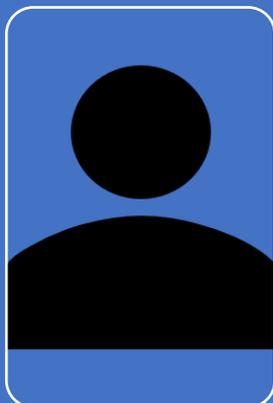


QEF understands that the privacy and safety of your personal information is very important. This policy sets out: *what type of information we hold on you; how we might use your personal information; how we keep it safe; who we might share it with; and your rights.*

### What type of information we might hold:



- ✓ Personal Information, such as your contact details, date of birth, National Insurance number, NHS number, financial details
- ✓ When were at our service and how you used the service
- ✓ Clinical information about the care you received
- ✓ Relevant lifestyle information such as alcohol intake or your weight
- ✓ Sensitive personal information about your racial/ethnic origin and your health including hospital visits and discharge notes

### How we use your personal information:



- ✓ To improve our services
- ✓ To help us understand more about you and offer a better service
- ✓ To manage your case or any complaints you have
- ✓ To help answer your questions and solve any issues
- ✓ To support a grant or funding application, report to existing funders, and inform annual reports

### How we ensure your information is kept safe:



- ✓ Only giving access to those who need it
  - ✓ Storing written information in lockable areas and using passwords when your information is kept on the computer
  - ✓ Running through ID questions before giving out personal information over the phone
  - ✓ Only transferring information outside of the UK when you say it's ok and if secure conditions are met
  - ✓ Securely destroying your data after 8 years\*
- \* your records will be kept for 75 years If you lack capacity at the time that you stop using our service

## How we share your information:



Your personal data including your progress will be disclosed to:

- ✓ Your funder including solicitors, insurers and employers
- ✓ Social Services, Clinical Commissioning Groups or Community Interest Companies
- ✓ Healthcare practitioners including your GP, hospital consultants, local therapy teams
- ✓ Someone with a Power of Attorney or who acts on your behalf in financial or medical decisions

[Your personal data may also be given to other organisations but only if we follow certain rules - for example when another company is acting on our behalf or if there are legal grounds]

## Our lawful grounds:



We are only allowed to process your information when:

- ✓ you've agreed we can use it in a certain way (we will ask you to agree at the end of this form for most of the processing we do)
- ✓ there's a legal requirement for us to do so
- ✓ where it is in your/someone else's vital interests
- ✓ where it is in our true interests and not stopped by your rights

**Please use form 1a for residents who have capacity to give consent and form 1b (overleaf) where capacity is in question.**

1a. Consent form

Your rights

We make sure you can use your rights in relation to the personal data you provide to us:

- ✓ You have the right to access, change, erase, stop processing and to object to your data being held
- ✓ You have the right to data portability. Where QEF use an industry standard application, we will provide portable data formats
- ✓ You have the right to complain to the Information Commissioner’s Office about our collection and use of your personal data. They can be contacted at: Information Commissioner’s Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF, [www.ico.org.uk](http://www.ico.org.uk).

If you wish to use these rights or have any privacy-related questions or unresolved problems related to use of your personal data, you may contact us at: [dataprotection@qef.org.uk](mailto:dataprotection@qef.org.uk).

Consent

- I agree that QEF can hold, use and share information about me (as detailed above).
- I do not agree that QEF can hold, use and share information about me (as detailed above). Please detail below any concerns you may have or any restrictions/changes you would like made below and our staff team will discuss these with you.

If you want to change your decision at any time in the future, please let us know in writing: QEF Independent Living Services, Dorincourt, Oaklawn Road, Leatherhead, Surrey KT22 0BT

Print name: .....

Signature: .....

Date: .....

1b. Where capacity is in question

If there is a Power of Attorney in place or a court appointed deputy, please attach a copy of the document

Print name: .....

Signature: ..... Date: .....

We then have two options:

**Option 1: If the client lacks capacity to consent to QEF holding information on them, we can ask their NOK to act or speak on their behalf.**

Please complete their contact details below.

Name: .....Relationship to client: .....

Address: .....

Postcode: .....Mobile: .....Email: .....

**Option 2: If the client lacks capacity to consent to QEF holding information on them, a Best Interest Decision has been made by the team as follows:**

Team in attendance:

Date:

Decision: