## Homeless Health Service Project – Information Sharing Protocol

The Norfolk and Waveney Health and Social Care Information Sharing Agreement (ISA) is not a legally enforceable document or a contract. The overarching agreement identifies best practice for systematic data sharing of health and social care information between signatories and this Information Sharing Protocol sits beneath the ISA and intends to provide granular detail of specific sharing initiatives agreed to by the parties involved.

The ISP is provided to all parties to support risk mitigation and to provide a consistent approach to managing data flows that may be routinely occurring.

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| Name of Project | | |  | Homeless Health Service (Council Rehoming Scheme) | | |
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| Description of Routine Sharing Practice | | |  | This document provides a formal agreement and associated actions in relation to the sharing of personal and sensitive (special category data) patient data between East Suffolk Council and East Norfolk Medical Practice and subsequently other Norfolk and Waveney GP Practices.  The data flows covered by this protocol are as follows;   1. The East Suffolk Council will send a list of a number of homeless patients that have been rehoused in the Waveney Area (name, DOB, location at present and if registered with a practice) 2. ENMP will confirm whether the patient is registered with a GP Practice 3. If they are **not registered with a practice**, ENMP will triage them for COVID19 and potentially other health issues 4. Liaise with an appropriate practice to facilitate registration of the patient 5. A record of the patient is created within the ENMP S1 module. Where sharing out on both the registered practice and the ENMP module is active, both parties can view updates to each record 6. Maintain contact with them to build a relationship between the patient and their own practice 7. Likely to come across them at outreach and may liaise with their practice on their behalf including obtaining relevant information from the practice 8. If they **are registered with a practice**, ENMP will contact the patient and make an introduction and undertake a COVID19 triage and potentially identify other health issues 9. Contact their registered practice and check that they are engaged 10. A record of the patient is created within the ENMP S1 module. Where sharing out on both the registered practice and the ENMP module is active, both parties can view updates to each record 11. Maintain contact with them to build a relationship with their own practice 12. Likely to come across them at outreach and may liaise with their practice on their behalf including obtaining relevant information from the practice 13. In either example, the triage may result in positive symptoms or indicators of COVID19 14. The patient will be referred to the relevant hot site for treatment 15. Patient will be referred for testing in accordance with the Vulnerable Adults Testing Pathway - [carehomecovidscreening@nchc.nhs.uk](mailto:carehomecovidscreening@nchc.nhs.uk) 16. ENMP will discuss their results with their practice 17. In the event that patients cannot be directly contacted, ENMP will liaise with other relevant bodies as described below, to locate and support the patient   XXXXX  XXXXX | | |  |
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| Agreed Data Set | | |  | Initial list from East Suffolk Council to include; name, DOB, location at present and if registered with a practice  Conversations with the patient will result in their disclosure of information as appropriate to their wishes  Conversations with the practice will result in disclosures of personal and sensitive information that will vary according to their circumstances and need but will be the minimum necessary to achieve the desired purpose (likely to involve diagnosis and medication)  Referral for testing will involve completion of a predefined request form that has been established by another Data Controller (the testing body)  ENMP will require reporting on performance and quality but this will be aggregated statistical data (non-personal) | | |  |
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| Preferred Secure Transfer Method 1 | | |  | NHS Mail | | |  |
| Preferred Secure Transfer Method 2 | | |  | Telephone and Direct Clinical System Transfers | | |
| Other Methods | | |  |  | | |
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| Secure Storage | | |  | Data will reside within the clinical system | | |
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| Retention Periods | | |  | Data will be retained in accordance with DH Records Management Code of Practice | | |  |
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| Legal Relationships | | |  | The process will involve sharing information between two independent controllers. | | |  |
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| Fair Processing  / Right to Be Informed | | |  | In order to satisfy the common law duty of confidentiality and the data protection legislation “right to be informed” there is a requirement to ensure that patients are provided with sufficient information. Individuals must “reasonably expect” disclosures of their confidential information. | | |
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| Data Security | | |  | All signatories must;  All signatories have a Data Security Protection Toolkit and have:  Implement appropriate technical and organisational measures to protect the Shared Personal Data in their possession against unauthorised or unlawful processing and against accidental loss, destruction, damage, alteration or disclosure, including but not limited to:   * Ensuring IT equipment, including portable equipment, is kept in lockable areas when unattended and is encrypted. * ensuring that staff use appropriate secure methods for logging into systems or databases containing the Personal Data; * Ensuring that access to systems is appropriately audited * Ensuring all staff handling Personal Data have been made aware of their responsibilities with regards to handling of the data, have a copy of this protocol and have undergone Data Protection and Security Training in the last 12 months | | |
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| Lawful Basis | | |  | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | **Purpose** | **DPA 2018 (personal data)** | **DPA 2018 (special cat)** | **GDPR (personal data)** | **GDPR (special cat)** | **ECHR Art 8** | **Common Law Duty of Confidentiality** | | Direct care to individual | Sch 9 s 5 (e) Public Task | Sch 10 s 10 8(1) Medical Purposes | Art 6 (1) (e) Public Task | Art 9 (2) (h) Medical Purposes | In accordance with the law  Proportionate | Established through raising patient expectations through privacy discussions | | | |

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| Patient Right to Object (Information Sharing Scripts) |  | N/A – provided in an additional question within COVID Triage questionnaire |

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| Incidents report to: |  | Kafico Ltd (DPO) |
| Access Rights Requests reported to: |  | The Parties agree that the responsibility for complying with a request from a data subject falls each individual controller  The Parties agree to provide reasonable and prompt assistance (within 5 working days of such a request for assistance) as is necessary to each other to enable them to comply with a Data Subject Request and to respond to any other queries or complaints from Data Subjects. |
| Approved by: |  | A copy of this document should be provided to all staff involved in the project at NNPC and Acle MC and should be logged with the Information Governance Lead / DPO for each participating partner organisation. |
| Approval date: |  | June 2020 |
| Review date |  | September 2020 |
| In case of queries about the content of this document contact: |  | Emma.cooper@kafico.co.uk |