Data Protection Impact Assessment

What is the name of the project, system or process that this DPIA document relates to?	Advice & Guidance (Eclipse Live) – centrally funded
Key contact name:	
Key contact details – email, landline and mobile	

This questionnaire is a mandatory document requiring completion as part of a project, whether it is procuring and implementing a new system or a change in business process for example, to identify any impact on the handling of personal confidential data (PCD) irrespective of whom it relates to, e.g. service users, staff, customers or third party contractors.

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1. Introduction

This document details the process for conducting a Full Data Protection Impact Assessment (fDPIA) and the involvement of Information Governance through a project lifecycle to ensure that, where necessary, personal and sensitive information requirements are complied with and risks are identified and mitigated. If you need more information on this document please refer to the guidance document which should have been supplied when you completed the DPIA Screening Questions.

2. Data Protection Impact Assessment

2.1. Section One

Please complete with as much information as possible as this will assist in assessing whether further action is required.

Information Asset/Project Name	Advice & Guidance (Eclipse Live)
Directorate/Department	Medicines Optimisation/Patient Safety
Organisation	
Is this a change to an existing process?	No
Assessment Completed By	Name: Title: Dept: Landline: Mobile: Email:
Date completed	
Information Asset Owner(s) The senior person(s) responsible for the system – Director or AD level	Name: Title: Dept:

	Landline: Mobile: Email:
Information Asset Administrator(s) Usually a manager or super user of the system. Reports to and supports the IAO	Name: Title: Dept: Landline: Mobile: Email:

Project/Change Outline - What is it that is being planned? If you have already produced this as part of the project's Project Initiation Document or Business Case etc. you may make reference to this, however a brief description of the project/process being assessed is still required.

Implementation of the NHS Digital Assured Advice & Guidance (Eclipse Live) subsidiary service from Prescribing Services Ltd. The service will deliver a central de-personalised patient database, weekly admission avoidance alerts for Practices and specific clinical project implementation tools, such as Diabetes Complete. The service is enabled through weekly data extracts from GP practice clinical systems and transmission of extract files to Prescribing Services Ltd where thousands of algorithms will be run against the individual patient's Read codes, medication lists and blood results; allowing clinical interventions to be made that prevent a significant medical emergency by generating alerts that are sent to Practices. De-personalised data is made available to the CCG and clinical specialists.

Purpose / Objectives - Why is it being undertaken? This could be the objective of the process or the purpose of the system being implemented as part of the project.

Proactive identification of 'at risk 'patients and sub-optimal clinical activity enables improvements in health outcomes and reduced costs to the healthcare system. Advice & Guidance (Eclipse Live) is an essential part of the develop a new model of care aligned to wider NHS priorities.

What is the purpose of collecting the information within the system? For example, patient treatment, patient administration, research, audit, reporting, staff administration etc.

Advice & Guidance (Eclipse Live) is a risk stratification software system in prescribing and screening that improves patient safety by analysing records of patients, to identify those most at risk of emergency admissions.
The system runs hundreds of admission avoidance query sets against all the extracted patient data within the CCG to identify patients at high risk of emergency admissions, based on MHRA, NICE, BNF, QOF and national best practice guidelines, identifying at-risk patients and feeding alerts back to GP Practices. This risk stratification tool differs from other available tools in that we prioritise the identification of those patients with reversible risk.

What are the potential privacy impacts of this proposal - how will this change impact upon the data subject? Provide a brief summary of what you feel these could be, it could be that specific information is being held that hasn't previously or that the level of information about an individual is increasing.

Through the PSL internal DPIA, the following *inherent* privacy risks have been identified (these are inherent to the processing and have been mitigated through various measures identified within the DPIA);

Controllers and Processors:

There is a risk that the Controllers will not be subject to appropriate agreements in order to systematically share data with one another.

There is a risk that the Processing Contract in place between PSL and its healthcare providers does not comply with GDPR Article 28 or s 59 DPA 2018.

There is a risk that sub processors may not be appropriately notified and authorised to Controller customers and therefore to data subjects.

Lawful Processing:

There is a risk that the appropriate obligations of secrecy are not in place for PSL as a Processor.

There is a risk that the appropriate legal gateways have not been established by the Controllers.

Data Minimisation:

There is a risk that the data set being extracted in excessive for the identified purpose.

There is a risk that changes to the project might result in "data creep" and inclusion of data sets that are not strictly necessary

Transparency and Fairness:

There is a risk that data subjects are not informed in relation to the project and are not provided with the opportunity to raise queries or object

There is a risk that PSL may not be able to effectively assist Controllers with their transparency obligations

Retention of Personal Data:

There is a risk that PSL are not prepared to respond swiftly and accurately to return or destroy data in the event of exit from the contract

Right to Access:

There is a risk that PSL is not adequately prepared to assist Controller customers with their obligations in relation to data subject access

Right to Rectification / Restriction

There is a risk that PSL are not prepared to deal with requests for rectification or restriction appropriately

Right to Objection:

There is a risk that PSL is not adequately prepared to assist Controller customers with their obligations in relation to data subject objections

Rights in Relation to Auto Decision Making and Profiling:

There is a risk that, as the project develops and technology advances, the threshold for the rights around automated decision making and profiling might be met.

Technical and Organisational Measures:

There is a Risk that PSL will not have appropriate Technical and Organisational Measures in Place to Protect Personal Data.

Governance Arrangements:

There is a risk that the project will not have sufficient governance arrangements to monitor privacy risks through the entire project lifecycle.

Provide details of any previous Privacy / Data Protection Impact Assessment or other form of personal data compliance assessment done on this initiative. If this is a change to an existing system, a DPIA may have been undertaken during the project implementation

PSL have completed an internal DPIA via an external Data Protection Consultant. This will be provided separately.

2.2. Section Two

In order to understand the potential privacy risks, it is important to know the types of data that is held and/or shared.

Personal	Please Tick All that Apply	Sensitive	Please Tick All that Apply
Name	☐	Racial / ethnic origin	☐
Address (home or business)	☐	Political opinions	☐
Postcode	☐	Religious beliefs	☐
NHS No	☐	Trade union membership	☐
Email address	☐	Physical or mental health	X read codes
Date of birth	☐	Sexual life	☐
Payroll number	☐	Criminal offences	☐
Driving Licence [shows date of birth and first part of surname]	☐	Biometrics; DNA profile, fingerprints	☐
		Bank, financial or credit card details	☐
		Mother's maiden name	☐
		National Insurance number	☐
		Tax, benefit or pension Records	☐
		Health, adoption, employment, school, Social Services, housing records	X Health and social care read codes
		Child Protection	☐
		Safeguarding Adults	☐

Additional data types (if relevant)	Clinical System Identifier

2.3.   Section Three

Please answer the questions below as fully as possible. If you are unsure of how to answer the question, please contact the relevant IG Team. If there is supporting information that relates to any of the questions, which you feel would be informative, indicate within the comments section and send this along with the completed assessment.

Assessment Questions	Yes/ No	Comments	Risk Score	Outcome
1. Is it likely that the project will involve processes that are subject to DH guidance/legislation/Caldicott principles/Medical Record Standards? (if you are unsure, please look at the list below, as examples of what process types would be included).	Yes	Health information subject to Caldicott Principles, Health and Social Care (Quality and Safety) Act 2015.		

If you have answered 'Yes' to the above, please indicate (with an X) if the following activities are included within the project: Recording of Demographic data Sharing of Patient information Diagnostic activity results Reporting of patient activity Transfer of Patient Identifiable Data to other systems, Patient, GP or other Third parties. Other (Please State)	☒ ☒ ☒ ☒ ☒ ☐	All patient data processed as part of this service is de-identified and presented in identified form at the point of care i.e. in the GP Practice In addition, all the data is existing data extracted from the Principal Clinical Systems		

Category		Yes/No	Comments	Risk Score	Outcome
Technology	**2.**Does the project involve new or inherently privacy-invasive technologies e.g.	Yes	Algorithms are being applied, whilst these do not appear to meet the GDPR / DPA threshold for automated decision making, they include technologies that may not be understood by the patient population.		

	biometrics or facial recognition?			

In order to answer this question, considerations include:
- whether all of the information technologies that are to be applied in the project are already well-understood by the public;
- whether their privacy impacts are all well-understood by the organisation, and by the public;
- whether there are established measures that avoid negative privacy impacts, or at least reduce them to the satisfaction of those whose privacy is affected; and
 - whether all of those measures are being applied in the design of the project.

Justification	**3.**Is the justification for the new data-handling unclear or unpublished?	No	Risk Stratification is well established and the Advice & Guidance (Eclipse Live) service has completed NHS Digital assurance and is available across England.	

Individuals are generally much more accepting of measures, even measures that are somewhat privacy-intrusive, if they can see that the loss of privacy is balanced by some other benefits to themselves or society as a whole. On the other hand, vague assertions that the measures are needed 'for security reasons', or 'to prevent fraud', are much less likely to calm public disquiet.

Identity	**4.**Will the project require anyone to contact individuals in ways that they may find intrusive?	No		
	5.Does the project involve an additional use of an existing identifier?	Yes	An Eclipse Identifier is produced for the purposes of de-identification at Processor level	
	6.Does the project involve use of a new identifier for multiple purposes?	No	As above, one purpose	

	7. Does the project involve new or substantially changed identity authentication requirements that may be intrusive or onerous?	No				
	8. Will the project result in anyone making decisions or taking action against individuals in ways which could have a significant impact on them?	No	In this case, there does not appear to be an impact on the legal rights of the individual nor any significant negative effect for those having decisions made about them. Where a clinician has identified risk and feel an intervention or care option is appropriate, the individual being profiled is likely to benefit from any decisions made. Additionally, the data subject retains choice and control about whether to take options provided to them such as referral to an alternative healthcare provider.			

The public understands that an identifier enables an organisation to collate data about an individual, and that identifiers that are used for multiple purposes enable data consolidation. They are also aware of the increasingly onerous registration processes and document production requirements imposed by organisations in recent years. From the perspective of the project manager, these are warning signs of potential privacy risks.

Data	**9.** Will the project involve the collection of new information about individuals?	No				
	10. Will the project compel individuals to provide information about themselves?	No				
	11. Will the project result in the handling of a significant amount of new data about each	Yes	Although GP Practices will already use case finding methodologies and CCGs are undertaking risk stratification, this project is new and unique as it utilises existing data in a de-identified format to applies automated &			

	person, or are there plans to use the information for a purpose it is not currently used for, or in a way it is not currently used?		standardised algorithms to identify patients most at risk and in need of review.		
	12. Will the project result in the handling of new data about a significant number of people, or a significant change in the population coverage?	No			
	13. Does the project involve new linkage of personal data with data in other collections, or significant change in data linkages?	No			
	14. What considerations have been made regarding the adequacy, relevance and necessity for the collection of each field of personal confidential data for the new system/process?		The data set that is extracted from source systems for Advice and Guidance (Eclipse Live) is; Clinical System Identifier Age in years Gender Read code		

	15. Please describe what has been done and the outcome.		Event date Value (where present) Medication Name Date of issue Medication type (Acute / repeat) Dosing information This has been identified as the minimum necessary data set to achieve the intended purposes for the initiative. This is reviewed periodically with the customer to ensure that it remains adequate. Beyond agreement of the data sets, PSL has put in place measures to control access to the data, such that it is access is proportionate. This is assured through appropriate clauses in PAL employment contracts, data protection training, role-based access and audit. It is presumed that similar controls are in place for Controller customers at the point of access	
*The degree of concern about a project is higher where data is transferred out of its original context. The term 'linkage' encompasses many kinds of activities, such as the transfer of data, the consolidation of data-holdings, the storage of identifiers used in other systems in order to facilitate the future searches of the current content of records, the act of fetching data from another location (e.g. to support so-called 'front-end verification'), and the matching of personal data from multiple sources.*
Data Handling	**16.** Does the project involve complex data controller in common arrangements that	No		

	may prove difficult to administer?				
	17. Does the project involve new or changed data collection policies or practices that may be unclear or intrusive?	No			
	18. Does the project involve new or changed data quality assurance processes and standards that may be unclear or unsatisfactory?	No			
	19. Does the project involve new or changed data security arrangements that may be unclear or unsatisfactory?	Yes	The data will be extracted and held by PSL as a Data Processor. There is likely a need to ensure that the security arrangements for this are made clear to the data subject and compliance evidence can be provided by PSL on request.		
	20. Does the project involve new or changed data access or disclosure arrangements that may be unclear or permissive?	No	The data will be extracted and held by PSL as a Data Processor. There is likely a need to ensure that the access arrangements for this are made clear to the data subject and compliance evidence can be provided by PSL on request.		
	21. Does the project involve new or	No	Advice and Guidance (Eclipse Live) creates an aggregated pool of data already held by stakeholder parties and PSL is merely processing this data		

	changed data retention arrangements that may be unclear or extensive?	for the purposes of extraction, application of algorithms and display at source. In accordance with Schedule 1 and 2 of the Data Processing Contract, PSL will act at the discretion of the Controller to return the data or securely destroy it in line with international standards of destruction.	
	22. Does the project involve changing the medium of disclosure for publicly available information in such a way that the data becomes more readily accessible than before?	No	
	23. Will information about individuals be disclosed to organisations or people who have not previously had routine access to the information?	Yes	PSL have not previously had access to the described information. Their "obligation of secrecy" will be managed through an Art 28 / DPA 2018 s 59 compliant contract. An RBAC schedule will be produced for the project to identify the PSL roles that will access, alter, disclose or delete data on behalf of the Controller customer	

24. Are other organisations involved in the processing of the data?	If yes, please list below.			

Organisation name and Data Protection Register number.	**Are they a Data Controller (DC) or Data Processor (DP)?**	**Compliance with the Data Security & Protection Toolkit (previously Information Governance Toolkit)**		
		Completed Y/N	**Score (%)**	**As at: (Date)**

Individual Practices	**Data Controllers**			
CCG	**Joint Data Controllers**			
Prescribing Services Ltd	**Data Processor**	**Y**	**66%**	**27/09/2017**

Exemptions	**25.** Will the project give rise to new or changed data-handling that is in any way exempt from legislative privacy protections?	No	Risk stratification is subject to an exemption to common law y virtue of s 251 but this is not determined to be a new process – but rather new technology to support an existing purpose.

2.4. Section Four

This section relates to work that may be included within the overall project plan however if some planning has already taken place it should be recorded here.

Questions for the procurement / development of a data collection system.	
1. Has a data flow mapping exercise been undertaken? If yes, please provide a copy If no, please ensure one is included within the overall project plan	No
2. Does the system involve new or changed USER access controls and/or authentication requirements?	PSL have not previously had access to the described information. Their "obligation of secrecy" will be managed through an Art 28 / DPA 2018 s 59 compliant contract. An RBAC schedule will be produced for the project to identify the PSL roles that will access, alter, disclose or delete data on behalf of the Controller customer
3. Does the system allow different levels of access for different job roles?	*YES* An RBAC schedule will be produced for the project to identify the PSL roles that will access, alter, disclose or delete data on behalf of the Controller customer
4. Are there any new or additional reporting requirements for this project? If yes, please provide **full** details If not yet considered please confirm it will be included in the overall project plan.	*Determined by Controller customers*
5. Does the system affect any current policies in relation to the collection and management of PCD – in so far as it may require changes to policy?	*Determined by Controller customers*
6. Who provides the data that will populate the system?	The data subjects are patients registered at the participating GP practices

7.	How will you ensure that the individuals whose information will be processed have been informed of all the processing[1] and disclosures that will take place?	It is presumed that fair processing / transparency materials will be put in place by Controllers to make the patient population are aware of Advice and Guidance (Eclipse Live) and to ensure that the "reasonable expectations" of the population align with that of the project. Additionally, this impact assessment may be linked to from Controller materials for patients who wish to find out more about the arrangements of PSL as Processor.
8.	Will individuals be asked for consent for their information to be accessed, collected and/or shared?	The lawful basis for processing is out of scope for PSL as Processor.
9.	If NO to Q8, provide list the reason(s) for not gaining consent e.g. relying on an existing agreement, consent is implied, the project has Section 251 approval or other legal basis,	The following assumptions are made; • The data being collected and processed is personal data to be used in connection with public tasks, particularly the delivery of healthcare to individuals (in the first instance) (rather than consent) • Case finding, is compatible with delivery of healthcare and does not require an additional lawful basis • Risk Stratification purposes are supported by s 251 • NHS Digital mandated data processing is likely legitimised supported by "legal obligation" as a legal gateway
10.	If data is to be shared outside of the organisation will individuals be able to opt-out? How will the opt-out be recorded e.g. on the system, manual	Currently, where a patient has already "opted out" of their information being processed beyond their GP practice, these are excluded through automatic recognition of the related "opt out" read codes. If the patient has an opt out read code assigned to them and they don't have a more recent opt in code their data isn't taken. Sensitive codes are also removed at source and Prescribing Services undertake an additional check on arrival, deleting any data that may have been extracted inappropriately.
11.	If this project relates to the disclosure of information, how will obligations to share be met?	Out of scope for PSL as Processor

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[1] Processing (as defined in the Data Protection Act 2018) in relation to information, means an operation or set of operations which is performed on information, or on sets of information, such as (a) collection, recording, organisation, structuring or storage, (b) adaption or alteration, (c) retrieval, consultation or use, (d) disclosure by transmission, dissemination or otherwise making available, (e) alignment or combination, or (f) restriction, erasure or destruction.

12. Who will have access to the identifiable information from the system/process and how?	Controller customers PSL as Processor (de-identified form) Data subjects (information access requests)	
13. Have you considered an audit trail and what information it will capture? Examples include: all changes made to a record, who made the changes, who has viewed the record.	Basic audit functionality, allowing users to see who has accessed Advice and Guidance (Eclipse Live) is available at user interface level. More granular reports and audits can be produced by PSL on request or proactively by prior arrangement.	
14. What procedures are in place or planned for the rectifying of inaccurate data, blocking the use of data by individual request or court order?	PAL has a documented process for managing such requests to ensure that they are managed within the legal timeframe and that appropriate information is provided to the Controller. Additionally, PSL is currently reflecting on whether the system is designed in such a way that it permits restriction of records whilst rectification requests are underway. Once confirmed, the protocol will include consulting with clinicians to ensure that patient safety is not compromised while data elements are restricted / unavailable.	
15. Is the new system replacing a system which is currently in use? If YES, what is the name of the old (legacy) system?	*Determined by Controller customers*	
16. If yes to Q15, is all the data being migrated to the new system? If yes, what has been done/will be done to ensure that the data is of good quality, appropriate, adequate and not excessive.	*Determined by Controller customers*	
17. If no to Q15, what arrangements have been/will be made to ensure that controlled access is still available to records which have not reached their retention period.	*Determined by Controller customers*	
18. What arrangements are in place to manage the legacy system – is it being decommissioned, what is happening to the data it contains, do some staff need	*Determined by Controller customers*	

	to continue to have access to it, how long will it be maintained etc.	
19.	What considerations have been made/planned regarding the destruction of any records as part of this project?	Advice and Guidance (Eclipse Live) creates an aggregated pool of data already held by stakeholder parties and PSL is merely processing this data for the purposes of extraction, application of algorithms and display at source. In accordance with Schedule 1 and 2 of the Data Processing Contract, PSL will act at the discretion of the Controller to return the data or securely destroy it in line with international standards of destruction
20.	What is the proposed model for the storage of, and access to, records? NB some of the options listed may go against our policy(s) and so will be highlighted in the report produced from this questionnaire	☐ Hosted on a third party server and accessed via internet/portal
21.	If any information will be stored off-site (off-site means outside the organisation and its computer network) please provide details of information security arrangements	Access to systems and assets containing Advice and Guidance (Eclipse Live) personal data is controlled, incorporating the principle of least functionality Physical access to Advice and Guidance (Eclipse Live) information assets is managed and protected Access permissions for Advice and Guidance (Eclipse Live) information assets are managed, incorporating the principles of least privilege and separation of duties Audit/log records for Advice and Guidance (Eclipse Live) access are determined, documented, implemented, and reviewed in accordance with PSL policy All PSL users of systems and assets containing Advice and Guidance (Eclipse Live) personal data are informed and trained Privileged users of systems and assets containing Advice and Guidance (Eclipse Live) personal data understand roles & responsibilities

		All users of systems and assets containing Advice and Guidance (Eclipse Live) personal data will be subject of obligations of secrecy by virtue of appropriate confidentiality clauses in employment contracts
		Protections against data leaks, cyber threats and incidents for Advice and Guidance (Eclipse Live) are implemented
		Personal data is encrypted and de-identified in transit and at rest
		Information Security and Cybersecurity roles and responsibilities for PSL are established and involved in the Advice and Guidance (Eclipse Live) Project
		Backups of Advice and Guidance (Eclipse Live) data are conducted, maintained, and tested periodically
		Response plans (Incident Response and Business Continuity) and recovery plans (Incident Recovery and Disaster Recovery) for Advice and Guidance (Eclipse Live) are in place and managed
		A Data Processing Contract has been produced that aligns PSL as a Processor with the requirements of GDPR Article 28 and s 59 DPA 2018 including with respect to measures to protect data and incident management
22.	Will information be sent off-site (off-site means outside the organisation and its computer network)?	Yes, information will be transferred to PSL server for application of algorithms
23.	Please state by which method the information will be transported	Hyper Text Transfer Protocol Secure (HTTPS) (end to end communications are encrypted)
24.	Is any personal information of any kind being transferred to a foreign country?	*No*

25.	If yes to Q24, Specify the data that is to be transferred abroad	NA
26.	Is the system to be covered by existing Information Security and other policies?	*Determined by Controller customers*
27.	Is disaster recovery and contingency planning being put in place to manage the effect of any unforeseen events?	*Yes, PSL will provide detail of the frequency and nature of the data backup schedule and the protocol for Controller customers and PSL in the event of an incident that requires recovery*
28.	Are there procedures in place to recover data which may be damaged through - Human error - Computer virus - Network failure - Theft - Fire - Flood - Other disaster	Yes, PSL will provide detail of the frequency and nature of the data backup schedule and the protocol for Controller customers and PSL in the event of an incident that requires recovery
29.	Has the requirement to apply clinical risk management to the deployment of patient based systems been addressed and in what ways?	*TBC*
30.	What assurances will be received to ensure Mandatory Staff Training is in place for the following: • Data collection: • Use of the System or Service: • Collecting Consent: • Information Governance?	Controller mandatory training is largely out of scope for PSL however, PSL staff are provided with regular Information Governance Training and training materials for the project itself will be provided as part of implementation.

NB – Record retention is important and fundamental to DPA, though not included in DPIA questions; provision for retention and destruction should be made in line with normal care record retention requirements

2.5. Section Five - Risk– To be completed by the IG Team Only

DPIA Assessment ID:

Please list the risks identified from Section, the scores and any actions that must be undertaken.

Risk Identified	Consequence Score 1 = Low 1 = Medium 3 = High	Likelihood Score 1 = Low 2 = Medium 3 = High	Risk Score (C x L)	Action	Owner	Target Date

2.6. Section Six – DPA 2018 / GDPR – To be completed by the IG Team Only

Does the DPIA meet the following legal requirements?

	Assessment of Compliance

Principle 1 – Lawfulness, fairness and transparency	
Principle 2 – Purpose limitation	
Principle 3 – Data minimisation	
Principle 4 – Accuracy	
Principle 5 – Storage limitation	
Principle 6 – Integrity and confidentiality (security)	
Principle 7 – Accountability	

2.7.   Section Seven – Caldicott – To be completed by the IG Team Only

	Assessment of Compliance
Principle 1 – Justify the purpose(s) of using confidential information	
Principle 2 – Only use it when absolutely necessary	
Principle 3 – Use the minimum that is required	
Principle 4 – Access should be on a strict need-to-know basis	
Principle 5 - Everyone must understand his or her responsibilities	

Principle 6 – Understand and comply with the law	
Principle 7 - The duty to share information can be as important as the duty to protect patient confidentiality	

2.8. Statement of Assessment

Statement: Please select the appropriate statement and delete the words **in bold** that do not apply. The other statements should then be deleted.	Assessed By	Date
The privacy risks for this project/change have been assessed, based upon the information provided, and it is felt that there is a low risk of any impact to the privacy of the data subjects. Recommendations **have/have not** been made within this section which should be actioned to further reduce or restrict the privacy risks.		
The privacy risks for this project/change have been assessed, based upon the information provided, and further **Data Protection/Legal Compliance and/or small scale Privacy Impact checks** were undertaken. Recommendations **have/have not** been made within this section which should be actioned to further reduce or restrict the privacy risks.		
The privacy risks for this project/change have been assessed, based upon the information provided, and a **full scale Data Protection Impact Assessment** should be undertaken. Actions have been included above which must be actioned before the project/change can be approved by the SIRO.		

SIRO/Caldicott Guardian Statement of Assessment – for Full scale Data Protection Impact Assessments only

Statement – Please remove **text in bold** that is not applicable	Please Tick	Date
Having reviewed the privacy impact risks, assessment recommendations and/or DPIA Report, I confirm that this project/change **can/cannot** proceed: The reasons for this are: • **It is crucial to the service delivery within the Trust/The privacy risks identified would impact negatively on the service delivery within the Trust** • The mitigating recommendations, once completed, **will/will not** reduce the likelihood of the privacy risks occurring • Reassurance has been sought from the Information Commissioners Office and the Information Governance Alliance, who have confirmed that we **are able to proceed/should not proceed** with this project/change.	☐ ☐	

| | ☐ | |

Once completed, please send the completed form back to the originator and keep a copy for record purposes.