former Names (if changed during employment): Date of Birth: Your Current Home Address (to which we will reply) Address: Telephone Number:

<u>Proof of Identity</u> (required from individuals not currently employed by CHSW)

To help establish your identity if you are not currently working for CHSW, your application must be accompanied by TWO official documents which, between them, show your name, date of birth and current address. Photocopies are acceptable. For example: A birth certificate/adoption certificate, driver's licence, medical card, passport or any other official document which shows your name and address. Failure to provide this proof of identity will delay your application.

PLEASE COMPLETE THIS SECTION AS FULLY AS POSSIBLE Information Requested

To ensure that we provide you with the right information, please state below exactly what information you would like us to look for. Please don't just ask for "everything you hold on me".

If you would like a copy of a particular file/document, then please state this below. Additionally, if you do not want particular information then please let us know. If you narrow your request to the specific information that you want, this will help us provide it to you much quicker.

Policy ref: D18

Please provide me with the following information:		
	\Box	

Upon receipt of your identification, we have a statutory time limit of one month within which we must provide you with the information that you have requested.

Declaration

The information that I have supplied in this application is correct. *I am the person to whom this request relates / *I am authorised to act on behalf of the person to whom this request relates. *please indicate correct answer

Signed by:	
Dated:	

Before returning this form, please check that you have completed ALL the sections, have enclosed copies of TWO identification documents of yourself, have signed and dated the application form.

If you have any queries regarding this form, contact your local Human Resources Department:

Little bridge House – 01271 313310

Little Harbour - 01208 871819

Charlton Farm - 01275 866600

Office Use Only

Date application was received:	
Who received the request?	
pplication checked and legible? Yes / No	
Identification documents checked? Yes / No / not applicab	
What identification was provided?	
Identification documents returned?	Yes / No / Not applicable

Policy ref: D18

Appendix 2 - Guidance for all staff, volunteers and contractors on handling personal information

This leaflet sets out your responsibilities when handling personal information.

All staff will at some point use personal information. Failure to handle information appropriately may affect the care of our children, CHSW's reputation and lead to legal action or a significant fine. Deliberate inappropriate use is likely to lead to disciplinary action. If in doubt, always seek advice.

This leaflet is a brief summary of your responsibilities with regard to personal information. If unsure how to handle information, please seek advice. Your line manager can direct you, or speak to Human Resources.

Definitions and responsibilities

Personal information

Information about an individual, which includes either some or all details of their identity is personal and is subject to the DPA/GDPR.

Confidential or sensitive information

Personal information, in any form is confidential. This means that information should only be shared or accessed by someone with a legitimate reason and related to the activity the information is being requested for i.e. the care of a child or donor/supporter request. Information about members of staff or others in relation to sensitive issues, such as appraisals or payroll details is also confidential.

Protecting information (including personal and sensitive data) Keep information secure and available

- Do not share your passwords
- Only access information about individuals where you have a justified work-related reason to do so
- Only store personal information on electronic media such as a memory stick and always ensure that it is encrypted and only when necessary
- Ensure that personal information contained in emails is sent by a secure method
- Do not leave personal information lying around where it can be seen, read or removed by others
- Personal information or sensitive details should be marked as 'private and confidential'
- Lock record stores and filing cabinets and log-out of computer systems when they are not in use
- Ensure that if you transport information in any form (paper or electronic), it is kept secure at all times
- Ensure you are aware of any security requirements when handling information outside of your normal workplace, such as at home or other location. You may not transfer information onto any personal computer equipment that you own
- Dispose of personal or confidential information via confidential waste facilities

Record information accurately and consistently

- Record information onto paper or enter it into the computer as soon as possible
- If hand writing a record, make sure that it is legible
- Check individuals' personal details with them to ensure that they are up to date
- Any alteration or addition on a paper record must be dated, timed and signed
- Record relevant and useful information. Do not use unnecessary abbreviations or jargon and do not include irrelevant speculation or personal opinions

Policy ref: D18

Only disclose sensitive information after thought and care

- Confirm the identity of anyone asking for information over the phone and if appropriate call them back to ensure they are who they say they are before releasing any data
- Ask them what they need and why they need it, so you can determine if it is appropriate to provide
 it to them
- Respect the sensitivity and privacy of individuals; ensure you are not overheard by others during private phone calls or conversations
- Establish the service user's wishes with regard to giving information to family and friends

Using personal information

- Justify why any personal information needs to be used. Seek advice if you need to use any information that could be used to identify a person.
- Only use personal information if necessary and always use the minimum amount of personal information required for the purpose

When deciding whether to share information

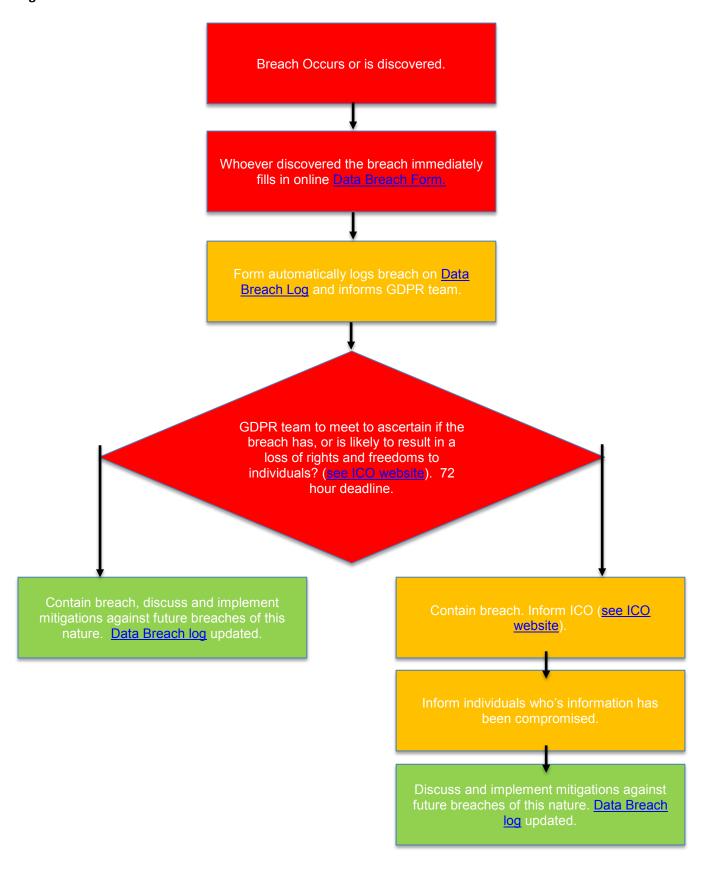
- Ensure that a request is lawful and reasonable
- When information needs to be shared about an individual who is not able to give consent and/or has difficulty understanding, ensure that it is in their best interests to do so
- Share the minimum information required to provide the necessary care or to satisfy a lawful, reasonable request
- Ensure information sharing is timely

Further information and guidance can be found in the following CHSW documents:

- Use of internet, email and telephone policy & procedure and Social Media Policy
- Care Policy & procedure for Children & Families: Access to Health records
- Care Policy & procedure for Health records: Creation, Management, Storage and Destruction Records Retention Policy & Procedure (DP/02)
- Employee Handbook

Policy ref: D18

Appendix 4 – CHSW Data Breach Flow Chart (non-care related) may need boxes adding to flow chart re internal procedures and reference to other specific authorities e.g. NMC and LADO?



Policy ref: D18