

Data Protection Impact Assessment (DPIA)

Section A - Key Information	
<i>please be as comprehensive as possible</i>	
Name of Project	Primary Care Quality Assured Spirometry
Project Reference Number	
Project Lead Name	Claire Morrissey
Project Lead Title	Strategic Transformation Manager – LTCs, Frail Elderly
Project Lead Contact Number & Email	clairemorrissey@nhs.net 01902 441774
Date completed	25/04/19
Information Asset Owner <i>The senior person(s) or organisation (e.g. Provider) responsible for the system/software/process</i>	Primary Care
Description of project:	<p>Spirometry measures the total amount of air that an individual can breathe out from their lungs and how fast they can blow it out. It is important that this procedure is carried out correctly to ensure that patients are diagnosed properly.</p> <p>The Association for Respiratory Technology and Physiology (ARTP) are the guardians of quality-assured diagnostic spirometry in the UK. Training is available to those who are novices to this measurement and a certification system is used to ensure that those who undertake diagnostic spirometry are performing and interpreting the results to internationally acceptable standards.</p> <p>The All Party Parliamentary Group (APPG) Report on inquiry into Respiratory Deaths (2014) called for a system to assess and certify the competence of all healthcare</p>

	<p>professionals undertaking and interpreting diagnostic spirometry. This document, which is part of a suite of resources relating to quality assured diagnostic spirometry, sets out a framework for taking forward the APPG recommendations.</p> <p>Key to this framework is the establishment of a National Register of certified healthcare professionals and operators. This Register will ensure that commissioners, employers, and patients can be assured that healthcare staff performing and/or interpreting diagnostic spirometry hold a valid, current certificate of competence. The Care Quality Commission¹ expects practices to be able to demonstrate:</p> <p>How they ensure spirometry equipment is cleaned and maintained according to the manufacturer’s guidance (KLOE S3 – reliable systems, processes and practices). That all staff who perform spirometry tests or interpret results are competent (KLOE E3 - staff skills, knowledge and experience). They can demonstrate this if the staff are on the National Register.</p> <p>The ARTP are also responsible for holding the national register of spirometry certified practitioners.</p>
<p>Will the project involve any data from which individuals could be identified (including pseudonymised data)?</p>	<p>Primary Care Providers will be in receipt of patient identifiable data</p> <p>CCG commissioning will not receive any patient identifiable data</p>

IF THE ANSWER TO THE ABOVE IS “NO” AND THE PROJECT WILL **NOT INVOLVE ANY DATA FROM WHICH AN INDIVIDUAL COULD BE IDENTIFIED, YOU DO NOT NEED TO ANSWER ANY FURTHER QUESTIONS AND A FULL DPIA IS NOT REQUIRED.**

Please forward only Section A to the IG Officer for Arden & GEM CSU.

Email: Kelly.Huckvale@nhs.net

The IG Officer will review and return the form with the below section completed, the form can then be presented to the relevant board for approval and sign off.

IF THE ANSWER TO THE ABOVE IS “YES” PLEASE COMPLETE SECTION B.

¹ <https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-83-spirometry-general-practice>

Sign Off / Approval (Section A only)

Title	Name	Date
Project Lead		
IG Officer		
IG Officer Comments		

The Project lead will then present section A of the DPIA to the relevant board for approval

Programme Board		Date:
Programme Board Chair		Date:

Section B – Screening Questions

Screening Questions	By CCG	By Provider
	YES or NO	YES or NO
Will the project involve the collection of new information about individuals?	YES or NO	YES or NO
Will the project compel individuals to provide new information about themselves?	YES or NO	YES or NO
Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information?	YES or NO	YES or NO
Will the project use information about individuals for a new purpose or in a new way that is different from any existing use? NB You will need to consider whether identifiable information may be required to evaluate the project.	YES or NO	YES or NO

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.	YES or NO	YES or NO
Will the project result in you making decisions about individuals in ways which may have a significant impact on them? e.g. service planning, commissioning of new services	YES or NO	YES or NO
Is the information to be used about individuals' health and/or social wellbeing?	YES or NO	YES or NO
Will the project require you to contact individuals in ways which they may find intrusive?	YES or NO	YES or NO

If the answer to ALL of the CCG and the Provider screening questions in section B are both answered “NO”, you do not need to complete Section C of the DPIA. Please return Section A and B to the IG Officer for sign off.

If the answer to ALL of the CCG screening questions is “NO” but one or more answer to any of the Provider screening questions is “YES”, then please liaise with the Provider to ensure a DPIA is completed (by the Provider) and the provider’s DPIA is evidenced to the CCG before commencement of the project/service.

Please return Section A and B to the IG Officer for Audit.

If the answer to any of the screening questions is “YES” for the CCG AND the Provider - a full DPIA will need to be completed.

Please liaise with the IG Officer for an initial discussion before completing Section C.

Sign Off / Approval (Section A & B only)

Title	Name	Date
Project Lead		
IG Officer		
IG Officer Comments		

The Project lead will then present Section A & B of the DPIA to the relevant board for approval		
Programme Board		Date:
Programme Board Chair		Date:

Section C - Full DPIA

C1. Key Contacts	
Key Stakeholder Names & Roles:	

C2. Use of personal information	
Description of data:	
What is the justification for the inclusion of identifiable data rather	

than using de-identified/anonymised data?	
Will the information be new information as opposed to using existing information in different ways?	
Will the project involve new or inherently privacy-invasive technologies e.g. Biometrics, facial recognition, Smart Device/ Apps?	
What is the legal basis for the processing of identifiable data? If consent, when and how will this be obtained and recorded?	
Who will be able to access identifiable data?	
Will the data be linked with any other data collections? How will this linkage be achieved and what is the legal basis for these linkages?	
What security measures will be used to transfer the data?	
What confidentiality and security measures will be used to store the data?	
How long will the data be retained in identifiable form? And how will it be de-identified? Or destroyed?	

<p>What governance measures are in place to oversee the confidentiality, security and appropriate use of the data and manage disclosures of data extracts to third parties to ensure identifiable data is not disclosed or is only disclosed with consent or another legal basis?</p>	
<p>Are procedures in place to provide individuals access to records on request under the subject access provisions of the Data Protection Act 2018 and General Data Protection Regulations?</p> <p>Is there functionality to respect objections/ withdrawals of consent?</p>	
<p>Are there any plans to allow the information to be used elsewhere either in the CCG, wider NHS or by a third party?</p>	

C3. 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.

Does any data flow in identifiable form? If so, from where, and to where?

Media used for data flow?

(e.g. email, fax, post, courier, other – please specify all that will be used)

C4. Consultation requirements

Part of any project is consultation with stakeholders and other parties.

In addition to those indicated “Key information, above”, please list other groups or individuals with whom consultation should take place in relation to the use of person identifiable information.

It is the project’s responsibility to ensure consultations take place, but IG will advise and guide on any outcomes from such consultations.

C5. Privacy Risks

List any identified risks to privacy and personal information of which the project is currently aware. Risks should also be included on the project risk register.

Risk Description (to individuals, to the CCG or to wider compliance)	Proposed Risk solution (Mitigation)	Is the risk reduced, transferred or accepted? Please specify.	Consequence Score 1= Low 1= Medium 3= High	Likelihood Score 1=Low 2= Medium 3=High	Risk Score (C x L)	Further detail if required

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C6. Further information

Please provide any further information that will help in determining privacy impact.

Once Section A, B and C has been completed, please send the completed DPIA to the Information Governance Officer who will review the impact and determine how the impact will be handled.

This will fall into three categories:

- 1. No action is required by IG excepting the logging of the Screening Questions for recording purposes.**
- 2. The questionnaire shows use of personal information but in ways that do not need direct IG involvement – IG may ask to be kept updated at key project milestones.**
- 3. The questionnaire shows significant use of personal information requiring IG involvement via a report and/or involvement in the project to ensure compliance.**

It is the intention that IG will advise and guide those projects that require it, but at all time will endeavour to ensure that the project moves forward and that IG is not a

barrier - unless significant risks come to light which cannot be addressed as part of the project development.

IG Sign Off / Approval (Section A, B & C only)

Title	Name	Date
Project Lead		
IG Officer		
IG decision (delete as applicable)	1. No action is required by IG excepting the logging of the Screening Questions for recording purposes. 2. The questionnaire shows use of personal information but in ways that do not need direct IG involvement – IG may ask to be kept updated at key project milestones. 3. The questionnaire shows significant use of personal information requiring IG involvement via a report and/or involvement in the project to ensure compliance.	
IG Officer Comments:		

Once the IG lead has approved the DPIA, it may be sent to the Data Protection Officer to review and add any comments or provide advice (if required)

DPO Advice (if required):	
DPO Name:	Date:

Once the DPO has reviewed the DPIA (where applicable), this will be issued to the Project Lead and IG Lead for audit.

The Project lead will then present the completed DPIA to the relevant board for approval

Board		
Board Chair		Date: