**Freedom of Information Policy**

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**Table of contents**

[1 Introduction 4](#_Toc103174421)

[1.1 Policy statement 4](#_Toc103174422)

[1.2 Status 4](#_Toc103174423)

[1.3 KLOEs (England only) 4](#_Toc103174424)

[1.4 Training and support 5](#_Toc103174425)

[2 Scope 5](#_Toc103174426)

[2.1 Who it applies to 5](#_Toc103174427)

[2.2 Why and how it applies to them 5](#_Toc103174428)

[3 Definition of terms 6](#_Toc103174429)

[3.1 Absolute exemption 6](#_Toc103174430)

[3.2 Applicant 6](#_Toc103174431)

[3.3 Duty to confirm or deny 6](#_Toc103174432)

[3.4 Exemption pending notice 6](#_Toc103174433)

[3.5 Fees notice 6](#_Toc103174434)

[3.6 Fees regulations 6](#_Toc103174435)

[3.7 General right of access 7](#_Toc103174436)

[3.8 Information Commissioner 7](#_Toc103174437)

[3.9 Lord Chancellor’s Department 7](#_Toc103174438)

[3.10 Public authority 7](#_Toc103174439)

[3.11 Publication scheme 8](#_Toc103174440)

[3.12 Qualified exemption 8](#_Toc103174441)

[3.13 Refusal notice 8](#_Toc103174442)

[3.14 Transfer notice 8](#_Toc103174443)

[4 The Freedom of Information Act 2000 (FOIA) 8](#_Toc103174444)

[4.1 Overview 8](#_Toc103174445)

[5 Principles 9](#_Toc103174446)

[5.1 Obligations under the Act 9](#_Toc103174447)

[5.2 Overarching principle 9](#_Toc103174448)

[5.3 Roles and responsibilities 10](#_Toc103174449)

[5.4 General rights of access 10](#_Toc103174450)

[5.5 Time limits 11](#_Toc103174451)

[5.6 Assessment of request 12](#_Toc103174452)

[5.7 Acknowledgement and logging of requests 12](#_Toc103174453)

[5.8 Request for clarification 13](#_Toc103174454)

[5.9 Allocation of request for draft response 13](#_Toc103174455)

[5.10 Conditions and exemptions 14](#_Toc103174456)

[5.11 Vexatious or repeated requests 14](#_Toc103174457)

[5.12 Charges and fees 15](#_Toc103174458)

[5.13 Means by which information will be conveyed 15](#_Toc103174459)

[5.14 Drafting of response 16](#_Toc103174460)

[5.15 Approval of response by senior management 16](#_Toc103174461)

[5.16 Final response sent to the applicant 16](#_Toc103174462)

[5.17 Duty to provide assistance 17](#_Toc103174463)

[5.18 Refusal of a request 17](#_Toc103174464)

[5.19 Filing 18](#_Toc103174465)

[5.20 Disclosure log 18](#_Toc103174466)

[6 Appeals process 19](#_Toc103174467)

[6.1 Internal review 19](#_Toc103174468)

[6.2 External review 19](#_Toc103174469)

[7 Transferring requests for information 19](#_Toc103174470)

[7.1 Overview 19](#_Toc103174471)

[7.2 Process 20](#_Toc103174472)

[8 Public sector contracts 21](#_Toc103174473)

[8.1 Overview 21](#_Toc103174474)

[9 Third parties 22](#_Toc103174475)

[9.1 Consultation from third parties 22](#_Toc103174476)

[9.2 Accepting information in confidence from third parties 23](#_Toc103174477)

[10 Complaints about the discharge of duties under the Act 23](#_Toc103174478)

[11 Model publication scheme 23](#_Toc103174479)

[11.1 Information publication 23](#_Toc103174480)

[11.2 Classes of information 24](#_Toc103174481)

[12 Training and compliance 25](#_Toc103174482)

[12.1 Training 25](#_Toc103174483)

[12.2 Monitoring compliance 26](#_Toc103174484)

[13 Summary 26](#_Toc103174485)

[Annex A – FOI request template 27](#_Toc103174486)

[Annex B – Exemption information under Part II 29](#_Toc103174487)

[Annex C – Timeline of process, considerations and actions 31](#_Toc103174488)

[Annex D – FOI request checklist 32](#_Toc103174489)

[Annex E – FOI acknowledgement letter template 37](#_Toc103174490)

[Annex F – FOI response letter template 38](#_Toc103174491)

[Annex G – PIT requirement delay letter template 39](#_Toc103174492)

[Annex H – Record of PIT meeting template 40](#_Toc103174493)

[Annex I – FOI request register 41](#_Toc103174494)

[Annex J – Disclosure log template 42](#_Toc103174495)

[Annex K – Organisation publication scheme 43](#_Toc103174496)

# Introduction

## Policy statement

The purpose of this document is to ensure that staff and patients at Sheerwater Health Centre are aware of the ways in which the organisation adheres to the [Freedom of Information (FoI) Act 2000](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwjw69Xc5ov2AhWQiVwKHW9kCucQFnoECA0QAQ&url=https%3A%2F%2Fwww.legislation.gov.uk%2Fukpga%2F2000%2F36%2Fcontents&usg=AOvVaw2ED-_lceYVKNX9EF_BgWVI) (referred to as the Act herein). The Act enables the public to access information held by public authorities in two ways:[[1]](#footnote-1)

* Public authorities are obliged to publish certain information about their activities
* Members of the public are entitled to request information from public authorities who, in turn, are required to provide the requested information within 20 working days, unless it is exempted

Sheerwater Health Centre will use all appropriate and necessary means to ensure that it complies with the Freedom of Information Act 2000 and associated Codes of Practice issued by the Lord Chancellor’s Department pursuant to Sections 45(5) and 46(6) of the Freedom of Information Act (FOIA).

It is important to note that the Act does not give individuals access to their own personal data, i.e., healthcare records. This is processed by means of a subject access request.

## Status

This document and any procedures contained within it are non-contractual and may be modified or withdrawn at any time. For the avoidance of doubt, it does not form part of your contract of employment.

## KLOEs (England only)

Specifically, Sheerwater Health Centre will need to answer the CQC Key Questions on ‘Effective’ and ‘Well-led’.

The following is the CQC definition of Effective:

*By effective, we mean that people’s care, treatment and support achieve good outcomes, promotes a good quality of life and is based on the best available evidence.*

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| **CQC KLOE E3** | How does the service make sure that staff have the skills, knowledge, and experience to deliver effective care, support and treatment? |

The following is the CQC definition of Well-led:

*By well-led, we mean that the leadership, management, and governance of the organisation assures the delivery of high-quality and person-centred care, supports learning and innovation and promotes an open and fair culture.*

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| **CQC KLOE W5** | Are there clear and effective processes for managing risks, issues and performance? |
| **CQC KLOE W6** | Is appropriate and accurate information being effectively processed, challenged and acted on? |
| **CQC KLOE W8** | Are there robust systems and processes for learning, continuous improvement and innovation? |

## Training and support

The organisation will provide guidance and support to help those to whom it applies to understand their rights and responsibilities under this policy. Additional support will be provided to managers and supervisors to enable them to deal more effectively with matters arising from this policy.

An Information Commissioner’s Office Freedom of Information [training video](https://www.youtube.com/watch?v=7P8qrS9zBsg) is available on YouTube.

# Scope

## Who it applies to

The Freedom of Information Act policy applies to all employees of the organisation and other individuals performing functions in relation to the organisation such as agency workers, locums and contractors. Furthermore, it applies to clinicians who may or may not be employed by the organisation but who are working under the Additional Roles Reimbursement Scheme (ARRS)[[2]](#footnote-2).

## Why and how it applies to them

The policy will provide a framework within which Sheerwater Health Centre will ensure compliance with the requirements of the Act and will underpin any operational procedures and activities connected with the implementation of the FOIA.

The organisation aims to design and implement policies and procedures that meet the diverse needs of our service and workforce, ensuring that none are placed at a disadvantage over others, in accordance with the [Equality Act 2010](https://www.legislation.gov.uk/ukpga/2010/15/contents). Consideration has been given to the impact this policy might have regarding the individual protected characteristics of those to whom it applies.

Any failure to adhere to this policy and its associated procedures may result in disciplinary action. Managers at all levels are responsible for ensuring that the staff for whom they are responsible are aware of and adhere to this policy. Managers are also responsible for ensuring staff are updated in regard to any changes in this policy.

# Definition of terms

## Absolute exemption

Applied to information that does not have to be released to the applicant either through a Publication Scheme or through the general right of access under the Act.

Information to which an absolute exemption applies does not require a public authority to take a test of prejudice or the balance of public interest to be in favour of nondisclosure. Reference to absolute exemptions can be found in Part I, Section 2 and Part II of the Act.

## Applicant

The individual(s), group or organisation requesting access to information under the Act

## Duty to confirm or deny

The FOI Act 2000 states that any person making a request for information to a public authority is entitled to be informed in writing by that authority whether the public authority holds the information specified in the request or not.

## Exemption pending notice

A written notification issued to an applicant stating it is not possible to confirm that an exemption applies and the issues remains under consideration within the organisation. An estimated date at which a firm judgement will be made will be stated.

## Fees notice

A written notification issued to an applicant stating that a fee is payable and exempts public authorities from being obliged to disclose information until the fee has been paid. The applicant will have three months from the date of notification to pay the fee before the request lapses.

## Fees regulations

National regulations that will prohibit a fee with regard to certain types of request, set an upper limit on amounts that may be charged and prescribe the manner in which any fees are to be calculated. The regulations will not apply where provision is made under another Act as to the fee that may be charged for the provision of particular information.

## General right of access

Section 1 of the Act confers a general right of access to information held by public authorities. An applicant has a right to be told whether the information requested is held by that authority and, if it is held, to have it communicated to them.

Provisions limiting an authority's duty under Section 1 appear in Sections 1(3), 2, 9, 12 and 14 and in Part II of the Act. The grounds in Sections 9, 12 and 14 relate to the request itself and the circumstances in which an authority is not obliged to comply with it. The provisions of Part II relate to the nature of the information requested.

## Information Commissioner

The Information Commissioner enforces and oversees the Data Protection Act 2018 and the Freedom of Information Act 2000. The Commissioner is a United Kingdom (UK) independent supervisory authority reporting directly to the UK Parliament and has an international role as well as a national one.

In the UK, the Commissioner has a range of duties including the promotion of good information handling and the encouragement of codes of practice for data controllers, that is, anyone who decides how and why personal data (information about identifiable, living individuals) is processed.

## Lord Chancellor’s Department

The Lord Chancellor's Department is responsible for the efficient administration of justice in England and Wales. Broadly speaking, the Lord Chancellor is responsible for:

* The effective management of the courts
* The appointment of judges, magistrates and other judicial office holders
* The administration of legal aid
* The oversight of a wide programme of government civil legislation and reform in such fields as human rights, freedom of information, data protection, data sharing, family law, property law, electoral and referenda law, defamation and legal aid

## Public authority

The Act is intended to have wide application across the public sector at national, regional and local level. In view of the large number of bodies and offices intended to fall within the scope of the Act it is not feasible to list each body individually.

Public authorities include the principal authorities in national and local government together with the principal authorities relating to the armed forces, NHS, education, the police and other public bodies and offices.

## Publication scheme

A scheme specifying the classes of information which a public authority publishes or intends to publish, the manner of publication and whether the information is available to the public free of charge or on payment.

## Qualified exemption

Information to which a qualified exemption applies requires a public authority to take a test of prejudice or to demonstrate that the balance of public interest is in favour of non-disclosure.

Reference to qualified exemptions can be found in Part I, Section 2 and Part II of the Act.

## Refusal notice

A written notification issued to an applicant stating the reasons for the decision to refuse the information requested including specification of any exemption that applies and providing information why the exemption applies if this is not already clear by the statement of the exemption applied.

It will include information about procedures for making a complaint and how to contact the Information Commissioner’s Office (ICO) if the applicant remains dissatisfied with the outcome of the organisation’s investigation of the complaint.

## Transfer notice

A written notification issued to an applicant to inform of one/some of the following:

* Advising the applicant that it does not hold part of the requested information, or all of it, whichever applies
* Informing the applicant that the information requested may be held by another public authority suggesting that the applicant re-applies to the authority which the original authority believes to hold the information and where reasonable providing him or her with contact details for that authority requesting for consent to transfer of a request for information to another authority
* The date a transfer has been made of a request for information to another authority

# The Freedom of Information Act 2000 (FOIA)

## Overview

The FOIA is part of the Government’s commitment to greater openness in the public sector, a commitment supported by Sheerwater Health Centre.

The FOIA will further this aim by helping to transform the culture of the public sector to one of greater openness. It will enable members of the public to question the decisions of public authorities more closely and ensure that the services we provide are efficiently and properly delivered. The Act replaces the non-statutory *Code of Practice on Openness in the NHS*.

The main features of the FOIA are:

* A general right of access from 1st January 2005 to recorded information held by public authorities, subject to certain conditions and exemptions. This places on Sheerwater Health Centre a duty to:
	+ Inform the applicant whether they hold the information requested, and
	+ Communicate the information to them, except in certain circumstances. Those circumstances include where information is exempted from disclosure because an absolute exemption applies or the public interest in maintaining a non-absolute exemption in question outweighs the public interest in disclosure
* An office of the Information Commissioner with wide powers to enforce the rights created by the Act and to promote good practice, and a new Information Tribunal
* A duty on the Lord Chancellor to publish Codes of Practice for guidance on specific issues

# Principles

## Obligations under the Act

In accordance with the Act, Sheerwater Health Centre must:[[3]](#footnote-3)

* Publish certain information proactively
* Respond to requests for information

By accepting these obligations, the organisation will be deemed to be operating in an open and transparent manner.

## Overarching principle

In general, the overarching principle of the Act is that people have a right to understand the activities of public authorities, including GP practices. The ICO states the following principles:3

* Everybody has a right to access official information
* Applicants do not need to give a reason for wanting the information. On the contrary, organisations must justify refusing to provide the information
* All requests for information must be treated equally except under some circumstances relating to vexatious requests and personal data. Furthermore, all requesters are to be treated equally, whether they are journalists, local residents, public authority employees or foreign researchers
* As all requesters are treated equally, you should only disclose information under the Act if you would disclose it to anyone else who asked

Information can be shared voluntarily outside the provisions of the Act.

## Roles and responsibilities

* **Caldicott Guardian**

The Caldicott Guardian has ultimate responsibility for Sheerwater Health Centre’s compliance with the FOIA and is responsible for providing advice and support to all staff.

* **Organisation manager**

The organisation manager, in their role as Senior Information Risk Owner (SIRO), is responsible for providing advice and guidance to all staff and they are also the nominated person to carry out an internal review of a response to an FOI enquiry.

* **Data Protection Officer**

The Data Protection Officer will provide expert advice with regard to the information request, the response and appeal process, if appropriate.

* **All staff**

All staff, including contractors, are responsible for ensuring that any requests for information that cannot be considered to be *‘business as usual’* and therefore fall under the FOIA are forwarded to the organisation manager immediately. This is to ensure that Sheerwater Health Centre is able to comply with its responsibility to acknowledge all FOIA requests within two working days and to respond within 20 working days.

Furthermore, all staff, including contractors, are responsible for responding to requests for information in order to comply with the FOIA received from the organisation manager in a timely manner to ensure that requests for information that they have access to can be completed within the statutory timescale of 20 working days.

## General rights of access

Section 1 of the FOIA gives a general right of access from 1 January 2005 to recorded information held by Sheerwater Health Centre, subject to certain conditions and exemptions.

Any person making a written request for information to this organisation is entitled:

* To be informed in writing whether Sheerwater Health Centre holds the information of the description specified in the request, and
* If this organisation holds the information, to have that information communicated to them. This is referred to as the ‘duty to confirm or deny’. These provisions are fully retrospective in that if Sheerwater Health Centre holds the information, it must provide it, subject to certain conditions and exemptions.

This organisation will ensure that procedures and systems are in place to facilitate access by the public to recorded information from this date.

A request for information under the general rights of access must be received in writing, stating the name of the applicant and an address for correspondence and a description of the information requested.

A FOI request form template is provided in [Annex A](#_Annex_A_–).

For the purposes of general rights of access, a valid request is to be treated as made in writing if it is transmitted by e-mail, is received in legible form and is capable of being used for subsequent reference. It would facilitate processing of the request if applicants could also provide a daytime contact telephone number when making their written application for information. However, this is not a requirement under the Act and applicants can refuse to give this information.

The Caldicott Guardian, SIRO and designated corporate IG lead must review and monitor the provision of information arising from each request under the Act. If a trend occurs, this information should be made available within the disclosure log section under the publication scheme.

## Time limits

Sheerwater Health Centre must ensure its compliance with the duty to confirm or deny and to provide the information requested within 20 working days of a request in accordance with Section 10 of the Act.

[Annex C](#_Annex_C_–) provides an appropriate timeline of process, considerations, and actions.

If the information requested by the applicant incurs a charge or a fee and the applicant has paid this within three months of receiving the fees notice, the working days in the period from when this organisation issued the fees notice to when the fee is received by the organisation will be disregarded for the purposes of calculating the twentieth working day following receipt. In essence, once the applicant has been requested to pay a fee the 20 working day clock is paused until the fee is paid.

If Sheerwater Health Centre chooses to apply an exemption to any information or to refuse a request as it appears to be vexatious or repeated or exceeds the appropriate limit for costs of compliance, a notice shall be issued within 20 working days informing the applicant of this decision (refusals will be in accordance with [Section 12](#_Refusal_of_requests)).

Once a FOI request has been received and processed by the organisation manager, the request will be forwarded to the Caldicott Guardian, SIRO and the designated IG lead who will be given a time scale to respond within 10 working days.

## Assessment of request

On receipt of an FOI request, the organisation manager will assess the request to ensure it is valid and clear. All requests should be submitted in writing and should contain the proper name of the applicant. Should a request be submitted verbally or under a pseudonym, the organisation manager will contact the applicant to advise them how to submit a valid FOI request.

Where an applicant is unable by reason of disability to put their request in writing, they are entitled to verbally list their request to the organisation manager. The organisation manager will write down their request on their behalf and confirm that they have recorded their request accurately. This will then count as an enquiry in writing for the purposes of the FOIA. As with all requests, such an enquirer is entitled to indicate their preferred format for a response. Where no preferred format has been indicated, a written response will be provided.

Should a request be unclear, the organisation manager will contact the applicant to request clarification. Clarification may include a request to provide a request in English to ensure that the organisation manager clearly understands the questions that have been asked.

Sheerwater Health Centre must ensure its compliance with the duty to confirm or deny and to provide the information requested within 20 working days of a request in accordance with Section 10 of the Act. All staff will be required to comply with the requirements of these procedures; failure to do so may result in disciplinary action.

The 20-working day ‘clock’ does not start until a valid request is received and clarification (if necessary) has been received.

If clarification is requested but not received within 20 working days, the request will be considered to have been withdrawn. Should the applicant re-submit their request after this point, it will be treated as a new FOI.

The organisation manager should review all requests against the FOI request checklist (see [Annex D](#_Annex_D_–)) to ensure that the process is undertaken appropriately.

## Acknowledgement and logging of requests

All valid requests for information under the FOIA should be acknowledged within 2 working days with an indicated response date (20 working days) stated in the acknowledgement. Requests should be logged and the timeline calculated for responding.

[Annex E](#_Annex_E_–) provides an appropriate FOI acknowledgement letter template meeting these requirements.

[Annex I](#_Annex_I_–) provides an appropriate FOI request log template.

## Request for clarification

If, on attempting to answer the questions, a service realises that they require clarification, they should inform the organisation manager immediately. The organisation manager will then request clarification of that question from the applicant. The 20-working day clock will be stopped at this point.

Once clarification is received, Section 1 (3) of the FOIA states that the time for compliance with the request will reset to 20 working days. The organisation manager should acknowledge the clarified request, quoting the new deadline for response, and forward the clarified request on to the appropriate service leads for response.

## Allocation of request for draft response

All valid requests should be initially reviewed using the Public Interest Test (PIT). The PIT is a meeting which is held to discuss whether a qualified exemption applies to the information using the Freedom of Information Request Checklist (see [Annex D](#_Annex_D_–)).

The PIT panel should be made up of at least two of the following:

* The Caldicott Guardian
* The SIRO – to provide the information about the request and the exemption
* Designated corporate Information Governance lead
* The relevant manager or head of the department who holds the information to agree the final decision and provide any reasons for or against disclosure

The PIT panel should consider the following when debating whether an exemption applies:

* The current public debate
* Health and safety.
* How the information may affect third parties
* What information is already available to the public?
* Media interest
* Does it show any decision-making processes?
* Does the information give a greater understanding of services provided by the organisation?
* Is the information confidential?

The PIT panel are encouraged to discuss all FOI requests with the organisation’s Data Protection Officer in order to gain expert advice and guidance prior to drafting a response to the applicant.

[Annex G](#_Annex_G_–) provides an appropriate letter template to the applicant informing them of the delay to enable a PIT meeting to be undertaken.

[Annex H](#_Annex_H_–) provides an appropriate PIT meeting template.

## Conditions and exemptions

The duty to confirm or deny is subject to certain conditions and exemptions. Under Section 1(3) the duty to confirm or deny does not arise where the organisation:

* Reasonably requires further information to identify and locate the information requested, and
* Has informed the applicant of that requirement. This organisation will make reasonable efforts to contact the applicant for additional information pursuant to their request should further information be required.

Under Section 2 of the Act, this organisation does not have to comply with the duty to confirm or deny if an absolute exemption is applied. Sheerwater Health Centre will consider the duty to confirm or deny in relation to non-absolute exemptions in all circumstances of the case.

* Absolute exemptions do not require a test of prejudice or the balance of public interest to be in favour of non-disclosure.
* Qualified exemptions or non-absolute exemptions involve a test of establishing prejudice as to whether harm or prejudice would result from the disclosure of information and/or whether it is in the balance of public interest to not disclose information.

A qualified exemption may be applied if, in all circumstances, the public interest in maintaining the exclusion of the duty to confirm or deny outweighs the public interest in disclosing whether this organisation holds the information.

The Part II exemptions are listed in [Annex B](#_Annex_B_–) of this policy. This organisation will seek to use the qualified exemptions sparingly and will, in accordance with Section 17 of the Act, justify the use of such exemptions.

If the arguments against disclosure outweigh the arguments for disclosure, then the exemption in question can be applied. If the argument against and for disclosure is equal this organisation must favour disclosure.

Once the PIT is completed, the request should be forwarded to the relevant service area who must confirm within two working days whether they are likely to be able to provide the requested information. This organisation’s service areas will be given a total of seven working days to provide their draft response to the questions to the organisation manager.

## Vexatious or repeated requests

Sheerwater Health Centre is not obliged to comply with a request for information if the request is vexatious. Where this organisation has previously complied with a request for information that was made by any person, it is not obliged to comply with a subsequent identical or subsequently similar request from that person unless a reasonable interval has elapsed between compliance with the previous request and the making of the current request.

This organisation will log all requests for information for monitoring purposes and will be able to identify repeated or vexatious requests.

## Charges and fees

Sheerwater Health Centre will generally not charge for information that it has chosen to publish in its publication scheme (see [Section 11](#_Model_publication_scheme)) once linked documents make information available direct to applicants over the internet. Charges may be levied for hard copies, multiple copies or copying onto media such as an appropriate USB.

This organisation will follow the national fees regulations for general rights of access under the Act. These will set an appropriate limit on costs of compliance, a manner in which an appropriate fee may be calculated and the circumstances in which no fee should be levied.

The first £450 worth of information/staff time must be provided free (18 hours). If the cost of providing information comes to more than £450.00, the Caldicott Guardian must complete a fees calculation. To complete a fees calculation, the Caldicott Guardian must complete part of the request in order to establish the time required to complete. A calculation is then made from the time taken in relation to the amount of information required. The fees calculation is then made using £25.00 per hour of staff’s time.

In all cases where the organisation chooses to charge for information published as a fee arising from an information request under general rights of access, a fees notice (or invoice) will be issued to the applicant as required by Section 9 of the Act. Applicants will be required to pay any fees within a period of three months beginning with the day on which the fees notice is given to them. Once payment is received, Section 1 (3) of the FOIA states that the time for compliance with the request will reset to 20 working days. The organisation manager should acknowledge the payment, quoting the new deadline for response and forward the request on to the appropriate service leads for response.

An enquiry will be considered to be withdrawn where:

* An applicant indicates that they do not wish to pay the advised fees in order to obtain the information
* The applicant agrees to pay the fees but does not do so within 20 working days of the organisation sending the invoice
* The applicant does not indicate whether they wish to pay the advised fees in order to obtain the information within 20 working days of being sent a response from the organisation stating that a fee would be payable.

## Means by which information will be conveyed

The [FOI Act 2000](https://www.legislation.gov.uk/ukpga/2000/36/contents) states that when an applicant, on making their request for information, expresses a preference for communication by any one or more of the following means, namely:

* The provision to the applicant of a copy of the information in permanent form or in another form acceptable to the applicant
* The provision to the applicant of a reasonable opportunity to inspect a record containing the information
* The provision to the applicant of a digest or summary of the information in permanent form or in another form acceptable to the applicant

then the organisation shall so far as reasonably practicable give effect to that preference in accordance with Section 11 of the Act.

In determining whether it is reasonably practicable to communicate information by a particular means, this organisation will consider all the circumstances including the cost of doing so. If Sheerwater Health Centre determines that it is not reasonably practicable to comply with any preference expressed by the applicant in making their request, this organisation will notify the applicant of the reasons for its determination and will provide the information by such means as it deems to be reasonable in the circumstances.

## Drafting of response

After drafting a response based on the information supplied by the appropriate service leads, the organisation manager should send the draft response back to those service leads for proofing/comment and to the Caldicott Guardian, SIRO and corporate designated IG lead.

Responses with any comments should be received within two working days to either confirm that they are happy with the draft response or to make any amendments.

## Approval of response by senior management

Once the organisation manager is satisfied that the draft response is accurate and complete, they will forward it on to the Caldicott Guardian for approval.

## Final response sent to the applicant

Once the response has been approved by the management team, the organisation manager will convert it to PDF (unless a different format of response has been specifically requested by the enquirer) and email (or post, if requested by the enquirer) the response. The date of response will be recorded as the day that the email is sent or the day that the letter is put in the post tray ready to send out.

Partial responses where the information is reasonably available but is not given within 20 working days count as a breach of the 20-working day deadline.

Partial responses where some of the information requested is not available within the response deadline (e.g., copies of notes of a meeting that have not been ratified by the time the response is due) do not count as a breach of the 20-working day deadline.

## Duty to provide assistance

Sheerwater Health Centre will ensure that systems and procedures are in place to meet the duty of a public authority to provide reasonable advice and assistance to persons who make requests for information.

This organisation must ensure that the systems and procedures employed conform to the Code of Practice issued under Section 45 of the Act. Should applicants or potential applicants need information about Freedom of Information or need assistance to produce a written request for information, they must be given the contact details of the organisation manager.

A Freedom of Information Leaflet must be regularly updated in line with the FOIA and changes within contact details or organisational policy

## Refusal of a request

As indicated previously, the provision of information does not arise if Sheerwater Health Centre:

* Applies an absolute exemption under Part II of the Act, as illustrated in [Annex B](#_Annex_A_–), with the exclusion of Section 21, or in all exemption circumstances of the case, if the public interest in maintaining the exclusion to provide the information outweighs the public interest in disclosing the information and in disclosing whether this organisation holds the information
* Has issued a fees notice under Section 9 of the Act and the fee has not been paid within a period of three months beginning with the day on which the fees notice was given to the applicant
* Under Section 12 of the Act, estimates that the cost of compliance with the request for information exceeds the appropriate limit
* Can demonstrate that the request for information is vexatious or repeated as indicated by Section 14 of the Act

Should this organisation choose to refuse a request for information under any of the above clauses, the organisation’s Data Protection Officer’s expert advice should be sought. Once the Data Protection Officer agrees, the applicant will be informed of the reasons for this decision within 20 working days by the issue of a refusal notice. The applicant will also be informed of the procedures for making a complaint about the discharge of the duties of this organisation under the Act.

If this organisation decides that an exemption applies, a refusal notice will be issued within 20 working days. The notice will:

* State that fact
* Specify the exemption in question
* State (if that would not otherwise be apparent) why the exemption applies
* Include a copy of the complaints process

Where it is not possible to confirm that an exemption applies, this organisation will inform the applicant that the issue remains under consideration and will estimate the date at which a firm judgement will be made. This will be notified to the applicant by issue of an exemption pending notice (see [Annex G](#_Annex_G_–)).

If this organisation finds, while considering the public interest, that the estimate is proving unrealistic, the organisation will endeavour to keep the applicant informed.

If this organisation claims that the request is vexatious or repeated, and a refusal notice has already been issued to the applicant stating this fact, a further notice is not required.

The organisation manager will keep a record of all notices issued to refuse requests for information and any information regarding the PIT process.

## Filing

Whilst an FOIA enquiry is progressed, all correspondence should be retained in a folder containing the reference number of the FOIA request. All progress relating to FOIA requests should be noted on the FOIA log for that year which is located on the organisational server. Access to this drive is restricted to named personnel with a specific reason to access the information in compliance with national information governance regulations and the Data Protection Act (2018).

Once an FOIA response has been sent, the folder of all correspondence should be moved to the ‘completed’ section of the file. Copies of all correspondence, all drafts of and the final response to the FOIA request should be saved under the appropriate year, month and FOIA reference number on the organisational server.

Copies of responses will be retained for three years from the date that they were issued. Copies of appeals will be retained for six years from the date that the appeal response was issued.

Where any documents have been redacted, a full, un-redacted copy of those documents (clearly labelled) should be included in the folder for the record.

## Disclosure log

The disclosure log (see [Annex J](#_Annex_J_–)) provides information that has been released via requests made to this organisation for information under the FOIA. The disclosure log forms part of the publication scheme and can link to documents available on the scheme which in turn is published on the organisation’s website.

The organisation manager must ensure that information from multiple requests regarding the same subject is available via the disclosure log. If there has been a request made for information which is currently part of a public debate, for example the subject is within the media, this information must be published within the disclosure log.

Having an up-to-date disclosure log can reduce the amount of time spent answering FOIA requests as the information can be made readily available on the log. The disclosure log also benefits public understanding of the information released, for example, if information released via a FOIA request was published within the media, the public will be able to check the information available within the media with the information provided by this organisation.

The requests within the disclosure log must remain anonymous and so the requester’s details must not be made available. The only information provided on the disclosure log are the questions asked and the answers to these questions. The reference numbers will also be provided to provide a reference if a member of the public contacts this organisation regarding the information contained within the disclosure log.

# Appeals process

## Internal review

Should an applicant be dissatisfied with a response that the organisation has written to them, they are able to request an internal review. Any complaint about or challenge to the information given in a response to an FOIA request should be treated as a request for an internal review.

Any request for an internal appeal should be made within 20 working days of an FOIA response being sent. Any requests for an internal review made after this date are out of time and will not receive an internal review. Internal review requests will be investigated and answered by the senior partner. All requests for an internal review will be responded to within 20 working days.

To ensure that all reviews are carried out independently, support in compiling the review responses will be provided by the organisation’s Data Protection Officer.

## External review

Should an enquirer be dissatisfied with a response that they have received, under Section 50 of the FOIA they are entitled to request an external review by the Information Commissioner’s Office.

Should an appeal be accepted by the Information Commissioner, the organisation is obliged to supply the complete audit trail of our response to the Information Commissioner including un-redacted copies of information that we have redacted.

# Transferring requests for information

## Overview

A request can only be transferred where Sheerwater Health Centre receives a request for information that it does not hold but which is held by another public authority. If the organisation is in receipt of a request and holds some of the information requested, a transfer can only be made in respect of the information it does not hold (but is held by another public authority).

This organisation recognises that ‘holding’ information includes holding a copy of a record produced or supplied by another person or body (but does not extend to holding a record on behalf of another person).

## Process

Upon receiving the initial request for information, this organisation will process it in accordance with the Act in respect of information it holds. Furthermore, this organisation will also advise the applicant that it does not hold part of the requested information, or all of it, whichever applies. Prior to doing this, the organisation must be certain as to the extent of the information relating to the request which it holds itself.

Should this organisation believe that some or all of the information requested is held by another public authority, the organisation will consider what would be the most helpful way of assisting the applicant with his or her request. In most cases this is likely to involve the following that were extracted from [ICOs FOI Act 2000 decision notice](https://ico.org.uk/media/action-weve-taken/decision-notices/2021/2620369/ic-113334-v5p7.pdf):

* Contacting the applicant and informing him or her that the information requested may be held by another public authority
* Suggesting that the applicant re-applies to the authority which the original authority believes to hold the information
* Providing him or her with contact details for that authority

If this organisation considers it to be more appropriate to transfer the request to another authority in respect of the information which it does not hold, consultation will take place with the other authority with a view to ascertaining whether it does hold the information and, if so, consider whether it should transfer the request to it. A request (or part of a request) will not be transferred without confirmation by the second authority that it holds the information. Prior to transferring a request for information to another authority, this organisation will consider:

* Whether a transfer is appropriate
* Whether the applicant is likely to have any grounds to object to the transfer

If Sheerwater Health Centre reasonably concludes that the applicant is not likely to object, it may transfer the request without going back to the applicant but will inform the applicant that it has done so by the issue of a transfer notice.

Where there are reasonable grounds to believe an applicant is likely to object, this organisation must only transfer the request to another authority with the applicant’s consent. If there is any doubt, the applicant will be contacted with a view to suggesting that they make a new request to the other authority. All transfers of requests will take place as soon as is practicable and the applicant must be informed as soon as possible once this has been done. Where this organisation is unable to facilitate the transfer of the request to another authority (or considers it inappropriate to do so) it will consider what advice, if any, it can provide to the applicant to enable them to pursue their request.

Where a request or part of a request is transferred from another public authority to Sheerwater Health Centre, the organisation will comply with its obligations under Part I of the Act in the same way as it would for a request that is received directly from an applicant. The time for complying with such a request will be measured from the day that it is received by the organisation.

# Public sector contracts

## Overview

When entering into contracts, Sheerwater Health Centre must refuse to include contractual terms that attempt to restrict the disclosure of information held by the organisation and relating to the contract beyond the restrictions permitted by the Act. With the inclusion of existing contracts, unless an exemption provided for under the Act is applicable in relation to any information, the organisation may be obliged to disclose that information in response to a request, regardless of the terms of any contract.

With non-public authority contractors, this organisation may be under pressure to accept confidentiality clauses so that information relating to the terms of the contract, its value and performance will be exempt from disclosure. As recommended by the Lord Chancellor’s Department, this organisation will reject such clauses wherever possible.

Where, exceptionally, it is necessary to include non-disclosure provisions in a contract, this organisation will investigate the option of agreeing with the contractor a schedule of the contract that clearly identifies information that should not be disclosed. This organisation will take care when drawing up any such schedule and be aware that any restrictions on disclosure provided for could potentially be overridden by obligations under the Act. Any acceptance of such confidentiality provisions must be for good reasons and capable of being justified to the Information Commissioner.

This organisation will not agree to hold information 'in confidence' which is not in fact confidential in nature. Advice from the Lord Chancellor’s Department indicates that the exemption provided only applies if information has been obtained by a public authority from another person and the disclosure of the information to the public (otherwise than under the Act) would constitute a breach of confidence actionable by that or any other person.

It is for this organisation to disclose information as required by the Act and not the non-public authority contractor. The organisation will take steps to protect from disclosure by the contractor information that this organisation has provided to the contractor that would clearly be exempt from disclosure under the Act by appropriate contractual terms. To avoid unnecessary secrecy, any such constraints will be drawn as narrowly as possible and according to the individual circumstances of the case. Apart from such cases, this organisation will not impose terms of secrecy on contractors.

When entering into contracts with non-public authority contractors, this organisation will include information that the Act empowers the Lord Chancellor to designate as public authorities for the purposes of the Act, persons (or bodies) who provide under a contract made with this organisation, any service whose provision is a function of that organisation. Thus, some non-public authority contractors will be regarded as public authorities within the meaning of the Act although only in respect of the services provided under the contract. As such, and to that extent, the contractor will be required to comply with the Act like any other public authority.

# Third parties

## Consultation from third parties

Sheerwater Health Centre recognises that in some cases the disclosure of information may affect the legal rights of a third party, for example where information is subject to the common law duty of confidence or where it constitutes ‘personal data’ within the definition of the Data Protection Act 2018 (DPA). Unless an exemption provided for in the Act applies in relation to any information, this organisation will be obliged to disclose that information in response to a request.

Where a disclosure of information cannot be made without the consent of a third party (for example, where information has been obtained from a third party and in the circumstances the disclosure of the information without their consent would constitute an actionable breach of confidence such that an exemption would apply), this organisation must consult that third party with a view to seeking their consent to the disclosure, unless such a consultation is not practicable, for example because the third party cannot be located or because the costs of consulting them would be disproportionate. Where the interests of the third party who may be affected by a disclosure do not give rise to legal rights, consultation may still be appropriate.

If information constitutes *‘personal data’* within the definition of the DPA, this organisation must comply with Section 40 of the Act that makes detailed provision for cases in which a request relates to such information and the interplay between the Act and the DPA.

The organisation will undertake consultation where:

* The views of the third party may assist the authority to determine whether an exemption under the Act applies to the information requested; or
* The views of the third party may assist this organisation to determine where the public interest lies.

This organisation may consider that consultation is not appropriate where the cost of consulting with third parties would be disproportionate. In such cases, Sheerwater Health Centre will consider what is the most reasonable course of action for it to take in light of the requirements of the Act and the individual circumstances of the request. Consultation will be unnecessary where:

* The organisation does not intend to disclose the information relying on some other legitimate ground under the terms of the Act
* The views of the third party can have no effect on the decision of the authority, for example, where there is other legislation preventing or requiring the disclosure of this information
* No exemption applies and so under the Act's provisions, the information must be provided

Where the interests of a number of third parties may be affected by a disclosure, and those parties have a representative organisation that can express views on behalf of those parties, Sheerwater Health Centre will, if it considers consultation appropriate, consider that it would be sufficient to consult that representative organisation. If there is no representative organisation, this organisation may consider that it would be sufficient to consult a representative sample of the third parties in question.

The fact that the third party has not responded to a consultation does not relieve this organisation of its duty to disclose information under the Act, or its duty to reply within the time specified in the Act. In all cases, it is for this organisation, not the third party (or a representative of the third party) to determine whether information should be disclosed under the Act. If a request for the disclosure of information to which the third party has previously objected is received, under the Act the organisation must review the decision to accept the objection and must provide the information unless it is satisfied that the objection was in fact a valid one.

## Accepting information in confidence from third parties

Sheerwater Health Centre will only accept information from third parties in confidence, if it is necessary to obtain that information in connection with the exercise of any of the organisation’s functions and it would not otherwise be provided.

This organisation must not agree to hold information received from third parties "in confidence" which is not confidential in nature. Acceptance of any confidentiality provisions must be for good reasons, capable of being justified to the Office of the Information Commissioner.

# Complaints about the discharge of duties under the Act

The response letter to the applicant will contain standard paragraphs indicating the Sheerwater Health Centre procedure for dealing with complaints about the discharge of the duties of the organisation under the Act, including the handling of requests for information. Applicants may, if they are unhappy with the outcome, request an internal review within two calendar months of the date of the letter.

The procedure will also refer applicants to the right (under Section 50 of the Act) to apply to the Information Commissioner if they remain dissatisfied with the conduct of the organisation following attempts at local resolution of their complaint.

# Model publication scheme

## Information publication

The ICO expects Sheerwater Health Centre to adopt its [model publication scheme](https://ico.org.uk/media/for-organisations/documents/1153/model-publication-scheme.pdf) and commit to:[[4]](#footnote-4)

* Proactively publishing or otherwise making available, as a matter of routine, information, including environmental information, that is held by the authority and falls within the classifications below
* Specifying the information that is held by the authority and falls within the classifications below
* Proactively publishing or otherwise making available, as a matter of routine, information in line with the statements contained within this scheme
* Producing and publishing the methods by which the specific information is made routinely available so that it can be easily identified and accessed by members of the public
* Reviewing and updating on a regular basis the information the authority makes available under the scheme
* Producing a schedule of any fees charged for access to information that is made proactively available
* Making this publication scheme available to the public
* Publishing any data set held by the authority that has been requested, and any updated versions it holds, unless the authority is satisfied that it is not appropriate to do so, publishing the data set, where reasonably practicable, in an electronic form that is capable of reuse and, if any information in the data set is a relevant copyright work and the public authority is the only owner, making the information available for reuse under the terms of the [Re-use of Public Sector Information Regulations 2015](https://www.legislation.gov.uk/uksi/2015/1415/contents/made), if they apply, and otherwise under the terms of the FOI Act Section 19

The term ‘data set’ is defined in Section 11(5) of the Act and the term ‘relevant copyright work’ is defined in Section 19(8) of the Act. The template for this organisation’s publication scheme can be found at [Annex K](#_Annex_K_–).

## Classes of information

The publication scheme refers to seven classes or types of information:[[5]](#footnote-5)

* Who we are and what we do – doctors in the practice, contact details, opening hours and other staffing details
* What we spend and how we spend it (current and previous financial year) – total cost of contracted services, audit of NHS income
* What our priorities are and how we are doing (current and previous year) – plans for developing and providing NHS services
* How we make decisions (current and previous year) – records of decisions made in the organisation affecting the provision of NHS services
* Our policies and procedures (practices should state if a policy is ‘not held’ as well as listing any additional ones) – policies, protocols and procedures concerning the employment of staff, delivery of services, equality and diversity, health and safety, complaints, records management (retention and destruction), data protection, the handling of requests for information and the patients’ charter
* Lists and registers – it is unlikely that any organisation will have any publicly available register or list and the ICO has advised that ‘none held’ can be entered here
* The services we offer – current NHS services provided and any charges, information leaflets and out-of-hours arrangements

The ICO expects Sheerwater Health Centre to make the above information available unless:[[6]](#footnote-6)

* The requested information is not held
* The information is exempt under one of the FOIA exemptions
* The information is readily and publicly available from an external website; such information may have been provided either by the GP or on their behalf. The GP must provide a direct link to that information
* The information is archived, out of date or otherwise inaccessible
* It would be impractical or resource-intensive to prepare the material for routine release

For organisations in Scotland, the Scottish Information Commissioner (SIC) has produced a model publication scheme and general guidance for public authorities; both are available [here](http://www.itspublicknowledge.info/ScottishPublicAuthorities/PublicationSchemes/PublicationSchemesHome.aspx).

# Training and compliance

## Training

Any member of Sheerwater Health Centre undertaking FOIA procedures should be trained in the following:

* How to recognise a request
* What to do when a request is received
* Should the role require it, how to complete a request

All staff should be aware of the timescales for the completion of a request and their role in meeting the requirements set out under the Act. Refresher training should be provided to staff on a regular basis to ensure their knowledge is up to date.

Appropriate supporting documents should be reviewed and updated annually or as legislative requirements are amended.

## Monitoring compliance

Staff are expected to comply with the requirements set out within the Freedom of Information Policy and related policies. Compliance will be monitored via manager and information governance reports, spot checks, completion of staff questionnaires, incidents reported, electronic audit trails and the submission of the Information Governance Toolkit.

Non-adherence to the Freedom of Information Policy and related policies will result in local disciplinary policies being implemented.

# Summary

Sheerwater Health Centre has an obligation to make sure it adheres to the principles of the Act, ensuring the right of access to information held by the organisation. In doing so, the organisation is demonstrating that it is operating in an open and transparent manner and complying with the provisions of the Freedom of Information Act 2000.

# Annex A – FOI request template

**FREEDOM OF INFORMATION REQUEST**

**In accordance with the Freedom of Information Act 2000**

Completion and submission of this form means that we will be processing your personal information. To find out how we use your personal information please refer to the organisation’s privacy notice for information governance.

The information you supply will be used for the purpose for which you have provided it and any relevant procedures following from this. This data will be maintained in accordance with the Data Protection Act 2018 and will not be passed on or sold to any other organisation without your prior approval unless this is a legal requirement.

Fields marked with an asterisk (\*) are mandatory.

**\*Your Details**

|  |  |
| --- | --- |
| **Title** |  |
| **\*Forename** |  |
| **\*Surname** |  |
| **\*Address** |  |
| **\*Email** |  |
| **Telephone Number(s)** |  |

**\*Access to information requested**

Please select the preferred form of access to the requested information:

|  |  |
| --- | --- |
| Via email | 🞏 |
| Receive copies by post | 🞏 |
| View originals (if practical) | 🞏 |

**\*Apply for access to information under the Freedom of Information Act**

|  |  |
| --- | --- |
| **Subject of your enquiry:** |  |
| **Describe your enquiry:**Provide as much detail as possible; this will help us to process your request quickly and efficiently. Where appropriate, include names, dates, references and descriptions to enable us to identify and locate the required information. |  |

# Annex B – Exemption information under Part II

There are two types of class exemption:

* Absolute exemption which does not require a test of prejudice or the balance of public interest to be in favour of non-disclosure.
* Non-absolute exemption qualified by the public interest test which requires Sheerwater Health Centre to decide whether it is in the balance of public interest to not disclose information.

With the exception of Section 21 (information available by other means), exemptions apply not only to the communication of information but also to the duty to confirm or deny, if that itself would disclose information that it is reasonable to withhold.

The absolute exemptions under the Act are:

|  |  |
| --- | --- |
| **Section** | **Absolute requirement** |
| Section 21 | Information accessible to applicant by other means |
| Section 23 | Information supplied by, or relating to, bodies dealing with security matters |
| Section 32 | Court records |
| Section 34 | Parliamentary privilege |
| Section 36 | Prejudice to effective conduct of public affairs (so far as relating to information held by the House of Commons or the House of Lords) |
| Section 40 | Personal information (where the applicant is the data subject) |
| Section 41 | Information provided in confidence |
| Section 44 | Prohibitions on disclosure |

The exemptions that are non-absolute exemptions qualified by the public interest test are:

|  |  |
| --- | --- |
| **Section** | **Non-absolute requirement** |
| Section 22 | National security |
| Section 24 | Information intended for future publication |
| Section 26 | 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 36 | Prejudice to effective conduct of public affairs (for all public authorities except the House of Commons and the House of Lords) |
| Section 37 | Communications with Her Majesty, etc. and honours |
| Section 38 | Health and safety |
| Section 39 | Environmental information |
| Section 40 | Personal information (where the applicant is not the data subject) |
| Section 42 | Legal professional privilege |
| Section 43 | Commercial interests |

Further information on the exemptions can be found [here](http://www.legislation.gov.uk/ukpga/2000/36/contents).

# Annex C – Timeline of process, considerations and actions

|  |
| --- |
| **Timeline of process, considerations and actions to take** |
| **Day 1-2** | * Request logged and acknowledgement sent to applicant
 |
| * Sensitive request?
 |
|  |
|  |
| **Day 2-5** | * Provisional search for info
 |
| * Held/not held
 |
| * Will investigation exceed cost limit?
 |
|  |
| **Day 6** | * If information is not held or exceeds cost limit – provide response to applicant
 |
|  |
| **Day 6-10** | * If information is held, PIT meeting to consider whether information can be disclosed
 |
| * Draft response
 |
|  |
| **Day 10-15** | * Collate information for disclosure and provide final draft
 |
|  |
| **Day 15-20** | * Response approved via PIT meeting attendees
 |
| * Full response sent or permitted extension letter
 |
|  |
| **Day 20** | * Information published on the organisation’s disclosure log
 |
| * File all correspondence
 |

# Annex D – FOI request checklist

|  |  |  |  |
| --- | --- | --- | --- |
| **Case reference** |  | **Date of receipt** |  |
| **Name of applicant** |  | **Target date** |  |
| **Information requested:** |
|  |
| **Checklist** |
| **Establishing if the request is valid**The first step in dealing with an FOI request is to establish whether or not the request fulfils the FOI request criteria:* Requests for information do not need to mention the FOI Act
* Anyone can make a request. There are no restrictions for example on the nationality or location of the applicant
* However, the request must be in writing (email or letter) and include the applicant’s name (pseudonyms can be refused) and postal address or an email address to which a response can be sent
* The request should describe the information required
* Consider whether the request should be dealt with under the Data Protection Act 2018 or Environmental Information Regulations 2004
 |
| **Cost Limit** (Section 12 of the Act)Will the cost of locating, retrieving and extracting the information exceed the appropriate limit? The appropriate limit is £450.00 which represents the cost of one person determining whether the information is held within the organisation, locating, retrieving and extracting the information. The limit covers the time taken to find, sort, edit or redact material. You cannot include the time taken to consider whether an exemption applies or the PIT.  |
| **Establishing if the information is held**A person may request any recorded information held by a public authority (or held by another on behalf of a public authority). Recorded information can be held in the form of documents, emails, notes, videos and audio tapes. If the applicant requires you to create information that is not already held at the time of receipt of the request, you are not obliged to create the information. |
| **Is the information already available on the disclosure log?**If the information is already available, then the applicant should be directed to this information in the public domain. |
| **Is the information closely connected with the functions of another public authority?**If the organisation does not hold the information that has been requested but you believe another public authority holds it, you should consider the best way to help the requester. In most cases, this will mean contacting the requester and supplying the contact details of the public authority in question, having confirmed beforehand that they do hold the information. |
| **Duty to provide advice and assistance**If the request is widely framed, you should consider whether:* It would be helpful to consult with the requester to try to narrow or refine the request but only if the cost limit is exceeded
* How long it will it take to retrieve and extract the information requested
 |
| **Is it a vexatious or repeated request?**There is no need to comply with a request:If it is vexatious, that is:* It would impose a significant burden on the organisation
* It clearly does not have any serious purpose or value
* It is designed to cause disruption or annoyance
* It has the effect of harassing the organisation
* It can otherwise fairly be characterised as obsessive or manifestly unreasonable

It is a repeated request, that is:* Identical or substantially similar to a previous request from that person or persons you believe to be working together (unless a reasonable amount of time (roughly three months) has elapsed between them)
 |
| **If we disclose this information, do we need to consult the communications team?** |
| **If we do hold this information, should it be released?**This depends on whether:* Any of the information is personal information, in which case the information is exempt under Section 40 of the Act and fails to be considered under the Data Protection Act.
* Requests for environmental information should be considered in accordance with Environmental Information Regulations 2004 (EIRs)
* The information is now or soon to be publicly available in which case you have the discretion to refuse the request (Section 21 or 22 of the Act) but should either provide a link to the information or provide the applicant with details of where the information can be obtained
* Any of the other exemptions in the act apply as per the exemption list:

There are 23 exemptions from rights of access under the FOIA. Further guidance on the exemptions can be found at: [ICO - FOI Exemptions](https://ico.org.uk/for-organisations/guidance-index/freedom-of-information-and-environmental-information-regulations/#exemptions)**Absolute Exemptions (AE)** – if an absolute exemption applies, there is no obligation under the Act to consider the request for information further**Qualified Exemptions (QE)** – are subject to the public interest test. Qualified exemptions do not justify withholding information unless, following a proper assessment, the balance of the public interest is against disclosure. When applying a qualified exemption, the deadline may be extended to consider fully where the balance of public interest lies. |
| **List of exemptions**

|  |  |  |  |
| --- | --- | --- | --- |
| ❑ | AE | Section 21 | Information accessible to applicant by other means |
| ❑ | AE | Section 23 | Information supplied by, or relating to, bodies with security matters |
| ❑ | AE | Section 32 | Court records |
| ❑ | AE | Section 34 | Parliamentary privilege |
| ❑ | AE | Section 36 | Prejudice to effective conduct of public affairs (so far as relating to information held by the House of Commons or the House of Lords). |
| ❑ | AE | Section 40 | Personal information (where the applicant is the data subject) |
| ❑ | AE | Section 41 | Information provided in confidence |
| ❑ | AE | Section 44 | Prohibitions on disclosure |
| ❑ | QE | Section 22 | Information intended for future publication |
| ❑ | QE | Section 24 | National security |
| ❑ | QE | Section 26 | Defence |
| ❑ | QE | Section 27 | International relations |
| ❑ | QE | Section 28 | Relations within the United Kingdom |
| ❑ | QE | Section 29 | The economy |
| ❑ | QE | Section 30 | Investigations and proceedings conducted by public authorities |
| ❑ | QE | Section 31 | Law enforcement |
| ❑ | QE | Section 33 | Audit functions |
| ❑ | QE | Section 35 | Formulation of Government policy |
| ❑ | QE | Section 36 | Prejudice to effective conduct of public affairs (for all public authorities except the House of Commons and the House of Lords) |
| ❑ | QE | Section 37 | Communications with Her Majesty, etc and honours |
| ❑ | QE | Section 38 | Health & safety |
| ❑ | QE | Section 39 | Environmental information |
| ❑ | QE | Section 40 | Personal information (where the applicant is not the data subject) |
| ❑ | QE | Section 42 | Legal professional privilege |
| ❑ | QE | Section 43 | Commercial interests |

A full copy of the Act including further information on the exemptions can be found at: <http://www.legislation.gov.uk/ukpga/2000/36/contents> |
| **If it is a qualified exemption, have you considered the public interest test (PIT)?** i.e., would the release of the information cause any harm (prejudice) and even if it would, does the public interest still favour disclosure?The burden is on the organisation to show that the public interest in withholding the information is greater than the public interest in disclosure. Where possible, use specific arguments, i.e., what harm/prejudice would occur by releasing this information. If the balance falls 50:50, then information should be released. |
| If the response is late, please give the reasons for this: |
| If a public interest test extension has been applied, please give the reasons: |
| **Reminder to include the standard complaints paragraphs at the end of your response**:*If you are unhappy with the result of your request for information, you may request an internal review within two calendar months of the date of this letter by writing to:*Sheerwater Health Centre, Devonshire Avenue, Woking GU21 5QJ. Telephone number 01932 343524. E-mail sheerwaterhealthcentre@nhs.net *If you remain unhappy with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision.* *The Information Commissioner can be contacted at:**Information Commissioner**Wycliffe House**Water Lane**WILMSLOW**SK9 5AF* |
| **Any other comments**: |

# Annex E – FOI acknowledgement letter template

**FOI acknowledgement letter**

Dear Sir/Madam,

**FREEDOM OF INFORMATION ACT 2000**

Thank you for your request for information under the requirements of the Freedom of Information Act 2000. We started work on this request on [insert date]. As per Section 10 of the Act, you can expect a reply no later than 20 working days from this date. Therefore the expected reply date for your request is [insert date].

There may be a fee payable for this information. This will be considered and you will be informed if a fee is payable. In this event, the fee must be paid before the information is processed and released. The 20-day time limit for responses is suspended until receipt of the payment. If there is a fee payable, we will write to you again to let you know the process in this event.

For your information, the Act defines a number of exemptions that may prevent the release of the information you have requested. We will assess whether any of the exemption categories apply to your request (as per Part 11 of the Act) and if they do, or if there is a delay due to the application of an exemption, we will write to you again.

If any further assistance in this matter is required, please do not hesitate to contact me again.

Further information is also available from the Information Commissioner at:

Information Commissioner's Office
Wycliffe House
Water Lane
WILMSLOW
SK9 5AF

Telephone: 0303 123 1113

www.ico.org.uk

Yours sincerely,

[Insert name and role]

# Annex F – FOI response letter template

**FOI response letter**

Dear Sir/Madam,

**FREEDOM OF INFORMATION ACT 2000**

Thank you for your request for information under the requirements of the Freedom of Information Act 2000. You asked for information regarding [copy in request details here]

Following consideration of your request for information, I will answer your queries below in turn:

[Response here]

If you are unhappy with the result of your request for information, you may request an internal review within two calendar months of the date of this letter by writing to:

[insert name, address and email]

If you remain unhappy with the outcome of the internal review, you have the right to apply directly to the Information Commissioner for a decision.

Further information is also available from the Information Commissioner at:

Information Commissioner's Office
Wycliffe House
Water Lane
WILMSLOW
SK9 5AF

Telephone: 0303 123 1113

www.ico.org.uk

Yours sincerely,

[Insert name and role]

# Annex G – PIT requirement delay letter template

**PIT requirement delay letter**

Dear Sir/Madam

**FREEDOM OF INFORMATION ACT 2000**

Thank you for your letter/email/ received on [insert date]. Your request for information is being considered.

It is not possible to confirm or deny that the information you requested is held and/or to provide the information as this may not be in the public interest. The organisation is currently assessing this.

The exemption that may apply is Section [insert and provide an explanation]. It is anticipated that this will require additional time to process this request. The anticipated date for a decision is [insert date]. If this timescale needs to be revised, I will write to you again as to the reasons and provide you with a revised timescale.

If any further assistance in this matter is required, please do not hesitate to contact me again.

Further information is also available from the Information Commissioner at:

Information Commissioner's Office
Wycliffe House
Water Lane
WILMSLOW
SK9 5AF

Telephone: 0303 123 1113

www.ico.org.uk

Yours sincerely,

[Insert name and role]

# Annex H – Record of PIT meeting template

**Record of public interest test meeting under the Freedom of Information Act 2000**

|  |  |
| --- | --- |
| Name of PIT members and job titles |  |
| Declarations of interest |  |
| Date of public interest test/decision |  |
| Brief description of the information requested |  |
| Reasons for disclosure/non-disclosure e.g., who will this affect/apply the prejudice test |  |
| Exemption applied (if appropriate) |  |
| Any other factors taken into account |  |

# Annex I – Freedom of Information request register

The FOI request register is a spreadsheet and can be found [here](https://practiceindex.co.uk/gp/forum/resources/freedom-of-information-request-register.1865/).

# Annex J – Disclosure log template

|  |  |  |  |
| --- | --- | --- | --- |
| **Reference** | **Date FOI request received** | **Details of request** | **Link to response** |
|  |  |  |  |
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# Annex K – Organisation publication scheme

Information available from Sheerwater Health Centre that provides medical services under contract to the NHS under the Freedom of Information Act model publication scheme.

|  |
| --- |
| **Class 1 – Who we are and what we do** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| Organisational information, structures, locations and contacts | i.e., organisation website, organisation information leaflet | Free |
| Doctors in the organisation |  |  |
| Contact details for the organisation (named contacts with telephone numbers and email addresses) |  |  |
| Opening hours |  |  |
| Other staffing details |  |  |
| Meeting information – specifically with pharma companies and other medical suppliers |  |  |
| **Class 2 – What we spend and how we spend it** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| Financial information relating to projected and actual income, expenditure, procurement, contracts and financial audit. This should be the current and previous financial year’s information |  |  |
| Details on NHS funding received by the organisation.We would expect practices to consider publishing as much information as is practically possible, including as much detail as possible  |  |  |
| Audit of NHS income |  |  |
| Details of expenditure items over £10,000 – published at least annually but at a quarterly or six monthly interval where practical |  |  |
| List and value of contracts awarded by the practice.We would normally only expect the organisation to publish details of contracts that are of sufficient size to have gone through a formal tendering process. |  |  |
| Staff allowances and expenses that can be incurred or claimed, with totals paid to senior staff members (for the purpose of this document, ‘senior staff’ are defined as partners or equivalent level) with references to categories |  |  |
| Pay policy |  |  |
| Declaration of GPs’ NHS/HSC income.The information made available as part of GPs’ contractual obligation to publish their net income relating to NHS/HSC contracts, once this obligation is in force. A link may be provided to the information on a third-party website and/or a description of where this information is available |  |  |
| **Class 3 – What our priorities are and how we are doing** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| Strategies and plans, performance indicators, audits, inspections and reviews. Current and previous year as a minimum |  |  |
| Plans for the development and provision of NHS services |  |  |
| Performance data, including performance against targets |  |  |
| Inspection reports by regulators: the CQC, HIW, RQIA and HSCB and any other regulators |  |  |
| **Class 4 – How we make decisions** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| Decision-making processes and records of decisionsCurrent and previous year as a minimum |  |  |
| Records of decisions made in the organisation affecting the provision of NHS services |  |  |
| **Class 4 – Our policies and procedures** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| Current written protocols, policies and procedures for delivering our services and responsibilities. Mark ‘not held’ against any policies that are not available |  |  |
| Policies and procedures about customer service |  |  |
| Internal instructions to staff and policies relating to the delivery of services |  |  |
| Policies and procedures about the recruitment and employment of staff |  |  |
| Equality and diversity policy |  |  |
| Health and safety policy |  |  |
| Complaints procedures (including those covering requests for information and operating the publication scheme) |  |  |
| Records management policies (records retention, destruction and archive) |  |  |
| Data protection policies |  |  |
| Policies and procedures for handling requests for information |  |  |
| **Class 6 – Lists and registers** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| We recognise that it is unlikely that GPs are going to have registers available for public inspection and, while this remains the case, ‘none held’ can be entered in this section |  |  |
| Any publicly available register or list (if any are held, this should be publicised. In most circumstances existing access provisions will suffice) |  |  |
| **Class 7 – The services we offer** |
| **Information to be published** | **How the information can be obtained** | **Cost** |
| Information about the services we offer, including leaflets, guidance and newsletters produced for the public |  |  |
| The services provided under contract to the NHS |  |  |
| Charges for any of these services |  |  |
| Information leaflets |  |  |
| Out-of-hours arrangements |  |  |

1. [What is the Freedom of Information Act?](https://ico.org.uk/for-organisations/guide-to-freedom-of-information/what-is-the-foi-act/) [↑](#footnote-ref-1)
2. [Network DES specification 2022/23](https://www.england.nhs.uk/publication/network-contract-directed-enhanced-service-contract-specification-2022-23-pcn-requirements-and-entitlements/) [↑](#footnote-ref-2)
3. [What is the Freedom of Information Act?](https://ico.org.uk/for-organisations/guide-to-freedom-of-information/what-is-the-foi-act/) [↑](#footnote-ref-3)
4. [ICO Model publication scheme](https://ico.org.uk/media/for-organisations/documents/1153/model-publication-scheme.pdf) [↑](#footnote-ref-4)
5. [MDU Freedom of information](https://www.themdu.com/guidance-and-advice/guides/freedom-of-information) [↑](#footnote-ref-5)
6. [ICO – Guide to information provided by GPs under the model publication scheme](https://r.search.yahoo.com/_ylt%3DAwrJQ55OJVpf1iIA3xAM34lQ%3B_ylu%3DY29sbwNpcjIEcG9zAzEEdnRpZANDMDA4OV8xBHNlYwNzcg--/RV%3D2/RE%3D1599772111/RO%3D10/RU%3Dhttps%3A//ico.org.uk/media/1273/doctors_guidance.doc/RK%3D2/RS%3DSbjIcwEslVbvqlt1FVYGf2kdRgk-) [↑](#footnote-ref-6)