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FREEDOM OF INFORMATION ACT 2000 POLICY AND PROCEDURE NGH-PO-096

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Version Control Summary

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3.0	March 2012	Louise Chatwyn	Draft	Initial draft
3.1	March 2012	Louise Chatwyn		Incorporation of consultation responses
3.2	March 2012	Louise Chatwyn	Final	
3.3	February 2014	Kehinde Okesola	Final	Reviewed and transferred to new Trust policy template
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SUMMARY

The Freedom of Information Act 2000 gives the public general right of access to recorded information held by public authorities subject to certain conditions and exemptions. This is called a Freedom of Information request and all requests have a legal response time frame of 20 working days.

All employees working in the Trust have an obligation to comply with the Freedom of Information Act (FOIA) which covers corporate information that they may come into contact with during their duties for the Trust. This is not just a requirement of their contractual responsibilities but also a legal obligation under the Freedom of Information Act 2000. This FOIA policy establishes a framework to ensure that all requests for information made in accordance with the FOIA are dealt with properly and compliantly.

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1. INTRODUCTION

The FOIA became law on 1 January 2000 and came fully into effect on 1 January 2005. The FOIA provides a general right of access to all information held by public authorities and places certain obligations upon them. The existence and application of the exemptions help manage access to information, particularly when requests are made for information which is considered to be extremely sensitive or where the burden on the resources of public authorities in managing a response are considered out of proportion to the benefits in terms of transparency and accountability.

For the Freedom of Information Act (FOIA) to be upheld in the spirit of openness there has to be a basic understanding, underpinned by a legal framework, that information held by public authorities (and those who provide services to them) is disclosable, and about what rights are granted and to whom.

Northampton General Hospital NHS Trust (NGH) is committed to greater openness in the public sector. The Freedom of Information Act 2000 (FOIA) gives people a general right of access to information held by public authorities, including Northampton General Hospital NHS Trust providing a culture of honesty, transparency and accountability. It enables members of the public to question the decisions of public authorities more closely, ensuring that the services that we provide are efficiently and properly delivered.

The main features of the FOIA are:

- A general right of access to recorded information held by public authorities subject to certain conditions and exemptions
- A general duty to confirm or deny to the applicant whether information is held by the public authority irrespective in most cases of whether the information which has been requested is to be disclosed
- A general duty to advise and assist the applicant
- A specific duty which applies to every public authority to adopt and maintain a publication scheme approved by the Information Commissioner through which it must proactively and routinely publish information.

By adhering to good practice in regards to Freedom of Information staff will help to promote a transparent environment and assist with the provision of information in accordance with the law.

This policy should be read in conjunction with the policies and procedures listed under Associated Documentation in section 10 of this document

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2. PURPOSE

The key purpose of this policy and these procedures are:

- To ensure that all information other than that which can be considered as 'personal information' is processed in accordance with the requirements of the Freedom of Information Act; and
- To provide guidance for staff on the correct way to handle requests for information that are made in accordance with the Freedom of Information Act 2000.

3. SCOPE

This policy and procedures document applies to all:

- Records created in the course of the business of Northampton General Hospital NHS Trust and its predecessor organisations i.e. corporate records (minutes, agenda etc) which are also public records under the terms of the Public Records Acts 1958 and 1967. It also includes email messages and other electronic records as well as informal meeting notes. No subject matter is excluded from consideration for disclosure including information relating to contracts, financial arrangements and other sensitive areas.
- Private emails if they are used for business matters
- Trust employees, including permanent, temporary and contract staff, including staff who hold honorary contracts, contractors working on behalf of the Trust, volunteers, and Non-Executive Directors, as well as those working for organisations hosted by Northampton General Hospital NHS Trust.

4. COMPLIANCE STATEMENTS

Equality & Diversity

This policy has been designed to support the Trust's effort to promote Equality, Diversity and Human Rights in the work place and has been analysed for any adverse or negative impact using the Trust's Equality Analysis toolkit as required by the Trust's Equality and Human Rights Strategy. It is considered to be compliant with equality legislation and to uphold the implementation of Equality, Diversity and Human Rights in practice.

NHS Constitution

The contents of this document incorporates the NHS Constitution and sets out the rights, to which, where applicable, patients, public and staff are entitled, and pledges which the NHS is committed to achieve, together with the responsibilities which, where applicable, public, patients and staff owe to one another. The foundation of this document is based on the Principals and Values of the NHS along with the Vision and Values of Northampton General Hospital NHS Trust.

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5. DEFINITIONS

Absolute Exemption	Those circumstances where a decision may be made not to disclose information where there is no requirement to consider the application of the public interest test.
Applicant	The individual(s), group or organisation requesting access to information under the Act.
Classes of Information	Broad categories in which information is proactively made available
Exemption	Those circumstances within which a decision may be made not to disclose information
Information	Section 84 of the FOIA defines information recorded in any form. Recorded information includes printed documents, computer files, letters, emails, photographs and sound or video equipment.
Information Commissioners Office (ICO)	The Information Commissioners Office is the UK's independent public body and supervisory authority, reporting directly to the UK Parliament. In the UK, the Commissioner has a range of duties. This includes promoting access to official information and protecting personal information by promoting good practice, ruling on eligible complaints, providing information to individuals and organisations, and taking appropriate action when the law is broken.
Personal Information	Information / data which relate to a living individual who can be identified: a) From the data, or b) From the data and other information which is in the possession of, or is likely to come into the possession of, the data controller, and includes any expression of opinion about the individual and any indication of the intention of the data controller or any other person in respect of the individual.
Publication Scheme	The legally required mechanism for making information held by Public Authorities (including Northampton General Hospital NHS Trust) routinely and proactively available on various media such as the NGH website.
Public Authorities	Public sector organisations as defined by the Freedom of Information Act 2000 (FOIA) are organisations such as the NHS, Police, Local council and other central government bodies.
Public Interest	Additional Test applied to information being considered for disclosure in some cases. It is the consideration of 'to the greater good', it is not the same as what people are interested in.

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Qualified Exemption	Those circumstances where a decision may be made not to disclose information where there is a requirement to consider and demonstrate that the balance of public interest is in favour of non-disclosure.
Third Party	Where information is requested about someone other than the applicant
Redacted Information	Information which has been deleted or blanked out from a document because it is legitimately exempt from release.
Vexatious requests	An unjustified, inappropriate or improper use of the FOI Act. Vexatiousness primarily involves making a request which has no reasonable foundation, that is, no reasonable foundation for thinking that the information sought would be of value to the requester or to the public or any section of the public.

6. ROLES & RESPONSIBILITIES

ROLE	RESPONSIBILITY
Chief Executive and the Trust Board	Chief Executive and Trust Board have ultimate accountability for actions and inactions in relation to this policy
Director of Corporate Development Governance and Assurance	Has overall responsibility for Information Governance (IG) within the Trust, including the Freedom of Information Act. The role includes briefing the Executive Team, including the Director of Corporate Development Governance and Assurance on FOI matters
Deputy Director of Quality and Governance	Has the responsibility of overseeing the request for Internal review made by a requester.
Information Governance Manager	The Information Governance Manager has day to day responsibility for implementing and monitoring procedures to ensure compliance with the Freedom of Information Act 2000. The role includes providing guidance and updates to Trust staff as necessary. As required, the IG Manager will provide specialist advice on matters relating to Personal Information
Managers	Managers and supervisors are responsible for ensuring that staff who report to them have suitable access to this policy and it's supporting documents and that the procedures in this policy and supporting documents are implemented in their area of authority. Managers have the responsibility to ensure that from the time of receipt of an FOI request, concerns at raised with the IG team or stating what is or is not available to ensure the request is forwarded in a timely manner to another area or clarity sought from the requester.

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<p>Information Governance (IG) Group</p>	<p>The IG Group is responsible for reviewing the Trust's compliance with the Act and reporting on FOI developments to the Assurance, Risk and Compliance Group, overseeing / monitoring all FOI Act policy, procedures and guidance and to challenge and manage any appropriate exemptions. The Director of Corporate Development Governance and Assurance this Group.</p>
<p>All Trust Employees</p>	<p>All staff have a responsibility to ensure they comply with the Freedom of Information policy. This includes:</p> <ul style="list-style-type: none"> • Promoting good practice and notify their line managers if the procedures are not being followed. • the creation and management of records and information in accordance with the Trusts Records Management procedures and processes • Comply with all requests from the IG department as part of all FOI requests. <p>Obligations on all members of staff shall be addressed at the recruitment stage and all contracts of employment shall contain a Freedom of Information Act clause. Freedom of Information expectations of staff shall be included within appropriate job definitions. Failure to comply with this Policy and its associated procedures may result in disciplinary action.</p> <p>Staff also have a responsibility to:</p> <ul style="list-style-type: none"> • Support the Trust to achieve its Vision and Values • Follow duties and expectations of staff as detailed in the NHS Constitution – Staff Responsibilities

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7. SUBSTANTIVE CONTENT

7.1. Statutory Obligations

Northampton General Hospital NHS Trust is required to meet a number of statutory obligations under the FOIA. These are:

- To adopt and maintain a Publication Scheme
- To respond to requests for information in compliance with the terms of the FOIA

7.1.1. Northampton General Hospital NHS Trust has published information on the Trust:

- Web site to provide public access to Trust information under the requirements of the FOIA Publication Scheme¹.
- Intranet site to provide Trust staff with key information regarding the FOIA and actions that need to be taken to allow the Trust to comply with the FOIA².

Additionally, the Information Commissioner's Office (ICO) "Guide to Freedom of Information" for Public Authorities³ explains the obligations of Public Authorities under the Freedom of Information Act 2000, answers many frequently asked questions and gives practical examples to illustrate how to apply the Act in practice.

7.2. Publication Scheme

7.2.1 Northampton General Hospital NHS Trust has adopted the 2013 Model Publication Scheme for Health Bodies in England (this includes NHS Trusts), as set out by the Information Commissioner, and has made it available on-line.

A guide to the Publication Scheme has also been produced and is similarly available. The Publication Scheme will be regularly reviewed by Information Governance Team and updated to ensure the relevance of information contained within it.

The documents available through the Trust's Publication Scheme will be the final approved versions only. It is the Trust's policy not to include draft documents in this Scheme.

7.2.2 Requests for a hard copy of information / documents contained within the Publication Scheme may be made to the Information Governance Manager at Northampton General Hospital NHS Trust, Cliftonville, Northampton, NN1 5BD

¹ Link to Freedom of Information Pages on the Trust Website:
<http://www.northamptongeneral.nhs.uk/AboutUs/FOI/FOI.aspx>

² Link to Freedom of Information Pages on the Information Governance (IG) Pages of the Trust Intranet:
<http://thetreet/CorporateInformation/Departments/InformationGovernance/FreedomofInformation/FreedomofInformationcontents.aspx>

³ Link to the Information Commissioner's Website:
<https://ico.org.uk/for-organisations/guide-to-freedom-of-information/>

7.3. Responding to Requests for Information

7.3.1 The FOIA confers two general rights on the public, a right:

- To be informed whether a public body holds information, which has been requested; and
- To see that information

7.3.2 A request for information under the general rights of access must be received in writing, stating the name of the applicant, an address for correspondence, and describe the information requested but it does not have to quote the FOIA to be a valid request. It is therefore essential that all staff are aware of their responsibilities to recognise requests and to act in compliance with the legislation.

7.3.3 For the purpose of general rights of access, a request for information is to be treated as made in writing if it is transmitted by e-mail or fax and provided the request is received in legible form and is capable of being used for subsequent reference/reply

7.3.4 If a verbal request for information is received, Trust staff should ask the applicant to put their request in writing to the Information Governance Manager, Northampton General Hospital NHS Trust, Cliftonville, Northampton, NN1 5BD or using the e-mail address foi@ngh.nhs.uk

7.3.5 If a requester is unable to put their request in writing, the Information Governance Manager should be informed in order to fulfil the Trust's duty to provide advice and assistance. The Information Governance Manager will take reasonable steps to ensure that appropriate assistance is given to enable that individual to make a request for information.

7.3.6 All requests for information that come under the Freedom of Information Act

- Must be date stamped with the date that the request was received into the department
- Passed to the Information Governance Manager within one working day.
- Requests received by email must be forwarded to foi@ngh.nhs.uk

7.3.7 It is not appropriate for staff to refer requests to the Information Governance Manager where:

- The information is already accessible to the applicant by other means. This includes providing information leaflets or other material that has already been approved for publication by the Trust for example the Annual Report
- The information is that which is released as part of the Trusts normal business practices. This includes information on the way we work, information relating to case work, or providing information on the current care and treatment of an individual using established practices

7.3.8 It is not intended that the system for managing FOI requests replace existing business processes that are functioning adequately. See Appendix 1 "What is a request for information?"

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7.3.9 Wherever possible the information will be supplied in the format requested by the applicant. However, requests can be met by providing a copy of the original document, as a summary of the original or even by allowing the applicant to visit the Trust to view the document(s).

7.3.10 The Trust has established systems and procedures to process applications and to monitor the provision of information arising from requests under the FOIA. A disclosure log is maintained of all requests for information under the FOIA general rights of access

7.3.11 It is a legal requirement that requests for information are met within 20 working days of receipt. Northampton General Hospital NHS Trust will endeavour to respond to all requests within the 20 working day timescale as set out by the Act

7.4. Exemption Information

7.4.1 The FOIA is designed to create a culture of openness and accessibility, to allow individuals to access more information held within public authorities than they could before. However this entitlement to information is not unlimited

7.4.2 The FOIA recognises that there is a need to limit the right of access and this is done by the engagement of the exemptions. Several sections of the FOIA confer an absolute exemption on the disclosure of information. These may also exceptionally have the effect of exempting Northampton General Hospital NHS Trust from confirming or denying that the information which has been requested is held by us. However we will always tell the applicant if we are withholding information or refusing to confirm or deny the existence of any information.

7.4.3 Other sections of the FOIA directs the Trust to consider whether the public interest in maintaining the exemption is greater than the public interest in disclosing the information at all

7.4.4 Part 11 of the FOIA sets out the detail of the exemptions which may be considered when information which is the subject of a request is considered particularly sensitive. The use of any exemption has to be justified; even when the engagement of an exemption can be justified Northampton General Hospital NHS Trust may decide not to apply it in a spirit of openness and transparency. The exemptions fall into two categories, those that are 'absolute', and those that are 'qualified'.

7.5. Absolute Exemptions

Absolute exemptions may apply when the harm that would be caused by a disclosure is already established. A few examples of when absolute exemptions may apply are:

- When a request is made by an individual to access their personal data under FOIA when this should be accessed via the Data Protection Act 1998 (DPA)
- When a request is made to access someone else's personal data
- When a request is made to release information, however the disclosure of that Information could result in an actionable breach of confidence
- When a request for information is made to us when it can obtain elsewhere without making a FOI request e.g. on our website (a full list of the exemptions can be seen in Appendix 2)

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7.6. Qualified Exemptions

Qualified exemptions only apply when the public interest in withholding the information outweighs the public interest in disclosure. A few examples of when a qualified exemption may apply are:

- When a request for information is made, however the Trust intends to publish that information publicly at a later date e.g. a few months from the time the request was made
- When you request information where the disclosure could prejudice someone's commercial interests
- When you request information that relates to advice we may have obtained from our legal advisors (a full list of the exemptions can be seen in Appendix 2).

7.7. Disproportionate Cost Exemption

7.7.1 In the event that at first glance it is considered the disproportionate cost exemption might apply, then the relevant department will be asked for an estimate of cost (which should be supported by clear evidence) – no effort should be made to find the information at this stage. The estimate should instead be completed as a matter of urgency and the results should be notified to the Information Governance Manager within 48 hours

7.7.2 Where Northampton General Hospital NHS Trust estimates that the cost of answering the information request will exceed the appropriate limit of 18 hours which is a cost of £450 (at £25 per hour) it will be under no obligation to provide the information but must inform the applicant of the reasons for not doing so and give the applicant the opportunity to refine the request in accordance with Section 16 of the FOIA which requires that the applicant must be provided with advice and assistance. This obligation will normally be undertaken by the Information Governance Manager.

The Trust must still confirm or deny whether it holds the information requested unless the cost of this alone would exceed the appropriate limit.

7.8. Other Circumstances in which the Trust need not comply with FOI Requests

There are also certain other circumstances in which Northampton General Hospital NHS Trust is not obliged to comply with requests for information:

- If it is considered vexatious in accordance with Section 14 FOIA. In these circumstances, Northampton General Hospital NHS Trust will log all requests for monitoring purposes and will be able to identify repeated and or vexatious requests
- If a fees notice has been issued to an applicant and any fee is not paid within three months of the date of the notice

7.9. Procedure for Handling Requests

- 7.9.1** Requests for information must be put in writing (including email) to Northampton General Hospital NHS Trust (e-mail foi@ngh.nhs.uk). Verbal requests are not valid requests under the FOIA, and while they may be dealt with in the course of normal business, the requirements of the FOIA do not apply. If a request is valid under the FOIA then the FOI process must be instigated and the deadline for a substantive reply to the applicant is 20 working days
- 7.9.2** The procedure to be followed at Northampton General Hospital NHS Trust is shown in the diagram at Appendix 3
- 7.9.3** In order for a request to be valid, Northampton General Hospital NHS Trust must understand what information, in general terms, is being asked for. If this is not clear from the correspondence from the applicant to the extent that we are unable to commence a search for the information, then this is not a valid request and will not become so until clarification is received. In such cases the 20 day time limit for compliance will commence only when the valid request (clarification) is received
- 7.9.4** In those circumstances where we have received a valid request but because of its volume we ask the applicant to refine it so that it falls below the limit of disproportionate cost; this process must be completed within the 20 day limit which starts with the receipt of the initial valid albeit voluminous request. Any refined request received from the applicant would constitute a new request for information.
- 7.9.5** Requests for advice, assistance or referral should be made within 48 hours of the request being received by Northampton General Hospital NHS Trust

7.10. FOIA Review and Complaint to the Information Commissioner

- 7.10.1** It is a requirement of the FOIA that all public authorities subject to the FOIA implement procedures for dealing with complaints about the discharge of the duties of the Trust under the Act, including the handling of requests for information and the management of requests made for information from the Publication Scheme. If applicants are dissatisfied with the handling of their request for information they have the right to ask for an internal review. Internal review requests should be submitted to the Trust within two months of the date of receipt of the final response.
 FOI Requests for review must be handled separately to the NHS Complaints procedure
- 7.10.2** Northampton General Hospital NHS Trust has put in place an independent FOI review process headed by Deputy Director of Quality and Governance.
- 7.10.3** Information about the review process must be included in any response correspondence sent to the applicant, and specifically in particular to any Refusal Notice under Section 17 (1) of the FOIA which is sent to the applicant.
- 7.10.4** All complaints from applicants about Northampton General Hospital NHS Trust FOIA procedures, and requests for review against any decisions made, must be referred immediately upon receipt to the Trust Information Governance Manager

7.10.5 The Northampton General Hospital NHS Trust procedure also refers applicants to their right under section 50 of the Act to apply to the Information Commissioner if they remain dissatisfied with the conduct of the Trust following attempts at local resolution of their complaint. In any correspondence with the applicant giving any decision in respect of which the applicant has a right of complaint, the applicant will be notified of the right to complain under the Trust's internal procedure and of the right to complain to the Information Commissioner.

7.11. Fees

The FOIA requires public authorities to publicise their policies in relation to the charging of Fees and Disbursement under the FOIA.

Northampton General Hospital NHS Trust has approved the following process:

- 7.11.1** Unless the amount of information requested clearly falls outside the limit set by Fees Regulations which apply to the FOIA and the DPA then Northampton General Hospital NHS Trust will not normally levy any Fee for dealing with a request. (However see section 7.12 – Charges).
- 7.11.2** Where the statutory cost limit as established in the Regulations is clearly exceeded, then Northampton General Hospital NHS Trust will provide the applicant with an estimate of costs and will normally ask the applicant to refine their request so as to fall within the cost limit. Where an applicant fails to respond to such a request, or the request still falls outside the cost limit, the request will normally be refused under the exemption provided by S.12.(1) of the FOIA.
- 7.11.3** Northampton General Hospital NHS Trust does not normally allow applicants to pay for information where costs exceed the regulatory limit. On the rare, exceptional circumstances in which payment may be agreed, a Fees Notice will be issued and the complete cost of dealing with the request in accordance with the provisions of the FOIA and the Fees Regulations will be charged.
- 7.11.4** In such exceptional circumstances Northampton General Hospital NHS Trust estimates costs based on the statutorily provided basis of £25.00 per hour. It should be noted that it is the complete cost of location etc which is chargeable not that which falls outside the £450.00 cost limit.
- 7.11.5** If a Fees Notice is issued and no response is received within 3 months the request for information will be considered to have lapsed.

7.12. Charges

- 7.12.1** The responsibility of Northampton General Hospital NHS Trust is limited to disclosing information in the format it is held and there will be no charge for information which can be accessed via our website, or where it is provided in a single hard copy. However where other formats or copies are requested then the disbursement charges will applied which must be paid for before the information is provided.
- 7.12.2** Information on the Trust disbursement charges is available on the Trust Website:
<http://www.northamptongeneral.nhs.uk/AboutUs/FOI/Disbursementcosts/Disbursementcosts.aspx>

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7.13. Breaches of the FOIA Policy

7.13.1 Compliance with all Northampton General Hospital NHS Trust Policies and Procedures are a condition of employment and a breach of policy may result in disciplinary action.

7.13.2 This Policy and Procedure document is complimentary to other Northampton General Hospital NHS Trust Policies and protocols and should be read in conjunction with them.

Breaches of policy include the following actions:

- Altering, defacing, blocking, erasing, destroying or concealing information with the intention of preventing disclosure
- A deliberate breach of patient or staff confidentiality
- Persistent failure to provide information within our statutory timescales.

This list is not exhaustive, but is provided as an indication of unacceptable conduct which may lead to gross misconduct under the Trust’s Disciplinary Policy.

8. IMPLEMENTATION & TRAINING

- Freedom of Information procedures are discussed at induction and published on the Trust intranet.
- Information governance is included in the Trust’s Mandatory Training Policy.
- All employees have a confidentiality clause in their signed contracts obliging them to comply with confidentiality practices.
- This policy will be made available on the Trust intranet, which can be accessed by all staff.
- The policy will be distributed to all heads of departments who will disseminate to their team members
- The policy co-ordinator will retain all versions of the policy for future reference when updated

9. MONITORING & REVIEW

Monitoring and review are key activities in Information Governance compliance assurance which includes Trust compliance with the requirements of the Freedom of Information Act 2000.

The table which follows provides a brief summary of the Northampton General Hospital NHS Trust Freedom of Information primary standards and assurance programme.

The diagram below provides an overview of the Freedom of Information reporting structure including reporting to members of the Trust Board who receive periodic assurance that the management and accountability arrangements are adequate and that any risks arising from the Trust management requirements under the Freedom of Information Act are identified and addressed. Frequency of reporting will address and reflect the significance of any risks identified.

Policy review 3 years from the date of approval unless required by a change in legislation

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Minimum policy requirement to be monitored	Process for monitoring	Responsible individual/ group/ committee	Frequency of monitoring	Responsible individual/ group/ committee for review of results	Responsible individual/ group/ committee for development of action plan	Responsible individual/ group/ committee for monitoring of action plan
Section 45 Code of Practice under the FOI Act. Requirement to: Maintain a log of all requests for information under FOIA and any complaints received in respect of the same to ensure consistency and identify repeat, duplicate or vexatious requests	Departmental reporting via Corporate Scorecard	Information Governance Manager	Monthly departmental reporting	Corporate Governance Manager •Director of Corporate Development Governance and Assurance	Information Governance Manager	Corporate Governance Manager Director of Corporate Development Governance and Assurance
Compliance with FOI statutory requirement to respond to requests for information within 20 working days	Departmental reporting via Corporate Scorecard	Information Governance Manager	Monthly departmental reporting	Corporate Governance Manager Director of Corporate Development Governance and Assurance	Information Governance Manager	Corporate Governance Manager Director of Corporate Development Governance and Assurance
NHS Information Governance Toolkit. Corporate Information Assurance, Requirement No 603: Document and make publically available procedures to ensure compliance with the FOIA	Review of the FOI publication scheme and requests received	Information Governance Manager	Annually	IG Group	Information Governance Manager	Corporate Governance Manager Director of Corporate Development Governance and Assurance
Staff will be trained on Freedom of Information procedures at corporate induction sessions.	Departmental reporting and grading of training assessments sheets	Information Governance Manager	Monthly	Corporate Governance Manager Director of Corporate Development Governance and Assurance IG Group	Information Governance Manager	Assurance Risk and Compliance Group (ARC)

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10. REFERENCES & ASSOCIATED DOCUMENTATION

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<http://www.legislation.gov.uk/ukpga/Eliz2/6-7/51> [Accessed 6th October 2015]

Associated Trust documents

Northampton General Hospital NHS Trust (2016) *Disciplinary*. NGH-PO-028. Northampton: NGHT

Northampton General Hospital NHS Trust (2015) *Electronic mail and internet (including all social networking sites)*. NGH-PO-10-02. Northampton: NGHT

Northampton General Hospital NHS Trust (2014) *Mandatory training*. NGH-PO-306. Northampton: NGHT

Northampton General Hospital NHS Trust (2015) *Data protection and confidentiality policy*. NGH-PO-334. Northampton: NGHT

Northampton General Hospital NHS Trust (2015) *Information governance*. NGH-PO-233. Northampton: NGHT

Northampton General Hospital NHS Trust (2015) *Corporate documentation management (information lifecycle)*. NGH-PO-123. Northampton: NGHT

APPENDICES

Appendix 1 What is a request for information?

Information is made available by the Trust to its patients and the public on a daily basis. It would be overly bureaucratic to attempt to record and address all of this routine activity for FOIA purposes. Wherever requests for information, either verbal or written, are routine day-to-day matters and there is no issue about providing it, then this 'business as usual' practice should continue.

The following is a list of circumstances when requests should not be dealt with as locally 'business as usual' practice but should be referred to the designated person(s) trained to deal with FOI.

Requests for information that fall into any of the categories listed below should be promptly forwarded to the Freedom of Information Team.

No.	<u>The request should be referred to the Information Governance Manager if :-</u>
1	It is an unusual request e.g. for obscure information or exceptional request
2	When you think the request should be formally dealt with under FOIA
3	If the request says "I request this in accordance under the Freedom of Information Act 2000" (or words to that effect)
4	If the information requested is confidential
5	If the request is for personal information about a member of staff or patient
6	If the request for information is from a solicitor and related to legal action
7	You do not think you should provide that information
8	When the information required will identify a 3rd party – e.g. a member(s) of staff, a patient or a service provider/contractor
9	When the information can only be made available by inspecting a document on site
10	When you do not have the information requested but think it is or may be held by the Trust
11	If the request is complex and involves more than one department
12	If the information is asked for in a different format e.g. paper copies onto a CD Rom etc; or in a different language
13	When the information requested is extensive or difficult to find and will take considerable time to collect and collate it
14	When it will cost any money to provide it (e.g. because of the need to photocopy or postage) and staff time (more than 2.5 days/18 hours work)
15	If the request is ambiguous and you need to ask the requestor to clarify what exactly they want to know
16	If the request is threatening or vexatious (Information Commissioner's guidance)
17	If you think an exemption applies or should apply
18	If you are otherwise concerned about the request and need advice

POLICY

Appendix 2 Exemptions

Absolute Exemptions

- Section 21– Information accessible to applicant by other means
- Section 23 – Information supplied by, or relating to, bodies dealing with security matters (applies to specified bodies e.g. Security Service)
- Section 32 – Information in Court records
- Section 34 – Information protected by Parliamentary Privilege
- Section 36 – Prejudice to effective conduct of public affairs: House of Commons or House of Lords)
- Section 40 – Personal Information
- Section 41 – Information provided in confidence
- Section 44 – Prohibitions on disclosure (where information disclosure is prohibited by law)

Qualified Exemptions

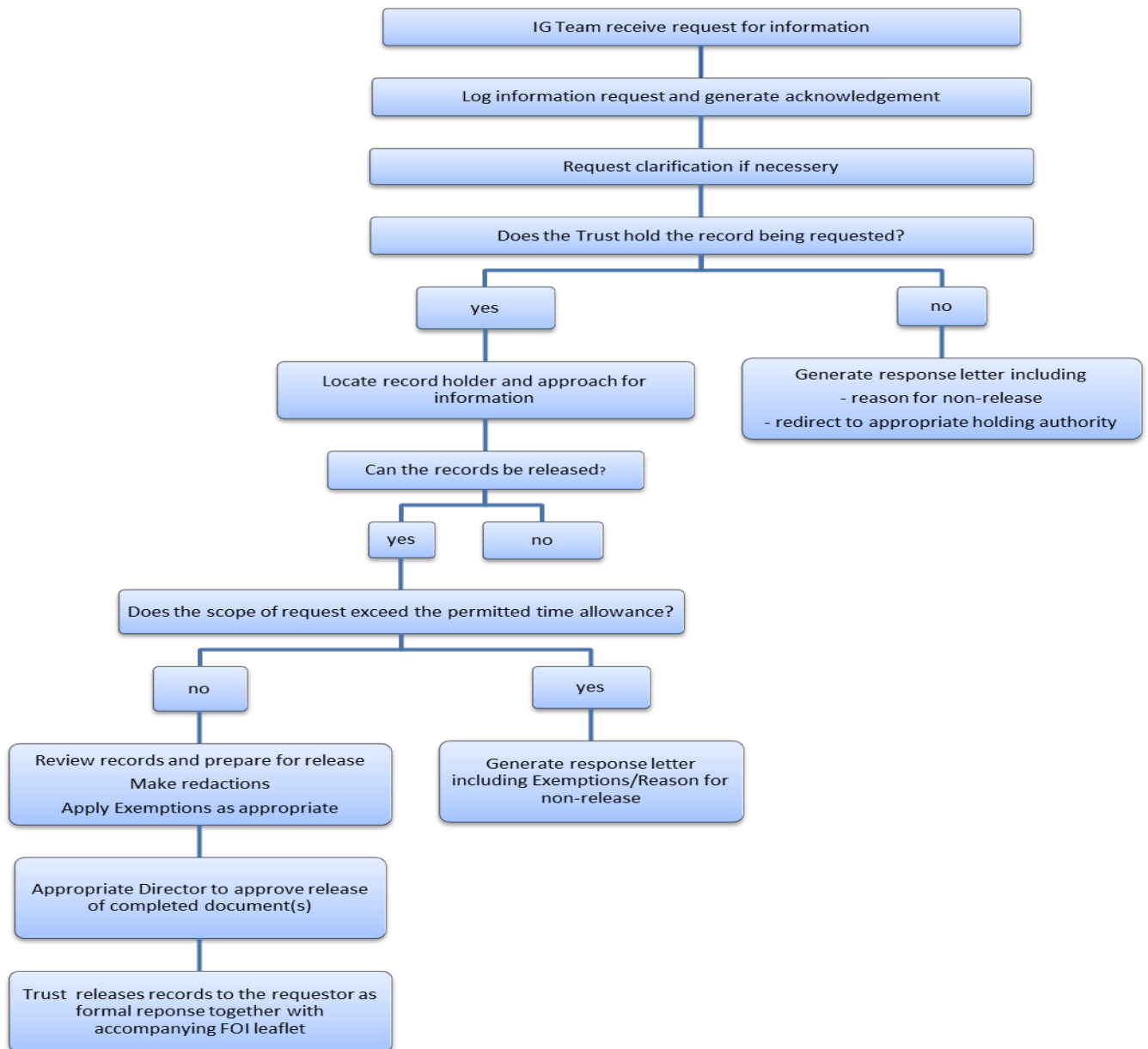
- Section 22 and 22A - Information intended for future publication and research information
- Section 24 – National Security
- Section 25 – *Supplementary provisions regarding certificate issued by a Minister under SS 23 and 24*
- Section 26 – National Defence
- Section 27 – International Relations
- Section 28 – Relations within the United Kingdom
- Section 29 – The Economy
- Section 30 – Investigations and proceedings conducted by public authorities
- Section 31 – Law enforcement
- Section 33 – Audit Functions
- Section 35 – Formulation of Government Policy
- Section 37 – Communications with Her Majesty, etc. and honours
- Section 38 – Health and Safety
- Section 39 – Environmental
- Section 42 – Legal Professional Privilege
- Section 43 – Commercial Interests

POLICY

Appendix 3 NGH Procedures for processing FOI Requests

Receiving and Processing Requests for Information

If received by any department other than the IG Team, please forward the request ASAP as the 20 working days starts at this point.



POLICY

FORM 1 & 2 - To be completed by document lead

FORM 1a- RATIFICATION FORM - FOR COMPLETION BY DOCUMENT LEAD

Note: Delegated ratification groups may use alternative ratification documents approved by the procedural document groups.

DOCUMENT DETAILS

Document Name:	Freedom of Information Act 2000 Pol & Proc
Is the document new?	Yes/ No
If yes a new number will be allocated by Governance	New Number
If No - quote old Document Reference Number	NGH-PO-096
This Version Number:	Version: 4
Date originally ratified:	May 2014
Date reviewed:	March 2016
Date of next review: a 3 year date will be given unless you specify different	Date: Highlight: (1 year) (2 year) (3 year)
If a Policy has the document been Equality & Diversity Impact Assessed? (please attach the electronic copy)	Yes / No

DETAILS OF NOMINATED LEAD

Full Name:	Kehinde Okesola
Job Title:	Information Governance Manager
Directorate:	Governance
Email Address:	Kehinde.Okesola @ngh.nhs.uk
Ext No:	3881

DOCUMENT IDENTIFICATION

Keywords: please give up to 10 – to assist a search on intranet	FOI, Freedom Information, Request, exemptions, open, ICO
---------------------------------------------------------------------------	----------------------------------------------------------

GROUPS WHO THIS DOCUMENT WILL AFFECT?

(please highlight the Directorates below who will need to take note of this updated / new Document)

Anaesthetics & Critical Care	General Medicine & Emergency Care	Medical Physics
Child Health	Gynaecology	Nursing & Patient Services
Corporate Affairs	Haematology & Oncology	Obstetrics
Diagnostics	Head & Neck	Ophthalmology
Estates & Facilities	Human Resources	Planning & Development
Finance	Infection Control	Trauma & Orthopaedics
General Surgery	Information Governance	Trust Wide

TO BE DISSEMINATED TO: NB – if Trust wide document it should be electronically disseminated to Head Nurses/ Dm’s and CD’s .List below all additional ways you as document lead intend to implement this policy such as; as presentations at groups, forums, meetings, workshops, The Point, Insight, newsletters, training etc below:

Where	When	Who
Mandatory Training and Induction	Twice monthly induction	All new staff
ROK sessions, training refreshers	As per advertised training schedule or as and when arranged departmentally	All staff groups

FORM 1 & 2 - To be completed by document lead

FORM 2 - RATIFICATION FORM to be completed by the document lead

Please Note: Document will not be uploaded onto the intranet without completion of this form

CONSULTATION PROCESS

NB: You MUST request and record a response from those you consult, even if their response requires no changes. Consider Relevant staff groups that the document affects/ will be used by, Directorate Managers, Head of Department ,CDs, Head Nurses , NGH library regarding References made, Staff Side (Unions), HR Others please specify

Name, Committee or Group Consulted	Date Policy Sent for Consultation	Amendments requested?	Amendments Made - Comments
Louise Simms-Ward - Governance	18 Feb 2016	Use of easily understood words Clear	Simpler words have been used
Caroline Corkerry	18 Feb 2016	Review of version control, responsibilities and the review period for this policy	Amendment made
Sean McGarvey	18 Feb 2016	Clearly defined responsibilities	Amendment made
Clare Topping	18 Feb 2016	Summary review and Rewording of section 7.5 and 7.6	Reworded those sections
Julie Wilson	18 Feb 2016	Include exemption sub section 22A for research information	Added as requested
Fiona Barnes	18 Feb 2016	List of staff groups to include volunteers	Added as requested
Andrea Chown	18 Feb 2016	Examples of breaches Formatting	Added as requested

Existing document only - FOR COMPLETION BY DOCUMENT LEAD

Have there been any significant changes to this document? <i>if no you do not need to complete a consultation process</i>	YES / NO	
Sections Amended:	YES / NO	Specific area amended within this section
Re-formatted into current Trust format	YES / NO	
Summary/ Introduction/Purpose	YES / NO	
Scope	YES / NO	
Definitions	YES / NO	
Roles and responsibilities	YES / NO	
Substantive content	YES / NO	
Monitoring	YES / NO	
Refs & Assoc Docs	YES / NO	
Appendices	YES / NO	

FORM 3- RATIFICATION FORM (FOR PROCEDURAL DOCUMENTS GROUP USE ONLY)			
Read in conjunction with FORM 2			
Document Name:	Freedom of Information Act 2000 Policy and procedure	Document No:	NGH-PO-096
Overall Comments from PDG			
	YES / NO / NA	Recommendations	Recommendations completed
Consultation Do you feel that a reasonable attempt has been made to ensure relevant expertise has been used?	YES / NO / NA		
Title -Is the title clear and unambiguous?	YES / NO / NA		
Is it clear whether the document is a strategy, policy, protocol, guideline or standard?	YES / NO / NA		
Summary Is it brief and to the point?	YES / NO / NA	Needs to explain what is in the policy	Completed
Introduction Is it brief and to the point?	YES / NO / NA		
Purpose Is the purpose for the development of the document clearly stated?	YES / NO / NA		
Scope -Is the target audience clear and unambiguous?	YES / NO / NA		
Compliance statements – Is it the latest version?	YES / NO / NA	Equality and Diversity needs updating	Completed
Definitions –is it clear what definitions have been used in the	YES / NO / NA		
Roles & Responsibilities Do the individuals listed understand about their role in managing and implementing the policy?	YES / NO / NA		
Substantive Content is the Information presented clear/concise and sufficient?	YES / NO / NA		
Implementation & Training – is it clear how this will procedural document will be implemented and what training is required?	YES / NO / NA		
Monitoring & Review (policy only) -Are you satisfied that the information given will in fact monitor compliance with the policy?	YES / NO / NA	Table is more of a reporting structure and is not explaining the policy – to be moved to section 7 (Substantive Content)	This has been taken out as it has no benefit to staff reading this policy. It is an internal process within the IG department and senior management
References & Associated Documentation / Appendices - are these up to date and in Harvard Format? Does the information provide provide a clear evidence base?	YES / NO / NA	Appendix 3 needs reviewing – Is it a form or a flow chart? References updated by library	Completed. Changed to a flow chart. Completed
Are the keywords relevant	YES / NO / NA		
Name of Ratification Group: Procedural Documents Group	Ratified Yes/No: Once amended can be chair approved		Date of Meeting: 21/04/2016