

# **Freedom of Information (FOI) and Environmental Information Regulations (EIR) Policy**

**July 2022 - July 2025**

<b>CONTROL RECORD</b>			
<b>Reference Number</b> GOV-015	<b>Version</b> 1.0	<b>Status</b> Final	<b>Author</b> Associate Director of Governance Head of Corporate Assurance
			<b>Sponsor</b> Director of Nursing
			<b>Team</b> Corporate Assurance Team
<b>Title</b>	Freedom of Information (FOI) and Environmental Information Regulations (EIR) Policy		
<b>Amendments</b>	N/A		
<b>Purpose</b>	To ensure that all ICB staff understand their responsibilities under the FOI Act and EIR for ensuring that the ICB complies with legal and regulatory requirements when responding to requests for information from members of the public.		
<b>Superseded Documents</b>	N/A		
<b>Audience</b>	All employees of the Nottingham and Nottinghamshire ICB including all individuals working within the ICB in a temporary capacity, including agency staff, seconded staff, students and trainees, and any self-employed consultants or other individuals working under contract for services.		
<b>Consulted with</b>	N/A		
<b>Equality Impact Assessment</b>	Completed – June 2022		
<b>Approving Body</b>	ICB Board	<b>Date approved</b>	1 July 2022
<b>Date of Issue</b>	July 2022		
<b>Review Date</b>	July 2025		
<p><b>This is a controlled document and whilst this policy may be printed, the electronic version available on the ICB's document management system is the only true copy. As a controlled document, this document should not be saved onto local or network drives.</b></p>			

**NHS Nottingham and Nottinghamshire Integrated Care Board (ICB)'s policies can be made available on request in a range of languages, large print, Braille, audio, electronic and other accessible formats from the Communications Team at [nnicb-nn.comms@nhs.net](mailto:nnicb-nn.comms@nhs.net).**

## Contents

	<b>Page</b>
<b>1 Introduction</b>	4
<b>2 Purpose</b>	4
<b>3 Scope</b>	5
<b>4 Roles and Responsibilities</b>	5
<b>5 Right of Applicants</b>	6
<b>6 Publication Scheme</b>	7
<b>7 Responding to Requests for Information (including use of exemptions)</b>	7
<b>8 Description of Information Requested</b>	10
<b>9 Appeals Process</b>	10
<b>10 Monitoring Compliance of Responses to Freedom of Information Requests</b>	11
<b>11 Escalation</b>	11
<b>12 Retention of Requests and Responses</b>	11
<b>13 Communication, Monitoring and Review</b>	12
<b>14 Staff Training</b>	12
<b>15 Re-use of Information</b>	12
<b>16 Equality and Diversity Statement</b>	13
<b>17 Interaction with other Policies</b>	13
<b>18 References</b>	14
<b>Appendix A: Flowcharts for Responding to Requests for Information</b>	15
<b>Appendix B: Exemptions</b>	20
<b>Appendix C: Vexatious Requests</b>	21
<b>Appendix D: Charging Regime</b>	22
<b>Appendix E: Duty to Confirm or Deny</b>	23
<b>Appendix F: Equality Impact Assessment</b>	24

## **1. Introduction**

- 1.1 This policy applies to the NHS Nottingham and Nottinghamshire Integrated Care Board (ICB), hereafter referred to as 'the ICB'.
- 1.2 The Freedom of Information Act 2000 (FOI Act) imposes a number of obligations on public authorities, which includes the ICB, to disclose information they hold about its activities. It replaces the non-statutory 'Code of Practice on Openness in the NHS'.
- 1.3 The FOI Act provides the public with a statutory right to request access to any information held by the ICB and details how requests for information should be handled. The FOI Act also sets out a number of exemptions that, where applicable, may be relied upon.
- 1.4 Requests for access to environmental information will be exempt under the FOI Act but then dealt with under the Environmental Information Regulations 2004 (EIR) which provides a right of public access to environmental information held by public authorities.
- 1.5 Compliance with the FOI Act and the EIR is enforced by the Information Commissioner's Office (ICO), the UK's independent authority responsible for upholding information rights in the public interest and promoting openness by public bodies and data privacy for individuals. Failure to comply with the requirements of the FOI Act and the EIR may give rise to a complaint to the ICO and possible regulatory action.
- 1.6 The FOI Act does not change the responsibilities of the ICB to protect individual's confidentiality in accordance with the Data Protection Act 2018 and there are occasions when the ICB will not be able to supply all the information requested.
- 1.7 Further guidance regarding the application of the Act and good practice guidance sheets are available for the Information Commissioners Office at [Guide to freedom of information | ICO](#)

## **2. Purpose**

- 2.1 The purpose of this policy is to support a culture of openness and transparency in business transactions and to set out the ICB's legal and regulatory requirements when responding to requests for information from members of the public.

### 3. Scope

- 3.1 The ICB requires this policy to be followed by all employees of the ICB (including all individuals working within the ICB in a temporary capacity, including agency staff, seconded staff, students and trainees, and any self-employed consultants or other individuals working under contract for services). These are collectively referred to as 'individuals' hereafter.
- 3.2 The principles of FOI should be applied to all information recorded and held by the ICB, however, this policy does not forfeit the ICB's duties to:
- Keep confidential personal and sensitive information.
  - Protect other legal and contractual obligations.
  - Ensure the safe and efficient conduct of the ICB's operations.
  - Protect commercially sensitive information.
- 3.3 On the occasions where the ICB does not disclose requested information, the ICB will always state the reasons why, using the exemptions detailed in the FOI Act and apply the public interest test where required.

### 4. Roles and Responsibilities

Role	Responsibilities
<b>Chief Executive</b>	The Chief Executive of the Nottingham and Nottinghamshire Integrated Care Board (ICB) is responsible for ensuring that the ICB establishes and maintains procedures to ensure that the organisation complies with the provisions of the FOI Act and EIR.
<b>Associate Director of Governance (supported by the Corporate Assurance Team)</b>	<p>The Associate Director of Governance has delegated responsibility for managing FOI and EIR requests to ensure that the ICB has processes in place for responding to information requests in compliance with the requirements of the FOI Act and EIR. They will, where possible, provide advice directly to staff on FOI matters or otherwise refer to a competent person to obtain such advice.</p> <p>The Associate Director of Governance is also responsible for maintenance of the ICB's Publication Scheme.</p>

Role	Responsibilities
<b>Head of Corporate Assurance (supported by the Corporate Compliance Manager and FOI Officer)</b>	<p>The Head of Corporate Assurance is responsible for coordinating all requests for information under the FOI Act and EIR, identifying the most appropriate respondent within the organisation, responding to requests within the appropriate timescales, maintaining a database of all requests and information provided and producing compliance monitoring reports on FOI requests received.</p> <p>The Head of Corporate Assurance will also provide a point of contact for all staff who require advice on FOI and EIR matters.</p>
<b>Associate Directors / Members of the Senior Leadership Team</b>	<p>Deputy/Associate Directors are responsible for ensuring that designated respondents provide the Corporate Assurance Team with the required information so that the timeframe for responding to the requestor can be met. Also, that information held in their areas fully complies with policy including information processed by contractors and other bodies working under service level agreements.</p> <p>They are also responsible for approving the issue of individual FOI responses relevant to their Directorate.</p>
<b>All Staff</b>	<p>All ICB staff must ensure that they are aware of their responsibilities for processing information in accordance with the FOI Act and for complying with the principles of FOI in accordance with this policy. Staff must ensure that they have the required competency to recognise FOI requests even where this is not referenced within the request.</p> <p>All staff are required to maintain manual and electronic records in a way that facilitates prompt responses to requests for information.</p>

## 5. Right of Applicants

5.1 The FOI Act and the EIR provides any member of the public a right to request access to all types of information held by the ICB. The legislation outlines two specific rights in respect of information held by the ICB:

- The right to be told whether the information is held by the ICB.

- The right to receive the information within the 20-working day statutory deadline, subject to relevant exemptions and in accordance with the requirements of the Data Protection Act 2018 (DPA).

5.2 All requests made under the FOI Act must be received in writing (including by email) and dealt with in accordance with the provisions of the FOI Act. However, the requestor does not need to mention the FOI Act in the request. ICB staff must have sufficient awareness to recognise a request that falls under the provisions of the FOI Act.

5.3 Requests made for access to environmental information under the EIR may be made in writing or verbally.

5.4 Requests for information under the FOI Act and EIR should be submitted to the Corporate Assurance Team via [notts.foi@nhs.net](mailto:notts.foi@nhs.net) or by post to:

Corporate Compliance / FOI Officer  
Sir John Robinson House  
Sir John Robinson Way  
Arnold  
Nottingham  
NG5 6DA

## **6. Publication Scheme**

6.1 The ICB has a duty to adopt and maintain a Publication Scheme which, in line with the Information Commissioner's Office (ICO) guidance, describes the different classes of information they hold and whether there is a charge for specific information. The ICB's Publication Scheme is accessible via the ICB's website.

6.2 The ICB maintains an FOI Disclosure Log on the ICB website that allows requestors to search through previous FOI responses by category and date. The FOI Officer is responsible for the ensuring the maintenance of the Disclosure Log.

6.3 The EIR provisions require public authorities to progressively make the environmental information they hold available to the public by easily accessible electronic means. This information should be organised with a view to active and systematic dissemination to the public. The ICB will use the Publication Scheme and the use of the Internet accordingly.

## **7. Responding to Requests for Information (including use of exemptions)**

7.1 The ICB will respond to FOI requests received in writing by:

- Acknowledging receipt of a request<sup>1</sup>. Template letters/e-mails will be utilised to reply to applicants to ensure a consistent approach.
- Informing the person making the request whether the organisation holds the information requested or not.
- Providing reasonable advice and assistance to applicants and prospective applicants in making a request (e.g. seeking clarification) or narrowing down a request which reaches the cost limit exemption (see **Appendix B** for further information).
- Conducting a search of information held by the ICB facilitated by sending an internal e-mail (with requestor identifiers removed) to the appropriate department and/or lead to provide the requested information to the freedom of information inbox. Under no circumstances should staff respond to a requestor directly as all request responses must come via the FOI e-mail address.
- If a request for information is held by a contractor or body working under a service level agreement for the ICB, a request will be made for access to this information by the ICB, so the ICB can consider if they will disclose this in the FOI response.
- Once the requested information (if held) has been collated, the FOI Officer will seek approval from the appropriate Associate Director of an intended response before being sent to the requestor.
- Providing the requested information within the statutory timescale (20-working days) unless an exemption applies.

7.2 Where an exemption applies, the ICB will communicate this to the requestor, providing a refusal notice and stating the reasons why the ICB is not providing requested information (considering whether a qualified or absolute exemption has been relied upon and if it is appropriate to 'neither confirm nor deny' if information is held) (see **Appendices B** and **D** for further information).

7.3 Two particular areas where a decision to restrict the disclosure of information by using an exemption are:

- If it is established that the time to collate information will exceed the appropriate cost limit set by the FOI Act.
- Failure by the applicant to refine and or clarify their request for information as suggested by the ICB.

---

<sup>1</sup> FOI requests received from the media should be referred to the Head of Communication (for information purposes only).

- 7.4 There will be occasions when the ICB will not be able to supply all the information requested. Information will only be withheld in accordance with the exemptions outlined in the FOI Act, and in particular those concerning:
- The ICB's duties to keep confidential sensitive information about individuals (e.g., staff members).
  - Intended future publication.
  - Other legal and contractual obligations.
  - Material detrimental to the safe and efficient conduct of the ICB's operations or which is commercially sensitive.
- 7.5 When the ICB is considering applying an exemption, this must be approved by the Associate Director of Governance or Head of Corporate Assurance.
- 7.6 In some cases, a disclosure of information cannot be made without the consent of a third party (for example, where information has been obtained from a third party and in the circumstances the disclosure of the information without their consent would constitute an actionable breach of confidence). In such instances, members of staff must consult that third party with a view to seeking their consent to the disclosure unless such a consultation is not practicable (for example because the third party cannot be located or because the costs of consulting them would be disproportionate).
- 7.7 Responses to requests will be made within 20-working days. If a fee is required to provide the information requested, this period may be extended by up to three months until the fee is paid. Where additional information/clarification is required from the applicant, the time will be put on hold until the additional information/clarification is received. A request will be put on hold no longer than 40 working days.
- 7.8 Depending on the request, an extension may be requested especially if the ICB is required to consider exempt information under the FOI Act's public interest test. The 20-working days can be extended for a reasonable time, however, the ICB will inform the requestor of how long the extension will be for.
- 7.9 Where a record due for destruction is known to be the subject of a request for information under the FOI Act, destruction shall be delayed until disclosure has taken place or if the ICB has decided not to disclose the information, until the complaint and appeal provision under the FOI Act has been exhausted.
- 7.10 Under the FOI Act, it is a criminal offence to destroy or dispose of records once the ICB has received a formal request to access the information contained in those records. Staff who unlawfully or inappropriately destroy information contrary to the

terms of the FOI Act as detailed above, will be subject to disciplinary action. In circumstances where information has been inappropriately destroyed, the ICB must inform the requestor of their rights in terms of the internal review process and complaint to the ICO.

- 7.11 If a request for information is refused, the requestor must be informed of their rights to request an internal review of the decision and, thereafter, to complain to the ICO. Internal reviews are dealt with by a senior manager within the ICB who are not involved in the original FOI response.

## **8. Description of Information Requested**

- 8.1 If the request has insufficient detail and it is unclear as to exactly what information is required, then further clarification must be sought from the requestor. The ICB is not obliged to comply with the request until further details are received. A request will be put on hold no longer than 40-working days.
- 8.2 If a requestor is requesting an 'unreasonable' amount of information, more specific details can be sought from the requestor of the specific information they require (refer to the Corporate Compliance/FOI Officer for advice regarding what is meant by the term 'unreasonable').
- 8.3 In both instances, the 20-working day 'clock' will start the day after the ICB receives the necessary clarification.

## **9. Appeals Process**

- 9.1 A process is in place for when the requestor wishes to appeal their FOI response. A request for an internal review can be made in relation to the outcome of their FOI or the way in which their request has been handled. For example:
- The response took longer than 20-working days;
  - Information was withheld and they believe that the exemptions or exceptions (EIR) have been wrongly applied;
  - The calculation of costs contravenes the Fees Regulations; or
  - The ICB has in any other way mishandled the request.
- 9.2 In any response letter, the applicant must be informed of the right to appeal. This is initially via the ICB's internal review process and then via a formal complaint to the Information Commissioner Office (ICO). A request of an internal review will be accepted within 40-working days from the date the ICB has issued an initial response to a request.
- 9.3 The ICB will distinguish between a request for an internal review, which seeks to challenge either the outcome of the process or the handling of a request, and a

general complaint which should be handled via the ICB's complaints process. The ICB will seek to provide the outcome of an internal review to the requestor within 20-working days or a reasonable target date dependent on the complexity of the appeal. (See **Appendix A** for detailed flowcharts for responding to requests for information, including appeals, in accordance with the provisions contained within the FOI Act and EIR).

## **10. Monitoring Compliance of Responses to Freedom of Information Requests**

- 10.1 The ICB will maintain a record of all requests made for information under the FOI Act and the action taken on each application (e.g. FOI database). The database will identify whether the same or similar information has previously been requested and provided or refused and the reasons for refusal. This will ensure consistency in dealing with similar requests and identify repeated, duplicate or vexatious requests (see **Appendix C**).
- 10.2 The ICB will maintain a record of all requests for an internal review received from requestors and will ensure that any learning points that arise are used to improve related policies and guidance.
- 10.3 Performance in administering and managing FOI and EIR requests will be monitored by the Head of Corporate Assurance and reported to the Information Governance Steering Group, as well as twice annually to the Audit and Risk Committee and annually to the ICB Board via the Information Governance Annual Report.

## **11. Escalation**

- 11.1 In the event that the ICB cannot meet the required 20-working days timeframe, or the reasonable extension outlined to the requestor, the FOI Officer will escalate these individual cases to the Head of Corporate Assurance and the Associate Director of Governance as soon as possible before a breach occurs, to ensure appropriate action is taken.
- 11.2 External independent advice will be sought from NHS England/Improvement and/or the Information Commissioners Office, as and when required.

## **12. Retention of Requests and Responses**

- 12.1 In line with the Information Governance Alliance (IGA) Records Management Code of Practice for Health and Social Care (2016), FOI requests including responses should be kept for three years after full disclosure or longer if an exemption has been used.

- 12.2 Where redactions have been made, it is important to keep a copy of the redacted disclosed documents or if not practical to keep, a summary of the redactions. For FOI requests, where there has been a subsequent appeal, these should be kept for six years following closure of the appeal.

### **13. Communication, Monitoring and Review**

- 13.1. The Associate Director of Governance is responsible for monitoring the organisation's compliance with the relevant legislative and regulatory requirements of this policy.
- 13.2. This policy is one of the Information Governance policies underpinning the ICB's Information Governance Management Framework (IGMF). The Information Governance Steering Group will, therefore, seek assurances on the overall implementation of this policy when monitoring compliance with the IGMF.
- 13.3. Any individual who has queries regarding the content of this policy or has difficulty understanding how this policy relates to their role, should contact the document author via email at [notts.foi@nhs.net](mailto:notts.foi@nhs.net).

### **14. Staff Training**

- 14.1 It is mandatory for all ICB staff to complete the online Data Security and Awareness refresher training every twelve months. Staff must inform their Line Manager if they do not understand any aspects of this policy and/or require further bespoke associated training.
- 14.2. Any specific training needs identified, to ensure compliance with this policy, should be referred to the Head of Corporate Assurance. Ad-hoc training regarding FOI and/or EIR can be provided to directorate/team meetings upon request.

### **15. Re-use of Information**

- 15.1. Regulations apply in respect of the 're-use' of information where the ICB holds the intellectual property/copyright of information and where re-use has been requested by a body that is not a public authority.
- 15.2. The regulations around re-use require organisations to publish details of information available for re-use. Information that NHS England publishes as part of its Publication Scheme can be considered as the list of information available for re-use.
- 15.3. Any published document can be re-used without charge, provided the ICB is quoted as the source and retains copyright. Requests for re-use will be granted or denied by the Associate Director of Governance.

- 15.4. All information supplied by the ICB in answering a request for information under the Freedom of Information Act 2000 will be subject to the terms of the Re-use of Public Sector Information Regulations 2013 Open Government Licence. This states that the information is re-usable as long as it remains in context and is not altered in any way.

## **16. Equality and Diversity Statement**

- 16.1 NHS Nottingham and Nottinghamshire ICB pays due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation, as a commissioner and provider of services, as well as an employer.
- 16.2 The ICB is committed to ensuring that, the way we provide services to the public and the experiences of our staff does not discriminate against any individuals or groups on the basis of their age, disability, gender identity (trans, non-binary) marriage or civil partnership status, pregnancy or maternity, race, religion or belief, gender or sexual orientation.
- 16.3 We are committed to ensuring that our activities also consider the disadvantages that some people in our diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, gypsies, roma and travellers.
- 16.4 As an employer, we are committed to promoting equality of opportunity in recruitment, training and career progression and to valuing and increasing diversity within our workforce.
- 16.5 To help ensure that these commitments are embedded in our day-to-day working practices, an Equality Impact Assessment has been completed for, and is attached to, this policy.

## **17. Interaction with other Policies**

- 17.1 This policy should be read in conjunction with relevant sections of the following ICB policies and procedures:
- Information Governance Management Framework;
  - Confidentiality and Data Protection Policy;
  - Information Security Policy; and
  - Records Management Policy.

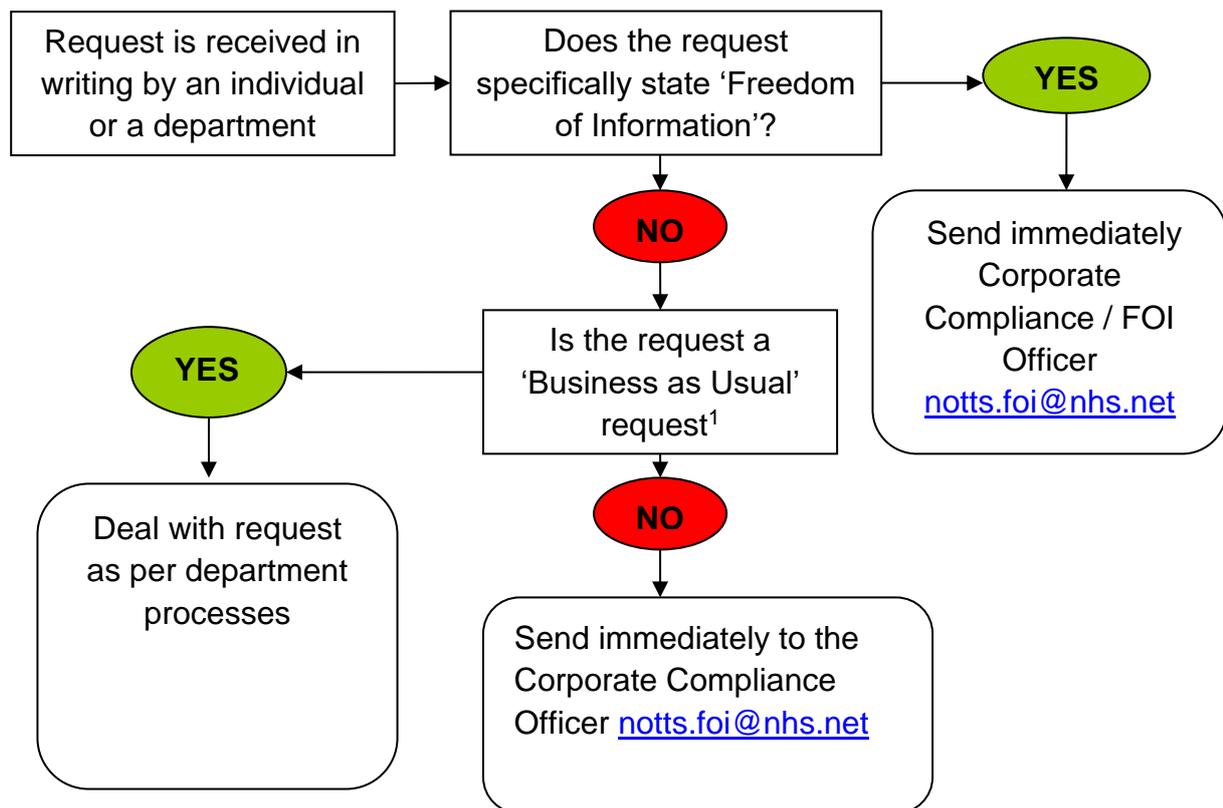
## 18. References

- Freedom of Information Act 2000 and FOI Code of Practice 2018;
- Environmental Information Regulations 2004;
- Data Protection Act 2018;
- Human Rights Act 1998;
- Criminal Justice and Immigration Act 2008;
- Records Management Code of Practice for Health and Social Care 2016;
- The NHS Confidentiality Code of Practice (Guidelines on the use and protection of patient information, November 2005);
- Model Publication Scheme for Health Bodies in England;
- The Information Commissioners website - [www.ico.org.uk](http://www.ico.org.uk)
- Re-use of Public Sector Information Regulations 2015;
- Data Security and Protection Toolkit.

## APPENDIX A:

### Flowcharts for Responding to Requests for Information

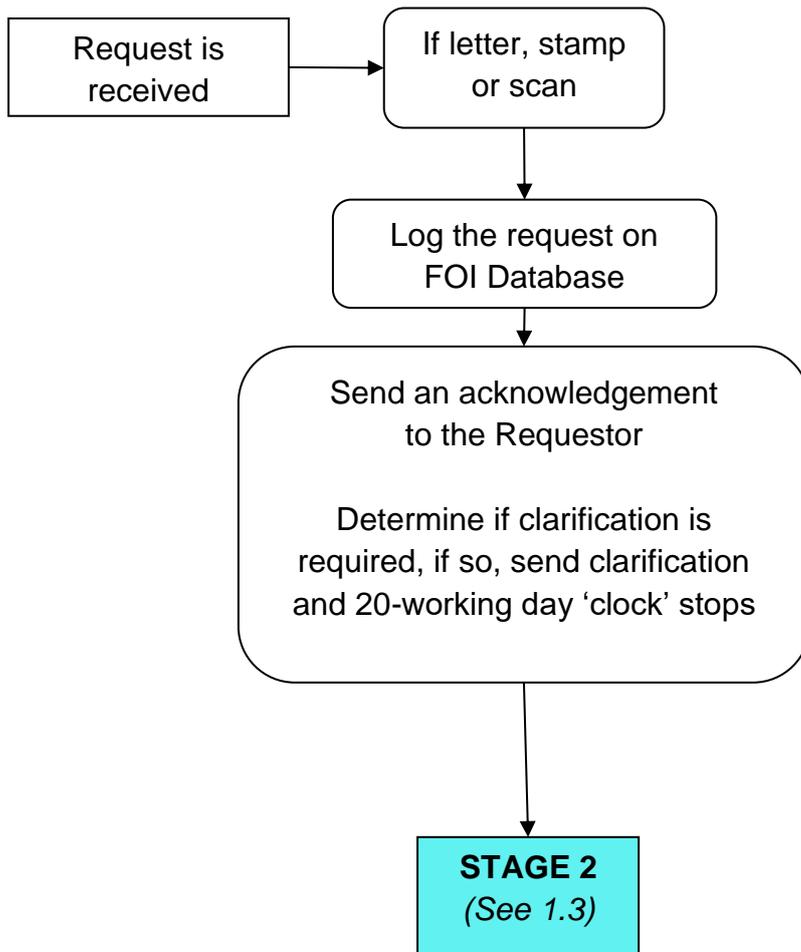
#### 1.1 Process for dealing with requests for information



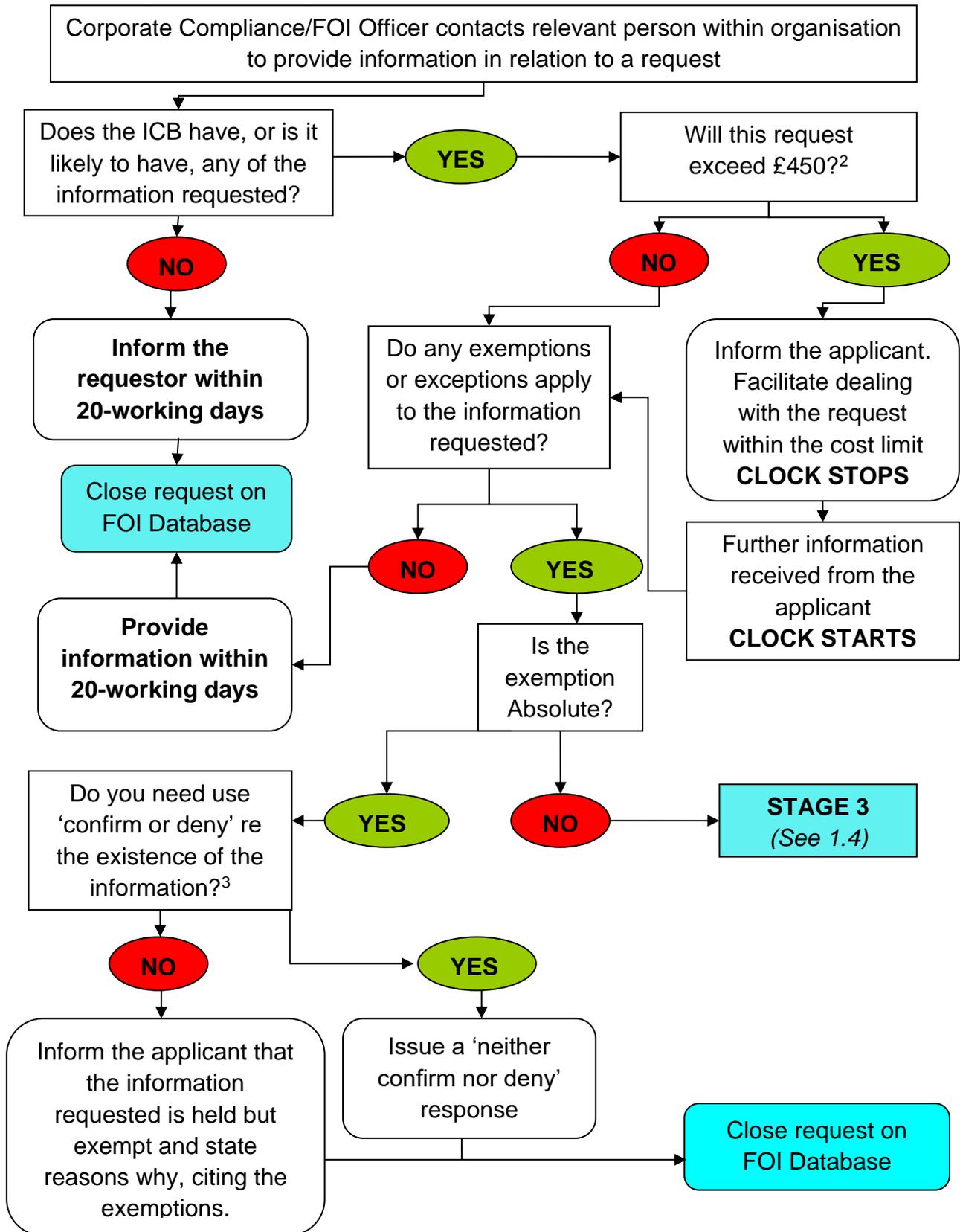
<sup>1</sup> Business as Usual Request: Any request for information that is generally and usually dealt with within the remit of the department. All FOI requests from the media must be referred to the Corporate Compliance Officer and Head of Communications. Further guidance can be sought from the Corporate Compliance Officer.

**1.2 Corporate Compliance / FOI Officer Process for Dealing with Requests for Information:**

**Stage 1 - Acknowledgement**



### 1.3 Process for Dealing with Requests for Information Stage 2 – Deciding whether to disclose

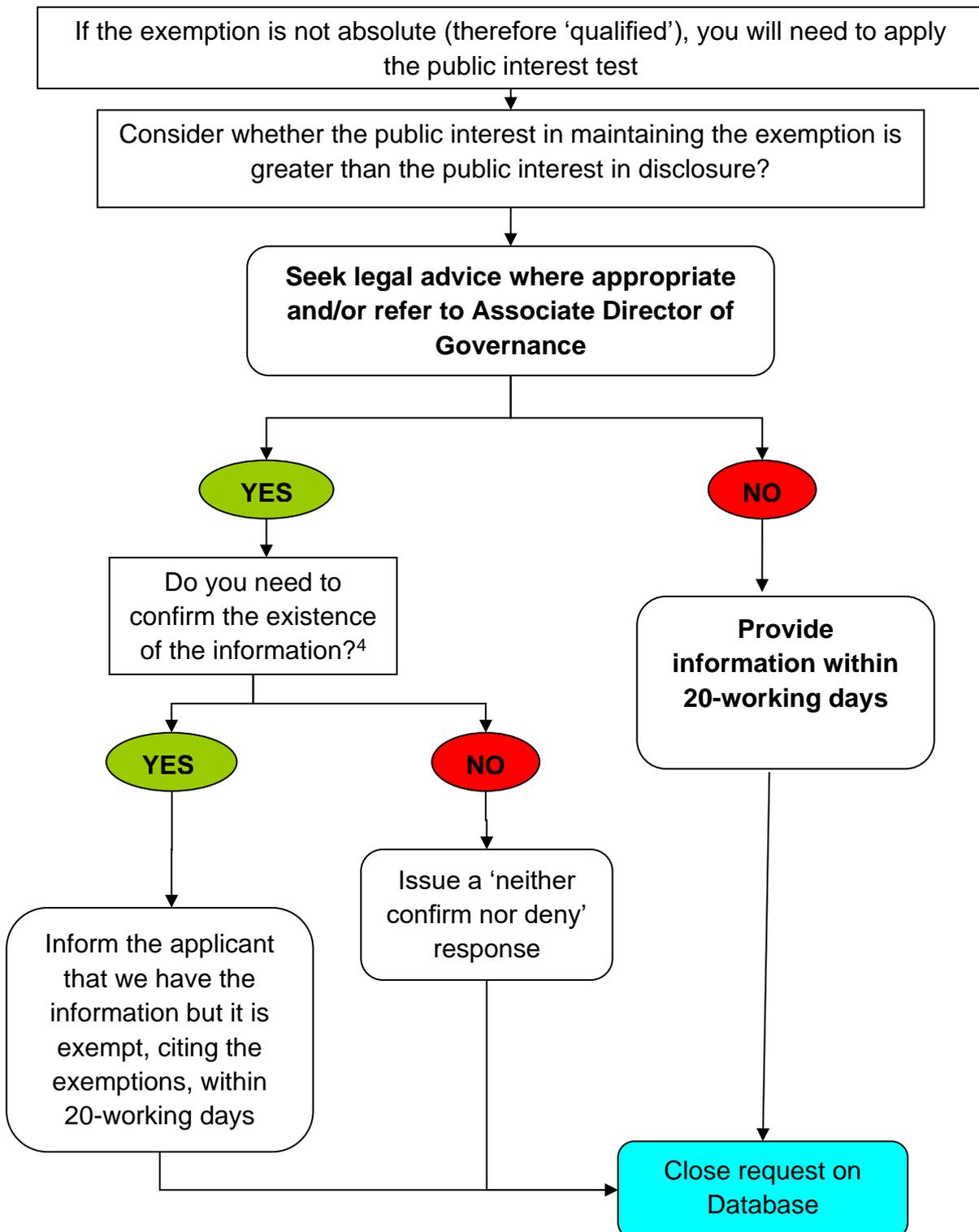


<sup>2</sup>See Appendix D– Charging Regime

<sup>3</sup>See Appendix E - for more details on 'confirm or deny'.

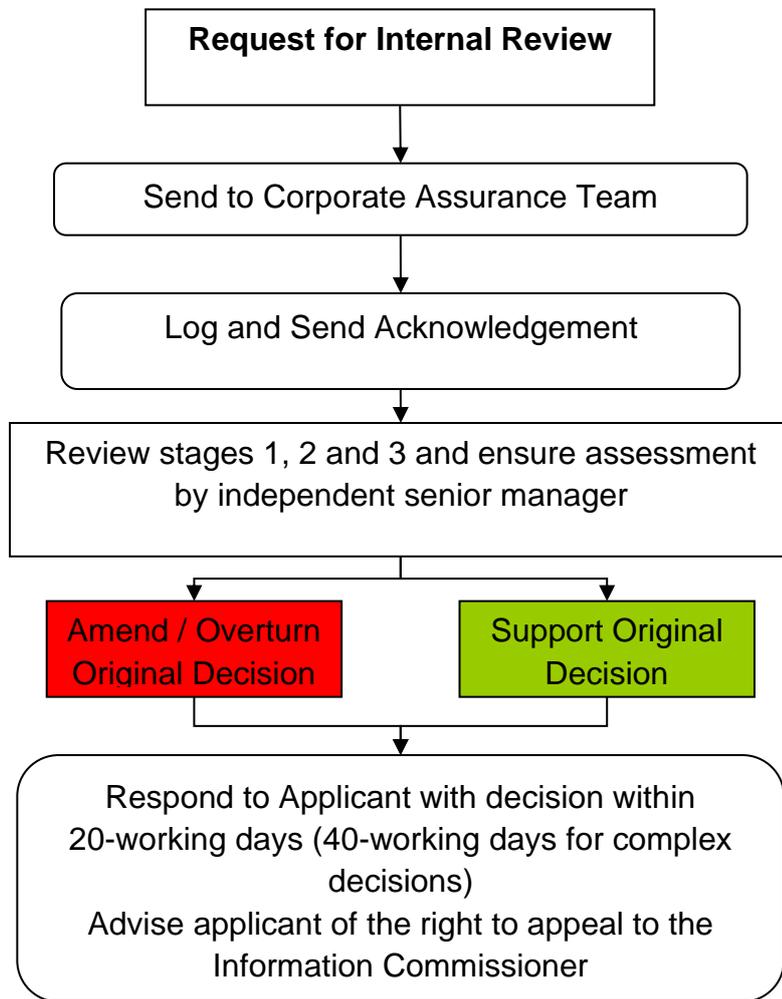
## 1.4 Process for Dealing with Requests for Information

### Stage 3 – The Public Interest Test (refer to the Head of Corporate Assurance)



<sup>4</sup>See Appendix E for more details on 'confirm or deny'.

**1.5 Corporate Compliance / FOI Officer Process for Dealing with Requests for Internal Review**



## Appendix B: Exemptions

The Act contains 23 exemptions to the general 'right of access' (see [www.ico.org.uk](http://www.ico.org.uk) for further details). The exemptions aim to ensure that decisions to release or withhold information are taken with the interests of the public at the fore. These exemptions mark out the limits of the 'right of access' to information under the FOI Act.

When applying individual exemptions, the following factors may need to be considered:

- The content of the information;
- The effect a disclosure would have (e.g. security implications);
- The source of the information;
- The purpose for which the information was recorded;
- Whether responding to the request involves the provision of personal information about individuals; or
- Where disclosure might breach a duty of confidentiality or commercial confidence.

The Corporate Compliance Officer will initially consider all applications received to determine whether the application of an exemption might be relevant. If it is concluded that an exemption may potentially apply, the application **may** be considered by the Head of Corporate Assurance or the Associate Director of Governance.

The decision to apply an exemption will be fully documented.

## Appendix C: Vexatious Requests

Under Section 14(1) of the FOI Act, public authorities are not obliged to comply with vexatious requests. The FOI Officer will send a standard letter stating that the request has been declined on the grounds that it is vexatious.

The following reasons/requests may identify vexatious requests (this is not a definitive list):

- **The applicant makes clear his or her intention:** If an applicant explicitly states that it is his or her intention to cause the ICB the maximum inconvenience through a request, it will almost certainly make that request vexatious.
- **The ICB has independent knowledge of the intention of the applicant:** Similarly, if an applicant (or an organisation to which the applicant belongs, such as a campaign group) has previously indicated an intention to cause the ICB the maximum inconvenience through making requests, it will usually be possible to regard that request as being vexatious.
- **The request clearly does not have any serious purpose or value:** It will usually be easier to recognise such cases than define them. Although the Act does not require the person making a request to disclose any reason or motivation, there may be cases which are so lacking in serious purpose or value that they can only be fairly treated as "vexatious" - for instance a request for the number of unmarried employees an organisation may have, may be able to be classified justifiably as a vexatious request. Such cases are especially likely to arise where there has been a series of requests. Before reaching such a conclusion, however, the ICB should be careful to consider any explanation which the applicant gives as to the value in disclosing the information which may be made in the course of an appeal against refusal.
- **The request can fairly be characterised as obsessive or manifestly unreasonable:** It will usually be easier to recognise such cases than define them. They will be exceptional – the ICB must have valid reasons for making such a judgement. An apparently tedious request, which in fact relates to a genuine concern, must not be dismissed. However, the organisation is not obliged to comply with a request which a reasonable person would describe as obsessive or manifestly unreasonable.

It will obviously be easier to identify such requests when there has been frequent prior contact with the requester or the request otherwise forms part of a pattern, for instance when the same individual submits successive requests for information. Although such requests may not be "repeated" in the sense that they are requests for the same information taken together, they may form evidence of a pattern of obsessive requests so that an authority may reasonably regard the most recent as vexatious.

## Appendix D: Charging Regime

### Additional details of charges for supplying information

Most of the information about the organisation listed in the ICB's Publication Scheme is available free of charge. Any charges will vary according to the amount of information and how it is made available.

- **Via the ICB's website** – free of charge, although any charges for the Internet service provider and personal printing costs would have to be met by the individual.
- **Printouts, photocopies, etc.** – for those without Internet access, a single printout as on the website may be requested by post from the FOI Officer. However, requests for multiple printouts, or for archived copies of documents that are no longer accessible or available on the website, may attract a charge for the retrieval, copying and postage. A standard photocopying charge of ten pence per sheet will apply. Where applicable, we will inform the requestor about any charges in advance. We will not provide printouts from other organisations' websites.
- **Leaflets and brochures** – the majority of leaflets, brochures and corporate publications referred to in the Publication Scheme are available free of charge for single copies. Requests for more than one copy of any leaflet, brochure or publication will be reviewed in relation to the total quantity available and the level of demand. For this reason, it may not be possible to provide more than one copy of a publication. It will not be possible to provide copies of out-of-print publications. A small number of books and other publications may carry a cover price.
- **Information by email** – information provided by email will be free of charge, unless stated otherwise. In cases where the ICB receives requests for information that is not included in the Publication Scheme, any charges for providing this information will be determined in line with the provisions of the FOI Act and the associated guidance and fees regulations published by the ICO. There are two elements to such charges:
  - **Cost of producing the information** - NHS organisations are required to absorb the cost of producing the required information where the cost does not exceed £450. Staff costs are calculated at a standard rate of £25 an hour. This includes the costs involved in determining whether the information is held, locating and retrieving the information and extracting the information from other documents. If the cost will exceed £450, the ICB is not obliged to provide the information.
  - **Disbursement fees** - the ICB is able to charge disbursement fees (photocopying and postage) for providing information requested. In line with the Information Commissioner's guidance, where disbursement costs exceed £10, the ICB may charge the full disbursement cost. In calculating the disbursement costs, a photocopying cost of ten pence per sheet will be applied.

The organisation's commitment to publish information excludes any information that can legitimately be withheld under the exemptions set out in the FOI Act.

If a fee is requested, the 20-working day clock stops. This will restart on receipt of the fee. If a fee has not been paid within three months, the request can be closed.

## **Appendix E: Duty to Confirm or Deny**

In some circumstances, it may be appropriate to neither confirm nor deny whether information is held. This is an exemption from the right under Section 1(1) (a) of Applicant to be informed whether the information is held.

A 'neither confirm nor deny' response may be required in circumstances where to confirm or deny the existence of information would itself communicate sensitive and potentially damaging information, to the detriment of the public good. Its use is particularly relevant in the areas of law enforcement, intelligence and national security.

A decision to neither confirm nor deny whether information is held needs to be taken in a similar manner to a decision to refuse to disclose information. That is to say, you must be certain that one of the FOI Act's exemptions is engaged and (where relevant) that the public interest requires a 'neither confirming nor denying' that the information is held.

The decision to neither confirm nor deny is separate from a decision not to disclose the information and needs to be taken entirely in its own terms. If you determine that it is appropriate to 'neither confirm nor deny', you should respond saying so and cite the relevant exemption(s) (unless doing so would itself reveal exempt information).

Where an authority reaches the conclusion that it has no obligation under the FOI Act to state whether it holds the information requested, the usual manner of doing so is to say that it will 'neither confirm nor deny' whether it holds the information.

## Appendix F: Equality Impact Assessment

<b>Date of assessment:</b>	June 2022			
<b>For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:</b>	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
<b>Age<sup>2</sup></b>	None identified	N/A	No	This policy provides guidance, accountability and clarity on how an organisation will comply with the requirements of FOI and EIR legislation.  It will support consistent and transparent decision-making to ensure all requests are treated openly and fairly in line with the requirements of the legislation.
<b>Disability<sup>3</sup></b>	Yes	Mechanisms are in place to enable the policy to be received in alternative formats.	No	
<b>Gender identity (trans, non-binary)<sup>4</sup></b>	None identified	N/A	No	
<b>Marriage or civil partnership status<sup>5</sup></b>	None identified	N/A	No	
<b>Pregnancy or maternity<sup>6</sup></b>	None identified	N/A	No	
<b>Race<sup>7</sup></b>	None identified	N/A	No	

<sup>2</sup> A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).

<sup>3</sup> A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.

<sup>4</sup> The process of transitioning from one gender to another.

<sup>5</sup> Marriage is a union between a man and a woman or between a same-sex couple.

Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.

<sup>6</sup> Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.

<sup>7</sup> Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.

<b>Date of assessment:</b>	June 2022			
<b>For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:</b>	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
<b>Religion or belief<sup>8</sup></b>	None identified	N/A	No	
<b>Gender<sup>9</sup></b>	None identified	N/A	No	
<b>Sexual orientation<sup>10</sup></b>	None identified	N/A	No	
<b>Carers<sup>11</sup></b>	None identified	N/A	No	

<sup>8</sup> Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.

<sup>9</sup> A man or a woman.

<sup>10</sup> Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none. <https://www.equalityhumanrights.com/en/equality-act/protected-characteristics>

<sup>11</sup> Individuals within the ICB which may have carer responsibilities.