

# **Data Protection Impact Assessment**

# 1. Project Information

Name of Project/ Activity/	Shared Benefit Activity
service:	(CHC Activity)
Is this DPIA for ICB data/ work	ICB
or, on behalf of Notts GPs/ GP data?	
Date of expected project delivery:	December 2022
Named parties and roles of parties involved in project/ activity/ service:	Liaison Care
	Nottingham & Nottinghamshire ICB
State which parties are data controller(s):	Nottingham & Nottinghamshire ICB
State which parties are data processor(s):	Liaison Care
Date of DPIA (start):	December 2022
Date of activity (start):	December 2023
Date of activity (end):	
Date of approval/ final sign off:	
DPIA Reference number:	



### 2. Introduction

Data Protection legislation requires organisations to implement appropriate measures to ensure and be able to demonstrate data protection compliance, taking into account the risks to individuals' data protection rights and freedoms. In certain circumstances, completion of a Data Protection Impact Assessment (DPIA) is a requirement by law and an important means of evidencing our compliance with the requirements of the Data Protection Act 2018 and the UK General Data Protection Regulation.

#### The DPIA process must:

- describe the nature, scope, context and purposes of the processing;
- assess necessity, proportionality and compliance measures;
- identify and assess risks to individuals; and
- identify any additional measures to mitigate those risks.

Completed DPIAs will form part of the ICB's (or where completed on behalf of Nottingham GP practices, the Practice's) 'Record of Processing Activity' which documents practice and provides assurance and compliance with statutory data protection responsibilities.

This DPIA is to be completed where the ICB or GP practices are the Data Controllers or where they are approving/ commissioning a service or change to a service involving processing of personal data and personal special category data.

#### Special Category data is classed as:

personal data revealing racial or ethnic origin; personal data revealing political opinions; personal data revealing religious or philosophical beliefs; personal data revealing trade union membership; genetic data; biometric data (where used for identification purposes); data concerning health; data concerning a person's sex life; and data concerning a person's sexual orientation.

Third parties completing this DPIA should ensure it is written from the ICB's/ GP practices' perspective.

A DPIA should be completed by the Project/ Initiating Manager, in conjunction with the relevant Information Asset Owner(s) with the help of Information Governance and any other relevant parties such relevant information asset owners e.g. Data team, Procurement, ICT and Legal team colleagues and/ or third parties to be involved in the work.

Users are encouraged to follow the detailed DPIA guidance when completing the DPIA form.



### 3. The Proposal

#### **About this Assessment**

Title of the Project

Brief description of the project to include parties involved and their roles.

Please include information about from where/ whom this work is being mandated/ initiated/ directed?

Include description of proposed use/ movement of / access to personal / special category personal data (data flows).

Continuing Health Care - Liaison Care

The ICB proposes to use a data processor, Liaison Care, to undertake Continuing Healthcare (CHC) assessments and reviews on its behalf.

The proposal will deliver the benefit of enabling the ICB to undertake CHC assessments and reviews which have been deferred due to Covid-19. The ICB does not currently have the capacity to undertake the required number of assessments and reviews without the additional resource provided by Liaison Care. It is proposed that a minimum of 369 assessments/reviews, along with any subsequent decision support tools (DSTs) will be undertaken by Liaison Care. Liaison Care will also contribute to any local dispute resolution meetings which associated the are to recommendations and outcomes.

The ICB will notify Liaison Care of the cohort of patients for them to assess by NHSmail. This list of patients to be assessed by Liaison Care, patients will be identified using the unique iQA system reference number, 'iQA ID'.

Liaison Care will gather information from the local authority and from care providers as well as the patient. Third parties such as family/next of kin will be consulted where there is consent to do so .

Liaison Care's allocated persons will have access to a shared nhs.net mailbox created and hosted by the ICB for the duration of the project. This will ensure data can be securely and efficiently communicated with all stakeholders when individual's data needs to be exchanged for the purposes of completing the work. Liaison Care would expect to receive various supporting documents and evidence containing individuals personal, sensitive information. The shared nhs.net



	mailbox will reflect Liaison and the ICB in the name for transparency.  Liaison will also have access to system1
	records. This will be achieved through loan of ICB owned laptops and Liaison staff's own SMART cards.
	Each patient (or their representative) within this cohort will be sent a Permission to Act letter by the ICB which explains the arrangement
Describe any benefits, quality expectations and intended outcomes	Patients will be assessed for CHC
Describe the number of individuals affected.	Minimum 369
Provide information with regards the individuals involved – i.e., adults, children, vulnerable individuals etc	Initially adults, vulnerable adults. Children.
Describe any relevant constraints to the project	

# 4. Details of Lead(s)

Details of the responsible lead to the project (this must be an internal NHS staff lead)

Any external party details can be added in addition.

Name	Sally Dore
Job Title	Assistant Director of Nursing and Quality
Department	Nursing and Quality Directorate
Contact address	Civic Centre - Arnold
Email address	Sally.Dore@nhs.net
Telephone number	07909004393



## 5. Details of Information Asset Owner(s)

**Details of the Information Asset Owner (IAO)\*** 

(Where this is for the ICB the Information Asset Owner is your ICB individual Director or if relevant, please add other NHS / other organisation individuals identified as IAOs)

Name	Sally Dore
Job Title	
Department	
Contact address	
Email address	Sally.Dore@nhs.net
Telephone number	
Does this project constitute a change to existing Information Asset(s)?	No
Does your Information Asset Register and Data Flow Register require updating? (This update will need to be confirmed by the project lead at the Approvals section at the end of this DPIA)	

## 6. Key stakeholders

Details of key stakeholders		
(These may be internal individ		
Name & Job Title	Contact email/ telephone	Organisation
Sally Dore – Assistant Director of Quality & Personalisation	Sally.Dore@nhs.net	Nottingham & Nottinghamshire ICB
Sales Director		Liaison Care
		Nottinghamshire County Council
		Nottingham City Council



## 7. Organisation Data Protection Status

Details of ICO registration and Data Security & Protection Toolkit (DSPT) submission status of all participating parties (see hyperlinks below to look up on-line if not known).

ICO registration - https://ico.org.uk/ESDWebPages/Search

DSPT Submission Status-<a href="https://www.dsptoolkit.nhs.uk/OrganisationSearch">https://www.dsptoolkit.nhs.uk/OrganisationSearch</a>

Please state if only partial/incomplete submission has been made, status of the assessment e.g. fully met

Organisation Name	ICO Registration Number	DSPT Submission Status
Nottingham & Nottinghamshire ICB	ZB346050	Standards met – QT1(was 52R)
Liaison Care	Z2823416	Standards Met- 8J035



### 8. DPIA Risk Assessment

Assessment of the proposal against the GDPR 'High Risk' criteria requiring a DPIA

High Risk Processing		
Does the processing meet the criteria of 'high risk' processing? (see examples in guidance below)	Yes ⊠	No □
Comments:		

#### Guidance - Examples of high-risk processing are:

- Any processing of genetic data, other than that processed by an individual GP or health professional for the provision of health care direct to the data subject.
- Any profiling or monitoring of individuals on a large scale
- Decisions about an individual's access to a product, service, opportunity or benefit which are based to any extent on automated decision-making (including profiling) or involves the processing of special - category data. (Special category data includes personal heath data).
- Data matching: Combining, comparing or matching personal data obtained from multiple sources
- Tracking: Processing which involves tracking an individual's geolocation or behaviour, including but not limited to the online environment.



## 9. The Data

a.

Does the project /activities include any of the following data sets? T apply.	ick all that
<b>Person-identifiable details</b> (e.g. name, address, e-mail address, postcode, date of birth)	
<b>Identifier numbers</b> (e.g. NHS, national insurance, passport, driving license numbers)	
Genetic data (e.g. DNA, an individual's gene sequence)	
Biometric data (e.g. fingerprints, facial recognition, retinal scans)	
<b>Family, lifestyle and social circumstances</b> (e.g. marital status, housing, travel, leisure activities, membership of charities)	
Vulnerable individuals (e.g. refer to safeguarding policies)	$\boxtimes$
<b>Education and training details</b> (e.g. qualifications or certifications, training records)	
<b>Employment details</b> (e.g. career history, recruitment and termination details, attendance details, appraisals)	
<b>Financial details</b> (e.g. banking, income, salary, assets, investments, payments)	
Goods or services (e.g. contracts, licenses, agreements)	
Legal details (e.g. legal documents or agreements, court papers)	
Cultural identity including racial or ethnic origin	$\boxtimes$
Political opinions, religious or philosophical beliefs	$\boxtimes$
<b>Health data</b> (e.g. treatment, diagnosis, medical information including a physical or mental health or condition)	
Location data (e.g. GPS location, Wi-Fi tracking, vehicle tracking)	
<b>Technology identifiers</b> (e.g., device names, applications, tools, protocols, such as IP addresses, cookie identifiers, radio frequency identification tags)	
<b>Criminal proceedings</b> (e.g. convictions, outcomes, sentences including offences or alleged offences)	
Sexual life (e.g., sexual health, sex life or sexual orientation)	$\boxtimes$



## b.

Indicate which data subject's personal data will be processed	
Employees'/ Contractors'	
Patients', their relatives or representatives	
Students'/ Pupils'	
Business partners' or organisations'	
Other	
C.	
Indicate the sources of personal information*	
All information /information covered much be covered in Section 9	(dete flevo)
All information / information sources must be covered in Section 8	(data flows)
Obtained from the individual directly  Obtained indirectly from another source (state what/ which below)	
Publicly Available	
Other	П
Comments: Data from Care homes ,family members, Health records	ш
including system1	
d.	
If certain/ specific data is being identified and selected for the proce	essing,
describe here how the data is searched and retrieved and any meas	ures to protect
confidentiality of records not applicable for selection.	
Health and care records will be identified for specific patients	
Comments:	
e.	
Indicate which of the following formats are used for the data	
Audio or Video tape/ cassette	
Digital document or system (state which/ what below)	
Digital image(s)	



Digital video	
Email	
Microfilm	
Paper documents	
Web Content	
Other (please specify):	
Comments:	

### 10. Data Flows

The next two boxes describe the data flows involved. They should be described from the originating data controller's point of view. Try to describe the flows in a way that describes the journey of the data. Include all necessary detail even if this repeats something described at another point. The data flow section is key to understanding risks and lawfulness of the data processing and once DPIA is final **must be added to the Controllers Data Flow Register.** 

a.

\*Outbound data flows (list all outbound flows whether sent internally within the organisation or sent externally to outside organisations) \* outbound is where data is sent or made available to another party or individual outside of the sending team or organisation. List ALL flows, where possible, in sequential order.

Tick box if there are no outbound data flows					
Flow number (if possible, indicate flows in order)	Name of Data Sender  (ensure the organisation is stipulated)	Data being sent/ accessed & format sent in	Purpose of transfer/ access	Method of sending/ access	Name of Receiver (ensure the organisation is stipulated)
1	Care homes, assessment teams (ICB & City Care) ICB from iQA Social care	Email and verbal	Conduct a thorough assessment	Secure email and through shared folders (Sharepoint)	Liaison Care



### b.

\*Inbound data flows (list all inbound flows whether internal or external to the organisation) \* "inbound" is where data is received. It also includes data which is <u>made available</u> to or by a party or individual (i.e. it is incoming whether physical transfer or is data that becomes known by a new receiving party). List ALL flows, where possible in sequential order.

Tick box if there are no inbound flowing data					
Flow number (if possible, indicate flows in order)	Name of Data Sender (ensure the organisation is stipulated)	Data being received & format received in	Purpose of transfer	Method of sending	Name of Receiver (ensure the organisation is stipulated)
1	Liaison Care	email	to share decisions and healthcare information	Secure email and documents to be saved in a shared folder (Sharepoint)	ICB

### 11. Data Uses

#### a. Activities

Does the project include any of the following activities?	
Retrieval, obtaining, recording or holding information or data	
Alignment, matching, combining, organisation, adaptation or alteration of information or data	
Blocking, erasure or destruction of information or data	
Disclosure or sharing of information or data	
None of the above	

## b. Purposes

Collected for specified, explicit and legitimate purposes

State the 'purpose(s)' clearly, specifically and completely for which *personal data* is being obtained/ accessed/ processed.



	eed not be detailed as that detail shoul		
Purpose 1	Undertake Continuing Healthcare asses	ssments	
Purpose 2	Undertaking reviews		
Purpose 3	Contributing to appeals		
Further process	ing		
Confirm that no fu	urther use is intended to be made of the d	lata	
Comments:			
Confirm that the N	National Data Opt-Out does not apply		
	ta Opt-Out applies comment here how Oare captured in the risk table below).	pt-Outs will be	upheld. (Ensure any
c. Persona	I Data Processing - Adec	quate, Relev	ant and Limited
Minimising Pers	onal Data		
	ata being obtained or accessed, the necessary to fulfil the purposes above (if n reasons why)?	Yes ⊠	No □
Comments: Liaiso	on Care will only receive necessary inform	nation.	
	seudonymised/ anonymised		
	on or anonymisation		
Will pseudonymis place (if so, pleas	ation or anonymisation processes take se describe)?	Yes □	No ⊠
Comments:			
Accurate and	, where necessary, kept up to	date	
Accuracy			
	e is a process in place for ensuring that previewed where necessary	personal data	
Comments:			



### Retention (Stored appropriate & not kept longer than is necessary)

Retention	•
There is a process to manage the retention of personal data which is aligned to the Organisation's (of the Data Controller) published retention schedule. See NHS guidance (link below).	
List the relevant Retention Period(s):	
Comments: Liaison care will be retaining the data for the duration of the p will be retaining data in accordance with the NHS Records Management 9 2021.	

The NHS Records Management Code of practice is found here which includes the guidance for records retention periods: Records Management Code of Practice 2020 - NHSX

## 12. Lawfulness of processing (legal bases)

Tick all relevant conditions which apply to the processing of personal and special category data.

To ensure the processing can be done lawfully at least one of the conditions must apply in the first column in relation all personal data and, if processing special categories of personal data, at least one in the second column.

### a. Personal Data

For the processing of "personal data" to be lawful, you need to identify at least one of the following:		
6(1)(a) the <b>data subject has given consent</b> for the purpose. This is often the last option. Find an alternative if possible. Refer to DPIA guidance.		
6(1)(b) the processing is necessary for the <b>performance of a contract</b> to which the data subject is a party		
6(1)(c) the processing is necessary for the <b>compliance with a legal obligation</b> to which the controller is subject (be prepared to identify and state what that is)		
6(1)(d) necessary to protect the <b>vital interests</b> of the data subject (life or death)		



6(1)(e) necessary for the <b>performance of a task carried out in the public interest</b> or in the <b>exercise of official authority</b> vested in the controller (be prepared to reference what the official authority is)	
6(1)(f) necessary for the <b>legitimate interests</b> pursued by the controller (not applicable to Public bodies for processing except for some instances of disclosure)	
Please provide explanatory information here, e.g. the necessity; the legal obligation; contract, any legitimate interests or public interest tests/ assessments, etc:	

# **b. Special Category Personal Data**

For the processing of "special categories" of data to be lawful, you need to identify at least one of the following:			
9(2)(a) <b>explicit consent</b> of the data subject unless consent is prohibited under law			
9(2)(b) necessary for the carrying out of obligations under <b>employment</b> , social security or social protection law			
9(2)(c) necessary for the <b>vital interests</b> of the data subject who is physically or legally incapable of giving consent			
9(2)(d) <b>not-for-profit body</b> with a particular aim (as specified under the Act) where the subject is a member or former member and provided there is no disclosure to a third party without consent			
9(2)(e) <b>made public</b> by the data subject			
9(2)(f) necessary for the establishment, exercise or defence <b>legal</b> claims/ courts acting in their judicial capacity			
9(2)(g) necessary for reasons of <b>substantial public interest</b> which is proportionate and has necessary safeguards in place			
9(2)(h) necessary for the purposes of preventative or occupational medicine, for assessing the working capacity of the employee, <b>medical diagnosis</b> , <b>the provision of health or social care or treatment</b> , or management of health or social systems and services on the basis of law or contract with a health professional,	$\boxtimes$		
9(2)(i) necessary for reasons of public interest in the area of <b>public</b> health			
9(2)(j) archiving scientific and historical <b>research purposes</b> or statistical purposes in the public interest			
Please provide explanatory information here, e.g. the necessity; the legal or judicial reason; public interest reason, etc:			



c. Common Law Duty of Confidence (CL	DC)	
Where a duty of confidence is owed to the individual and the legal b under GDPR is <u>not</u> consent please indicate how the CLDC will be me		cessing
The individual to whom the information relates has given consent	$\boxtimes$	
	Implied Consent	Explicit Consent
The disclosure is in the overriding public interest		
There is a legal duty to do so, for example a court order		
There is a statutory basis that permits disclosure such as approval under Section 251 NHS Act 2006		]
Confirm where any record of the Data Subject's dissent for use of their information for such purposes exists, their data is omitted from		]
Please provide explanatory information here, e.g. consent		
particulars; public interest reason; specific legal duty, etc:		
Individuals lacking capacity will have mental capacity act assessment.  Information will be shared in their best interests.		
d.Other legislation		
Other relevant legislation		
List any applicable legislation that applies to the processing		



## 13. Consent

If consent is being relied upon or used, complete the following;				
Consent is obtained through (written/ verbal means)	Verbal □ Written □ Both □			
Consent is recorded	Yes □	No □		
If so, specifically, how will the consent be collected and recorded?				
Can the individuals withdraw or opt-out from their data being processed?	Yes □	No □		
How will the withdrawal or opt-out be managed and recorded?				
Notice was provided to the individuals prior to collection of data	Yes □	No □		
The data will be used for the following purposes				
Do you envisage using the information for any other purpose in the future? If so, provide details				
Comments: see section 12				

# 14. Individual's Rights

a.

Does the processing support the following rights? (See DPIA guidance)					
The Right to be Informed	$\boxtimes$	Comments:			
The Right of Access		Comments: Upon receipt of a Subject Access Request (or any other GDPR rights request)  Liaison Care will notify the ICB's Information Governance Lead without undue delay and hastily assist the ICB in satisfying the request as appropriate			
The Right to Rectification	$\boxtimes$	Comments:			
The Right to Erasure		Comments:			
The Right to restrict Processing		Comments:			



			Integrate	d Care Board
The Right to Data Portability		Comm	nents:	
The Right to Object		Comm	nents:	
Rights related to automated decision making and profiling		Comm	nents:	
b. Privacy Notice				
Privacy Notice				
Are Data Subjects advised about this use of their	data?		Yes ⊠	No □
(Data Subjects must be made aware PRIOR to the their data in a new/ unexpected way).	e use	of		
How are Data Subjects made aware (list all method	ods)?			
c. Data Subject consultation  Describe any consultation with Data Subjects	about	t this p	rocessing of pe	rsonal data
Has any consultation been undertaken with Data	Subje	cts?	Yes □	No ⊠
(i.e. wide pre- project discussions/ forum/consulta	ition)			
Comments:				
15. Security				
Appropriate Security in place (organisational and technical controls) to protect the personal data				
a. Organisational Controls				
Contractual Control				
			<b>,</b> 0	
Confirm the processing is or will be covered by a				$\boxtimes$
Confirm the contract or agreement contain the ne the processing activities	cessa	ry detai	i in respect of	



handayar

or disposal of data following cessation of the contracted services	
of disposal of data following cessation of the contracted services	
Other organisational controls	
All parties are aware of incident reporting requirements	$\boxtimes$
All parties have an adequate and up to date Information Security policy in place	
All parties will ensure the necessary training is undertaken by staff to ensure competency	
Confirm the relevant processes are documented and available to staff	
Comments: Guidance and training to staff on how to manage attendance at MS Teams meetings and ensure that no unauthorised individuals can gain access to a meeting. Guidance will prohibit video recording of confidential discussions about patients.  Training will be undertaken by all persons accessing the IT systems. The number of persons will be kept to a minimum.  Liaison staff will not print out any information. It will be stored within Liaison Care's Sharpoint 365 environment.	

#### Period over which the processing activity will take place:

Confirm the contract/ careement stimulate arrangements for return

Start Date: December 2022 End Date: December 2023

Comments: Liaison also undertake DBS checks on all staff. Clinical staff have up to date professional registrations. All complete annual training in Cyber Security and GDPR.

#### b. Technical Controls

**Security and Continuity plans** 

# Confirm business continuity plans are in place in case of data loss or damage

(as a result of human error, virus, network failure, theft, fire, floods etc)

How will users escalate cyber security, data security or data breaches in a timely manner? Response to a Breach

The person who discovers or receives a report of a breach must immediately inform their Line Manager who will ensure that as a matter of urgency one of the following people are informed:

Caldicott Guardian ,Information Governance Lead ,Senior Information Risk Officer, Data Protection Officer.

The investigation should be completed without delay and wherever possible within

 $\boxtimes$ 



24 hours of the breach being discovered and reported. A further review of the causes of the breach and recommendations for future improvements can be done once the matter has been resolved.

Liaison Care would notify the ICB within 24, even if the full facts determining the breach are not yet known to Liaison Care.

Access controls	
Confirm that the Access Controls in place will effectively ensure that only those with a valid need to access the data can do so.	
Confirm that the Access Controls in place are effective and ensure appropriate permissions to view, create, amend and delete data.	
Comments	

#### Securing the data within systems

Confirm that appropriate technical security (appropriate to the sensitivity of the data) is in place to protect the data at rest e.g. encryption, strong access controls, breach or attempted unauthorised access alerts, etc.

 $\boxtimes$ 

Comments: Liaison will secure data within their Sharepoint 365 environment with appropriate access controls in place.

#### Securing the data when being transferred or transmitted

Confirm that appropriate technical security (appropriate to the sensitivity of the data) is in place to protect the data in transit from threats

 $\boxtimes$ 

Comments: NHS mail and Egress will be used for transferring data.



Physical security measures	
What physical security measures have been undertaken to protect the data? Please describe.	Microsoft Teams meetings - staff will be wearing headphones and maintain confidentiality.

# 16. Disclosure and Sharing

Transfer of Personal Data to countries outside the EEA		
Confirm here if data is being transferred or processed outside the UK, or planned that data will be processed outside the UK	if it is	
If "NO" state "No" in comments below and go to the next table.		
Confirm here that adequate steps have been taken to meet the required standards for data transferred or processed outside the UK. If unsure you declare this.	ı must	
Comments: No data is transferred		
Information Sharing		
Will the project involve information sharing across organisations?	Yes □	No ⊠
If so, is information sharing agreement in place?	Yes □	No ⊠
Comments:		



# 17. Risk Management

Some examples of risk management to consider are provided to help. Delete/ amend as appropriate.

#	Data Protection Risks	Risk to Individual	Compliance Risk	Corporate Risk
1	lawfulness, fairness & transparency- identify lawful basis for processing — only shared legally, not adversely impact individuals, informing individuals/privacy notice (transparency)	Significant, or even irreversible, consequences due to the ICB not ensuring that individuals are aware of the use of their personal data which may impact on their data protection rights and freedoms - Right to Access, Right to Rectification, Right to Erasure, Right to Restrict Processing, Right to Object to Processing	Non-compliance with organisational data protection responsibilities	Potential ICO enforcement notices or fines. Potential claims from data subjects. Reputational damage
2	<pre>purpose limitation - only being used for a specific purpose</pre>	Significant, or even irreversible, consequences due to the ICB enabling illegitimate access to data. Individuals' personal data provided unlawfully or linked unlawfully or processed unlawfully for other purposes	Non-compliance with organisational data protection responsibilities	Potential ICO enforcement notices or fines. Potential claims from data subjects. Reputational damage
3	data minimisation — minimum personal data to carry out what is required	Significant, or even irreversible, consequences due to the ICB not ensuing minimum data is collected shared lawfully or non-adherence to retention requirements.	Non-compliance with organisational data protection responsibilities	Potential ICO enforcement notices or fines. Potential claims from data subjects. Reputational damage
4	accuracy — data quality, accurate and reliable information	Significant, or even irreversible, consequences due to inappropriate decisions being made based on the use of incorrect or misleading data.	Non-compliance with organisational data protection responsibilities	Potential ICO enforcement notices or fines. Potential claims from data subjects. Reputational damage



5	storage limitation – only held for specified purpose with set storage and retention requirements	Significant, or even irreversible, consequences due to the ICBs non-adherence to storage and retention requirements.	Non-compliance with organisational data protection responsibilities	Potential ICO enforcement notices or fines. Potential claims from data subjects. Reputational damage
6	integrity and confidentiality (security) – also includes data quality, processed securely with authorised/approved access	Significant, or even irreversible, consequences due to the ICB enabling the non-legitimate sharing of information with inappropriate staff or organisations. Loss of personal data due lack of appropriate security of the personal data, including protection against unauthorised or unlawful processing and against loss, accidental loss, destruction or damage, using appropriate technical or organisational measures.	Non-compliance with organisational data protection responsibilities	Potential ICO enforcement notices or fines. Potential claims from data subjects. Reputational damage



# 18. Risk Assessment of project data processing (please complete all sections)

#	Risk Description	Mitigating Control(s)	Actions	Risk/ Action Owner	Likely	Impact	Score	Date Completed
1	lawfulness, fairness & transparency- Significant, or even irreversible, consequences due to the ICB not ensuring that individuals are aware of the use of their personal data which may impact on their data protection rights and freedoms:	Liaison Care process to notify the ICB where it receives an individual rights request. The ICB has a privacy notice for CHC	Process already in place (no further acton)	n/a	1	2	2	
	<ul> <li>Right to Access,</li> <li>Right to Rectification,</li> <li>Right to Erasure,</li> <li>Right to Restrict Processing,</li> <li>Right to Object to Processing.</li> </ul>	Patient's whose case it is proposed will be handled by Liaison Care will receive a permission to act letter	To be actioned by ICB CHC.	Sally Dore	1	2	2	
	Individuals unable to exercise control over their data or causing them significant social or economic damage.  Harm to the rights and freedoms of		Update ICB privacy notice to include Liaison Care processing.		1	2	2	
	vulnerable persons/or individuals the age of 18 caused by the processing of their personal data.							



2	purpose limitation — Significant, or even irreversible, consequences due to the ICB enabling illegitimate access to data. Individuals' personal data provided unlawfully or linked unlawfully or processed unlawfully for other purposes.	Only data from specific cases will be sent to Liaison Care. The data sent will only be in relation to the purposes outlined.		(Enter action owner should for any risks in this area)	Enter Likely Score from matrix below	Enter Impact Score from matrix below	Enter Likely x Impact outcome (Low, Medium or High)	
3	data minimisation — Significant, or even irreversible, consequences due to the ICB not ensuing minimum data is collected shared lawfully or non-adherence to retention requirements.	ICB will notify Liaison Care of the cohort of patients for them to assess by NHSmail. This list of patients to be assessed by Liaison Care, patients will be identified using the unique iQA system reference number, 'iQA ID. Only relevant data will be used.	None	n/a	1	2	2	
4	accuracy – Significant, or even irreversible, consequences due to inappropriate decisions being made based on the use of incorrect or misleading data.	Patient data uploaded to the wrong record by Liaison's Care Pathway Co- ordinators	Ensuring that Liaison Care staff check the iQA reference numbers – to be included in a SOP.	n/a				



5	storage limitation — Significant, or even irreversible, consequences due to the ICBs non-adherence to storage and retention requirements.	All data will be returned to the ICB on completion of the contract and managed in line with the NHS Records management code of practice.	No further action	(Enter action owner should for any risks in this area)	Enter Likely Score from matrix below	Enter Impact Score from matrix below	Enter Likely x Impact outcome (Low, Medium or High)	
•	integrity and confidentiality (security) – Significant, or even irreversible, consequences due to the ICB enabling the non-legitimate sharing of information with inappropriate staff or organisations.  Loss of personal data due lack of appropriate security of the personal data (including cyber-attacks), lack of protection against unauthorised or unlawful processing and against loss, accidental loss, destruction or damage, not using appropriate technical or organisational measures to prevent Illegal access to personal/special category personal data.	There is a risk of IT system failure, at either of the data warehouses (the ICB, or Liaison Care)	There are failover systems in place for both data warehouses.  Business continuity plans where there is a total IT failure.	(Enter action owner should for any risks in this area)	Enter Likely Score from matrix below	Enter Impact Score from matrix below	Enter Likely x Impact outcome (Low, Medium or High)	



### (Add rows as necessary)

	Catastrophic	(2)	W.	н	VH	VH	VH	
	Significant	(4)	M	н	VH	VH	VH	
Re ative Impact	Moderate	(3)	М	М	н	Н	Н	
R	Mincr	(2)	L	L	М	М	М	
	Insignificant	(1)	L	L	L	L	L	
			Rare (1)	Unlikely (2)	Possible (3)	Likely (4)	Almost certain (5)	
	Relative Likelihood							

Ш	UKELIHO OD					
1	Rare	0% to 5% chance				
2	Unlikely	6 to 20% chance				
3	Possible	21 to 50% chance				
4	Likely	51 to 80% chance				
5	Almost certain	81%+ chance				

IM	IMPACT					
1	Insignificant	0% to 5% chance				
2	Minor	6 to 20% chance				
3	Moderate	21 to 50% chance				
4	Significant	51 to 80% chance				
5	Catastrophic	81%+ chance				



### 19. Reference to associated documentation

Please reference any relevant documents below.

Please note these documents may need to be provided upon request at any point. This section and the documents within will not be routinely published with the DPIA.

#### e.g.

- Information Governance/Legal (Privacy Notice/ Consent Form)
- Project documentation, (e.g. Business Case, PIDs, training docs; procedures, etc.)
- Information Security
- Design & ICT Security (including spec; security assessments, network diagrams etc.)
- Procurement (including IG evaluation(s), Contract/ Agreement)

Documentation					
Title of document	Comment				

### 20. Reviews

Regularity of Reviews	
The processing activity will be reviewed (state at 6 months/ 12months/ 24 months, etc:	12 months
Comments:	

#### **Review Outcomes**

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Date Review Undertaken:	
Confirm that the processing as initially approved in this assessment remains unchanged	
All mitigations remain in place and are effective and appropriate to the level of risk	
No further action is required as a result of the review	
Comments:	

(Add additional sections for further reviews)

# 21. Approvals

Function/ Role	Name/ Job title	Date	Comments		
DPO					
Project Lead					
IG Team Review					
Other NHS/ other Organisation IG/ DPO					
Confirm any new o controller's Data Fl					
Confirm any new o controller's Informa	ta 🗆				
Comments:					