

## STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title	Subject Access Requests: GP practices		Doc. No.	IG406
Scope	Governance	GP Practices Governance Team		
Purpose	To ensure requests for information are processed in line with the Access to Health Records Act 1990, Data Protection Act 2018 and accurate, appropriate records are provided promptly.			
Guidelines	Individuals have the right under the Data Protection Act 2018 to have access to the personal records held by Primary Care 24 (Merseyside) Ltd.			
	Requests may be received from statutory sources (eg Coroner’s Office, courts), solicitors or individuals. Requests can be verbal or in writing.			
PROCEDURE			RESPONSIBILITY	
1	Subject access requests received by Primary Care 24 (Merseyside) Ltd GP practices should be date stamped upon receipt (please note, this may also apply to email if receipt has been delayed by IT issues or leave).  If a request is received by telephone you must confirm who is making the request in order to ensure that they have the right to the information. Requests from third parties require evidence of patient consent so should be written.  All requests, whether in writing or verbal, must be notified to HQ using the email address <a href="mailto:iccq.pc24.cosec@nhs.net">iccq.pc24.cosec@nhs.net</a> . Attach an electronic copy of any written request.		Practice Manager (or Deputy in their absence)	
2	Any request received from a third party must be accompanied by a letter of consent signed by the individual whose information (generally patient record) is requested and specifying the particular third party making the disclosure request. All individuals over the age of 13 can give their own consent. Consent from a parent or legal guardian is required for younger children. If consent is not provided, a letter or email should be sent the same day requesting consent.  Requests must be responded to in writing ie letter or email. No information should be disclosed over the telephone. The time limit for providing information is <b>30</b> calendar days, though this can be extended in consultation with the Data Protection Officer in certain circumstances.		Practice Manager (or Deputy in their absence)	

<b>3</b>	Where the request relates to a patient, information should be extracted from the patient record.	Practice Manager or staff member to whom the task is delegated
<b>4</b>	<p>If the information relates to a patient, it should be reviewed by a clinician once it has been obtained to ensure that disclosure does not breach the Caldicott principles in relation to that or any other patient. In particular:</p> <ol style="list-style-type: none"> <li>1. Any information relating to a third party should be redacted</li> <li>2. Information which could cause serious harm to the patient or others should be redacted</li> <li>3. Only the information requested should be disclosed (eg ensure any time boundaries are adhered to).</li> </ol>	Practice Manager (or Deputy in their absence)
<b>5</b>	<p>Information in relation to staff should be available on the individual's personnel file available via the HQ Human Resources Team. The provision of information in relation to staff should always be undertaken via the HR team who hold all personnel files.</p> <p>Should reference be made to any other individuals in the requested documents, these must be redacted.</p>	HR Team working with Practice Manager (or Deputy in their absence)
<b>6</b>	From 25 May 2018 (under General Data Protection Regulations) no charge can be made for the provision of information under a Subject Access Request unless the response is unreasonable or excessive.	
<b>7</b>	<p>If there is any query regarding the response to a Subject Access Request, guidance can be obtained by contacting the Information Governance Lead (Company Secretary) <a href="mailto:margaret.swinson@pc24.nhs.uk">margaret.swinson@pc24.nhs.uk</a> or the Caldicott Guardian (Medical Director) or SIRO (Director of Ops).</p>	
<b>8</b>	<p>Every stage of the request should be recorded on the checklist.</p> <p>The completed checklist should be sent to the IG lead <a href="mailto:lccg.pc24.cosec@nhs.net">lccg.pc24.cosec@nhs.net</a> to ensure the monitoring sheet is appropriately updated.</p>	<p>Practice Manager (or Deputy in their absence)</p> <p>IG Team</p>

## STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title		Subject Access Requests: GP Practices		Doc. No.	IG406
Version			v1.3		
Supersedes			Previous GP Practice processes and policies		
Approving Managers/Committee			Information Governance		
Date Ratified			26th March 2018		
Department of Originator			Information Governance		
Responsible Executive Director			SIRO (Director of Service Delivery)		
Responsible Manager/Support			Information Governance Lead Manager		
Date Issued			March 2018		
Next Review Date			July 2022		
Target Audience			GP Practices and Governance Team		
Version	Date	Control Reason		Accountable Person for this Version	
v1.0	26/03/2018	Dedicated process for daytime General Practice		IG Lead	
v1.1	31/05/2018	Update for GDPR		IG Lead	
v1.2	23/04/2019	Update for logo, name, time limits		IG Lead/DPO	
v1.3	25/07/2020	Update to reflect introduction of checklist and change of contact information following change of responsibilities at HQ		IG Lead/DPO	
Reference documents		Electronic Locations		Locations for Hard Copies	
		Primary Care 24 (Merseyside) Ltd Intranet / Corporate Policies/ Current SOPS/ Information Governance		Standard Operating Procedures File in GP practice.	
Document Status: This is a controlled document. Whilst this document may be printed, the electronic version maintained on the UC24 Intranet is the controlled copy. Any printed copies of the document are not controlled.					