

Cambridgeshire County Council Public Health Directorate

Privacy Notice, February 2017

1. Background

- 1.1 The Cambridgeshire County Council Public Health Directorate has a wide range of responsibilities related to understanding and improving the health, wellbeing and care needs of local communities and ensuring that differences in health outcomes are tackled and addressed by working to improve the health of the most disadvantaged members of the community.
- 1.2 As such, along with all Local Authorities, we have a duty to improve the health of the population we serve. To help with this, we use data and information from a range of sources, including data collected at the registration of a birth or death or from records of hospital treatment, to understand more about the health and care needs and the population health outcomes in the our area.

2. Who do we hold information about?

- 2.1 We hold information about people we directly provide a service to and about people we have a responsibility for in respect of our Public Health and health improvement functions. This will include residents of Cambridgeshire, people receiving health and care services in Cambridgeshire and people who work or attend school in Cambridgeshire.
- 2.2 Under our statutory obligation to provide a public health advice service to our local NHS clinical commissioning group (CCG), this also extends to people resident in Cambridgeshire and Peterborough CCG's area or registered with one of the CCG's general practices.

3. What information do we hold?

- 3.1 With your consent, we collect some data to enable us to provide direct care services to you. The precise details held will depend on the services you are receiving from Public Health or an organisation commissioned to provide services on our behalf. The specific details collected will be explained when you start the relevant service. The standard identifiers used are: NHS number, Name, Date of Birth and Postcode.
- 3.2 We also receive some data, containing identifiers, to enable us to carry out Public Health functions that are not related to direct care. Some of these data are provided to us under specific data access agreements and an example of

this is provided below in section 7 about *Access to Office for National Statistics (ONS) births and deaths data*.

- 3.3 Information that relates to an identifiable living individual is called *personal data*. This could be one piece of data, e.g. a person's name or a collection of data, such as name, address and date of birth.

4. How do we collect this information?

- 4.1 This information is collected in one of two ways. It may be provided to us directly by a member of the public when they sign up to use a service we are providing. In some cases it may be shared with us by another organisation due to us having a role in a service they are providing, or as part of providing local data analysis to support decisions related to Public Health functions like the commissioning of services or improving and protecting the public's health. This will include organisations such as national and local NHS bodies, the Office for National Statistics, NHS Digital, other local authorities and schools.

5. How do we use the information?

- 5.1 **Primary use of data (direct care services).** This is where a service collects and uses information that identifies individual residents and users of public health services in Cambridgeshire and is known as 'personal data'. These personal data are required to enable us to carry out specific functions and services. There are 5 public health functions we must deliver by law that can involve the collection of personal data, which are:

- Helping protect people from the dangers of communicable diseases and environmental threats.
- Organising and paying for sexual health services.
- Providing specialist public health advice to primary care services: for example GPs and community health professionals.
- Organising and paying for height and weight checks for primary school children.
- Organising and paying for regular health checks for Cambridgeshire people.

We may commission or provide these services ourselves. Internal to the Public Health Department itself, primary use includes, but is not restricted to, the delivery and management of the following public health services:

- Smoking cessation services, including outreach health checks.
- Public health services for gypsies and travellers.

- 5.2 **Secondary use of data.** The Public Health Directorate also uses data and information as part of the planning, commissioning and monitoring of services. This is to help ensure that services meet the needs of people now and in the future, that we take steps to improve and protect the public's health, that we

work to reduce inequalities in health and that we provide an advisory service to the local NHS commissioner (NHS Cambridgeshire and Peterborough Clinical Commissioning Group). These functions include:

- Producing assessments of the health and care needs of the population, in Particular to support the statutory responsibilities of the:
 - Joint Strategic Needs Assessment (JSNA)
 - The Director of Public Health's Annual report
 - The local Health and Wellbeing Strategy
- Identifying priorities for action
- Informing decisions on (for example) the design and commissioning of services,
- To assess the performance of the local health and care system and to evaluate and develop them.
- To report summary statistics to national organisations
- Undertaking equity analysis of trends, particular for vulnerable groups
- To support clinical audits.
- To provide the mandated healthcare public health advice service to the local Clinical Commissioning Group (CCG).

In secondary use cases, the information is used in such a way that individuals cannot be identified and personal identifiable details are removed as soon as possible in the processing of the data. There is clear separation of data resources between those people nominated to process these data and those that use the data for secondary analysis. Depending on the circumstances, the data will be anonymised or de-identified (pseudonymised).

Anonymised data is information which does not identify an individual directly and which cannot reasonably be used to determine identity. Anonymisation does not allow information about the same individual to be linked in the same way that pseudonymisation does and is therefore more likely to be used for 'one-off queries' of data rather than consistent trend analysis.

Pseudonymisation (also known as de-identification) refers to the process of replacing personally identifiable information relating to a patient/service user with an alternative 'identifier' (such as a randomised reference number instead of their unique NHS number) in order that their data can be analysed appropriately (for example as part of trend analysis) without their personal identifiable data being disclosed unnecessarily.

Public Health's policy on Anonymisation and Pseudonymisation can be found online here:

http://www.cambridgeshire.gov.uk/download/downloads/id/5135/pseudonymisation_and_anonymisation_of_data_policy.pdf.

6. How do we keep information secure and who do we share it with?

- 6.1 We are required to comply with the Data Protection Act (1998) to ensure information is managed securely and this is reviewed every year as part of our

NHS Information Governance Toolkit assessment (please see <https://www.igt.hscic.gov.uk/>). Information is strictly made available only to key professionals who have a business need to see it. All staff are required to undertake regular training and to comply with policies and procedures around Data Protection, information security, confidentiality and the safe handling of information.

- 6.2 We only keep hold of information for as long as is necessary. This will depend on what the specific information is and the agreed period of time it may need to be referred to for a legal or business reason.
- 6.3 Information is only shared with other organisations where their involvement is required to provide a service, for us to comply with our Public Health responsibilities or where we are under a legal requirement to share it. The organisations we may need to share information with include organisations such as national and local NHS bodies, the Office for National Statistics, NHS Digital, other local authorities and schools. Any sharing will be assessed to ensure the organisations will meet the same standards of security and confidentiality as we do.

7. Access to ONS births and deaths data

7.1 Introduction

NHS Digital require us to include further specific detail in our Privacy Notice about access to, and use of, ONS Births and deaths data. ONS mortality data are supplied to us via the Primary Care Mortality Database (PCMD) and the PCMD holds data about people who have died in our area, as provided at the time of registration of the death, along with additional GP details, geographical information, details about the cause of death and associated administrative details. ONS births data holds information about births in our area, which is collected at birth registration, and is supplied to us in securely emailed text files.

Our access to these data is by application to NHS Digital and is available for use by Public Health analysts in local authorities for statistical purposes to support Public Health functions. Data supply and management is covered by this agreement with NHS Digital.

The terms of this agreement stipulates that data are supplied to us under specific legislation and for specific purposes. Access is permitted under section 42 (4) of the Statistics and Registration Service Act 2007, as amended by section 287 of the Health and Social Care Act 2012, for the purpose of statistical analysis for Local Authority Public Health purposes. NHS Personal Confidential Data (PCD) is released under regulation 3 of the Health Service (Control of Patient Information) Regulations 2002 and can only be used for public health purposes.

This ONS births and deaths data are of significant value to the Local Authority as it enables our analysts to respond to local public health needs. Evaluations of births and deaths in our local area allows us to perform the following:

- Measuring the health, mortality or care needs of the population, for specific geographical area or population group;
- Planning, evaluating or monitoring health and social care policies, services or interventions; and,
- Protecting or improving the public health, including such subjects as the incidence of disease, the characteristics (e.g. age, gender, occupation) of persons with disease, the risk factors pertaining to sections of the population, or the effectiveness of medical treatments.

7.2 Identifiers included in data relating to deaths (PCMD)

Data relate to the deceased, the family of the deceased, people involved in the care of the deceased and people involved in the administration of the death and include:

- Deceased's address
- Postcode of usual residence of the deceased
- Post code of place of death
- NHS number
- Date of birth
- Date of death
- Maiden name (PID field specified by NHS Digital / ONS but not present in current PCMD).
- Name of certifier
- Name of coroner
- Cause of death (ICD10 coded cause of death will be retained in the data set used by PCMD data processors and analysts, all having completed the relevant approvals).

7.3 Identifiers included in data relating to births

Data relate to the birth, the mother of the new born and administrative details about the birth and include:

- Address of usual residence of mother
- Place of birth
- Postcode of usual residence of mother and postcode of birth of child
- NHS number of child
- Date of birth of child

7.4 Data processing and secondary analysis

In order to gain access to, process, store and analyse births and deaths data appropriately and safely we do the following:

- Access to the births and deaths data, whether identifiable data or anonymised data, is restricted to those staff members who have signed the appropriate NHS Digital data access agreements. The data are stored on our IT network at a location that is restricted to those staff.

- Data are encrypted and are password protected.
- Access to the source identifiable data is restricted to those staff who have been nominated as data processors for the births and deaths data.
- For those staff engaged in secondary analysis, we have removed the identifiable data, as this is not routinely required for the permitted uses of the data.
- We have created a link identifier between the de-identified data and the identifiable source data, but access to re-identification is restricted to our nominated data processors.
- Publication of the outcome of secondary analysis is limited to permitted purposes, is derived from de-identified data and is restricted to the aggregate results of that analysis in line with our Data Access Agreement and ONS rules on the uses of health based statistical data and disclosure.
- The information are only used for the purpose(s) described above and use will meet the criteria and principles established in the ONS *Disclosure Control Guidance for Birth and Death Statistics* (<http://www.ons.gov.uk/ons/guide-method/best-practice/disclosure-control-policy-for-birth-and-death-statistics/index.html>).
- We are not permitted to, or have no business need to, link the deaths and births data directly with any other data. We do, however, assimilate the data with other sources of data, information and evidence in order to carry out our Public Health responsibilities.

Further details about the deaths data (PCMD) can be found on the NHS Digital website: <http://content.digital.nhs.uk/pcmdatabase>

8. Opting out

- 8.1 You have the right to opt out of Cambridgeshire County Council Public Health Service receiving or holding your personal identifiable information. There are occasions where service providers will have a legal duty to share information, for example for safeguarding or criminal issues. The process for opting out will depend on the specific data is and what programme it relates to. For further information, please contact the Information Governance team by the contact details provided below.

9. Accessing your information and further queries

- 9.1 The Cambridgeshire Public Health Service is part of Cambridgeshire County Council. The Council is registered as a Data Controller with the Information Commissioner's Office (Registration Number Z4849790) under the Data Protection Act (1998). Further details about how the Council processes personal data can be found in our registration on the Information Commissioners website at <https://ico.org.uk/ESDWebPages/Entry/Z4849790>
- 9.2 The Council's NHS Information Governance Toolkit status can be found at <https://www.igt.hscic.gov.uk/>.

- 9.3 If you would like to see the information that is held about you, you can make a request for this to the Council's Information Governance Team. They can also be contacted if you have a query or complaint about the use of your information. Information Governance Team, Cambridgeshire County Council, SH1001, Shire Hall, Castle Hill, Cambridge, CB3 0AP. E-mail: data.protection@cambridgeshire.gov.uk Telephone: 01223 699137. http://www.cambridgeshire.gov.uk/info/20044/data_protection_and_foi/148/information_and_data_sharing/4
- 9.4 The Information Commissioner's Office is the national regulator for compliance with the Data Protection Act who can provide independent guidance: <https://ico.org.uk/> .

Document control

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