

## Council of Governors: Summary Sheet

**Title of Paper:** Governor Questions to Board

**Presented By:** Jayne Brown OBE, Chair

<b>Action Required:</b>	<b>For Information</b>	<input checked="" type="checkbox"/>	<b>For Ratification</b>	<input type="checkbox"/>	<b>For a decision</b>	<input type="checkbox"/>
	<b>For Feedback</b>	<input type="checkbox"/>	<b>Vote required</b>	<input type="checkbox"/>	<b>For Receipt</b>	<input type="checkbox"/>

To which duty does this refer:

Holding non-executive directors individually and collectively to account for the performance of the Board	X
Appointment, removal and deciding the terms of office of the Chair and non-executive directors	
Determining the remuneration of the Chair and non-executive directors	
Appointing or removing the Trust's auditor	
Approving or not the appointment of the Trust's chief executive	
Receiving the annual report and accounts and Auditor's report	
Representing the interests of members and the public	X
Approving or not increases to non-NHS income of more than 5% of total income	
Approving or not significant transactions including acquisitions, mergers, separations and dissolutions	
Jointly approving changes to the Trust's constitution with the Board	
Expressing a view on the Trust's operational (forward) plans	
Consideration on the use of income from the provision of goods and services from sources other than the NHS in England	
Monitoring the activities of the Trust to ensure that they are being conducted in a manner consistent with its terms of authorisation and the constitution	X
Monitoring the Trust's performance against its targets and strategic aims	X

### How does this item support the functioning of the Council of Governors?

Putting questions to the Board allows governors an additional measure to hold the Trust to account for its performance and to ensure that the views of governors and members are heard and responded to at the highest level.

**Author of Report:** Governors

**Designation:**

**Date:** February 2020

December 2019

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### **Question from Jules Jones, Public Governor**

#### **Re: Sale of personal medical data**

The Clinical Practice Research Datalink issues licences on a commercial basis to companies, including big pharma, to use patients' confidential medical records for research purposes. The Observer reports (8/12/19) that 1 in 7 GP practices allow their patients' records to be sold in this way.

Does the Clover Group allow patients' confidential medical records to be sold? If so, how are patients' rights to privacy and confidentiality being respected? How have patients been consulted on, and informed of this use of their confidential medical records? How can they opt out if they want to?

How have NEDS been assured?

*Please don't answer by telling me that its anonymised, This is a sticking plaster because modern data aggregation can reconnect the name.*

#### **Response by Richard Mills, Chair of Finance & Performance Committee. Assured by Jayne Brown OBE, Trust Chair**

I can confirm this very comprehensive response provides the necessary assurance to me.

#### **Response from Clover Practice**

Thank you for your question. The only time data is shared outside direct patient care is in anonymised format (usually in amalgamated format) for the purpose of predictive risk analysis, payment checks (activity checks for our claims against LCSs / capitation etc) and annual diabetes surveys.

The Clover Practice does not receive any payments for the sale of any data and I can confirm that access to data is never sold to third parties. Also, there is an extensive approach to opt-out from sharing advertised on our websites and in the waiting rooms in the form of privacy notices, but this is aimed at the opt-out from Summary Care Records and ECR, not the type of data described in your question.

In relation to the use of data for onward research purposes, there are opt-in facilities to provide GP data to Research One (University of Leeds and UK Government Technological Strategy Board), UK BioBank and PHE Surveillance. The Clover Practice is opted OUT of all these services. The Clinical Practice Research Datalink quoted in the original question sits under the National Institute for Health Research governance as part of the Department of Health. The service is GDPR and DSPT (Data Security and Protection toolkit) compliant, is approved by the Research Ethics Committee and uses de-identified medical data to provide anonymised data sets to health researchers. However, the Clover Practice is NOT opted in to this service at this point.

From a GDPR point of view, anonymised means that the data cannot be re-identified even with reference to other data items which may be held elsewhere. Data which can be re-identified is classed as pseudonymised. Data which is genuinely anonymised is exempt from GDPR whereas pseudonymised data is still covered by GDPR.

Attached is a copy of the Clover Practice's GDPR notice. I hope that and the content of the response provides the assurance you require.



GDPR Clover Patient  
Notice.docx

January 2020

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### **Question from Adam Butcher, Service User Governor**

In the light of the ongoing emergency to the coronavirus what is the trust doing to make sure that our service users and staff are safe?

Response to be provided