



INFORMATION SHARING PROTOCOL

Community Pharmacy access to Immediate Discharge Letter

June 2025

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Introduction

Community Pharmacies are contracted by NHS Dumfries & Galloway to provide services, including dispensing medication, to patients in community-based settings.

Any alteration of prescribed medication during an admission to an inpatient facility must be communicated to Community Pharmacy as soon as possible to ensure patient safety and appropriate future supply of the required medication once the patient returns to a community-based setting.

1 Parties, Scope and Purpose

1.1 Name and details of the parties who agree to share information

Legal name of parties subject to the protocol and Head Office address	Short name of the party	Role in this agreement : Data Controller or Data Processor (*)	ICO Registration
Dumfries and Galloway NHS Board	NHS D&G	Data Controller	Z6162267
Pharmacy contracted to supply NHS dispensing services across Dumfries & Galloway	Community Pharmacy	Data Controller	

1.2 Business and legislative drivers for sharing data.

Community Pharmacies across Dumfries & Galloway provide NHS services under contract to NHS D&G. This includes dispensing medication to those requiring a monitored dosage system or those supported to administer their medicines by formal carers.

Changes to medicines during admission to an NHS D&G inpatient facility require to be communicated to Community Pharmacy timeously to ensure appropriate future supply.

Information is shared under the provisions of the Intra NHS Scotland Sharing Accord, Section 8 (e):

Any other organisations/persons incorporated to the NHS (Scotland) for the provision of health and care services in virtue of the National Health Service (Scotland) Act 1978 section 1A (Duty of the Scottish Ministers to promote health improvement).

For example, this may include, but not be limited to, the sharing or disclosure of information between organisations listed in Part 1 of the NHS Act 1978 namely Health Boards (including Special Health Boards and Public Health Scotland), GPs, Dentists, Hospitals, Prison Medical Staff, **Community Pharmacies**, Primary Care Contractors as part of the health and care delivery purposes identified in paragraph 5 of the Accord.

1.2.1 Purpose(s) of the information sharing

Indicate how the data controllers will decide upon changes in the purpose(s) of the information sharing	Jointly or independently
	Jointly

Instructions for reaching agreement on any changes to purpose of the sharing are listed in the table in Appendix 1, called; List of Work instructions, policies and procedures.

1.2.2 Legal basis for the processing and constraints

Without detriment of any other legal basis that may be applicable (e.g. criminal investigation, etc.) the following are the core legal basis for each of the parties to process the data in this agreement:

Legal basis	Party
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	Both
9(2)(j) processing is necessary for the purposes of preventative medicine and the provision of health or social care or treatment	Both

2 Description of the information to be shared

Data category	Data Controller(s)	PD*
Patient CHI	Community Pharmacy	PD
Patient Demographic Data (Name, Address, CHI)	NHS D&G	PD
Patient GP details (Name, Address)	NHS D&G	PD
Patient Allergy details (allergen and reaction)	NHS D&G	
Patient Admission details (Date, Ward, coded admission reason, Discharge Date and destination)	NHS D&G	
Medication list at Discharge (Medicines, dose, route, frequency and details of supply). Warfarin history. Any notes added by prescriber or pharmacist. Changes to medicines (New, Changed, stopped, withheld). Pharmacist comments	NHS D&G	

Appendix 2 (Data items and adequacy), contains the list of all relevant data items/fields which it has been agreed can be shared under this protocol, indicating the source and the recipients, and any relevant supporting statement for information that may raise questions on data minimisation.

3 Description and manner of information sharing

3.1 Data flows

Community pharmacy to identify patients where information is required and supply list of CHI numbers for those patients.

NHS D&G to incorporate CHIs into a database to highlight that a community pharmacy copy is required and to record which community pharmacy.

On discharge, where a community pharmacy is recorded in IDL, a community pharmacy specific copy of the IDD will be sent by email to the pharmacy generic NHS email address.

Community Pharmacy will utilise the information to support the preparation of the next prescription. The IDD document will then be deleted.

3.2 How data/information is to be accessed, processed and used

Processing (descriptor)	Associated work instructions, policy or procedure (listed in Appendix 1) If applicable
Community pharmacy will email from the pharmacy generic mailbox a list of required CHI numbers to a dedicated mailbox	SOP
NHS Dumfries & Galloway will automatically process this data into a dedicated table and make available in a dedicated view in IDD to aid troubleshooting. It will also flag to pharmacy IDD users that a copy will be sent.	
CHI is used to identify the need to send the community pharmacy specific copy of the IDL to the pharmacy generic mailbox automatically when final copies are generated.	

3.3 Summary of how decisions are going to be made with regards to the manner of the processing.

Community Pharmacy is responsible for identifying whose documents are required and maintaining an accurate list of CHI numbers.

NHS D&G are responsible for ensuring updated lists are processed timeously and that the correct pharmacy email is used for sending information.

4 Impact assessments and preparatory work

Mandatory statement:

The parties acknowledge that any actions and countermeasures agreed as part of the Data Protection Impact Assessment reviews must be implemented by the responsible party. Deadlines and follow up to progress on those actions will be established as part of the DPIA review process.

Not applicable. This information sharing is a long-established process which is necessary to ensure patient safety and continued appropriate care and treatment in the community. Information being shared is limited to that which is contained in IDL, no new technologies are involved in the processing activity and this does not meet the legal requirement for undertaking a full DPIA.

Consideration has been made to the method of transfer of information between NHS D&G and community pharmacies to protect patient confidentiality.

5 Privacy information (transparency requirement)

This processing activity is in compliance with NHS Dumfries & Galloway legal basis for processing personal and special category data. Data subjects are informed of the use of their personal information via NHS Dumfries & Galloway Data Protection Notice: <https://www.nhsdg.co.uk/data-protection-notice/>

6 Accuracy of the information

This is standard patient data used in the prescription and supply of medication at discharge along with communication with the patients' GP. Data is currently accepted as sufficiently accurate for these purposes.

7 Data retention and secure disposal

Data will be deleted from NHS email inbox after use and is therefore subject to standard data retention policies associated with the Microsoft 365 tenancy.

NHS Dumfries & Galloway retains patient medical information in accordance with the Scottish Government Records Management Health & Social Care Code of Practice (Scotland) 2024 [Records Management Code of Practice for Health and Social Care v4.0](#)

8 The rights of individuals

8.1 Subject access request, FOI and data portability.

Data subjects can submit a Subject Access Request for copies of their information as processed by NHS Dumfries & Galloway by contacting the Data Protection Team at dg.dpa-office@nhs.scot.

8.2 Objection or restriction to processing, rectification and erasure.

Data subjects can exercise their data subject rights of objection or restriction to processing, rectification and erasure by contacting the Information Governance Team at dg.dataprotection@nhs.scot

8.3 *Rights related to automated decision making, including profiling.*

There is no automated decision making involved in this processing activity.

8.4 Direct Marketing

There is no direct marketing involved in this processing activity.

9 Security, risk and impact of the processing

[X] All relevant Security Policies applicable to the parties and systems used in this proposal are available and listed in Appendix 1.

[X] A qualified Information Security Officer has reviewed the adequacy of the attached Security Policies and has advised on the technical and organisational security risk level.

[X] A suitable process to document and monitor the security risk described in the Information Security and Governance Policies listed in Appendix 1.

[n/a] A Data Protection Impact assessment has been produced and is available as listed in Appendix 1.

[X] A competent, independent and free of conflicts of interests Data Protection Officer has been designated to inform the Data Controllers on the adequacy of this agreement and the corresponding compliance and any residual risks documented in the Data Protection Impact Assessment.

The security measures put in place across the parties ensure that:

[X] Wherever special categories of data are processed, the data will be encrypted at rest and in transit.

[X] Wherever special categories of data are transmitted over network, Transport Layer Security (TLS) protocols will be applied. Exceptions will be documented in the DPIA and any residual risk will require approval by the SIRO of each organisation prior to processing such data.

[X] only authorised individuals can access, alter, disclose or destroy data. This is achieved through the following work instructions, policies and procedures (also listed in Appendix 1):

[X] authorised individuals act only within the scope of their authority. This is achieved through the following work instructions, policies and procedures (also listed in Appendix 1):

- [X] if personal data is accidentally lost, altered or destroyed, it can be recovered to prevent any damage or distress to the individuals concerned. This is achieved through the following work instructions, policies and procedures (also listed in Appendix 1):

The security controls applicable by each organisation will be:		Jointly agreed between the parties
	X	Independently decided by each party

9.1 Agreed standards, codes of conduct and certifications

10 International transfers of personal data

Personal data shared in line with this agreement will be transferred to:

	EEA countries only
	Outwith EEA
X	Will not be transferred outside the UK

10.1 List of countries where the data will be transferred to (if applicable).

N/A

10.2 Reasons for transferring personal data outside the UK.

N/A

11 Implementation of the information sharing agreement

11.1 Dates when information sharing commences/ends

Continual and ongoing.

11.2 Training and communications

All NHS Dumfries & Galloway staff are required to complete mandatory Information Governance and Cyber Security training on an annual basis.

All registered pharmacy professionals are regulated by the General Pharmaceutical Council. The nine standards of practice can be found here:

<https://www.pharmacyregulation.org/pharmacists/standards-and-guidance-pharmacy-professionals/standards-pharmacy-professionals>

The standards included a requirement for pharmacy professionals to demonstrate “respect and maintain the person’s confidentiality and privacy” and to “understand the importance of managing information responsibly and securely, and apply this to their practice”. They are also responsible for ensuring “that everyone in the team understands the need to maintain a person’s privacy and confidentiality”.

11.3 Information sharing instructions and security controls

All relevant information sharing instructions, including but not exclusively any work instructions, policies or procedures, are listed in Appendix 1 and accepted by all parties.

The applicable security classification for the data in this agreement are as follows:

- OFFICIAL-SENSITIVE

11.4 Non-routine information sharing and exceptional circumstances

This system allows for Hospital Pharmacy staff to send a copy of the IDD where they assess requirement even where not requested by the community pharmacy.

11.5 Monitoring, review and continuous improvement

This Information Sharing Protocol will be reviewed:

- every two years as a minimum
- on request of any of the parties involved in this processing activity
- in the event of a breach of personal information
- in the event of an adverse event relating to this data sharing

12 Sign-off

We the undersigned approve the details recorded in this Information Sharing Protocol and are satisfied that it is in compliance with information governance, data protection and record management legislation.

Role	Advice/ Action/ Sign-Off	Date
Directorate: CHSC Name: Stephanie Mottram	Stephanie Mottram (by email)	20/06/2025
Directorate: WCSH Name: Lyn Durrant	Lyn Durrant (by email)	02/07/2025
Directorate: AD Name: Callum Ambridge	Callum Ambridge (by email)	04/07/2025
Directorate: MH Name: Justin Murray	Justin Murray (by email)	28/07/2025

13 Appendix 1: List of Work instructions, policies and procedures

Work instructions title	Organisation	Where to find this document (e.g. hyperlink)
Confidentiality and Data Protection Policy	NHSD&G	Policies – NHS Dumfries & Galloway
Information Security Policy	NHSD&G	Policies – NHS Dumfries & Galloway
Safe Information Handling Policy	NHSD&G	Policies – NHS Dumfries & Galloway
Personal Data Breach Reporting Procedure	NHSD&G	Personal Data Breach Reporting Procedure
GPhC Standard 7	GPhC	standards for pharmacy professionals may 2017_0.pdf

The above table should list all:

- Instructions for reaching agreement on any changes to the purpose of the sharing.
- All applicable and relevant Information Security and Governance Policies
- All Data Protection Impact assessments

14 Appendix 2: Data items and adequacy

Data Item	Source	Recipients
CHI	IDL	CP
Patient Name	“	CP
Patient Address	“	CP
GP	“	CP
Allergies	“	CP
Patient Admission details (Date, Ward, coded admission reason, Discharge Date and destination)	“	CP
Medication list at Discharge (Medicines, dose, route, frequency and details of supply). Warfarin history. Any notes added by prescriber or pharmacist. Changes to medicines (New, Changed, stopped, withheld).	“	CP
Pharmacist comments		

The above table should contain:

The list of all relevant data items/fields which it has been agreed can be shared under this protocol, indicating the source and the recipients, and any relevant supporting statement for information that may raise questions on data minimisation.