

THE TRANSFER IN AND OUT PROCESS BY SPECIALIST COMMUNITY PUBLIC HEALTH NURSE (SCPHN) HEALTH VISITING (HV) TEAMS

Standard Operating Procedure (SOP) 7

Ref No: 2125

Version: 3

Prepared by:

Health Visitor Team leader &
 Service Manager Professional lead SCPHN

Presented to: Care & Clinical Policy Group

Date: 21 February 2018

Ratified by: Care and Clinical Policy Group

Date: 21 February 2018

Review date: 6 April 2020

Relating to policies:

- The Perinatal Infant Mental Health Contact & the initial assessment of early attachment by the SCPHN. Date Jan 2017 – 2019 (SCPHN SOP No 4)
- The Universal Antenatal Contact at 28 Weeks' Gestation by the Specialist Community Public Health Nurse (SCPHN) Health Visitor (HV) Date June 2017(SCPHN SOP No 2)
- The SCPHN Infant Feeding Policy (Health Visiting) 15/07/2015
- Torbay and South Devon NHS Foundation Trust (TSDFT) - Transition Standards from the Midwife to Health Visitor: October 2015
- South West Child Protection Procedures- <http://www.proceduresonline.com/swcpp/> (last access 1/12/17)
- Torbay and South Devon NHS Foundation Trust (TSDTF) Lone Working Policy & Guidance No 55
- Torbay and South Devon NHS Foundation Trust - BCG Vaccination in the New born Version 6
- Torbay and South Devon NHS Foundation Trust - New born blood spot screening – Protocol 28/10/2019
- Torbay and South Devon NHS Foundation Trust - Disengagement with Community Services in relation to children. V2 Date 20.4.16 – 03.06.2018: Ref 1906
- TSDFT Safeguarding Adults Policy Jan 17.
- Record Keeping Standard for SCPHN Health visitors and School Nurses: April 2016 (Reviewed)
- TSDFT Domestic Abuse Guideline for Routine Enquiry: Ref 1339: V 3: 2017
- TSDFT Standard: Standards for Record Keeping: 2010-2019

1. Purpose of this document:

- 1.1 The purpose of this document is to offer a standard of practice for the SCPHN Health Visiting (HV) teams when a family with children move into or out of the Borough of Torbay, including movement between General Practitioner surgeries within the Borough of Torbay. The Healthy Child Programme (HCP) describes the service and interventions to be provided to all families in Torbay and South Devon NHS Foundation Trust (TSDFT).

2. Scope of this SOP:

- 2.1 This Standard Operating Procedure must be followed by all TSDFT Specialist Community Public Health Nurse (SCPHN) Health Visitor (HV) teams.
- 2.2 This SOP is applicable to all families and carers with children aged 0 to 5years who have moved in to the Borough of Torbay as a permanent or temporary resident. Or who live in Torbay and have changed their General Practitioner Surgery.
- 2.3 This SOP is applicable to families who have moved out of the Borough of Torbay on a permanent or temporary basis.

3. Competencies required:

- 3.1 SCPHN HV's are expected to have knowledge of child development, and of factors that influence health and well-being.
- 3.2 SCPHN HV teams will be aware of the South West Child Protection Procedures www.swcpp.org.uk (*last accessed 29/11/2017*) and how to refer to the Multi-Agency Safeguarding Hub (MASH) where concerns are present for the welfare of a child.
- 3.3 SCPHN HV team members will be competent in the use of The Signs of Safety tool.
- 3.4 SCPHN HV team members will be competent in making a targeted support referral.
- 3.5 Health visitors will have attended the 2 day Solihull Foundation training.
- 3.6 The SCPHN HV team will have attended the iHV Domestic Abuse or equivalent training
- 3.8 The SCPHN HV team will have attended the iHV Perinatal Mental Health or equivalent training.

4. Procedure / Steps: Record Management

- 4.1 Transfers into and out of area and within Torbay are managed by The SCPHN Administration Hub (Admin Hub), in partnership with the Child Health Information Service (CHIS).

4.2 Transfers IN Procedure:

- 4.2.1 CHIS are informed of children moving into Torbay by the child health department of regional origin. This information is sent to the SCPHN Admin Hub electronically as soon as it is received. The Admin Hub team create a client's casefile on PARIS, Torbay's electronic records data system, and notify the relevant HV team. This triggers a notification in the HV team's inbox on PARIS for them to acknowledge the outstanding referral and action appropriately.
- 4.2.2 In addition, HV/SN Practitioners can also be informed of children transferred into Torbay by G/P surgeries, schools and on attending child health clinics. Once informed, the HV will contact the SCPHN Admin Hub by email providing the new clients details, the date of the transfer, their previous address and G/P if known.

- 4.2.3 The SCPHN Admin Hub will inform CHIS of any new client's transfers into the Borough of Torbay. CHIS will then request their previous records from out of area.
- 4.2.4 The SCPHN Admin Hub will create a record on PARIS and notify the practitioner's team on creation.

4.3 Clients Transferring Out of area:

- 4.3.1 Health Visitors will inform the SCPHN Admin hub as they become aware of clients who have left the Torbay area temporarily or permanently.
- 4.3.2 Practitioners should end their involvement on PARIS by:
- closing all open assessments for the client
 - Ensuring that any outstanding Screening Client Profile entries are complete or actioned appropriately.
 - A summary report for children moving out of area, who are assessed as receiving a Universal Plus level of service and/or there are safeguarding concerns , should be completed by the allocated SCPHN to inform the receiving area. The summary template is attached as Appendix 3
 - The report should then be uploaded to external documents on Paris child health. Inform the SCPHN admin Hub that a summary has been completed.
 - Following this, the HV will email the SCPHN Admin Hub informing them of the client who has transferred out of area providing them with the clients PARIS Number, the date of the movement out of area, their forwarding address/location and the clients G/P if known.
 - The SCPHN Admin Hub will then close down any open referrals and set the clients 'registration status' to 'Transfer Out.'

4.3.3 Practitioners can refer to the "Transfer In and out Process" flowchart in appendix 1.

4.4 Client's paper records and original paper copies of documents not received electronically:

- 4.4.1 The HV will send, via courier, the clients paper records (i.e. those created prior to the introduction of PARIS 13/03/2017), to CHIS, who send them to the appropriate Regional Child Health Department, electronically after having been scanned on to Clinical Document Management System (WinDIP) prior to transfer out of area.
- 4.4.2 On notification of a transfer out of area, the Admin Hub will locate the Original paper documents that have been scanned onto PARIS that are retained and stored by the Admin Hub. They are sent out of area alongside the electronic casefile (To comply with guidance in the Goddard standards for child health records.)
- 4.4.3 The PARIS electronic client record will be reformatted to enable transfer via NHS email to the receiving authority. The creation of the client record as a PDF is currently undertaken by the SCPHN Admin Hub with the support of the PARIS team. On receipt of notification of a transfer out, the Admin Hub will manage this process. Once created, this electronic PDF will be sent to CHIS for transfer out of area, alongside paper notes where they exist.

4.5 Clients transferring within the Borough of Torbay, between GP practices.

- 4.5.1 HV's will inform the SCPHN Admin Hub when a client changes their G/P practice and registers with a new surgery by email. This will include the clients PARIS ID number, the date of transfer and the new GP practice.

- 4.5.2 The Admin Hub will then 'transfer' the client on PARIS from their current Health Visiting Team over to the new Health Visiting Team.
- 4.5.3 The Admin Hub will then notify the new health visiting team, through the inbox function on PARIS, informing them of the internal transfer to 'accept' and then action accordingly within the 'caseload manager' function.

4.6 Process for the clinical work Transfer in Procedure

- 4.6.1 All parents/carers with children aged 0 - 5 years moving into the Specialist Community Public Health Nurse (SCPHN) Health Visiting (HV) team's catchment area who have previously been assessed as requiring the **Universal level** and **Universal Plus** level of service will be contacted within **10 working days** of notification and offered a contact where safe to do so, **within one month** of knowledge of arrival.
- 4.6.2 All parent/carers with children aged 0–5 yrs. Identified at the **Universal Partnership Plus** level of service will be contacted within **2 working days** of notification and offered a contact where safe to do so, **within 5 working days** of knowledge of arrival.
- 4.6.3 The SCPHN practitioner will complete a lone working community risk assessment for all new clients transferring in to the Borough of Torbay. All parents and carers will be visited at home if no risks have been identified. If a home visit is not suitable the family will be discussed with the health visitor's child protection supervisor and contact made in a safe environment for example: a GP surgery or clinic setting.
- 4.6.4 All families will be assessed with reference to the transfer in assessment tool, located on the PARIS Health Template. This includes the Family Health Need's assessment. The level of service required will be assessed and a plan of care considered that meets the families' need. All records will be completed on the PARIS Child health data system.
- 4.6.5 At each contact the SCPHN HV team should offer consistent information and clear explanations, and should provide parents/carers/young people with an opportunity to discuss issues and ask questions.
- 4.6.6 The transfer in contact will provide the opportunity to discuss the Health Visiting Family Offer and core service in line with the Healthy Child Programme. Information will be given to signpost families to our partner agencies and support services as well as the SCPHN service. Families will be directed to the SCPHN website page to access resources via the internet where applicable, to promote positive healthy lifestyle choices including reviewing immunisation status, smoking cessation, brief intervention regarding substance misuse, registering with a Dentist and keeping safe.
- 4.6.7 Health Visitors will notify the School Nursing team of families with school age children registered at General Practitioner surgeries and schools in Torbay.
- 4.6.8 Each General Practitioner Surgery in Torbay will have a named Health Visitor who will ensure arrangements are in place with the General Practitioner Surgery to notify the attached Health Visiting team of families with children up to 5 years of age registering with their surgery. Information is to be collected on a regular basis.
- 4.6.9 Children moving in from outside of the U.K., the HV must check if he/she has been offered a new-born blood spot screening and, if so, that a record of the result has been recorded. If not, arrangements should be made to offer screening, in line with the National Standards "within 15 days of notification of the residency".
*To arrange for the screening test to be undertaken contact the Paediatric Outpatients at Torbay Hospital (Tel: 01803 656356) and request an appointment for the Blood Clinic. Ensure the mother takes the baby's personal Child Health Record with her. The HV should refer to the **New Born Blood Spot Screening Protocol Ref: 0744***

https://icon.torbayandsouthdevon.nhs.uk/corp_doc_mgmt/Clinical%20Effectiveness/G0744.pdf (last accessed 11/01/18)

- 4.6.10 The SCPHN HV team will contact by telephone the Health Visitor or School Nurse in previous area if there is any indication of previous concern or risk issues
- 4.6.11 SCPHN HV will give the family or carer the *Your Health Visiting Service leaflet* and discuss consent to record information on Paris by informing them information is available via the link and QR reader to the *TSDFT Leaflet Your Information What You Need to Know*.
- 4.6.12 The SCPHN HV team will obtain support for families whose first language is not English or who have other communication difficulties. Consult the Booking Interpreter guidance on ICON.
- 4.6.13 Women should be asked appropriate and sensitive questions to identify depression and other significant mental health problems:
- 4.6.14 The SCPHN HV will ask the mother the Whooley questions followed by the GAD-2 questions if anxiety is suspected and it is safe to ask the questions.

4.7 Transfer out Procedure

- 4.7.1 When a child or young person 0-19 years of age moves out of Torbay, or changes General Practitioner surgery, the SCPHN HV must ensure that the child, young person’s records are transferred to CHIS within 2 weeks of notification.
- 4.7.2 Direct contact with the Health Visiting team in the receiving area must be made to hand over all children and young people where there are significant health or social issues including children on a Child Protection and Children in Need Plan
- 4.7.3 The SCPHN HV will notify the family’s social worker in Torbay when a child or young person on a child protection plan moves out of Torbay.

Appendix 4

5. Monitoring tool:

Standards:

Item	%	Exceptions
Annual audit of transfer into area	95%	
Annual audit of transfer out of area	95%	

Equality Statement.

The Trust is committed to preventing discrimination, valuing diversity and achieving equality of opportunity. No person (staff, patient or public) will receive less favourable treatment on the grounds of the nine protected characteristics (as governed by the Equality Act 2010): Sexual Orientation; Gender; Age; Gender Reassignment; Pregnancy and Maternity; Disability; Religion or Belief; Race; Marriage and Civil Partnership. In addition to these nine, the Trust will not discriminate on the grounds of domestic circumstances, social-economic status, political affiliation or trade union membership.

The Trust is committed to ensuring all services, policies, projects and strategies undergo equality analysis. For more information about equality analysis and Equality Impact Assessments please refer to the [Equality and Diversity Policy](#)

References:

1. Health Visitor Implementation Plan 2011 - 2015: A Call to Action, DH 2011
2. NICE Guidance CG 45: Antenatal and Postnatal Mental Health - Clinical Management and Service Guidance, Feb 2007
3. Nice Guidance CG 62: Antenatal Care & Routine Care for Healthy Pregnant Women, March 2008
4. NICE Guidance PH26: Quitting Smoking in Pregnancy & Following Childbirth, June 2010
5. NICE Guidance PH27: Weight Management Before, During & After Pregnancy, July 2010
6. NICE Guidance PH11: Maternal and Child Nutrition, March 2008
7. NHS Outcome Framework Domain 4: Ensuring People Have a Positive Experience of Care
8. Perinatal and Infant Mental Health Pathway

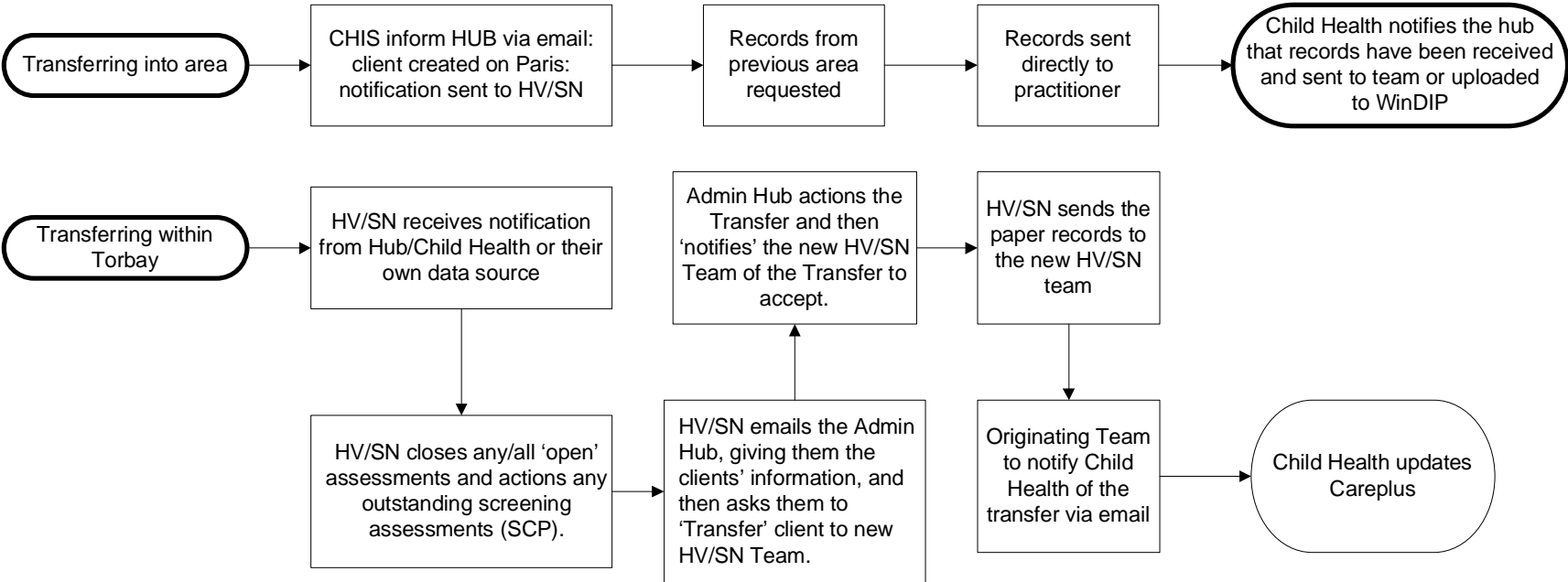
Appendix:

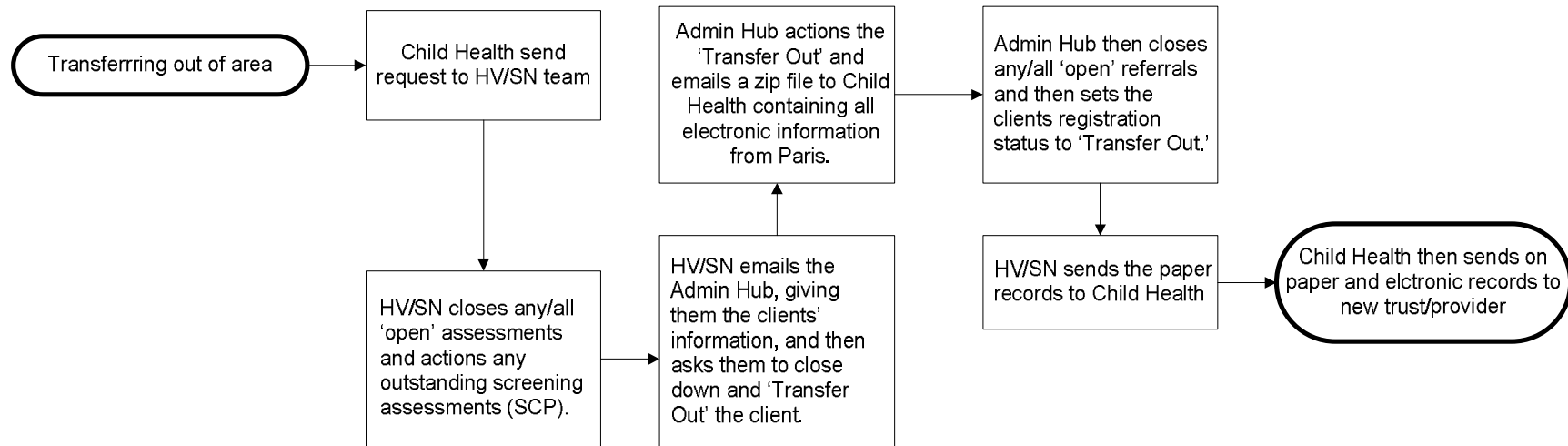
1. Transfer In /Out Torbay Flow Chart
2. Blood spot results form for children moving in from abroad in 6-8 week.
3. Safeguarding Form for records being transferred out of area.

Amendment History

Issue	Status	Date	Reason for Change	Authorised
2	DRAFT	10 March 2017	Uploaded onto ICON	
3	Ratified	6 April 2018	Revised	Care and Clinical Policies Group

Transfer In/Out Flowchart





The Admin Hub is receiving movement-in information in various ways, including copies of GP registration forms for children. If they become aware of a movement before Child Health they will notify Child Health of the information via email. Child Health will then update Careplus and request the records.

Appendix 2

BLOOD SPOT RESULTS FORM FOR CHILDREN MOVING IN FROM ABROAD

Torbay and South Devon **NHS**
NHS Foundation Trust

Child Health Department
Vowden Hall
Torbay Hospital
Lawes Bridge
TORQUAY TQ2 7AA
(01803) 655815
Date

Dear Health Visitor

Name:
Date of Birth:
NHS No:

The above child has moved in from abroad. Can you please check if he/she has been offered new born blood spot screening and if so that a record of the result has been recorded. If not, arrangements should be made to offer screening, in line with the National Standards.

Please enter details below and return to Child Health.

To arrange for the screening test to be undertaken please contact the Paediatric Outpatients at Torbay Hospital (Tel: (01803) 656356) and request an appointment for the Blood Clinic. Ensure the mother takes the baby's personal Child Health Record with her.

Thank you for your help.

Child Health Dept.
Referred to Outpatients YES []
Declined YES []

or:

<u>TEST</u>	<u>RESULT</u>	<u>DATE</u>
PKU
TSH
CYF
MCADD
SCD

Appendix 3

FORM TO BE COMPLETED FOR TRANSFER OF CLIENT RECORDS WHERE THERE ARE SAFEGUARDING CONCERNS.

Up load completed form to child s electronic case file.

Child's Name and NHS number	DOB	Subject of CP Plan? Indicate Category	CAF instigated?	Child In Need?	Child Looked After?

Parent/Carer's Name	DOB	Indicate whether has Parental Responsibility (if known)

Current Address	New address if known

Current Health Visitor/School Nurse:	New Health Visitor/School Nurse
Address:	Address:
Telephone Contact:	Telephone Contact:
Current GP:	New GP:
Current School:	New School:

Direct contact with new practitioner made?	Yes	No
State who contact was between:		
Date:		

Please give details of CP Plan/Care Orders/CAF etc. including background and dates, and outline any key current interventions

Other agencies involved:	
Social Worker:	
Education SENCO:	
Police:	
CAMHS:	
Drugs & Alcohol:	
Other:	

Date sent to Child Health :

Date Transferred out:

Form Completed by:

Name:

Signature:

Date:

Contact Number:

Appendix 4

Children Subject to a Child Protection Plan

Where a Child subject to a Child Protection Plan moves out of the home area, anyone who becomes aware of the plan to move or the move taking place, must inform the allocated social worker or, their line manager.

The Social Worker will:

- Immediately inform the Children's Social Care Services in the new area of the change in the child's circumstances;
- Send the child's relevant personal details to the new area including a copy of the most recent Child Protection Plan;
- Inform the 'home' Designated Manager (Children subject to a Child Protection Plan) of the changes;
- Inform the Core Group of the change in circumstances;
- Attend any Initial Child Protection Conference in the new area;
- Ensure that all information is updated and the correct address is displayed on the List of Children subject to a Child Protection Plan.

The Designated Manager (Children subject to a Child Protection Plan) will:

- Inform the new area's Designated Manager (Children subject to a Child Protection Plan) of the current details and forward any relevant documentation such as copies of minutes of the Initial Child Protection Conference and the most recent Review Conference;
- Inform the local Designated Nurse of the relevant information in order for the health agencies in the new area to be informed.

Actions to be taken in the child's new area

At the point of notification, the Designated Manager (Children subject to a Child Protection Plan) or their nominated representative in the child's new area will Place the child's name, address and relevant known personal details on the List of Children with a Child Protection Plan.

- Request information from the originating Local Authority, including copies of the Initial Child Protection Conference and the last Review Conference minutes from the originating area;
- Inform the relevant Children's Social Care Services team of the details of the incoming child;
- Inform the Designated Nurse;
- Make arrangements to hold an Initial Child Protection Conference within 15 working days of the notification of the child moving in;
- Confirm the outcome of the Initial Child Protection Conference with the originating local authority's Designated Manager (Children subject to a Child Protection Plan) and forward a copy of the Conference Minutes for their records.

The Torbay Safeguarding Team and CHIS will inform the SCPHN Admin Hub of the Transfer in and place an 'ALERT' onto the Paris client record that a Child Protection Plan is in place.

The Mental Capacity Act 2005

The Mental Capacity Act provides a statutory framework for people who lack capacity to make decisions for themselves, or who have capacity and want to make preparations for a time when they lack capacity in the future. It sets out who can take decisions, in which situations, and how they should go about this. It covers a wide range of decision making from health and welfare decisions to finance and property decisions

Enshrined in the Mental Capacity Act is the principle that people must be assumed to have capacity unless it is established that they do not. This is an important aspect of law that all health and social care practitioners must implement when proposing to undertake any act in connection with care and treatment that requires consent. In circumstances where there is an element of doubt about a person's ability to make a decision due to 'an impairment of or disturbance in the functioning of the mind or brain' the practitioner must implement the Mental Capacity Act.

The legal framework provided by the Mental Capacity Act 2005 is supported by a Code of Practice, which provides guidance and information about how the Act works in practice. The Code of Practice has statutory force which means that health and social care practitioners have a legal duty to have regard to it when working with or caring for adults who may lack capacity to make decisions for themselves.

“The Act is intended to assist and support people who may lack capacity and to discourage anyone who is involved in caring for someone who lacks capacity from being overly restrictive or controlling. It aims to balance an individual's right to make decisions for themselves with their right to be protected from harm if they lack the capacity to make decisions to protect themselves”. (3)

All Trust workers can access the Code of Practice, Mental Capacity Act 2005 Policy, Mental Capacity Act 2005 Practice Guidance, information booklets and all assessment, checklists and Independent Mental Capacity Advocate referral forms on iCare

http://icare/Operations/mental_capacity_act/Pages/default.aspx

Infection Control

All staff will have access to Infection Control Policies and comply with the standards within them in the work place. All staff will attend Infection Control Training annually as part of their mandatory training programme.

Rapid (E)quality Impact Assessment (EqIA) (for use when writing policies)

Policy Title (and number)		Version and Date	
Policy Author			
An (e)quality impact assessment is a process designed to ensure that policies do not discriminate or disadvantage people whilst advancing equality. Consider the nature and extent of the impact, not the number of people affected.			
Who may be affected by this document?			
Patients/ Service Users <input type="checkbox"/>		Staff <input type="checkbox"/>	Other, please state... <input type="checkbox"/>
Could the policy treat people from protected groups less favorably than the general population?			
<i>PLEASE NOTE: Any 'Yes' answers may trigger a full EIA and must be referred to the equality leads below</i>			
Age	Yes <input type="checkbox"/> No <input type="checkbox"/>	Gender Reassignment	Yes <input type="checkbox"/> No <input type="checkbox"/>
Race	Yes <input type="checkbox"/> No <input type="checkbox"/>	Disability	Yes <input type="checkbox"/> No <input type="checkbox"/>
Gender	Yes <input type="checkbox"/> No <input type="checkbox"/>	Pregnancy/Maternity	Yes <input type="checkbox"/> No <input type="checkbox"/>
Sexual Orientation			Yes <input type="checkbox"/> No <input type="checkbox"/>
Religion/Belief (non)			Yes <input type="checkbox"/> No <input type="checkbox"/>
Marriage/ Civil Partnership			Yes <input type="checkbox"/> No <input type="checkbox"/>
Is it likely that the policy could affect particular 'Inclusion Health' groups less favourably than the general population? (substance misuse; teenage mums; carers ¹ ; travellers ² ; homeless ³ ; convictions; social isolation ⁴ ; refugees)			Yes <input type="checkbox"/> No <input type="checkbox"/>
Please provide details for each protected group where you have indicated 'Yes'.			
VISION AND VALUES: Policies must aim to remove unintentional barriers and promote inclusion			
Is inclusive language ⁵ used throughout?			Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Are the services outlined in the policy fully accessible ⁶ ?			Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Does the policy encourage individualised and person-centred care?			Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Could there be an adverse impact on an individual's independence or autonomy ⁷ ?			Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
EXTERNAL FACTORS			
Is the policy a result of national legislation which cannot be modified in any way?			Yes <input type="checkbox"/> No <input type="checkbox"/>
What is the reason for writing this policy? (Is it a result in a change of legislation/ national research?)			
Who was consulted when drafting this policy?			
Patients/ Service Users <input type="checkbox"/>		Trade Unions <input type="checkbox"/>	Protected Groups (including Trust Equality Groups) <input type="checkbox"/>
Staff <input type="checkbox"/>		General Public <input type="checkbox"/>	Other, please state... <input type="checkbox"/>
What were the recommendations/suggestions?			
Does this document require a service redesign or substantial amendments to an existing process? <i>PLEASE NOTE: 'Yes' may trigger a full EIA, please refer to the equality leads below</i>			Yes <input type="checkbox"/> No <input type="checkbox"/>
ACTION PLAN: Please list all actions identified to address any impacts			
Action	Person responsible	Completion date	
AUTHORISATION:			
By signing below, I confirm that the named person responsible above is aware of the actions assigned to them			
Name of person completing the form		Signature	
Validated by (line manager)		Signature	

Please contact the Equalities team for guidance:

For South Devon & Torbay CCG, please call 01803 652476 or email marisa.cockfield@nhs.net

For Torbay and South Devon NHS Trusts, please call 01803 656676 or email pdf.sdht@nhs.net

This form should be published with the policy and a signed copy sent to your relevant organisation.

- ¹ Consider any additional needs of carers/ parents/ advocates etc, in addition to the service user
- ² Travelers may not be registered with a GP - consider how they may access/ be aware of services available to them
- ³ Consider any provisions for those with no fixed abode, particularly relating to impact on discharge
- ⁴ Consider how someone will be aware of (or access) a service if socially or geographically isolated
- ⁵ Language must be relevant and appropriate, for example referring to partners, not husbands or wives
- ⁶ Consider both physical access to services and how information/ communication is available in an accessible format
- ⁷ Example: a telephone-based service may discriminate against people who are d/Deaf. Whilst someone may be able to act on their behalf, this does not promote independence or autonomy

Clinical and Non-Clinical Policies – New Data Protection Regulation (NDPR)

Torbay and South Devon NHS Foundation Trust (TSDFT) has a commitment to ensure that all policies and procedures developed act in accordance with all relevant data protection regulations and guidance. This policy has been designed with the EU New Data Protection Regulation (NDPR) in mind and therefore provides the reader with assurance of effective information governance practice.

NDPR intends to strengthen and unify data protection for all persons; consequently, the rights of individuals have changed. It is assured that these rights have been considered throughout the development of this policy.

Furthermore, NDPR requires that the Trust is open and transparent with its personal identifiable processing activities and this has a considerable effect on the way TSDFT holds, uses, and shares personal identifiable data. The most effective way of being open is through data mapping. Data mapping for NDPR was initially undertaken in November 2017 and must be completed on a triannual (every 3 years) basis to maintain compliance. This policy supports the data mapping requirement of the NDPR.

For more information:

- Contact the Data Access and Disclosure Office on dataprotection.tsdf@nhs.net,
- See TSDFT's [Data Protection & Access Policy](#),
- Visit our [GDPR](#) page on ICON.