



Information Update: Guidance on GDPR for GP Practices 8 March 2018

The long awaited further guidance from the BMA about the implications for practices from the introduction of GDPR on 25 May 2018 has now been published and can be found at this [link](#).

It provides some very useful updates about how this legislation will impact of practices and also starts to provide some specific advice about practical steps that practices need to take to ensure compliance. However, practices should note that the UK legislation in the form of the Data Protection Act 2018 (which will supersede the DPA 1998 that we have all been working to) has not yet been enacted and there may therefore be some changes when this legislation is published. The BMA are also producing templates for use/adaptation by practices and we will publish these along with any further guidance as soon as we receive them.

The guidance sets out the main themes of the legislation and what you need to do to ensure compliance, including:

- What is a data controller?
- Consent and other lawful bases for processing
- Right to object
- Data controller responsibilities for processing: privacy notices
- Accountability: demonstrating compliance
- Dealing with requests for confidential health data
- Breach reporting
- Subject access requests
- Breach reporting
- Additional concepts under GDPR

The following two areas have produced the most queries to the LMC and the publication does provide some further guidance:

- Subject Access Requests. Unfortunately in most cases patients must be given access to their medical records free of charge, including when a patient authorises access by a third party such as a solicitor. A “reasonable fee” can be charged if the request is manifestly unfounded or excessive. The BMA guidance states that these circumstances are likely to be rare and the onus is on the practice to demonstrate what constitutes “manifestly unfounded or excessive”. Although the guidance currently does not provide clear cut definitions to practices, we are sure that this will be informed over time by experience as organisations test

For further information, or to arrange an interview, please contact:
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what these definitions do and do not include and we will continue to monitor any developments and provide updates when we receive them. For completeness the actual regulations from GDPR state:

- Article 12: Information providedshall be provided free of charge. Where requests from a data subject are manifestly unfounded or excessive, in particular because of their repetitive character, the controller may either: (a) charge a reasonable fee taking into account the administrative costs of providing the information or communication or taking the action requested; or (b) refuse to act on the request. The controller shall bear the burden of demonstrating the manifestly unfounded or excessive character of the request.
- Article 15: The controller shall provide a copy of the personal data undergoing processing. For any further copies requested by the data subject, the controller may charge a reasonable fee based on administrative costs.
- Data Protection Officers. It is clear from the guidance that the vast majority of practices will be required to have a designated DPO and the guidance does provide some examples of how this might be achieved by individual practices or within collaborations/federations. We recommend that practices start to explore the options open to them and we will continue to explore other options at local and national levels to ascertain whether further support and assistance may be available.

If you have any further questions after reading the guidance please don't hesitate to [contact us](#).

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