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| **Freedom of Information Act Policy** |
| Version 2.0 |
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| **Turner Martin (Mr)**  **28 September 2020** |
| **A. Confidentiality Notice** |

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| Confidentiality Notice. This document and the information contained therein is the property of Staveleigh Medical Centre. This document contains information that is privileged, confidential or otherwise protected from disclosure. It must not be used by, or its contents reproduced or otherwise copied or disclosed without the prior consent in writing from Staveleigh Medical Centre. |

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C. Document Details

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| **Classification:** | Policy |
| **Author and Role:** | Mr Martin Turner, Practice Manager |
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| **Date Approved:** | 28 September 2020 |

D. Document Revision & Approval History

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| **Version** | **Date** | **Version Created By** | **Version Approved By** | **Comments** |
| 1.0 | March 14 | Mrs D Teasdale | Dr S Ul-Haq |  |
| 1.1 | April 18 | Mrs D Teasdale | Dr J Shilhan |  |
| 2.0 | Sept 20 | Mr M Turner |  | Combined FOI Act Policy and FOI Policy. Updated personnel details. |
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E. Definitions

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| “The Practice”, “We” | On behalf of The Partners of Staveleigh Medical Centre |
| “CCG” | Clinical Commissioning Group for Tameside and Glossop |
| “Office”, “Officers” | Responsible persons for policy |

F. Persons Whom Policy Applies to

Staff, faculties, visitors, stakeholders and other persons or bodies affected by or for whom this policy applies to:

* All Clinical staff.
* Patients.
* 3rd Party Staff.
* All Stakeholders.

G. Responsible Office

Office or officers charged with developing, updating, communicating, training, ensuring compliance with, and providing resources to promote adherence to this issued policy:

* Practice Manager.
* All Practice Staff.
* Practice Partners.

H. Introduction

The Freedom of Information (FOI) Act was passed in 2000 and replaced the Open Government Code of Practice that has been in place since 1994. The Act gives the public a general right of access to all types of recorded information held by public authorities. The Act came into full effect on the 1st January 2005.

The Act places a statutory obligation on all public bodies to publish details of *all* recorded information that they hold and to allow, with a few exceptions, the general public to have access to this information on request.

CQC Essential Standard 21 incorporates the following statement which reaffirms the mandatory requirement of compliance with the Freedom of Information Act:

# *“Where a request for access to a record is made, all legislation and guidance in respect of The Freedom of Information Act 2000 and the Data Protection Act 1998 is followed by all staff.”*

I. Practice Statement

Staveleigh Medical Centre recognises the importance of the Act and it will ensure that appropriate systems are put in place to publicise what recorded information is kept by the practice and how this information can be accessed on request by the general public.

J. Operational Implementation and Procedures

**The FOI Act**

The main features of the Act are:

* a general right of access to information held by public authorities
* exemptions from the duty to provide information
* a requirement on public authorities to exercise discretion; they may have to disclose information even when exempt under the Act (the ‘public interest test’)
* arrangements in respect of costs and fees
* a duty on public authorities to adopt publication schemes
* arrangements for enforcement and appeal
* a duty to provide advice and assistance to people who wish to make, or have made requests for information
* Codes of Practice

The UK legislation is wholly retrospective and applies to all information held by public authorities regardless of its date.

The Act is overseen by the Information Commissioner, who will have the power to issue enforcement notices and, if needs be, initiate court proceedings to ensure compliance.

The practice recognises its corporate responsibility under the Act to provide the general right of access to information held. The overall responsibility for this policy is with [*insert name of Information Governance/FOI Lead*].

**Employee Responsibilities**

All employees will, through appropriate training and responsible management:

* observe all forms of guidance, codes of practice and procedures about the storage, closure, retention and disposal of documents and records
* be aware that ultimately the general public may have access to any piece of information held within the practice and must pay due regard to how they record information as part of their normal duties
* on receipt of an information request immediately notify the IG/FOI lead
* provide information promptly when requested from the IG/FOI lead
* understand that breaches of this Policy may result in disciplinary action, including dismissal

**Organisation Responsibilities**

The practice will:

Comply with the FOI Act and sees it as an opportunity to enhance public trust and confidence in the practice.

Ensure that there is always one person with overall responsibility for FOI. Currently this person is **(Insert name of person responsible for FOI).**

Maintain a comprehensive 'Publication Scheme' that provides information which is readily accessible without the need for a formal FOI Act request.

Seek to satisfy all FOI Act requests promptly and within 20 working days. However, if necessary we will extend this timescale to give full consideration to a public interest test. If we do not expect to meet the deadline, we will inform the requester as soon as possible of the reasons for the delay and when we expect to have made a decision.

Continue to protect the personal data entrusted to us, by disclosing it only in accordance with the Data Protection Act 2018.

Provide advice and assistance to requesters to facilitate their use of FOI Act. We will publish our procedures and assist requesters to clarify their requests so that they can obtain the information that they require.

Work with the Clinical Commissioning Group, NHS England, the local Area Team and other bodies with whom we work to ensure that we can meet our FOI Act obligations, including the disclosure of any information that they hold on our behalf.

Apply the exemptions provided in the FOI Act and, where qualified exemptions exist, the practice will disclose the information unless the balance of public interest lies in withholding it.

Consult with third parties before disclosing information that could affect their rights and interests. However, according to the FOI Act, the practice must take the final decision on disclosure.

Charge for information requests in line with the FOI Act fees regulations or other applicable regulations, including the Data Protection Act 2018.

Record all FOI Act requests and our responses and will monitor our performance in handling requests and complaints.

Ensure that all staff are aware of their obligations under FOI Act and will include FOI Act education in the induction of all new staff.

# Guidance for Practices on complying with the requirements of the Freedom of Information Act

The Freedom of Information (FoI) Act became law on 30th November 2000 in England, Wales and N. Ireland, giving the public a right of access to all types of recorded information held by ‘Public Authorities’, including the Health Service.

As the Act specifically defines a General Practice as being a ‘Public Authority’ within the scope of the Act, it must comply with the Act’s requirements by having and operating a “Publication Scheme” approved by the Information Commissioner.

The Act contains complex provisions regarding enforcement but the ultimate sanction is that non-compliance with the Act can be regarded as contempt of court, for which a judge may impose an unlimited fine or imprisonment.

## “Model Publication Scheme”

A Practice must publish information proactively.

This is known as a “Publication Scheme” and must set out the Practice’s commitment to making certain classes of information routinely available, such as policies and procedures, minutes of meetings, annual reports and financial information.

A “Model Publication Scheme” for General Practices has been developed by the Information Commissioner’s Office (ICO) and MUST be followed.



Click on this icon to open a copy of the ICO “Model Publication Scheme” for General Practices.

Its 7 “Classes” and their respective content is summarised on the following page.

This scheme commits a Practice:

* To proactively publish or otherwise make available as a matter of routine, information, including environmental information, which is held by the Practice and falls within the “Classes of Information” described overleaf.
* To specify the information which is held by the Practice and falls within the “Classes of Information” described overleaf.
* To proactively publish or otherwise make available as a matter of routine, information in line with the statements contained within this scheme.
* To produce and publish 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.
* To review and update on a regular basis the information the Practice makes available under this scheme.
* To produce a schedule of any fees charged for access to information which is made proactively available.
* To make this publication scheme available to the public.

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| Information leaflets |
| Out of hours arrangements |

Fees should be requested only where this is done in accordance with ICO guidance.

The Classes of information will not generally include:

* Information the disclosure of which is prevented by law, or exempt under the Freedom of Information Act, or is otherwise properly considered to be protected from disclosure.
* Information in draft form.
* Information that is no longer readily available as it is contained in files that have been placed in archive storage, or is difficult to access for similar reasons.

### The method by which information published under this scheme will be made available

The Publication Scheme must always be available in hard copy format but the FOI Act states: **“Where it is within the capability of a Practice, information will be provided on a website**”.

Where a Practice has decided not to make their Publication Scheme available on their website and only produce it in hard-copy format, the Practice must still list on their website the Classes of information in their Publication Scheme and provide contact details so people can make a request to obtain it. The Practice should provide this promptly on request.

The Practice must publicise the fact that the Publication Scheme is available to the public, what is covered by the Scheme and how it can be obtained, by promoting this prominently on the Practice notice board, or in any other way the Practice normally communicates with the public.

In exceptional circumstances certain information may only be available by viewing in person (e.g. copy of a large map). Such circumstances must be specified and most appropriate contact details provided. The appointment to view this information must arranged within a reasonable timescale.

The Publication Scheme will be provided in the language in which it is held or in such other language that is legally required. Where a Practice is legally required to translate any information, it must do so.

The Practice must also adhere to its obligations under disability and discrimination legislation and any other legislation to provide information in other forms and formats when providing information in accordance with this scheme.

### Charges which may be made for Information published under this scheme

Because the purpose of this scheme is to make the maximum amount of information readily available at minimum inconvenience and cost to the public, charges made by the Practice for routinely published material must be justified, transparent and kept to a minimum.

Material which is published and accessed on a website will be provided free of charge.

Charges may be made for actual disbursements incurred such as:

* Photocopying
* Postage and packaging
* The costs directly incurred as a result of viewing information

Charges may also be made for information provided under this scheme where they are legally authorised and are in accordance with a published schedule or schedules of fees which is readily available to the public.

If a charge is to be made, the Practice must confirm the amount of payment due before the information is provided and can request payment prior to providing the information.

## Responding to Written Requests

As well as responding to publishing information proactively via the “Model Publication Scheme”, a Practice must also respond to requests for information.

Information held by a Practice that is not published under the “Model Publication Scheme” can be requested in writing, when its provision will be considered in accordance with the provisions of the Freedom of Information Act.

### Valid Requests

To be valid under the Act, the request:

* Must be in writing. This could be a letter or email from anywhere in the world. Requests can also be made via the web, or even on social networking sites such as Facebook or Twitter if a Practice uses these;
* Can be made to any member of staff and does not have to refer to the Freedom of Information Act;
* Must include the requester’s real name. The Act treats all requesters alike, so the Practice should not normally seek to verify the requester’s identity.

However, the Practice may decide to check their identity if it is evident they are using a pseudonym or if there are legitimate grounds for refusing their request and it is suspected they are trying to avoid this happening, for example because their request is vexatious or repeated.

A request can be made in the name of an organisation, or by one person on behalf of another, such as a solicitor on behalf of a client but must;

* Include an address for correspondence. This need not be the person’s residential or work address – it can be any address at which they can be written to, including a postal address or email address;
* Describe the information requested. The Act covers information not documents, so a requester does not have to ask for a specific document (although they may do so). They can, for example, ask about a specific topic and expect the Practice to gather the relevant information to answer their enquiry.

A question can be a valid request for information.

### Responding to requests for information

The Practice can deal with many requests by providing the requested information in the normal course of business. If the information is included in the “Model Publication Scheme” this should be given out automatically or a link provided to where the information can be accessed.

In the event that a request needs to be dealt with more formally, it is important to identify the relevant legislation:

* If the person is asking for their own personal data, this should be dealt with as a subject access request under the Data Protection Act.
* If the person is asking for ‘environmental information’, the request is covered by the Environmental Information Regulations 2004.
* Any other non-routine request for information held by the Practice should be dealt with under the Freedom of Information Act.

A Practice has two separate duties when responding to FoI requests:

* To tell the applicant whether it holds any information falling within the scope of their request; and
* To provide that information.

A Practice normally has 20 working days to respond to a request, counting the first working day after the request is received as the first day.

Working day means any day other than a Saturday, Sunday, or public holidays and bank holidays; this may or may not be the same as the days the Practice is open, or staff are in work.

The time allowed for complying with a request starts when the Practice receives it, not when it reaches the Freedom of Information Officer or other relevant member of staff.

Upon receipt of the request, it should be read carefully and objectively to make sure what is being asked for is clearly identified. It is recommended the applicant is contacted to verify that their request has been correctly understood.

If a request is considered to be ambiguous, with many potential interpretations, or has no clear meaning at all, the requester must be contacted as soon as possible for clarification.

In this event, consideration must also be given as to whether the requester can be given advice and assistance to enable them to clarify or rephrase their request (e.g. an explanation of the options available to them and identifying whether any of these would adequately answer their request).

The time for compliance will not begin until the Practice has received the necessary clarification to allow the request to be answered.

The Act only covers recorded information held by the Practice and does not include any information that is not held, is held for other purposes or would be exempt from release.

When compiling a response to a request for information, it may be necessary to draw from multiple sources of information held by the Practice.

If the relevant information does not exist in recorded form or has to be found from elsewhere, the Practice can comply with the request by advising the requester of this, in writing. However, adequate and properly directed searches must have been carried out to ensure convincing reasons exist for concluding that no recorded information is held.

If it is known that the information is held by another “Authority”, the request could be transferred to them or the requester advised to redirect their request.

If a requester complains to the ICO that the Practice has not identified all the information it holds, the ICO will consider the scope, quality and thoroughness of the searches and test the strength of reasoning and conclusions.

This Section provides detailed guidance for organisations, including:

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| Advice and assistance | Environmental information - general | MPs' correspondence | Records management |
| Codes of practice | Exceptions - environmental | The prejudice test | Refusing a request |
| Confirm or deny | Exemptions - freedom of information | Property searches | Request handling |
| Costs and fees | Freedom of information - general | Public interest test | Time for compliance |
| Deceased people | Higher education | Publication schemes | Vexatious or repeated requests |
| Destroying information | Holding information | Publicly owned companies |  |

# Information available from STAVELEIGH MEDICAL CENTRE

# under the Freedom of Information Act Model Publication Scheme.

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| **Our Charges for Providing Information under this Scheme** |
| All documents that we make available free of charge under this Scheme are identified in the table below as “Free”.  All documents available under this Scheme for which we may charge a fee are identified as “★”.  We will make reasonable charges (which will include staff time, administrative costs, copy costs, postage and any other out of pocket expenses we incur) when we provide the following information:   * Paper copies of certain documents; * Copying data onto media (e.g. CD-ROM); * Supplying multiple print-outs; * Supplying archived copies of documents that are held by the Practice but are no longer accessible or available via the Practice website   Please contact The Assistant Practice Manager at the Practice if you require a document for which a fee may be applicable. She will let you know the cost and charges that you will be required to pay us, in advance of us supplying the documents to you.  Our charges will be reviewed regularly and be in line with other NHS organisations.  We are not able to provide printouts of other organisation’s websites. |

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| **How the Information can be obtained under this Scheme** |
| All documents that we make available under this Scheme can be viewed and / or downloaded from the Practice Website and / or made available in a leaflet and / or made available in hard copy format on request.  We will despatch information within 20 working days from receipt of the request and fee.  Information available on the website is also available in hard-copy format on request, although charges may apply - please contact The practice manager at the Practice for further details. |

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| **Information to be published** | **How the information can be obtained** | **Cost** |
| **Class 1 - Who we are and what we do**  (Organisational information, structures, locations and contacts) - This will be current information only | | |
| Staveleigh Medical Centre provides general medical services to patients in the geographical area of Stalybridge and the surrounding areas  A more detailed guide to the geographical area, incorporating a detailed list of all surrounding areas we cover is featured on the Practice Website.  We are under contract with NHS England to provide these NHS Services. | Practice leaflet and website | Free |
| **Doctors in the Practice:**  Dr Jason Shilhan  Dr Victoria Long  Dr Grace Choi | Practice leaflet and website & NHS Choices Website | Free |
| **Contact details for the Practice:**  Mr Martin Turner Practice Manager  Ms Lisa Moran Assistant Practice Manager  Staveleigh Medical Centre  King Street  Stalybridge  Cheshire  SK15 2AE  staveleighmedicalcentre.co.uk | Practice notice board, New Patient Registration Information and website & NHS Choices Website | Free |
| **Opening hours:**  8.00 to 6.30pm daily Monday to Friday  Weekend & Bank Holidays Closed  closing for Training 3rd Thursday of each month | Practice leaflet and website | Free |

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| **Information to be published** | How the information can be obtained | Cost |
| **Other staffing details:**  Nurses  Health Care Assistants  Administration Staff  Reception Staff  Attached staff include | Notice boards, New Patient Registration Information and website | Free |

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| **Information to be published** | **How the information can be obtained** | **Cost** |

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| **Class 3 – What our priorities are and how we are doing**  (Strategies and plans, performance indicators, audits, inspections and reviews) - Current and previous year as a minimum. | | |
| The Practice’s priority is to provide the highest standard of clinical care to patients registered with the Practice, ensuring we work collaboratively with other healthcare providers and support organisations, to enable more of our patients to be treated in a primary care setting, closer to home. |  |  |
| Insert details of all plans, performance indicators, audits, inspections and reviews |  |  |
| Developments In line with CCG priorities | See CCG 5 Year Plan on their website :  <http://nww.tamesideandglossop.nhs.uk/> |  |
| Plans for development and provision of NHS services are detailed in our Practice Development Plan which we produce at the start of every new financial year, in April. | Hard copy by request from Practice Manager | ★ |
| Continued participation in the Quality & Outcomes Framework (QOF).  Our performance under the QOF can be found on the NHS IC website: <http://qof.hscic.gov.uk/index.asp> | Website | Free |
| Continued participation in Enhanced Services:  To be populated once agreed for 19-20 | Hard copy by request from Practice Manager | ★ |
| Continued participation in Commissioning Group to provide greater services for patients, closer to Home. | Hard copy by request from Practice Manager | ★ |
| NHS Choices website provides details of our performance, and what patients think of us from the Patient Satisfaction Questionnaire, carried out annually. [www.nhschoices.nhs.uk](http://www.nhschoices.nhs.uk) | Website | Free |
| Our Patient Participation Group project updates and information | Website and Hard Copy from Reception | Free |
| **Plans for the development and provision of NHS Services:** |  |  |
| Increase in access for patients with extended hours via our local hubs | Hard copy by request from Practice Manager | ★ |
| Expansion of internet facilities for ordering repeat medications and making/cancelling advance appointments | Hard copy by request from Practice Manager | ★ |
| Continued participation in Quality and Outcome Framework. | Hard copy by request from Practice Manager | ★ |
| Continued participation in Enhanced services. | Hard copy by request from Practice Manager | ★ |
| Continued participation in Commissioning Group to provide greater services for patients Closer to Home. | Hard copy by request from Practice Manager | ★ |

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| **Information to be published** | **How the information can be obtained** | **Cost** |
| **Class 4 – How we make decisions**  (Decision making processes and records of decisions) - Current and previous year as a minimum | | |
| Partners meet every Monday Morning   |  |  |  | | --- | --- | --- | | **Meeting Name** | **Attendees** | **Frequency** | | Partners | Partners, & Practice/Assistant Manager | Weekly | | Clinical | All Doctors, Managers, and Practice Nurses | Monthly | | Primary GSF Healthcare Team | Partners, Salaried GP, Manager, District Nurses, McMillan Nurse | Every 6 weeks | | Nurses | Partner, Practice Nurse, HCA’s & Manager | Monthly | | Receptionists | Practice Manager, Office Supervisor & Receptionists | Monthly |   The Palliative Care Register is discussed at the Primary Healthcare Team Meeting.  All issues regarding the Practice and any changes proposed are discussed at the appropriate level of meeting.  All decisions affecting the partnership are made on a majority vote basis.  All meetings and decisions are evidenced in minutes.  The Practice retains minutes:   1. A confidential set which contains commercially sensitive or data protected information that is not within this Publication Scheme. These minutes are shared with key personnel in the Practice, including the line managers who then brief their staff teams as necessary. 2. General minutes of meetings are available through the Publication Scheme. Copies of these minutes are held centrally within the Practice for reference by any member of the team. | Hard copy by request from Practice Manager | ★ |

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| **Records of decisions made in the practice affecting the provision of NHS services**  Increase in access for patients with extended hours  Expansion of internet facilities for ordering repeat medications and making/cancelling advance appointments | Hard copy by request from Practice Manager | ★ |

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| **Information to be published** | **How the information can be obtained** | **Cost** |
| **Class 5 – Our policies and procedures**  (Current written protocols, policies and procedures for delivering services and responsibilities) - Current information only. | | |
| Policies and procedures about the employment of staff | Hard copy by request from Practice Manager | ★ |
| Internal instructions to staff and policies relating to the delivery of services | Hard copy by request from Practice Manager | ★ |
| Equality and diversity policy | Hard copy by request from Practice Manager | ★ |
| Health and safety policy | Hard copy by request from Practice Manager | ★ |
| Complaints procedures (including those covering requests for information and operating the publication scheme) | Website and Hard Copy from Reception | Free |
| Records management policies (records retention, destruction and archive) | Hard copy by request from Practice Manager | ★ |
| Data protection policies | Hard copy by request from Practice Manager | ★ |
| Policies and procedures for handling requests for information | Hard copy by request from Practice Manager | ★ |
| Patients’ charter | Practice leaflet and  Website | Free |

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| **Information to be published** | **How the information can be obtained** | **Cost** |
| **Class 6 – Lists and Registers**  Currently maintained lists and registers only. | | |
| We maintain our list of registered patients using the SystmOne Clinical system which is fully computerised and paperless.  At the present time, we have approximately 6600 patients registered with the Practice.  The list is confidential. |  |  |
| In accordance with the requirements of the New General Medical Services Contract we also hold a Register of Gifts to the Practice | Hard copy by request from Practice Manager | ★ |
| **Any publicly available register or list** | Not held |  |

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| **Information to be published** | **How the information can be obtained** | **Cost** |

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| **Class 7 – The services we offer**  (Information about the services offered, including leaflets, guidance and newsletters produced for the public) - Current information only. | | |
| **The services we provide in accordance with the General Medical Services contract held with NHS England include the following:**   * A full range of General Medical Services * Ante-natal Care * Anticoagulant Service * Baby Clinic & immunisation * Blood Pressure Review Clinic * Cervical Cytology * Child health surveillance * Childhood developmental checks, vaccinations and immunisations * Contraceptive services * Dietetics * Disease management services including Asthma, Diabetes, Hypertension, Coronary Heart Disease and Chronic Obstructive Pulmonary Disease * Health Visiting and Midwifery Services * Ear Syringing * Flu Clinics * Health promotion services for young people and adults of all ages (Well man / Well woman) * Immunisations * Maternity Medical Services * Minor surgery services * New patient consultations if required * Podiatry * Phlebotomy * Removal of Stitches * Smoking Cessation Service * Travel and other immunisations * Warfarin Monitoring * DVT monitoring * ECG * 24 hour BP Monitoring | Practice leaflet and website. | Free |
| **Enhanced Services**   These are NHS services not provided through Essential or Additional services and include more specialised services undertaken by GPs or nurses with special interests and allied health professionals and other services at the primary-secondary care interface.  They may also include services addressing specific local health needs or requirements, and innovative services that are being piloted and evaluated.  We provide the following enhanced services: Alcohol ReductionCancer  * Carers  Chronic Kidney DiseaseDiabetes monitoring – to include provision of care for housebound diabeticsFitting of contraceptive implantsHeart failureHPV (Human Papillovirus) vaccination for 17 to 18 year oldsMMR Catch-up CampaignPalliative CareRheumatology monitoring  * Ring Pessaries | Hard copies by request from Practice Manager | Free |

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| **The following services involve information sharing with other agencies:**   * Child protection, * General nursing, * Mental health, * Referral to Hospitals and other agencies, * Social services, | Hard copies by request from Practice Manager | Free |
| Charges for services made by the Practice No charge is made for all the services we provide under contract to the NHS.  For the services we provide which are outside our contract to the NHS, there is a charge, which we keep in line with those recommended by the British Medical Association (BMA).  Examples of non-NHS services for which GPs can charge their NHS patients are:   * Certain travel vaccinations * Private medical insurance reports * Holiday cancellation claim forms * Referral for private care forms * Letters requested by, or on behalf of, the patient   Examples of non-NHS services for which GPs can charge other institutions are:   * Medical reports for an insurance company * Some reports for the DSS/Benefits Agency * Examinations of local authority employees * Examinations for adoption/fostering services   We produce and publish a list of these Services and their associated charges. | Practice Website;  Practice Leaflet;  On our Reception Desk;  On Practice Notice Boards. | Free |

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| **Information Leaflets:**   * Practice Brochure * Practice Newsletter * Traveller Holiday Information * Patient Participation Group Reports * Access to medical records – application form * Access to medical Records – patient information leaflet * Carer’s Referral form   The Practice also holds information leaflets provided by outside agencies:  In addition to the above, the Practice offers a range of information about a variety of issues and a considerable number of minor illnesses via the Practice website, where you can also find a list of Useful Contacts and links to other health-related websites. | Practice Website;  On our Reception Desk;  From Practice Waiting Room. | Free |

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| Out of Hours Arrangements When the Practice is closed ‘Out of Hours Care’ for urgent medical services is provided by an ‘Out of Hours’ service arranged by Go To Doc and 111  The ‘Out of Hours’ centre is based at Ashton Primary care centre Address: 193 Old St, Ashton-under-Lyne OL6 7SR  Phone: 0161 342 7000    Accidents and emergencies occurring outside surgery hours should be directed to Tameside General Hospital, Fountain Street, Ashton-Under-Lyne, Lancashire  0161 331 6000 | Practice Website;  Practice Leaflet | Free |

K. Statement Publication

Staveleigh Medical Centre will endeavour to update and publish their policy and statement as soon as possible and appropriate. The policy and statement should be reviewed not more than 12 months of the version date.

The statement needs to be approved and signed by an appropriate senior person in the business to ensure senior level accountability.

A copy of the statement is to be provided to anyone who requests one in writing. The copy must be provided to the requestor within 30 days of the receipt of the request.

L. Additional Information

None recorded.

M. References & Further Resources

[www.firstpracticemanagement.co.uk/knowledge-base/general-administration/freedom-of-information-act/](http://www.firstpracticemanagement.co.uk/knowledge-base/general-administration/freedom-of-information-act/)

[Gov.uk - Freedom of Information Act 2000](http://www.legislation.gov.uk/ukpga/2000/36/contents)

The Information Commissioner - [www.ico.gov.uk](http://www.ico.gov.uk)

The Justice Department - [www.justice.gov.uk](http://www.justice.gov.uk)

The Health & Social Care Information Centre - <http://www.hscic.gov.uk/foi>

NHS Direct - [www.nhsdirect.nhs.uk](http://www.nhsdirect.nhs.uk)

NICE - [www.nice.org.uk](http://www.nice.org.uk)

Publications:

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Freedom of Information Act 2000 - <http://www.legislation.gov.uk/ukpga/2000/36/contents>

Code of Practice under Sections 45 & 46 FOI Act 2000 –

<http://www.justice.gov.uk/information-access-rights/foi-guidance-for-practitioners/code-of-practice>

N. Appendices

None recorded.

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