



# **SUBJECT ACCESS REQUESTS**

## **including**

# **ACCESS TO HEALTH RECORDS POLICY AND PROCEDURE**

|                                    |  |
|------------------------------------|--|
| <b>Title:</b>                      | Subject Access Requests including Access to Health Records |
| <b>Procedural document Type:</b>   | Policy and Procedure                                       |
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**Review and Amendment Log**

| <b>Version No</b> | <b>Type of Change</b> | <b>Date</b>   | <b>Description of change</b>                  |
|-------------------|-----------------------|---------------|---|
| One               | New                   | February 2019 | New Policy                                    |
| Two               | Reformatting          | July 2021     | Updating and Reformatting                     |
| Three             | Review                | April 2022    | Updating incl. removal of DPA 1998 references |
| Four              | Review                | June 2022     | Updating                                      |

## 1. Policy Statement

### What is subject to access?

Enabling individuals to find out what personal data you hold about them, why you hold it and who you disclose it to is fundamental to good information-handling practice. The UK General Data Protection Regulations (UK GDPR) gives individuals the right to require you to do this. This right is commonly known as 'subject access'. Individuals may exercise the right by making a written 'subject access request' (SAR) to organisations holding their data.

The Data Protection Act 2018 (DPA) established the age of consent for children to be able to control access to their records to be 13 years of age.

The majority of SARs processed by the Charity are in relation to health records and this policy is written with this in mind. However, SARs could be received from staff, volunteers, customers or supporters and the same principles apply. In all cases the Information Commissioner's Office guidance at: [Right of access | ICO](#) should be followed.

When a SAR relates to a deceased person the Access to Health Records Act 1990 is the legislation that applies rather than the DPA or the UK GDPR but the process for dealing with them is very similar.

### What is personal data?

In the context of this policy personal data is data that could identify an individual and also any sensitive data relating to that individual e.g., a person's health record. Under the right of subject access, an individual is entitled only to their own personal data, and not information relating to other people (unless they are acting on behalf of that person e.g., healthcare staff involved in a patient's care). Before you can respond to a SAR, you need to be able to decide whether the information you hold is personal data and, if so, whose personal data it is.

### Time limits

Under the UK GDPR you must comply with a SAR 'promptly' and in any event within one month of the date on which the request is received or (if later) the day on which you receive:

- Any requested location information.

- Any information requested to confirm the requester's identity (see below for further guidance).
- Confirmation of the legal basis for completing the SAR.

*Note: UK GDPR the time limit for processing a SAR is one month, the Charity interprets this as 28 days.*

However, the Charity aims to complete health record SARs within 21 days, which is in line with the NHS.

### **Fees and cost limits**

Under UK GDPR fees are not permitted – this will apply to all requests through the UK GDPR and the Access to Health Records Act 1990.

See Appendix 1 for a summary of permitted timescales and charges.

### **Making reasonable adjustments for disabled people**

Some disabled people find it difficult to communicate in writing and may therefore have difficulty making a SAR. You may have a legal duty to make reasonable adjustments for such a person if they wish to make a SAR. Reasonable adjustments could include treating a verbal request for information as though it were a valid SAR. If the request is complex, it would be good practice for you to document it in an accessible format and to send it to the disabled person to confirm the details of the request.

You might also have to respond in a particular format that is accessible to the disabled person, such as Braille, large print, email or audio formats.

### **Sharing information with other health professionals**

Doctors, nurses, physiotherapists, therapists etc., have a professional and ethical duty to respect patients' confidentiality and should only access patient records if they are involved in that patient's care. Therefore, accessing a patient's records should only be on a 'need-to-know' basis.

### **Administrative staff**

Non-clinical staff are increasingly required to access patients' records for administrative purposes, and this raises serious concerns about preserving patient confidentiality. It is essential that all such staff be given training on confidentiality and record-security and that a confidentiality clause is included in their contracts.

Their access to patient information should be restricted to what they need for carrying out their specific duties. The same principle applies in all areas where personal data is processed e.g., for staff or volunteers.

### **Disclosure with consent**

Before allowing access to anyone other than the patient or data subject to access personal information you will need to confirm that the person making the request has the patient's/data subject's consent. You need to be clear about exactly what part of the record the consent applies to.

Whilst it is assumed that patients generally consent to their personal information being shared among the clinical team for the purposes of their care, they should be made aware that this is the case and told that they have the right to withhold consent the Charity's 'Fair Processing Notices' explains this. Sometimes, patients may ask for certain – usually extremely sensitive – information to be kept private and you should respect this. However, in certain circumstances this information may need to be released if failure to disclose would place others at risk of death or serious harm.

### **Disclosure without consent**

Occasionally, there will be circumstances where you have to disclose a patient's (or data subject's) records without their consent (and, rarely, in the face of the patient's/data subject's clear objection to disclosure). There are three possible justifications for this:

1. If you believe that a patient (data subject) may be a victim of neglect or abuse, and that they lack capacity to consent to disclosure, you must give information promptly to an appropriate person or authority, if you believe disclosure is in the patient's/data subject's best interests.
2. You believe that it is in the wider public interest, or that it is necessary to protect the patient/data subject or someone else from the risk of death or serious harm. Examples of this might be to inform the DVLA if someone may be unfit to drive, or to assist the police in preventing or solving a serious crime, or informing the police if you have good reason to believe that a patient/data subject is a threat to others. In this circumstance you may wish to follow GMC guidance (Confidentiality) on disclosure within the wider public interest.
3. Disclosure is required by law – for example, in accordance with a statutory obligation, or to comply with a court order.

In any of these cases, you should only provide the minimum amount of information necessary to serve the purpose, and you should carefully document your reasons for making the disclosure (or not) e.g. in the patient's record/staff or volunteer personnel file.

A patient's HIV, or similar, status should not be disclosed without the patient's consent, as this does not normally fall within the "risk of death or serious harm" exception. For more information see the GMC's Confidentiality – Supplementary guidance: Disclosing information about serious communicable diseases.

### **Access to a patient's records after death**

The duty of confidentiality remains after a patient has died. Under the Access to Health Records Act 1990, the personal representative of the deceased and people who may have a claim arising from the patient's death are permitted access to the records. This applies to information provided after November 1991 and disclosure should be limited to that which is relevant to the claim in question. This should be considered in conjunction with GMC guidance, Confidentiality (paragraphs 70-72).

The records should not be disclosed if it is thought that they may cause mental or physical harm to anyone, if they identify a third party or if the deceased gave the information on the understanding that it would remain private.

Under the Access to Health Records Act 1990 the time to respond to access requests is 21 working days if the record has been added to in the last 40 days, and within 40 days otherwise.

However, the policy of the Charity is that SARs should be responded to within 21 days, irrespective of when information was last added to the record – see Appendix 1.

### **Access to a child or young person's records, including medical records**

Children and young people, although unlikely to be patients of the Charity are on occasions involved as volunteers in fundraising and potentially other activities for the Charity.

The Information Commissioner's Office states that parents can make subject access requests on behalf of their children who are too young to make their own request.

A young person aged 13 or above is generally considered mature enough to understand what a subject access request is, however each case must be judged on its own merits. These children can make their own request and would need to provide their consent to allow their parents to make the request for them. You must use your judgment to decide whether a young person aged 13 or above is mature enough to make their own request as they do not always have the maturity to do so. Any parental access to a child's records must be in the child's best interests.

Fathers with parental responsibility may exercise a child's right to make a subject access request, as outlined above. In some cases you might also consider that it would be in the child's best interests to allow the father access to the notes even if he does not have parental responsibility. If the child's parents are divorced or separated, parental responsibility is not affected.

However, if this is the case, although there is no absolute obligation to do so, you may wish to consider informing the other parent that an application for access has been made, so that they can seek their own advice.

### **Access to the medical records of an incapacitated patient**

Healthcare professionals can disclose information from the records of an incapacitated patient (following the Mental Capacity Act 2005), either when it is in the patient's best interests, or where there is some other lawful reason to do so. Disclosure would usually be related to the ongoing care of the patient. Information should not be disclosed, if it is judged that doing so would cause serious mental or physical harm to the patient or anyone else.

An attorney (who is a person nominated by the patient) for the patient, acting as a Lasting Power of Attorney (LPA), can ask to see information about the person they are representing, provided that it is relevant to the decisions the attorney has a legal right to make. Before disclosing any information, the holder of the information should make sure that the attorney has the official authority.

### **Police access to personal data**

The police are entitled to access personal data with or without the data subjects consent in some circumstances – see Appendix 6.

## 2. Procedure

### Aim and Scope of the Procedure

To set out the steps by which patients or other data subjects can access the information held about them by the Charity (including their health records) and providing a clear work instruction for staff, so that all requests are handled correctly and in a uniform manner.

This procedure follows the Information Commissioners Office Guidance.

### Staff Responsibilities

- The Director of Clinical Services will manage the health (patient) Subject Access Requests.
- The HR Director will manage all other Subject Access Requests.
- All staff should be able to recognise a subject access request and pass the request to their unit manager/head of department for processing.
- The head of department will arrange to have the request assessed and processed if appropriate.
- Nominated staff will collect and collate the SAR information required and redact or remove information relating to individuals (as appropriate under the UK GDPR).
- The Caldicott Guardian will review completed health record SARs before they are sent out.
- The HR Director will review all other SARs before they are sent out.
- Once a satisfactory review of the SAR output has been completed the head of department will arrange for the records to be presented/sent to the requestor.
- The heads of departments will report details of SAR activity to the Data Protection Officer periodically.

### Method

- A request to access personal data is received and passed to the Unit manager (health) and then to the head of department or straight to the head of department for other requests.
- The head of department will confirm that the request is a 'Subject Access Request' and inform the requestor if the request is rejected, and tell them the basis for the decision.
- The head of department will determine what information and forms should be sent to the requestor (if required) in order to process the SAR:



The appropriate forms will be:

- Access to a deceased patient's record Appendix 2
- Patient requesting their own health records Appendix 3
- Employee/Volunteer requesting their own records Appendix 4
- Any other person e.g., supporter, customer etc. wishing to access their own records Appendix 5

When the 'Subject Access Request' comes from a 3<sup>rd</sup> party e.g., a solicitor, then the '3<sup>rd</sup> Party Disclosure form' included within the Appendices should be completed, otherwise it is not required.

The requestor is not obliged to complete these forms if they prefer to give the required information in some other form.

- Requests from the Police for access to Patients/data subject records should be authorised by a DPA form 277, see Appendix 6.
- Once the required information is received the head of department arranges for the required records to be collated and for appropriate redactions or omissions to be made.
- For health records, the health professional most directly concerned is permitted to withhold information which she/he believes might cause serious harm to the physical or mental well-being of the patient, or which might identify a third party. However, the justification for this should be documented in the patients' record.
- Details of a health record SAR should be included within the patients' record.
- Details of employee or volunteer SARs should be included within personnel files. This should include details of any rejected requests, details of withheld information and information redacted.
- The information in the records should be understandable and the use of complex terms or codes within the records should be explained to the requestor.
- The completed SAR should be reviewed and approved by Caldicott Guardian for health SARs and the HR Director for other SARs.
- Once reviewed the head of department will arrange to send out the records to the requestor or arrange a viewing as required.
- The timescales and fees permitted for completing SARs are shown in Appendix 1. The starting point for the permitted timescale starts when the Charity has all the information it needs to process the SAR.
- Each head of department will maintain a record of the SARs received in their department.

- When data subjects are sent the information they have requested this must be done by secure means and proof of receipt obtained.

### **3. Staff training requirements**

All staff and volunteers will be made aware of this policy and procedure. Staff responsible for co-ordinating and responding to requests for access to health records will have had training in the provisions of the UK GDPR requirements and be aware of professional guidance on record keeping for clinical staff.

### **4. References**

GMC, Confidentiality –

[https://www.gmcuk.org/guidance/ethical\\_guidance/30587.asp](https://www.gmcuk.org/guidance/ethical_guidance/30587.asp)

Access to Health Records Act 1990 –

[www.legislation.gov.uk/ukpga/1990/23/contents](http://www.legislation.gov.uk/ukpga/1990/23/contents)

Mental Capacity Act Code of Practice –

<https://www.gov.uk/government/collections/mental-capacity-act-makingdecisions#mental-capacity-act-code-of-practice>

Information Commissioner's Office, Subject Access Code of Practice 2017 –

[www.ico.org.uk](http://www.ico.org.uk)

UK General Data Protection Regulations - [www.ico.org.uk/Guide to the UK General Data Protection Regulation \(UK GDPR\) | ICO](http://www.ico.org.uk/Guide-to-the-UK-General-Data-Protection-Regulation-(UK-GDPR)-|ICO)

### **5. Acknowledgements**

The General Medical Council “Access to Health Records” and “Confidentiality: good practice in handling patient information” documents are recognised as the source of much of the content of this policy.

The SAR request forms (Appendices 2 to 6) are based on those provided by NHS Digital.

## Appendix 1 – SAR Timescales and Fee Summary

### Access to Health Records and Subject Access Requests (SAR) – Timescales and Fees

|  | Access to Health Records Act 1990 |                | UK GDPR - SARs                    |                | Charges & Format of output |   |
|--|-----------------------------------|----------------|-----------------------------------|----------------|----------------------------|---|
| SAR type   | Time limit                        | Charity Policy | UK GDPR Time limit for responding | Charity Policy | Charges permitted          | Format of output                              |
| Health, living person                                  | n/a                               |                | 1 month                           | 21 days        | None                       | On request, a commonly used electronic format |
| Health, living person Added to within 40 days of SAR   | n/a                               |                | 1 month                           | 21 days        | None                       | On request, a commonly used electronic format |
| Employee   | n/a                               |                | 1 month                           | 28 days        | None                       | On request, a commonly used electronic format |
| Volunteer  | n/a                               |                | 1 month                           | 28 days        | None                       | On request, a commonly used electronic format |
| Customer   | n/a                               |                | 1 month                           | 28 days        | None                       | On request, a commonly used electronic format |
| Supporter  | n/a                               |                | 1 month                           | 28 days        | None                       | On request, a commonly used electronic format |
| Other  | n/a                               |                | 1 month                           | 28 days        | None                       | On request, a commonly used electronic format |
| Deceased person  | 40 days                           | 21 days        | n/a                               |                | None                       | Copy  |
| Deceased person, record added to within 40 days of SAR | 21 days                           | 21 days        | n/a                               |                | None                       | Copy  |

Richard Ward

13/02/2019

Notes:

The UK GDPR did not replace the Access to Health Records Act 1990 (AHRA), however the AHRA refers to the costs described in the Data Protection Act 1998 hence costs for AHRA change in line with UK GDPR but the timescales and output requirements do not (as they are directly specified within the AHRA).

Under UK GDPR if the initial SAR was made electronically then an electronic response should be provided in a 'common electronic format'

Other than timescales and fees, other aspects of completing a subject access request for the health records of a deceased person should, in general, follow the Information Commissioners "Subject access code of practice". However, the timescales and fees sections of this guidance have not been updated to include the UK GDPR requirements but these should be applied as in the table above.

The timescale count does not start until all the information necessary to process the SAR has been provided.

## Appendix 2 – Access to Health Records of a Deceased Individual

### Access to Health Records of a Deceased Individual

Under the

### ACCESS TO HEALTH RECORDS ACT 1990

Please read the following information carefully.

Your request must be made **in writing** - preferably using the forms in this Appendix.

You will be asked to indicate the data you require, i.e., whether you wish to see a certain part of the record or the record in its entirety.

Cornwall Hospice Care is required to take advice from our medical staff before making a decision about disclosure.

The right of access is for the personal representative of the deceased person and not simply a surviving family member. An applicant must provide evidence to Cornwall Hospice Care that they have a right of access under the Access to Health Records Act 1990.

Access may not be permitted if the following circumstances apply;

1. If it is considered that the patient would not have wished disclosure.
2. If access would lead to the identification of someone else not involved in the patients care.
3. If access would cause serious mental or physical harm to someone else not involved in the patient's care.

Where access is allowed we will supply photocopies.

**From 25 May 2018 onwards there will be no charges.**

Unless you are the patient's next of kin and can be identified by the patient's medical records we will require proof of your relationship to the patient (e.g. birth/marriage certificate). If you are not related to the patient, you will be asked for documentation supporting your claim for access to the patient's records.

Use of the '**Access to Health Records of a Deceased Individual – application form**' below will assist us greatly in complying with your request.

## Access to Health Records of a Deceased Individual Application Form

### Section 1: Details of the person the request is about (data subject)

Title: .....

Surname: .....

First Name: .....

Former Surname: .....

Date of Birth: .....

Sex (Male/Female): .....

Home Address: .....

.....

Postcode: .....

NHS Number (if known): .....

Telephone Number (day): .....

E-mail Address: .....

If the above has been known by a different name or has lived at a different address during the period to which the information required relates, please give details below:

Name: ..... From (date): ..... To (date): .....

Address: .....

.....

Postcode: .....

Name: ..... From (date): ..... To (date): .....

Name: .....

Address: .....

.....

Postcode: .....

## **Section 2: Your name and address**

Title: .....

Surname: .....

First Name: .....

Home Address: .....

.....

Postcode: .....

Telephone Number (day): .....

E-mail Address: .....

## **Section 3: Your relationship to the patient**

I am the patient's personal representative (please attach proof of relationship, see Section 5 for further details).

I am the executor of the estate (please attach confirmation of your appointment).

I have been designated the administrator (designated by the rules of intestacy) of the patient (please attach confirmation of your appointment).

I have a claim arising from the patient's death (please provide details of this claim below).



## **Details of claim:**

### **Section 4: Helping us to find the information**

Please use the space below to provide details of which health records you require access to, if possible which periods and part of those records you require, along with any other details you may feel have relevance e.g. consultant name etc.

Please supply as much details as possible in order that we may locate the information required and interrogate the most appropriate systems to provide the most relevant information in relation to your request.

**Section 5: Proof of Identity**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B, and **all** relevant documents from section C with the application if relevant.

A. Confirmation of name<sup>1</sup>

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

C. As a 3<sup>rd</sup> party – to access someone else’s health records, you must provide:

- Proof of relationship to subject i.e. patient’s personal representative.
- Confirmation of appointment as executor of the estate of a deceased person.
- Confirmation of appointment of administrator (designated by the rules of intestacy) of a deceased person.

I am providing the following types of identification, which are attached to this document:

A. Confirmation of name: .....

B. Confirmation of address: .....

C. 3<sup>rd</sup> Party confirmation: .....

<sup>1</sup> where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

## Section 6: Declaration

Please tick as appropriate and sign below:

- I confirm I am the patient's personal representative and have enclosed evidence of the will/administrator of the estate and evidence of my identity.
- I confirm I have a claim arising out of the patient's death and have enclosed proof of my identity and documented evidence of my claim.

Signature: ..... Date: .....

Please note that, where required, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e. not under confidential cover).

### Your checklist

- Is this contact information correct?
- Have you enclosed acceptable identification?
- Have you signed the form?
- Have you completed all the sections?

### Please return completed form(s) marked confidential to:

Director of Clinical Services  
Cornwall Hospice Care  
Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

## Appendix 3 – Patient Subject Access Request Application Form

Surname of Patient: .....

First Name(s): .....

Patient's Date of Birth: .....

Address: .....

.....

Postcode: .....

### Type of Request:

Please tick relevant boxes.

Do you wish to review the information?

Collect a copy from Cornwall Hospice Care?

Has a full copy of Health Records sent by post?

### Additional information

Please provide as much information as possible and specify if you only require a particular part of the health record. Please use another blank sheet if necessary. Useful information such as any previous addresses, dates of consultations, names of health professionals will be helpful.

.....

.....

## Identification

**To be shown to clinical staff if picking up or seeing records at Cornwall Hospice Care or to be sent by post if records required by post.**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B.

A. Confirmation of name<sup>2</sup>

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

I am providing the following types of identification, which are attached to this document.

A. Confirmation of name: .....

B. Confirmation of address: .....

.....

Signature: ..... Date: .....

Please note that, where required, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e. not under confidential cover).

<sup>2</sup> Where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

### **Your checklist**

- Is this contact information correct?
- Have you enclosed acceptable identification?
- Have you signed the form?
- Have you completed all the sections?

### **Please return completed form(s) marked confidential to:**

Director of Clinical Services  
Cornwall Hospice Care  
Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

**3<sup>rd</sup> Party disclosure – to be filled in by the person requesting the records (if not the patient)**

Name of Patient: .....

Date of Birth of Patient (DD/MM/YY): .....

**Details of person requesting the records:**

Surname: .....

First Name(s): .....

Relationship to Patient: .....

Address: .....

.....

Postcode: .....

Contact Telephone number: .....

Date: .....

**Identification**

**To be shown to clinical staff if picking up or seeing records at Cornwall Hospice Care or to be sent by post if records required by post.**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B, and **all** relevant documents from section C with the application if relevant.

A. Confirmation of name<sup>3</sup>

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

C. As a 3<sup>rd</sup> party – to access someone else’s health records, you must:

- Be acting on their behalf with their consent.
- Have legal authority to make decisions on their behalf (power of attorney).
- Have another legal basis for access (evidence required).

I am providing the following types of identification, which are attached to this document:

A. Confirmation of name: .....

B. Confirmation of address: .....

C. 3<sup>rd</sup> Party confirmation: .....

Signature: ..... Date: .....

Please note that, where requested, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e. not under confidential cover).

<sup>3</sup> Where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

**Your checklist**

- Is this contact information correct?
- Have you enclosed acceptable identification?
- Have you signed the form?
- Have you completed all the sections?



**Please return completed form(s) marked confidential to:**

Director of Clinical Services  
Cornwall Hospice Care  
Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

## Appendix 4 – Employee or Volunteer Subject Access Request Form

Surname of Employee/Volunteer: .....

First Name(s): .....

Date of Birth: .....

Address: .....

.....

Postcode: .....

### Type of Request:

Please tick relevant boxes.

Do you wish to review the information?

Collect a copy from Cornwall Hospice Care?

Has a full copy sent by post?

Do you wish to receive a digital copy?

### Additional information

Please provide as much information as possible and specify if you only require a particular part of the your record. Please use another blank sheet if necessary. Useful information such as any previous addresses, dates of issues of interest, names of Line Managers will be helpful. Digital copies of SAR information are normally presented as .pdf files, if a different format is required please outline this below.

.....

.....

## Identification

**To be shown to Human Resources staff if picking up or seeing records at Cornwall Hospice Care or to be sent by post if records required by post.**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B.

A. Confirmation of name<sup>4</sup>

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

I am providing the following types of identification, which are attached to this document.

A. Confirmation of name: .....

B. Confirmation of address: .....

Signature: ..... Date: .....

Please note that, where required, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e., not under confidential cover).

<sup>4</sup> Where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

### **Your checklist**

Is this contact information correct?

Have you enclosed acceptable identification?

Have you signed the form?

Have you completed all the sections?

### **Please return completed form(s) marked confidential to:**

Director of Human Resources  
Cornwall Hospice Care  
Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

**3<sup>rd</sup> Party disclosure – to be filled in by the person requesting the records (if not the employee/volunteer)**

Name of employee/volunteer:

.....

Date of Birth of employee/volunteer (DD/MM/YY):

.....

**Details of person requesting the records:**

Surname: .....

First Name(s): .....

Relationship to employee/volunteer: .....

Address: .....

.....

Postcode: .....

Contact Telephone number: .....

Date: .....

**Identification**

**To be shown to Human Resources staff if picking up or seeing records at Cornwall Hospice Care or to be sent by post if records required by post.**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B, and **all** relevant documents from section C with the application if relevant.

A. Confirmation of name

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

C. As a 3<sup>rd</sup> party – to access someone else’s health records, you must:

- Be acting on their behalf with their consent.
- Have legal authority to make decisions on their behalf (power of attorney).
- Have another legal basis for access (evidence required).

I am providing the following types of identification, which are attached to this document:

A. Confirmation of name: .....

B. Confirmation of address: .....

C. 3<sup>rd</sup> Party confirmation: .....

Signature: ..... Date: .....

Please note that, where requested, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e. not under confidential cover).

<sup>5</sup> Where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

**Your checklist**

- Is this contact information correct?
- Have you enclosed acceptable identification?
- Have you signed the form?
- Have you completed all the sections?

**Please return completed form(s) marked confidential to:**

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Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

## Appendix 5 – General purpose Subject Access Request Application Form

Surname of requestor: .....

First Name(s): .....

Date of Birth: .....

Address: .....

.....

Postcode: .....

### Type of Request:

Please tick relevant boxes.

Do you wish to review the information?

Collect a copy from Cornwall Hospice Care?

Have a full copy of information sent by post?

### Additional information

Please provide as much information as possible and specify if you only require a particular part of the information we hold about you. Please use another blank sheet if necessary. Useful information such as any previous addresses, dates of interest, names of health professionals/staff will be helpful.

.....

.....

.....



## Identification

**To be shown to Human Resources staff if picking up or seeing records at Cornwall Hospice Care or to be sent by post if records required by post.**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B.

A. Confirmation of name<sup>6</sup>

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

I am providing the following types of identification, which are attached to this document:

A. Confirmation of name: .....

B. Confirmation of address: .....  
.....

Signature: ..... Date: .....

Please note that, where required, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e. not under confidential cover).

<sup>6</sup> Where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

### **Your checklist**

Is this contact information correct?

Have you enclosed acceptable identification?

Have you signed the form?

Have you completed all the sections?

### **Please return completed form(s) marked confidential to:**

Director of Human Resources  
Cornwall Hospice Care  
Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

**Section B - 3<sup>rd</sup> Party disclosure – to be filled in by the person requesting the records of another person**

Name of the person whose records are request: .....

Date of Birth (DD/MM/YY): .....

**Details of person requesting the records:**

Surname: .....

First Name(s): .....

Relationship to person whose records requested: .....

Address: .....  
.....

Postcode: .....

Contact Telephone number: .....

Date: .....

**Identification**

**To be shown to Human Resources staff if picking up or seeing records at Cornwall Hospice Care or to be sent by post if records required by post.**

It will be necessary to confirm the identity of **all** parties included on this form. Please supply a photocopy of **one** document from sections A and B, and **all** relevant documents from section C with the application if relevant.

A. Confirmation of name <sup>7</sup>

- Full driving licence.
- Passport.
- Birth Certificate.
- Marriage Certificate.

B. Confirmation of address

- Utility bill.
- Bank statement.
- Credit card statement.
- Benefit book.
- Pension book.

C. As a 3<sup>rd</sup> party – to access someone else’s health records, you must:

- Be acting on their behalf with their consent.
- Have legal authority to make decisions on their behalf (power of attorney).
- Have another legal basis for access (evidence required).

I am providing the following types of identification and evidence of the legal basis for accessing the records, which are attached to this document:

A. Confirmation of name: .....

B. Confirmation of address: .....

C. 3<sup>rd</sup> Party confirmation: .....

Signature: ..... Date: .....

Please note that, where requested, your information will be posted to you by special delivery which will require a signature upon receipt. However, if the Royal Mail are unable to deliver to the address given and need to return the documentation to Cornwall Hospice Care this will be returned by normal post (i.e., not under confidential cover).

<sup>5</sup> Where there has been a change of name we will require evidence of the name for which you are seeking information e.g. a birth certificate will not be considered as evidence for searches on a married name.

## Your checklist

- Is this contact information correct?
- Have you enclosed acceptable identification?
- Have you signed the form?
- Have you completed all the sections?

## Please return completed form(s) marked confidential to:

Director of Human Resources  
Cornwall Hospice Care  
Mount Edgcumbe Hospice  
St Austell  
Cornwall  
PL26 6AB

Tel: 01726 65711

## Appendix 6 – Police – Personal Data Requests

All requests from the Police for access to personal data should be referred to the Information Governance Officer who will deal directly with the Police, the Data Protection Officer (Director of Finance), the HR Director and the Caldicott Guardian (Director of Clinical Services).

According to the Information Commissioners Office (ICO) the disclosure of personal data under the section 29 exemption does not need to be received in a certain manner, the Charity simply needs to be satisfied that the request is genuine and that the information being requested is required for the prevention or detection of crime, and the prosecution or apprehension of offenders. This provides an exemption from informing the individuals, or seeking their consent to disclose the information.

Under the Data Protection Act 2018 the Police may request data for any of the following purposes:

- A. The prevention or detection of crime.
- B. The apprehension or prosecution of offenders.
- C. The assessment or collection of any tax or duty or of any imposition of a similar nature.

However, this does not give the Police the automatic right to ask for any information that they may wish to have.

Any information requested must demonstrably be required to meet at least one of the above purposes.

For instance, while the Police may be justified in asking to see specific details about an individual in respect of a criminal investigation they would not be justified in asking to look at the whole (for arguments sake) personnel file for every employee just in case they find evidence of a crime.

Each request from the Police should be justified and for only one person's information. Where information about more than one person is required there should be a separate request for each person.

Where there is evidence that the data subject has given consent for the Police to access personal data there is no issue and the data should be provided. However, depending on the age and mental capacity of a child data subject, we will require parental consent or that of an adult with legal guardianship.

For Devon and Cornwall Constabulary access to personal data requests should be presented on a Devon and Cornwall Constabulary Form 277.

The 277 form should be authorised by a police officer more senior than the police officer making the request, if the police are unable to provide an explanation regarding the requirement to access personal data (usually due to the nature of the offence being investigated) then the form should be signed by a Superintendent.

The Police right of access to peoples' information has to be justified and it is therefore important that in addition to the details on the 277 form they do provide some indication of what is being investigated if at all possible. This will help the Charity determine whether the request is exempt from requiring consent, lawful and genuine e.g., for the purposes of prevention or detection of crime; apprehension or prosecution of offenders; or assessment or collection of tax, duty or imposition of a similar nature.

This is because we have to ensure that the request is proportionate and justifiable e.g. you would not need someone's personnel or health record to investigate a case of dropping litter in the street but you might for investigation of fraud.

All requests from the Police to access health records must be authorised by the Caldicott Guardian.

All other requests from the Police must be authorised by the HR Director.

Where the Charity does not believe the police request is justified the police should be informed of this and given an explanation of the Charity's position

The Caldicott Guardian and the HR Director may require legal advice in complex cases, and it should be noted that the police can apply for a Court Order in order to access personal information and Court Orders must be complied with by the Charity.

A separate request form should be submitted for each individual data subject about whom information is required.

The Police should give details of the specific information they require about the data subject for the purpose stated in the form i.e., only the relevant information should be provided rather than all the information held – unless that is what has been asked for.

It should be established how the required information will be given to the police as it may simply require the police to view a record or they may need a copy of the information. When a copy of information is required this should be provided by secure means, preferably collected in person, and a signature provided as confirmation of receipt. Evidence of receipt is also required when information is sent by secure post or secure email.



## Appendix 7 - Equality Impact Assessment Form

### Section One

|  |  |  |  |              |                        |       |
|--|--|--|--|--------------|------------------------|-------|
| <b>Name of the Policy to be assessed:</b> Subject to Access Requests |  |  |  |              |                        |       |
| <b>Area responsible for completion:</b><br>Information Governance    |  |  | Is this a new policy? <b>NO</b><br>A refresh of an existing policy? <b>YES</b> |              |                        |       |
| <b>Name of individual completing EIA:</b><br>Richard Ward            |  |  | Contact details:<br>rward@cornwallhospice.co.uk                                |              |                        |       |
| 1. Policy Aim. Who is the policy aimed at?                           |  | All staff/volunteers but in particular those responsible for dealing with Subject Access Requests.                       |  |              |                        |       |
| 2. Policy Objectives.  |  | To deal effectively with Subject Access Requests in line with legislation.   |  |              |                        |       |
| 3. Policy intended outcomes.   |  | Effective management of Subject Access Requests  |  |              |                        |       |
| 4. How will you measure the outcome?                                 |  | Through the reporting of Subject Access Requests to the IG Forum   |  |              |                        |       |
| 5. Who is intended to benefit from the policy?                       |  | The Charity will benefit by being compliant with legislation, anyone wishing to make a Subject Access Request            |  |              |                        |       |
| 6. A) Who did you consult with?                                      |  | Workforce  | Patients   | Local groups | External organisations | Other |
|  |  | √  |  |              |                        |       |
| B) Please list any groups who have been consulted about this policy. |  | <b>Please record specific names of groups:</b><br>The Director of Clinical Services (with regard to the original policy) |  |              |                        |       |
| C) What was the outcome of the consultation?                         |  | Approval to publish.   |  |              |                        |       |

## 7. The Impact

Please complete the following table. If you are unsure/do not know if there is a negative impact you need to repeat the consultation step.

Are there concerns that the policy **could** have a positive/negative impact on:

| Protected Characteristic   | Yes | No                   | Unsure | Rationale for Assessment/Existing evidence  |
|--|-----|----------------------|--------|---|
| <b>Age</b>   |     | ✓                    |        | <p>This policy applies to all people and is therefore consistent in its approach regardless of any of the Protected Characteristics</p> |
| <b>Sex</b> (male, female, non-binary, asexual etc)   |     | ✓                    |        |   |
| <b>Gender reassignment</b>   |     | ✓                    |        |   |
| <b>Race/ethnic communities/groups</b>  |     | ✓                    |        |   |
| <b>Disability</b> (learning disability, physical disability, sensory impairment, mental health problems and some long term health conditions)  |     | ✓                    |        |   |
| <b>Religion/other beliefs</b>  |     | ✓                    |        |   |
| <b>Marriage and civil partnership</b>  |     | ✓                    |        |   |
| <b>Pregnancy and maternity</b>   |     | ✓                    |        |   |
| <b>Sexual orientation</b> (bisexual, gay, heterosexual, lesbian)   |     | ✓                    |        |   |
| <p><b>If all characteristics are ticked 'no' and this is not a major working or service change, you can end the assessment here as long as you have a robust rationale in place.</b></p> |     |                      |        |   |
| <b>Name of person confirming result of initial impact assessment and date:</b>   |     | Name<br>Richard Ward |        | Date<br>21 <sup>st</sup> June 2022  |