

Privacy Notice

Payments

Contract holding GPs in the UK receive payments from their respective governments on a tiered basis. Most of the income is derived from baseline capitation payments made according to the number of patients registered with the practice on quarterly payment days. These amounts paid per patient per quarter vary according to the age, sex, and other demographic details for each patient. There are also graduated payments made according to the practice's achievement of certain agreed national quality targets known as the Quality and Outcomes Framework (QOF), for instance the proportion of diabetic patients who have had an annual review. Practices can also receive payments for participating in agreed national or local enhanced services, for instance opening early in the morning or late at night or at the weekends. Practices can also receive payments for certain national initiatives such as immunisation programmes and practices may also receive incomes relating to a variety of non-patient related elements such as premises. Finally, there are short term initiatives and projects that practices can take part in.

Practices or GPs may also receive income for participating in the education of medical students, junior doctors, and GPs themselves as well as research².

To make patient-based payments basic and relevant necessary data about you needs to be sent to the various payment services. The release of this data is required by English laws¹.

Practices may forward your prescription to the NHS Business services authority (NHSBSA) as stated on your prescription form. This is required as part of contract terms and from this the practice may receive payment for providing your medical products.

We are required by Articles in the General Data Protection Regulations to provide you with the information in the following 9 subsections.

1) Data Controller contact details	Elizabeth Perryman at General Practice Alliance, 129 Hazeldene Rd, Northampton, NN2 7PB
2) Data Protection Officer contact details	Elizabeth Perryman at General Practice Alliance, 129 Hazeldene Rd, Northampton, NN2 7PB
3) Purpose of the processing	To enable GPs to receive payments. To provide accountability.
4) Lawful basis for processing	The legal basis will be: <i>Article 6(1)(c) "processing is necessary for compliance with a legal obligation to which the controller is subject."</i>

	<p>Article 6(1)(e) ‘...necessary for the performance of a task carried out in the public interest or in the exercise of official authority.’</p> <p>Article 9(2)(h) “processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services on the basis of Union or Member State law or pursuant to contract with a health professional and subject to the conditions and safeguards referred to in paragraph 3.”</p> <p>We will also recognise your rights established under UK case law collectively known as the “Common Law Duty of Confidentiality”</p>
5) Recipient or categories of recipients of the shared data	The data will be shared with Health and care professionals and support staff in this surgery and at hospitals, diagnostic and treatment centres who contribute to your personal care.
6) Rights to object	You have the right to object to some or all the information being processed under Article 21. Please contact the Data Controller or the practice. You should be aware that this is a right to raise an objection, that is not the same as having an absolute right to have your wishes granted in every circumstance.
7) Right to access and correct	You have the right to access the data that is being shared and have any inaccuracies corrected. There is no right to have accurate medical records deleted except when ordered by a court of Law.
8) Retention period	The data will be retained in line with the law and national guidance. https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/records-and-document-management-policy or speak to us.
9) Right to Complain.	You have the right to complain to the Information Commissioner’s Office at this link: https://ico.org.uk/global/contact-us/

1, NHS England’s powers to commission health services under the NHS Act 2006 or to delegate such powers to CCGs and the GMS regulations 2004 (73)¹

2, For more information about payments the English GPs please see; <https://digital.nhs.uk/NHAIS/gp-payments> , <https://digital.nhs.uk/catalogue/PUB30089> and <http://www.nhshistory.net/gppay.pdf>

* "Common Law Duty of Confidentiality", common law is not written out in one document like an Act of Parliament. It is a form of law based on previous court cases decided by judges; hence, it is also referred to as 'judge-made' or case law. The law is applied by reference to those previous cases, so common law is also said to be based on precedent.

The general position is that if information is given in circumstances where it is expected that a duty of confidence applies, that information cannot normally be disclosed without the information provider's consent.

In practice, this means that all patient information, whether held on paper, computer, visually or audio recorded, or held in the memory of the professional, must not normally be disclosed without the consent of the patient. It is irrelevant how old the patient is or what the state of their mental health is; the duty still applies.

Three circumstances making disclosure of confidential information lawful are:

- where the individual to whom the information relates has consented;
- where disclosure is in the public interest; and
- where there is a legal duty to do so, for example a court order.