

Privacy Impact Assessments (PIA)

Privacy impact assessment screening questions

These questions are intended to help organisations decide whether a PIA is necessary. Answering 'yes' to any of these questions is an indication that a PIA would be a useful exercise. You can expand on your answers as the project develops if you need to.

You can adapt these questions to develop a screening method which fits more closely with the types of project you are likely to assess.

Will the project involve the collection of new information about individuals?

Yes

Will the project compel individuals to provide information about themselves?

Yes

Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information?

No

Are you using information about individuals for a purpose it is not currently used for, or in a way it is not currently used?

Yes

Does the project involve you using new technology which might be perceived as being privacy intrusive? For example, the use of biometrics or facial recognition.

No

Will the project result in you making decisions or taking action against individuals in ways which can have a significant impact on them?

No

Is the information about individuals of a kind particularly likely to raise privacy concerns or expectations? For example, health records, criminal records or other information that people would consider to be particularly private.

Yes

Will the project require you to contact individuals in ways which they may find intrusive?

Yes

Privacy impact assessment template

This template is an example of how you can record the PIA process and results. You can start to fill in details from the beginning of the project, after the screening questions have identified the need for a PIA. The template follows the process which is used in this code of practice. You can adapt the process and this template to produce something which allows your organisation to conduct effective PIAs integrated with your project management processes.

Step one: Identify the need for a PIA

Explain what the project aims to achieve, what the benefits will be to the organisation, to individuals and to other parties.

You may find it helpful to link to other relevant documents related to the project, for example a project proposal.

Also summarise why the need for a PIA was identified (this can draw on your answers to the screening questions).

The use of MJOG will result in faster communication with patients which will benefit both patients and the practice, allowing us to send more and better information which should result in better care.

Ad-hoc communication for self-care should help to reduce demand on practice resources.

A PIA was needed because we answered "Yes" to multiple screening questions including collecting new information, using it for purposes not currently used for, could raise privacy concerns and could be felt to be intrusive.

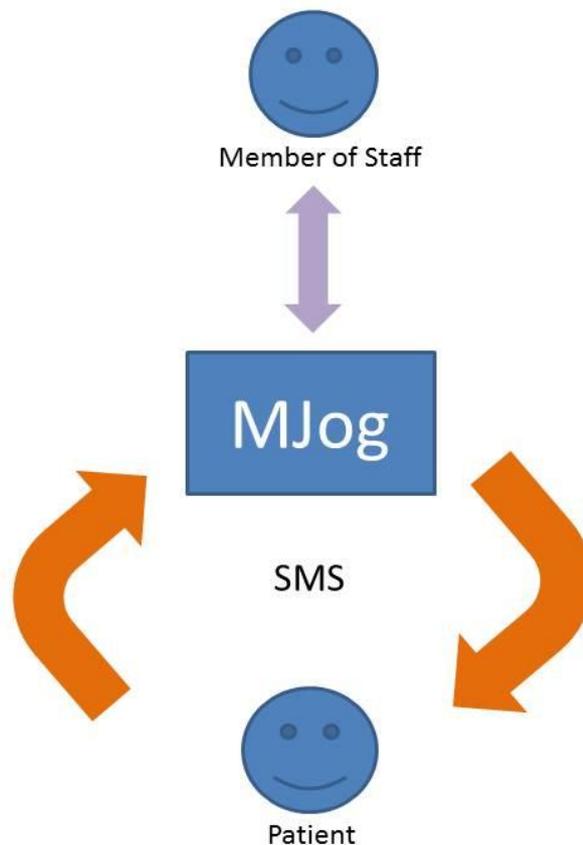
Step two: Describe the information flows

The collection, use and deletion of personal data should be described here and it may also be useful to refer to a flow diagram or another way of explaining data flows. You should also say how many individuals are likely to be affected by the project.

The project could affect all patients who are over the age of 18 (approximately 23,000 patients) but they all have the option to opt-out of using the service.

We continue to collect mobile telephone numbers which will be used to populate MJOG.

We will be sending information to patients for their direct care via SMS text messages.



Consultation requirements

Explain what practical steps you will take to ensure that you identify and address privacy risks. Who should be consulted, internally and externally? How will you carry out the consultation? You should link this to the relevant stages of your project management process.

Consultation can be used at any stage of the PIA process.

MJOG have confirmed that the product is a GP system of choice (GPSOC) and adheres to the strictest information security measures and is an N3 product.

We are currently verifying email addresses and telephone numbers with patients.

Any patient with a shared email address or shared mobile telephone number will be opted out of MJOG & will be contacted to ask for their own email address and mobile telephone number. If they don't have their own email address or phone number they will continue to be opted out of MJOG.

The service will not be available to patients below the age of 18 years old due to the risks with shared email addresses and mobile telephone numbers.

Step three: identify the privacy and related risks

Identify the key privacy risks and the associated compliance and corporate risks. Larger-scale PIAs might record this information on a more formal risk register.

Privacy Issue	Risk to individuals	Compliance risk	Associated organisation/ corporate risk
Shared mobile telephone numbers	Confidentiality breach	GDPR breach	
Under 18 year olds (Shared numbers)	Confidentiality breach	GDPR breach	

Step four: Identify privacy solutions

Describe the actions you could take to reduce the risks, and any future steps which would be necessary (e.g. the production of new guidance or future security testing for systems).

Risk	Solution(s)	Result: is the risk eliminated, reduced or accepted?	Evaluation: is the final impact on individuals after implementing each solution a justified, compliant and proportionate response to the aims of the project?
Shared mobile telephone number	Opted out of MJOG & contacted to get their own mobile telephone number.	Risk is eliminated for patients who provide their own mobile telephone number.	Yes
New registrations or amendments to records could add MJOG records with shared telephone numbers or for under 18 year olds	Registration team to opt out any under 18 patient or those with shared mobile telephone numbers. Run a weekly search of all patients & check for under 18s and shared mobile phone numbers & then opt them out & contact patients with shared mobile numbers to see if they have their own mobile numbers.	Risk is reduced from the time the new details are entered until the time the patients are opted out. This would be a maximum of a week	Yes

Step five: Sign off and record the PIA outcomes

Who has approved the privacy risks involved in the project? What solutions need to be implemented?

Risk	Approved Solution	Approved By
Shared mobile telephone number	Opted out of MJOG & contacted to get their own mobile telephone number	Dr. Andy Miller IT Lead/Caldicott Guardian
New registrations or amendments to records could add MJOG records with shared telephone numbers or for under 18 year olds	Registration team to opt out any under 18 patient or those with shared mobile telephone numbers. Run a weekly search of all patients & check for under 18s and shared mobile phone numbers & then opt them out & contact patients with shared mobile numbers to see if they have their own mobile numbers.	Dr. Andy Miller IT Lead/Caldicott Guardian

Step six: Integrate the PIA outcomes back into the project plan

Who is responsible for integrating the PIA outcomes back into the project plan and updating any project management paperwork? Who is responsible for implementing the solutions that have been approved? Who is the contact for any privacy concerns which may arise in the future?

Action to be taken	Date for completion of actions	Responsibility for action
Opting out patients with shared mobile telephone numbers	1 st September 2018	Gareth Hannam IG & IT Specialist
Opting out patients that are under 18 years old		Gareth Hannam IG & IT Specialist
Contact point for future privacy concerns		
Gareth Hannam – Gareth.hannam@nhs.net		

Linking the PIA to the data protection principles

Answering these questions during the PIA process will help you to identify where there is a risk that the project will fail to comply with the DPA or other relevant legislation, for example the Human Rights Act.

Principle 1

Personal data shall be processed fairly and lawfully and, in particular, shall not be processed unless:

- a) at least one of the conditions in Schedule 2 is met, and**
- b) in the case of sensitive personal data, at least one of the conditions in Schedule 3 is also met.**

Have you identified the purpose of the project?

Yes

How will individuals be told about the use of their personal data?

Initial SMS text message to all patients 18 years old & over to introduce MJOG & give patients the choice to opt out

Do you need to amend your privacy notices?

No. A privacy notices for SMS text messages already exists.

Have you established which conditions for processing apply?

Article 6(1)(e) ‘...necessary for the performance of a task carried out in the public interest or in the exercise of official authority...’

Article 9(2)(h) ‘necessary for the purposes of preventative or occupational medicine for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services.’

If you are relying on consent to process personal data, how will this be collected and what will you do if it is withheld or withdrawn?

For shared mobile telephone numbers the care navigators will contact the patients to ask if they have their own mobile telephone number. If they do they will be opted back in to MJOG. The registrations team will opt out any patients aged under 18 years old or who have shared mobile telephone numbers.

If your organisation is subject to the Human Rights Act, you also need to consider:

Will your actions interfere with the right to privacy under Article 8?

No

Have you identified the social need and aims of the project?

Yes

Are your actions a proportionate response to the social need?

Yes

Principle 2

Personal data shall be obtained only for one or more specified and lawful purposes, and shall not be further processed in any manner incompatible with that purpose or those purposes.

Does your project plan cover all of the purposes for processing personal data?

MJOG communication will only be used for purposes of direct care in the first phase of the project

Have potential new purposes been identified as the scope of the project expands?

A second phase could introduce the use of MJOG for purposes other than direct care but only with additional patient consent.

Principle 3

Personal data shall be adequate, relevant and not excessive in relation to the purpose or purposes for which they are processed.

Is the information you are using of good enough quality for the purposes it is used for?

Yes

Which personal data could you not use, without compromising the needs of the project?

Sensitive personal data e.g. safeguarding data, sexual health data etc.

Principle 4

Personal data shall be accurate and, where necessary, kept up to date.

If you are procuring new software does it allow you to amend data when necessary?

Telephone numbers from EMIS will automatically synchronise with MJOG in case of changes or for new patients.

A weekly search will be run to gather under 18s and opt them out. Patients are opted back in when they turn 18 by running a search and manually updating by batch update.

How are you ensuring that personal data obtained from individuals or other organisations is accurate?

Care Navigators check mobile telephone numbers with patients when they call to book a triage call.

Patients are asked on the checking in screens to verify their telephone number and if this is incorrect they can go to the Information Desk to notify them of any changes.

Patients can amend their contact details via our practice website.

Principle 5

Personal data processed for any purpose or purposes shall not be kept for longer than necessary for that purpose or those purposes.

What retention periods are suitable for the personal data you will be processing?

Patient contact details are part of the medical record and are held in line with our retention of records policy.

Are you procuring software which will allow you to delete information in line with your retention periods?

Communications trails on MJOG are removed after 3 months. The EMIS patient record will maintain a full history of these communication trails.

MJOG do not hold the data, they access currently registered patients from EMIS, so leavers and deceased patients are not included.

Principle 6

Personal data shall be processed in accordance with the rights of data subjects under this Act.

Will the systems you are putting in place allow you to respond to subject access requests more easily?

No

If the project involves marketing, have you got a procedure for individuals to opt out of their information being used for that purpose?

n/a

Principle 7

Appropriate technical and organisational measures shall be taken against unauthorised or unlawful processing of personal data and against accidental loss or destruction of, or damage to, personal data.

Do any new systems provide protection against the security risks you have identified?

It is an N3 product which is held within the NHS secure environment meeting all GPSOC IT security requirements

What training and instructions are necessary to ensure that staff know how to operate a new system securely?

In-house training will be provided for staff. MJOG also has its own e-learning included.

Principle 8

Personal data shall not be transferred to a country or territory outside the European Economic Area unless that country or territory ensures and adequate level of protection for the rights and freedoms of data subjects in relation to the processing of personal data.

Will the project require you to transfer data outside of the EEA?

No

If you will be making transfers, how will you ensure that the data is adequately protected?

n/a