



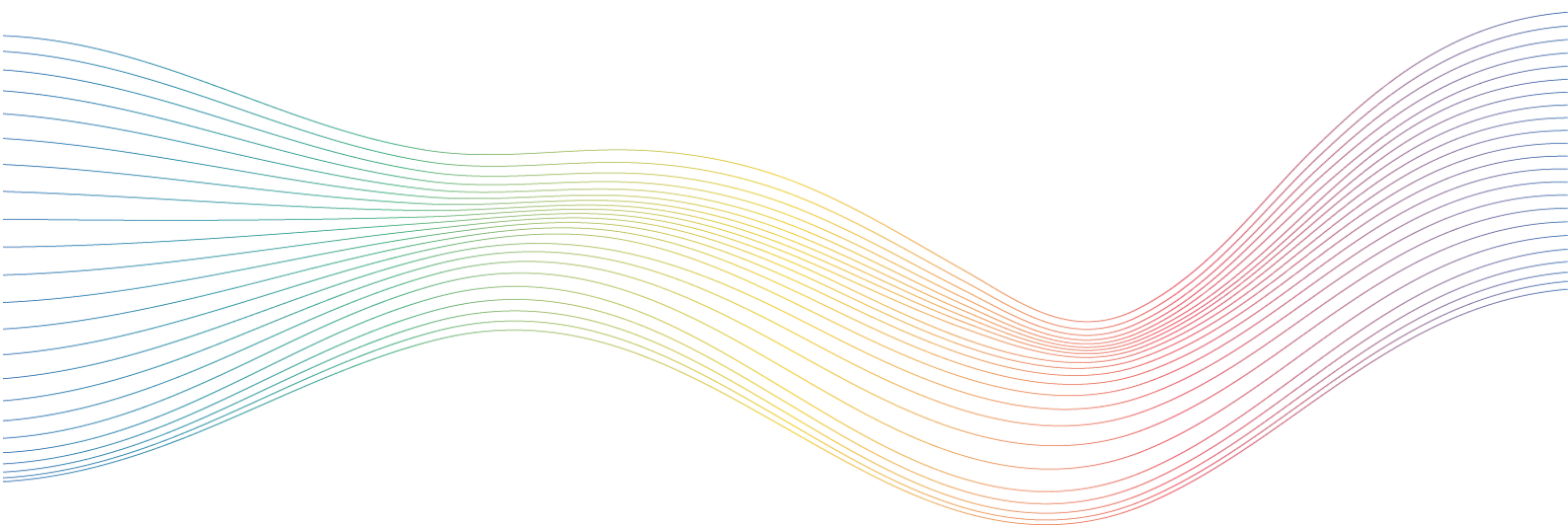
**Benchmarking Network**

## **NHS BENCHMARKING NETWORK**

### **FAIR PROCESSING NOTICE**

**Version 1.1**

**Date Issued: August 2025**



## Version control

| Date completed                 | Version | Summary of changes                              |
|--------------------------------|---------|---|
| 18 <sup>th</sup> May 2018      | V 0.01  | First draft                                     |
| 23 <sup>rd</sup> May 2018      | V 0.02  | Second draft – additions by DH                  |
| 25 <sup>th</sup> May 2018      | V 0.03  | CH  |
| 31 <sup>st</sup> July 2018     | V 0.04  | DH  |
| 15 <sup>th</sup> October 2018  | V 0.05  | CH  |
| 15 <sup>th</sup> May 2019      | V 0.06  | DH  |
| 16 <sup>th</sup> October 2019  | V 0.07  | CG  |
| 12 <sup>th</sup> February 2020 | V 0.08  | Merger of FPN and National Opt Out FPN          |
| 13 <sup>th</sup> March         | V 0.09  | New DPO contact and new project added           |
| 8 <sup>th</sup> December 2020  | V0.10   | Projects collecting patient level data reviewed |
| 22 <sup>nd</sup> February 2021 | V0.11   | Projects collecting patient level data reviewed |
| 20 <sup>th</sup> January 2022  | V0.12   | Projects collecting patient level data reviewed |
| 6 <sup>th</sup> April 2022     | V0.13   | Projects collecting patient level data reviewed |
| 8 <sup>th</sup> June 2022      | V0.14   | Projects collecting patient level data reviewed |
| 3 <sup>rd</sup> September 2022 | V0.15   | CVD Prevent update and change of DPO            |
| 27 <sup>th</sup> March 2024    | V0.16   | Projects collecting patient level data reviewed |
| 2 <sup>nd</sup> May 2024       | V0.17   | Included company name change & project update   |
| 22 April 2025                  | V1.0    | Updated   |
| 8 <sup>th</sup> August 2025    | V1.1    | Updated   |

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## Who are we?

The NHS Benchmarking Network (The Benchmarking Network Ltd) is a subcontractor to Norfolk Community Health & Care NHS Trust (NCH&C) who host the Network.

All organisations that process personal data must have a valid ICO registration, ours is Z1624069.

## What do we do?

We are a member-led organisation funded by subscription fees. Membership is open to commissioners and providers of publicly funded health and social care services across the UK. National bodies may also be members, subject to agreement by our Steering Group.

We are also commissioned by organisations such as NHS England (NHSE) and the Healthcare Quality Improvement Partnership (HQIP), via NCH&C, to undertake work which may involve processing anonymised, pseudonymised or limited Personal Confidential Data (PCD) on their behalf.

More about us: <https://www.nhsbenchmarking.nhs.uk>

## What data do we hold and on what legal basis?

We only collect and process the minimum amount of data required to deliver our services. The data we handle generally falls into the following categories:

### 1. Patient / Service User Data

In most cases, we process anonymised or aggregated data. However, some projects require the use of pseudonymised or limited Personal Confidential Data (PCD), processed under the instructions of the relevant Data Controller. This may include:

- Information from clinical case reviews
- Patient-reported experience or outcome data
- Service user feedback
- Survey responses from individuals involved in care delivery or receipt

We do **not** routinely collect fully identifiable patient data, and where limited identifiers are required, these are minimised and secured appropriately.

### 2. Membership Data

As part of delivering services to NHS Benchmarking Network members, we hold administrative and contact data for individuals representing their organisations, including:

- Names and job titles
- Work email addresses and telephone numbers
- IP addresses (for survey access logging)
- Project participation roles and site details
- Invoicing and subscription information

This information enables us to manage membership, coordinate benchmarking projects, and communicate project updates.

### 3. Browsing and Survey Platform Data

We collect IP addresses and basic access logs when individuals access our secure online platforms (e.g. surveys, dashboards). This is used solely to:

- Maintain platform security
- Prevent fraudulent activity
- Troubleshoot technical issues

We do not use browsing data for marketing, profiling, or analytics, and we do not share it with third parties.

#### Legal Basis for Processing – UK GDPR

We rely on the following lawful bases for processing:

- **Article 6(1)(e)** – *Processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller.*  
This applies to our work with public health and care organisations, and commissioned national audits.

When special category data is involved (such as health or ethnicity data), this is further supported by:

- **Article 9(2)(i)** – *Processing is necessary for reasons of public interest in the area of public health, ensuring high standards of quality and safety of healthcare.*

**Note:** For special category data, it is the **Data Controller** commissioning the work who must determine and document the appropriate legal basis. The NHS Benchmarking Network acts as a **Data Processor** under their instructions.

## What programmes/ projects are we involved with that use data?

We support a wide range of national and local projects that collect and analyse data across health and care services in the UK. Some of these projects involve patient, staff or service-level information. Where relevant, we process this data on behalf of the commissioning organisation. We review and update this list regularly to reflect our current portfolio of work.

### 1. The National Audit of Care at the End of Life (NACEL)

Commissioned by: HQIP (England & Wales) and Public Health Agency (Northern Ireland)

Data: Pseudonymised or limited patient-level data

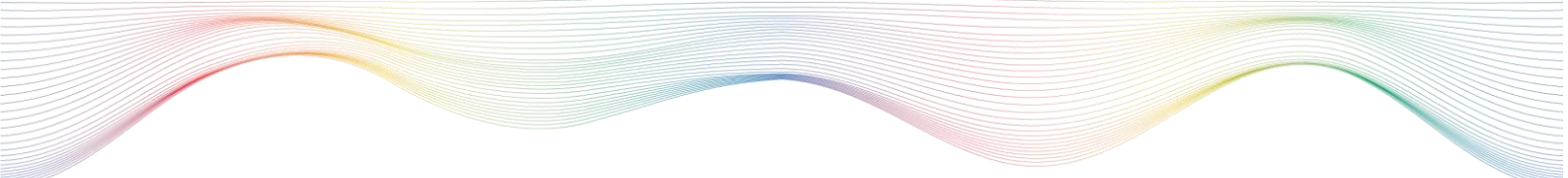
NACEL collects data about the care provided to people in the last days of life. This may include data on patient demographics, place of death, care received, and staff/patient feedback.

#### Lawful basis:

- Article 6(1)(e) – public task
- Article 9(2)(i) – public health and healthcare quality

More info:

<https://www.nacel.nhs.uk>



<https://www.nacel.nhs.uk/audit-guidance-ni>

## 2. CVDPREVENT (Workstream 3)

Commissioned by: HQIP (England only)

Data: Anonymised, with small number suppression

This audit helps understand how cardiovascular disease prevention is managed in primary care. All data is anonymised and no identifiable or pseudonymised data is processed by NHSBN.

**Lawful basis:** Article 6(1)(e)

More info:

<https://www.cvdprevent.nhs.uk>

## 3. Member Work Programme

Commissioned by: Health and social care providers and commissioners (via NCH&C)

Data: Primarily organisational and anonymised data, with some patient and staff feedback

This programme includes benchmarking projects across a wide range of service areas. While most data is submitted at organisational level, some projects involve:

- Clinical case reviews
- Patient or service user experience surveys
- Staff surveys or workforce data

All patient and staff level data is anonymised.

**Lawful basis:** Article 6(1)(e)

More info:

<https://www.nhsbenchmarking.nhs.uk/member-work-programme>

## 4. Workforce Programme

Commissioned by: NHS England Workforce, Training & Education Directorate (NHSE WT&E)

Data: Aggregated data with small number suppression

These projects support workforce planning and development across the NHS. We process workforce data submitted by organisations across regions. No identifiable data is used.

**Lawful basis:** Article 6(1)(e)

More info:

<https://www.wfbenchmarking.nhs.uk>

## 5. Insight and Analytics Projects

Commissioned by: NHS organisations, integrated care boards, local authorities and other public sector bodies

Data: Aggregated and/or pseudonymised data, small number suppression applied

These projects are typically short- to medium-term, tailored to the needs of the commissioning organisation. They may include service redesign, pathway mapping, impact modelling, or needs



assessments.

**Lawful basis:** Article 6(1)(e)

More info:

<https://www.nhsbenchmarking.nhs.uk/insight>

## How is data used and stored?

We are committed to protecting personal data and using it responsibly. We apply appropriate technical and organisational controls to ensure data confidentiality, integrity, and availability.

### 1. Research, Clinical Audit and Evaluation

Some of the national audits we support, such as NACEL, may involve the use of data for:

- **Clinical audit** (measuring care against standards)
- **Service evaluation** (understanding how services are working)
- **Health and care research** (only where approved by the relevant data controller)

We do not make decisions about whether patient data is used for research. Any such decisions are made by the Data Controller, typically HQIP or NHS England.

If data from a national programme is to be used for research, the request is managed through the Healthcare Quality Improvement Partnership (HQIP) via the Data Access Request Group (DARG).

More info:

<https://www.hqip.org.uk/national-programmes/accessing-ncapop-data>

### 2. Data Storage and Retention

We follow industry-standard security practices for storing data, including secure cloud and encrypted systems, with access limited to only those who need it.

Data may be stored in:

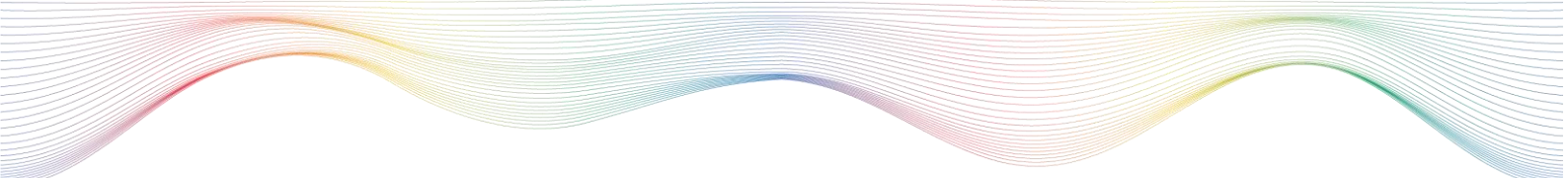
- Secure cloud-based platforms (UK-based or NHS-approved)
- Encrypted databases and file stores
- Paper records (if used, these are stored securely and destroyed confidentially)

We retain data only for as long as is necessary to deliver our services and meet legal or contractual obligations. Our retention periods vary by project and are agreed with the Data Controller. We operate under a formal Records Management and Retention Policy, available on request.

### 3. National Data Opt-Out

The National Data Opt-Out is a service that allows patients to choose not to have their confidential patient information used for research and planning purposes.

As a commissioned partner of the NHS, we are required to comply with this policy. However:

- 
- It is the responsibility of NHS organisations (the Data Controllers) to apply the opt-out before data is shared with us.
  - We remind all commissioning organisations of their obligation to apply the opt-out where relevant.
  - We do not collect identifiable data directly from patients.

Patients can manage their data choices here:

<https://www.nhs.uk/your-nhs-data-matters/manage-your-choice/>





## Your Rights Under Data Protection Law

Under the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018, individuals (data subjects) have a number of rights relating to their personal data. These rights apply whether we are acting as a data processor or, in limited circumstances, a data controller.

If we are acting as a **Data Processor**, we will direct any enquiries to the appropriate **Data Controller** (e.g. HQIP, NCH&C, NHS England), who is responsible for responding. Your rights include:

- **The right to be informed**  
You have the right to be informed about the collection and use of your personal data. This Fair Processing Notice forms part of our commitment to transparency.
- **The right of access**  
You can request a copy of any personal data we hold about you. This is known as a Subject Access Request (SAR).
- **The right to rectification**  
You have the right to ask for any inaccurate or incomplete data to be corrected.
- **The right to erasure (“to be forgotten”)**  
In some circumstances, you may request that your personal data is deleted.
- **The right to restrict processing**  
You can ask for processing of your data to be restricted (e.g. while accuracy is being checked).
- **The right to data portability**  
Where applicable, you have the right to receive your personal data in a structured, commonly used format and to have it transmitted to another organisation.
- **The right to object**  
You can object to your data being processed in certain ways, especially where the basis is public task or legitimate interests.
- **Rights related to automated decision-making and profiling**  
You have rights in relation to automated decisions and profiling where these have legal or significant effects on you. NHSBN does not carry out automated decision-making.
- **The right to withdraw consent**  
Where we rely on your consent to process personal data (e.g. survey participation), you may withdraw that consent at any time.
- **The right to complain**  
If you are unhappy with how we have handled your data, you can contact our Data Protection Officer. You also have the right to raise a complaint with the Information Commissioner’s Office (ICO).

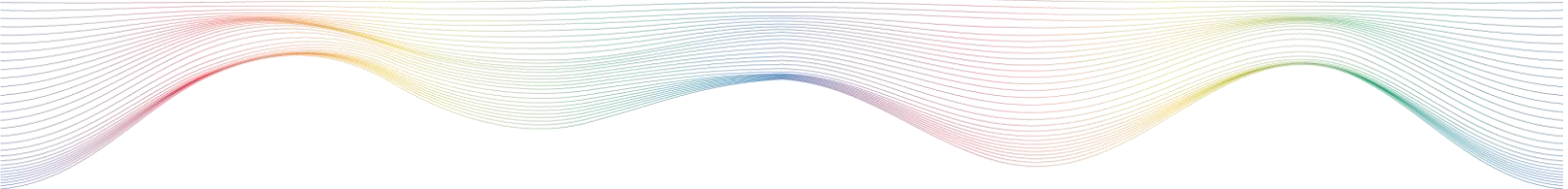
## Contact Us



**Data Protection Team** - [nhsbn.dpo@nhs.net](mailto:nhsbn.dpo@nhs.net)

## Contact the ICO

**Information Commissioner’s Office**  
Wycliffe House  
Water Lane  
Wilmslow  
Cheshire  
SK9 5AF





 0303 123 1113  
 <https://www.ico.org.uk>