

**STANDARD OPERATING PROCEDURE FOR THE MANAGEMENT OF SUBJECT ACCESS REQUESTS (SARS)**

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| Version 3.0 | March 2024 | Due to office move address and addresses on appendices updated.  |
| Version 4 | June 2025 | Complete Refresh of standard operating procedure to bring in line with Staffordshire, Stoke-on-Trent Integrated Care Board Policy and to update following from learning from previous Subject Access Requests. Amended to take into account comments from staff and members of the public following engagement.  |

The formally approved version of this document is that held on the NHS Shropshire, Telford and Wrekin website:

[Subject Access Request (SAR) - NHS Shropshire, Telford and Wrekin](https://www.shropshiretelfordandwrekin.nhs.uk/about-us/how-we-are-run/polices-procedures-and-governance/subject-access-request-sar/)

Printed copies or those saved electronically must be checked to ensure they match the current online version.

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# Introduction

This procedure applies to The Integrated Care Board and all its Subject Access Request (SAR) duties.

The right of access, commonly referred to as Subject Access Request, gives individuals the right to obtain a copy of their personal data from the organisation, as well as other supplementary information. It helps individuals understand how and why the organisation uses their data and checks it is being done lawfully.

This document is based on the Information Commissioner’s Office Subject Access Code of Practice and sets out the process for handling Subject Access Requests received in the Integrated Care Board’s offices. It is intended to assist those members of staff who are involved in providing responses / investigations into Subject Access Requests, including employees of the Integrated Care Board and providing guidelines for timescales in which Subject Access Requests should be responded to.

It is important that all staff are familiar with the contents of this Standard Operating Procedure as they may be the first point of contact for a request for personal information or they may be required to advise others including patients and other service users who make a request for personal information.

# Legislation

The rights outlined within this policy are governed by Data Protection legislation, including:

* General Data Protection Regulation (GDPR)
* The Data Protection Act 2018
* Access to Health Records Act 1990

# What is personal data?

Personal data is information that relates to an identified or identifiable individual. Even if an individual is identified or identifiable, directly or indirectly, from the data being processed, it is not personal data unless it ‘relates to’ the individual.

***The UK GDPR applies to the processing of personal data that is:***

* Information that relates to an identified or identifiable individual.
* Data that can directly identify an individual from the information held.
* Personal data may also include special categories of personal data or criminal conviction and offences data. These are more sensitive, and you may only process them in more limited circumstances.
* Pseudonymised data can help reduce privacy risks by making it more difficult to identify individuals, but it is still personal data.
* If personal data can be truly anonymised, then the anonymised data is not subject to the UK GDPR. It is important to understand what personal data is to understand if the data has been anonymised.
* Information about a deceased person does not constitute personal data and therefore is not subject to the UK GDPR. However, access to data in these circumstances is governed by the Access to Health Records Act 1990.
* Information about companies or public authorities is not personal data.
* Information about individuals acting as sole traders, employees, partners and company directors where they are individually identifiable and the information relates to them as an individual may constitute personal data.

# What are the identifiers and related factors?

An individual is ‘identified’ or ‘identifiable’ if they can be distinguished from other individuals based on the information that is held.

* A name is the most common means of identifying someone. However, whether any data held identifies an individual depends on the context.
* A combination of identifiers may be needed to identify an individual.
* In the UK, GDPR provides a non-exhaustive list of identifiers, including:
* name
* identification number
* location data and online identifiers. ‘Online identifiers’ includes IP addresses and cookie identifiers which may be personal data
* other factors can identify an individual.

## Can we identify an individual directly from the information we have?

* If, by looking solely at the information the Integrated Care Board is processing, an individual can be distinguished from other individuals, that individual will be identified (or identifiable).
* Not knowing someone’s name does not mean that they cannot be directly identifiable; a combination of other identifiers may be sufficient to identify the individual.
* If an individual is directly identifiable from the information, this may constitute personal data.

## Can we identify an individual indirectly from the information we have (together with other available information)?

* Even if information does not directly name an individual, it may still identify them when combined with other data, and therefore still count as personal data.
* Even if additional information is needed to be able to identify someone, they may still be identifiable.
* The additional information may be information already held by the Integrated Care Board, or it may be information that needs to be obtained from another source.
* In some circumstances it is possible that someone might be able to reconstruct the data in such a way that identifies the individual. However, this is not necessarily sufficient to make the individual identifiable in terms of UK GDPR. The Integrated Care Board must consider all the factors at stake.
* When considering whether individuals can be identified, the Integrated Care Board may have to assess the means that could be used by an interested and sufficiently determined person.
* The Integrated Care Board has a continuing obligation to consider whether the likelihood of identification has changed over time (for example, because of technological developments).

## What is the meaning of ‘relates to’?

Information must ‘relate to’ the identifiable individual to be personal data. This means that it does more than simply identifying them – it must concern the individual in some way.

To decide whether or not data relates to an individual, the Integrated Care Board needs to consider:

* The content of the data – is it directly about the individual or their activities?
* The purpose of the data being processed.
* The results of or effects on the individual from processing the data.

Data can reference an identifiable individual and not be personal data about that individual, as the information does not relate to them. In this case any information that is not relative to the individual should be redacted.

There will be circumstances where it may be difficult to determine whether data is personal data. If this is the case, as a matter of good practice, the Integrated Care Board should treat the information with care, ensure that there is a clear reason for processing the data and ensure that it is held and disposed of securely.

Inaccurate information may still be personal data if it relates to an identifiable individual.

## What happens when different organisations process the same data for different purposes?

It is possible that although data does not relate to an identifiable individual for one data controller, in the hands of another controller, it does. This is particularly the case where, for the purposes of one controller, the identity of the individual is irrelevant, and the data therefore does not relate to them. However, when used for a different purpose, or in conjunction with additional information available to another controller, the data does relate to the identifiable individual. It is therefore necessary to consider carefully the purpose for which the controller is using the data to decide whether it relates to an individual. The Integrated Care Board should take care when making an analysis of this nature.

# Who can make a request?

An individual can make a request verbally or in writing, including on social media. A request is valid if the individual is asking for their own personal data. An individual does not need to use a specific form of words, refer to legislation or direct the request to a specific contact.

An individual may ask a third party (i.e. a relative, friend or solicitor) to make a Subject Access Request on their behalf. Before responding to requests from third parties, the Integrated Care Board needs to be satisfied that the third party making the request is entitled to act on behalf of the individual. It is the third party’s responsibility to provide evidence of their authority. Below is an outline of who can make a request:

* The individual themselves, the ‘data subject’.
* Those who have parental responsibility (if requesting a child’s record), subject to Fraser Gillick-Competence.
* A representative nominated by the individual to act on their behalf such as solicitors or a relative. In these circumstances, valid consent in writing by the individual granting the authority must accompany the application.
* In certain situations, a person granted an attorney or agent by the Court of Protection on behalf of an adult who is unable to consent.
* The police.
* Via a court order.

## Proof of Identity and authority to act

The Integrated Care Board will need to request evidence of identity and authority to act, if this is not provided when the request is received. A list of appropriate identification is included in Appendix A. Where an individual is not already known to the Integrated Care Board, it may be necessary to review the ID in person or via a virtual call, so that they can be assured that the request is being received from the individual concerned.

## Where proof of identity or authority to act is not received

Where insufficient identification or evidence of authority to act cannot be provided to support a request for personal information, the Integrated Care Board will contact the requester to advise them of this and ask for additional information. If the requester is unable to provide this, the Integrated Care Board will not be able to comply with the request and will notify the requester in writing that this is the case, outlining the reason(s) why.

## Requests made under the Access to Health Records Act 1990 For Deceased Persons’ Records

Requests made under the Access to Health Records Act 1990 For Deceased Persons’ Records can be requested by:

* The patient’s personal representative - a personal representative is the executor or administrator of the deceased person’s estate. Valid documentation granting the authority must accompany the application, as outlined in Appendix A.
* Any person who may have a claim arising out of the patient’s death. Valid documentation granting the authority must accompany the application, as outlined in Appendix A.

# How do I make a request for personal data?

Requests for personal data under GDPR are managed by the Corporate and Governance Team. The Governance Manager is the main point of contact for the processing of Subject Access Requests.

## Where should I send my Subject Access Request?

Requests can be made as follows:

**Via Email**: stw.dsar@nhs.net

**Post:** Governance Manager

 NHS Shropshire, Telford and Wrekin

Wellington Civic Offices

Larkin Way

Tan Bank

Wellington

Telford

TF1 1LX

**Telephone:** 01952 580300 (this is the main reception number, staff will take your details and ask for a member of the Corporate and Governance Team to call back).

To be able to process a request there is a minimum amount of data required. An application form is provided in Appendix B which outlines these requirements. Whilst there is no requirement to complete the form, it may be easier as this ensures that all the required information is provided. A copy of the form is available on NHS Shropshire, Telford and Wrekin website as follows - [Subject Access Request (SAR) - NHS Shropshire, Telford and Wrekin](https://www.shropshiretelfordandwrekin.nhs.uk/about-us/how-we-are-run/polices-procedures-and-governance/subject-access-request-sar/).

## Key roles

### The Governance Manager

The Governance Manager has overall responsibility for the Subject Access Process, has specialist knowledge to process requests and is fully versed in the legislation surrounding requests for personal information. This ensures that requests are dealt with lawfully and that legislation is not breached.

### NHS Shropshire, Telford and Wrekin’s Caldicott Guardian

A Caldicott Guardian is a senior person in an organisation that handles health and social care data. Their main job is to ensure that personal information about patients and service users is used legally, ethically, and appropriately, while maintaining confidentiality.

The Caldicott Guardian within NHS Shropshire, Telford and Wrekin is the Chief Medical Officer,

### Data Protection Officer

A Data Protection Officer (DPO) is responsible for ensuring an organisation's compliance with data protection laws and regulations, such as the General Data Protection Regulations.

The Data Protection Officer is the Midlands and Lancashire Commissioning Support Unit (CSU) Head of Information Governance.

The DPO and Caldicott Guardian are responsible for overseeing the Subject Access Request process and providing support, direction and management to the Governance Manager.

# Requests received via a court order

All court orders and associated documents must be brought to the attention of the Corporate and Governance Team and / or the Caldicott Guardian. Authorisation will be requested from the professional involved and copies of records will be given to the court. The original records must not be released.

# Timescales for providing personal data

Applications made under the General Data Protection Regulation / Data Protection Act 2018 (SARs) must be responded to within one month unless exceptional circumstances apply in which case the applicant should be informed. Any requests to access personal information received should be directed to the Corporate and Governance Team immediately.

Below are some examples of how timeframes are applied:

* One calendar month starts on the receipt of appropriate proof of the requester’s identity.
* It does not matter if the day the request is received is not a working day. For example, if a request is received on Saturday 7 March, the response is due by Tuesday 7 April.
* If the Subject Access Requests due date falls on a weekend or a public holiday, the response is due the next working day. For example, if a request is received on 25 November, the response will be due by 27 December.
* Extra days cannot be added when the calendar month is shorter. For example, if a request is received on 31 January, the response will be due by 28 February.

Applications made under the Access to Health Records Act 1990 (where the individual the records relate to is deceased) have a historic ministerial commitment that requests should normally be handled within 21 days where the record has been added to within the last 40 days, otherwise a timescale of releasing the information within 40 days is applied.

## Extension to timescales

In line with GDPR and the Data Protection Act, an extension of up to 2 months can be applied where requests are complex or numerous.

## Manifestly excessive requests

There are occasions where a request could be considered manifestly excessive, due to the number of requests received or the number of documents that require collation. As outlined by the Information Commissioner’s Office, to determine whether a request is manifestly excessive, organisations “should consider whether it is clearly or obviously unreasonable”. Organisations “should base this on whether the request is proportionate, when balanced with the burden or costs involved in dealing with the requests”. Where teams believe a request may be excessive, they should discuss this with the Governance Manager to determine whether this is the case, so that a balanced approach can be taken.

## Exemptions

The UK GDPR and the Data Protection Act 2018 set out exemptions from some of the rights and obligations in some circumstances. Whether or not an exemption can be applied often depends on why personal data is processed.

* The Integrated Care Board will not routinely rely on exemptions and will consider whether the Integrated Care Board can rely on an exemption on a case-by-case basis.
* Where appropriate, the Integrated Care Board will carefully consider the extent to which the relevant UK GDPR requirements would be likely to prevent, seriously impair, or prejudice the achievement of our processing purposes.
* The Integrated Care Board justifies and documents the reasons for relying on an exemption.
* When an exemption does not apply (or no longer applies) to the Integrated Care Board processing of personal data, the Integrated Care Board will comply with the UK GDPR’s requirements as normal.

***For clarity anything that can potentially be ruled “exempt” will be as per the Information Commissioner’s Office guidance and will be handled on a case-by-case basis by the Integrated Care Board in line with the guidance*** [***Right of access/subject access requests and other rights | ICO***](https://ico.org.uk/for-organisations/advice-for-small-organisations/frequently-asked-questions/right-of-accesssubject-access-requests-and-other-rights/#whencan)

# NHS Shropshire, Telford And Wrekin procedure when a request for personal data is received

## Requests received elsewhere within the Integrated Care Board

If a request is received by another department within the Integrated Care Board, then the request should be forwarded immediately to the Subject Access Request email address stw.dsar@nhs.net to ensure there is no delay in processing the request.

## Logging of Subject Access Requests

 The Corporate and Governance Team will log and acknowledge the request, providing a unique reference number. The team will also ask for any relevant identification required to process the Subject Access Request.

## Requests for Data where the Integrated Care Board is not the data controller

There are instances where the Integrated Care Board contracts out services to another organisation. In these instances, the Integrated Care Board does not hold the records, therefore the service that holds those records is responsible for processing the request, on behalf of the Integrated Care Board. In these instances, the Integrated Care Board will redirect the request to the relevant organisation and request that they follow their procedure for managing requests on behalf of the Integrated Care Board. Where this is the case the Integrated Care Board will advise the requester of this and provide contact details for the team who will be processing the request and the reasons why they will be doing so.

If the request relates to records where the Integrated Care Board is not the Data Controller, a letter or email will be sent to the requester advising that the Integrated Care Board is not the Data Controller. Where possible, guidance will be provided in relation to where the requester may be able to obtain the information that they are requesting.

## Requesting data from Integrated Care Board departments

Once appropriate identification has been received, the Corporate and Governance Team will forward the request for records to the relevant department for processing.

## Considering whether an extension to timescale is required

In line with Information Commissioner’s Office guidance as outlined above, if the department believes an extension is required, they need to notify the Governance Manager within three working days of receiving the request and explain why the extension is necessary. The Governance Manager will consider this request and if agreed, the requester will be advised of the revised timescale. The requester must be notified of the extension as soon as possible and within 20 working days after the date of receipt of the original request. The notification should be specific in explaining the reasons for the extension.

## Collating, reviewing and redacting records

It is the individual department’s responsibility to collate, review and apply any redactions to the document that are to be shared with the requester. The process of redacting is to remove information that it is not appropriate to share. There are limited reasons why redactions can be made, some examples of these are included below:

* Where disclosure could cause serious harm to the physical or mental health of the person requesting the records or of another individual.
* Access would disclose information relating to, or provided by, a third party who is not an NHS health care professional and has not consented to their information being disclosed.
* The record contains information the person expressly stated must not be released.

Once the information is collated and redacted, where necessary, a copy of the information should then be sent to the Governance Manager. This should be accompanied by a copy of an unredacted version for reference and a list of redactions and the reasons for the redactions. The Governance Manager will then check the documentation prior to them being sent to the Caldicott Guardian for final approval.

## Caldicott Guardian approval

Once the records have been checked by the Governance Manager, a copy of the information should then be sent to the Caldicott Guardian, along with a copy of an unredacted version for reference and a list of redactions and the reasons for the redactions. The Caldicott Guardian will review the records and confirm whether they can be shared with the requester.

## Providing records to the requester

Once confirmation has been received from the Caldicott Guardian that they are happy for records to be shared with the requester, these should be shared with them via their preferred method. Methods of sharing are as follows:

* Secure email.
* Paper records sent via registered post.
* Paper records collected from the Integrated Care Board office by the requester (with appropriate ID being provided and checked)

## Right to rectification

If a SAR reveals that a person’s data is inaccurate or incomplete, they have the right to have the information rectified according to Article 16 of the UK GDPR.

***What do we need to do?***

If a request is received for rectification of data, the Integrated Care Board will take reasonable steps to satisfy themselves that the data is accurate and will rectify the data if necessary. The Integrated Care Board will consider carefully the arguments and evidence provided by the data subject. Where necessary, guidance around this can be obtained from the Governance Manager or Caldicott Guardian.

# Requests for records from employees

Where an employee requests information from their personnel file, and / or emails that the Integrated Care Board may hold relating to them, then the request will be sent to their Line Manager. The Line Manager will be responsible for collating the records and redacting them where necessary. As part of this process, a request may need to be made for a search to be undertaken by the Health Informatics Service (HIS) to identify any emails that may be held on the server. A form can be obtained from Midlands and Lancashire Commissioning Support Unit IT Team. All requests of this nature need to be approved by the Chief Executive Officer.

It should be noted that not all emails that mention a staff member by name will be considered as personal data. Line Managers will need to take this into consideration when they are reviewing documentation. Information relating only to the requester should be provided (please refer to section *4 - What are Identifiers and factors*).

Where a request for employee records has not come directly from the staff member, the same processes apply in respect obtaining appropriate identification as with any member of the public.

# Supervised access to view records

There may be occasions where the person requesting their data does not wish to have a copy and would be happy to just view their records. The process of reviewing the data sources and records follows the same process as outlined above. Whilst being reviewed, the records must not be left unattended with the requester. The appropriate senior manager must remain in the room to ensure that the records are not tampered with, to explain any entries or terminology and to help with any legibility queries.

If a person wishes to view their records and then wants to be provided with copies this would still come under the one access request.

# Police requests

Requests from the police where consent is available may be processed in the same way as solicitors or third-party requests. The Governance Manager and / or the Caldicott Guardian should be informed of any requests for records from the police which are not accompanied by the written consent of the data subject. The request from the police must be in writing to comply with the Data Protection Law Enforcement Directive. This is a more extensive data processing right and all requests by the police must comply with this directive.

Original health records must not be given to the police.

# Complaints relating to the Subject Access Request process

If the applicant is dissatisfied with the information provided or the manner the request has been handled by the Integrated Care Board, they are entitled to complain following the Integrated Care Board’s complaints procedure. Information around how to do this can be found on the Integrated Care Board website - <https://www.shropshiretelfordandwrekin.nhs.uk/contact-us/complaints-and-pals/>

If the applicant is still dissatisfied once the complaints process is completed, they are entitled to make a complaint to the Information Commissioners Office (ICO).

The Information Commissioner’s Office

Wycliffe House

Water Lane

Wilmslow

Cheshire

SK9 5AF

Telephone: 0303 123 1113

Email: casework@ico.gsi.gov.uk

Website: [www.ico.gov.uk](http://www.ico.gov.uk)

# Monitoring and audit

As part of our quality control measures and to meet the requirements of the Data Security and Protection Toolkit, audits will be undertaken in respect of Data Subject Access Request processes on an ongoing basis. The Integrated Care Board and the CSU IG Team will consistently check for accuracy and quality of content and issues arising from the audits will be recorded along with necessary corrective actions and recommendations.

# Advice and training

## Advice

For any advice around the Subject Access Request process, the first point of contact should be the Integrated Care Board Governance Manager. Midlands and Lancashire CSU IG Team can also provide advice, along with the Caldicott Guardian and Data Protection Officer.

## Training

Midlands and Lancashire CSU offer training in relation to processing of Subject Access Requests. Any staff member who will be involved in collating data for Subject Access Requests should complete this training at least every 3 years.

# Subject Access Request Process Map

**Request Received**

* Request received into Subject Access Request inbox; stw.dsar@nhs.net
* Log and acknowledge within three working days.
* If information held, the Corporate and Governance Team will request ID from the requester, if not already provided.
* When ID received the request to be passed to appropriate team / manager for collation of information.
* If information not held, the requester to be notified and advised where to obtain information, if known.

**Identity Checked**

* Staff Requests – Access to information contained in personnel file; ask application to complete a Subject Access Request form detailing information required.
* Member of the Public – Complete identity check, as outlined in Appendix B.

**Seek Information**

* Staff Requests – Pass to relevant Manager for collation of records.
* Member of the Public – Request information from the relevant department(s).

**Caldicott Guardian**

* Provider of information to collate records, to identify any exemptions and complete any redactions required. This is then forwarded to the Corporate and Governance Team.
* Corporate and Governance to check records to ensure appropriate process has been followed.
* Collated records are sent to Caldicott Guardian for review and approval.

**Send Information**

* Once approval has been received from the Caldicott Guardian, information to be shared with the requester via their preferred route / method.

***Note: Caldicott Guardian signs off all public and staff Subject Access Requests.***

# Appendix A – Acceptable Forms of Identification

For verification of identity, the following combinations are acceptable when requesting personal information\*:

* One form of photographic personal identification and one document confirming their address.

Note\*

If you are applying on behalf of an individual, proof of entitlement will also be required separately.

Acceptable photo personal identity documents

* Current UK (Channel Islands, Isle of Man or Irish) passport or EU / other nationalities passports.
* Passports of non-EU nationals containing UK stamps, a visa or a UK residence permit showing the immigration status of the holder in the UK
* Current UK (or EU / other nationalities) Photo-card Driving License (providing that the person checking is confident that non-UK Photo-card Driving Licenses are genuine)
* A national ID card and / or other valid documentation relating to immigration status and permission to work

Note, documents such as an organisational ID card is not an acceptable form of identification.

Acceptable non-photo personal identity documents

* Birth certificate.
* Residence permit issued by Home Office to EU Nationals on inspection of own country passport.
* Adoption certificate.
* Marriage / civil partnership certificate.
* Divorce or annulment papers.
* Police registration document.
* Certificate of employment in HM Forces.
* Current benefit book or card or original notification letter from the Department of Work and Pensions (DWP) confirming legal right to benefit.
* Most recent HM Revenues and Customs (previously Inland Revenue) tax notification.
* Current firearms certificate.
* Application Registration Card (ARC) issued to people seeking asylum in the UK (or previously issued standard acknowledgement letters, SAL1 or SAL2 forms).
* GV3 form issued to people who want to travel in the UK without valid travel documents.
* Home Office letter IS KOS EX or KOS EX2.
* Building industry sub-contractor’s certificate issued by HM Revenues and Customs (previously Inland Revenue).

To confirm the address, the following documents are acceptable:

* Recent utility bill or a certificate from a supplier of utilities confirming the arrangement to pay for the services on pre-payment terms (note: mobile telephone bills should not be accepted as they can be sent to different addresses). Utility bills in joint names are permissible. **\***
* Local authority tax bill (valid for current year). **\***
* Current UK photocard driving license (if not already presented as a personal ID document).
* Bank, building society or credit union statement or passbook containing current address.
* Most recent mortgage statement from a recognised lender. **\***
* Current local council rent card or tenancy agreement.
* Current benefit book or card or original notification letter from Department of Work and Pensions (DWP) confirming the rights to benefit.
* Confirmation from an electoral register search that a person of that name lives at the claimed address. **\***
* Court order. \*

Proof of entitlement:

* Copy of the section of the will that names you as Executor.
* Copy of Grant of Probate.
* Copy of Letters of Administration.
* Letter from solicitor confirming entitlement.

*\*****The date on these documents should ideally be within the last 6 months (unless there is a good reason for it not to be, e.g. clear evidence that the person was not living in the UK for 6 months or more) and they must contain the name and address of the applicant.***

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# Appendix B – Subject Access Request Application Form

**APPLICATION FOR ACCESS TO PERSONAL INFORMATION**

**Section 1 – Details of Person Making the Request “the applicant”**

**Full Name of Person Making the Request:**

**Address of Person Making the Request:**

**Telephone Number of Person Making the Request:**

**Email Address of Person Making the Request:**

**Section 2 – Data Subject (the person that the data that is being requested relates to) Details.**

**Full Name of Data Subject:**

**Previous Name(s) where applicable:**

**Date of Birth:**

**NHS Number (If known):**

**Data Subject’s Current Address:**

**Data Subject's Previous Address(es), if applicable:**

**Data Subject’s Telephone Number:**

**Data Subject's Email Address:**

**Section 3 – Description of the information you require**

Please provide as much information as possible giving full details of the periods you are interested in. This should include the type of information that is being requested and the dates that the data relates to:

**Section 4 – Declaration**

I declare that the information given by me is correct to the best of my knowledge and that I am entitled to apply for access to the personal information referred to above under the terms of the General Data Protection Regulation/Data Protection Act 2018 / Access to Health Records Act 1990.

If you are not the data subject named in Section 2, please confirm which of the following applies by ticking in front of the appropriate descriptor:

**I am the parent / guardian of an individual under 16 years old who has completed the Authorisation section (Section 4).**

**I am the parent / guardian of an individual under 16 years old who (is unable to understand the request / has consented to my making this request).**

**I am the deceased patient’s personal representative and attach confirmation of my appointment by a court to manage the patient’s affairs**

**I am the legal representative of the individual, and they have given signed authorisation (Section 4)**

**Other (please specify)**

**Section 5 – Authorisation**

I hereby authorise NHS Shropshire, Telford and Wrekin to release the requested personal data that they may hold relating to me.

**Signature of Applicant:**

**Signature of Data Subject:**

**(where this is different to the applicant):**

**If the Data Subject is unable to sign, please specify the reason and provide appropriate authority to act where required:**

**Date:**

**Once completed, please return this form:**

By Post to: NHS Shropshire, Telford and Wrekin

Wellington Civic Offices

Larkin Way

Tan Bank

Wellington

Telford

TF1 1LX

By Email to: stw.dsar@nhs.net

**If assistance is required to complete this form or if you need this form in a different format, please contact: 01952 580300.**

# Equality Impact Assessment

|  |  |
| --- | --- |
| **Title of policy** | NHS STW Subject Access Request Standard Operating Procedure |
| **Names and roles of people completing the assessment** | Angie Porter, Governance Manager |
| **Date assessment started/completed** | 18th July 2025 | 18th July 2025 |
| **Reviewed** | Angie Porter, Governance Manager |

|  |
| --- |
| **1. Outline** |
| **Give a brief summary of the policy** | The Subject Access Request Standard Operating Procedure provides guidance to staff and members of the public around how Subject Access Request will be processed.  |
| **What outcomes do you want to achieve?** | To ensure:* Processes align to national legislation.
* Staff have clear guidance in relation to processing Subject Access Requests
* Members of the public can be assured that there is a clear procedure in place for managing Subject Access Requests / Access to Health Record Requests should they wish to request their data.
 |

**2. Analysis of Impact**

This is the core of the assessment. Using the information above detail the actual or likely impact on protected groups, with consideration of the general duty to eliminate unlawful discrimination; advance equality of opportunity; and foster good relations.

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Are there any likely impacts?****Are any groups going to be affected differently?****Please describe.** | **Are these negative or positive?** | **What action will be taken to address any negative impacts or enhance positive ones?** |
| **Age** | None identified. |  |  |
| **Carers** | None identified. |  |  |
| **Disability** | None identified. |  |  |
| **Sex** | None identified. |  |  |
| **Race** | None identified. |  |  |
| **Religion or belief** | None identified. |  |  |
| **Sexual orientation** | None identified. |  |  |
| **Gender reassignment** | None identified. |  |  |
| **Pregnancy and maternity** | None identified. |  |  |
| **Marriage and civil partnership** | None identified. |  |  |
| **Other relevant group** | None identified. |  |  |
|  |
| **If any negative/positive impacts were identified are they valid, legal and/or justifiable?****Please detail.** | N/A |

|  |
| --- |
| **4. Monitoring, Review and Publication** |
| **How will you review/monitor the impact and effectiveness of your actions?** | Whilst no specific actions have been identified to address any equality issues, the policy will be reviewed at scheduled intervals, and the review of this assessment will form part of those reviews. |
| **Lead Officer:** | Angie Porter | **Review date:** | 18th July 2025 |

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| --- |
| **5. Sign off** |
| **Senior Manager** | Alison Smith | **Date approved:** | 22nd July 2025 |