

### CONTROLLED DOCUMENT

N.B. Colleagues should be discouraged from printing this document. This is to avoid the risk of out of date printed versions of the document. The Intranet should be referred to for the current version of the document.

## Personal Data Training and Awareness Policy

<b>CATEGORY:</b>	Policy
<b>CLASSIFICATION:</b>	Information Governance
<b>PURPOSE:</b>	To set out the Charity's approach to personal data training and awareness
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<b>CONTROLLED DOCUMENT SENIOR LEADERSHIP TEAM LEAD:</b>	Director of Corporate Services
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<b>REVIEW PERIOD:</b>	Every 3 years - unless changes to legislation, best practice or internal roles and responsibilities
<b>REVIEW DATE:</b>	Reviewed in September 2025 – to reflect new Executive Team Structure Next full review: September 2027
<b>ASSOCIATED DOCUMENTS:</b>	Data Protection Policy
<b>Essential Reading for:</b>	Trustees and all colleagues

## Document Consultation and Review Process

<b>Groups/Individuals who have overseen the development of this Policy:</b>	<b>Corporate Governance Team, Senior Leadership Team</b>
<b>Groups/Individuals Consulted:</b>	<b>Corporate Governance Team, Senior Leadership Team, PQ&amp;E Committee, Board</b>

## Document Version Control:

<b>Date</b>	<b>Version</b>	<b>Amendments made</b>	<b>Amendments Approved by</b>
September 2024	V001	New Policy as a result of data protection review	Board - 18 September 2024
September 2025	V002	Updated to reflect new Executive Team structure and adoption of the term colleague for employee	Director of Corporate Services

## For the Use of the Corporate Services Team only:

<b>Date added to Register:</b>	<b>2 October 2024</b>
<b>Date Published on Hub:</b>	<b>V001 - 2 October 2024 V002 – September 2025</b>
<b>Does it need to be published on website:</b>	<b>No</b>

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## 1. POLICY STATEMENT

1.1 To deliver its services safely and efficiently, Brunelcare needs to gather and use certain information about individuals, including customers, residents, tenants, suppliers, business contacts, employees (colleagues) and other individuals with whom the Charity has a relationship with or may need to contact.

1.2 Brunelcare is committed to ensuring that it complies fully with data protection legislation and this Policy is a key part of Brunelcare's Data Protection Management System ('**DPMS**'). Its purpose is to ensure Brunelcare is compliant with its obligations under all applicable data protection laws ('**DP Laws**') and contracts or other interactions with stakeholders (including residents, tenants, customers, suppliers, colleagues, partners and regulators). The DPMS also aims to reduce or eliminate the potential for the commitment of, and liability for, criminal offences in DP Laws by Brunelcare and Brunelcare's officers and colleagues.

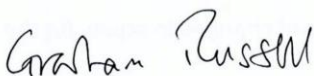
1.3 The Board of Brunelcare will take steps to ensure that personal data is:

- processed fairly, lawfully and in a transparent manner;
- used only for limited, specified stated purposes and not used or disclosed in any way incompatible with those purposes;
- adequate, relevant, and limited to what is necessary;
- accurate and, where necessary, up to date;
- not kept for longer than necessary; and
- kept safe and secure.

1.4 Brunelcare will make sure that it does not put individuals at risk because of processing their personal data. Failure to do so, can result in breach of legislation, reputational damage or financial implications due to fines. To meet our obligations, Brunelcare will put in place appropriate and effective measures to make sure compliance is maintained with DP laws.

1.5 This policy has been developed to achieve compliance with relevant legislation and national guidance and ensure compliance throughout the Charity.

Graham Russell



Oona Goldsworthy



## 2. AIM OF THE POLICY AND RELATED LEGISLATION

2.1 This policy's purpose is to ensure that appropriate training is carried out to provide for an adequate awareness of Brunelcare's data protection policies and procedures as well as applicable data protection laws ('**DP Laws**').

### Legislative and Legal requirements:

- [Data Protection Act 2018](#)
- [General Data Protection Regulation \(GDPR\) \(Regulation \(EU\) 2016/679\)](#)
- [UK General Data Protection Regulation \(UK GDPR\)](#)
- [Care Act 2014](#)
- [Health & Social Care Act 2008 \(Regulated Activities\) Regulations 2014](#)
- [Mental Capacity Act 2005](#)
- [Human Rights Act 1998](#)
- [Access to Health Records Act 1990](#)

## 3. SCOPE OF THE POLICY

3.1 This policy applies to all Brunelcare's officers and employees and, as appropriate, those operating on its behalf.

## 4. DEFINITIONS

4.1 In this policy, we use definitions from the GDPR unless otherwise stated.

4.2 **EU GDPR** means the EU General Data Protection Regulation, 2016/679.

4.3 **GDPR** means either or both of the EU GDPR and UK GDPR. We will use this when there is little or no difference in the wording of the relevant law for the context.

4.4 **Personal data** means any information relating to an identified or identifiable natural person, namely one who can be identified, directly or indirectly from that information alone or in conjunction with other information 'in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person' (EU GDPR). While **personal data** is a defined term in EU and UK law, we use it here to also cover **personally identifiable information** as defined in US law, and other similar legal definitions.

4.5 *UK GDPR* means the UK-adopted version of the EU GDPR, which took effect from 1 January 2021 as a result of Brexit.

## 5. KEY PRINCIPLES AND REQUIREMENTS

5.1 Brunelcare shall ensure that each person subject to this policy is provided with appropriate training on data protection laws, and Brunelcare's data protection policies and procedures, to provide an adequate level of awareness of such matters among those to whom this policy relates to meet Brunelcare's obligations under DP Laws and its contracts with stakeholders to protect personal data.

### *Frequency*

5.2 Such training shall be provided on induction and as appropriate on change of role and in refresher sessions.

### *Appropriateness to Role*

5.3 Such training shall be tailored for the individual's role with particular regard to their access to personal data. As such, it is envisaged that all subject to this policy shall receive a core level of training, with more specific training provided to individuals based on Brunelcare's or their particular requirements or the needs of their role.

### *Approved Codes of Conduct & Certifications*

5.4 The GDPR allows for approval of codes of conduct (Article 40) and certification mechanisms (Article 42). Adherence to an approved code or certification mechanism may be used as an element by which to demonstrate compliance with various requirements in the GDPR. If necessary or appropriate, Brunelcare will review such codes and certification mechanisms for relevance and fit for our operations.

### **Breach**

5.5 If you become aware of a breach of this policy, you must report it promptly to the Director of Corporate Services at [dataprotection@Brunelcare.org.uk](mailto:dataprotection@Brunelcare.org.uk).

### **Enforcement**

5.6 All Brunelcare colleagues bear responsibility for their own compliance with this policy. Breach of this policy is ground for disciplinary proceedings against a colleague, which may result in disciplinary action including termination of employment. Breach of this policy by any non-employee such as a temporary worker, contractor or supplier may be a breach of their contract with Brunelcare and grounds for damages or termination.

## **Ownership**

5.7 The Director of Corporate Services is responsible for maintaining this policy and related training and awareness programs.

## **6. ROLES AND RESPONSIBILITIES**

### **Board**

6.1 It is the responsibility of the Board to ensure that Brunelcare's policies and procedures reflect statutory requirements and best practice.

6.2 The Board has delegated oversight and monitoring of this policy to the Performance, Quality and Experience Committee.

6.3 Brunelcare is the data controller under data protection Legislation for the personal data it processes for its own purposes.

6.4 The CEO has overall responsibilities for compliance with data protection legislation as delegated by the Board.

### **Performance, Quality and Experience Committee**

6.5 The Performance, Quality and Experience Committee is responsible for overseeing Brunelcare's arrangements for ensuring compliance with data protection legislation and information governance arrangements.

### **Director of Corporate Services**

6.6 The Director of Corporate Services has delegated responsibility to ensure that the Charity has robust data protection processes in place that comply with current legislation and best practice guidance.

### **Data Protection Officer**

6.7 The Data Protection Officer (DPO) is primarily responsible for advising on and assessing Brunelcare's compliance with the DPA and UK GDPR and making recommendations to improve compliance.

6.8 The DPO is responsible for monitoring progress and advising the organisation on implementation of this policy, acting as primary contact on any data protection queries and approving responses to Right of Access requests (generally described in this document as '*Subject Access Requests*').

6.9 The DPO is responsible for monitoring the completion of all mandatory training for all colleagues (with special emphasis on colleagues handling personal data on a daily basis) and ensuring access to further guidance and support.

### **Senior Information Risk Owner (SIRO)**

6.10 The SIRO owns the overall risk arising from the processing of personal data by Brunelcare.

### **Colleagues**

6.11 All colleagues have individual responsibility for complying with this policy and following accompanying guidance.

6.12 All colleagues will undertake relevant data protection training alongside any other training that shall be deemed as mandatory.

## **7. EQUALITY AND DATA PROTECTION**

### **Equality and Diversity**

7.1 Brunelcare seeks to embed an environment where all clients, visitors, colleagues, agency employees, contractors, consultants, trustees, volunteers and any other workers are treated as individuals, fairly and in a consistent way. We work within the spirit and the practice of the Equality Act 2010 by promoting a culture of respect and dignity and actively challenging discrimination, should it ever arise. This Policy will be applied in a way that is consistent with these principles.

### **Data Protection**

7.2 Brunelcare is committed to ensuring protection of all personal information that we hold, and to provide and protect all such data as laid out in this policy.

7.3 It is recognised that processing of personal data will involve the collection and sharing of sensitive personal information. Data protection obligations will therefore be followed at all times with information only shared with those that it is necessary to share this information with and in a secure manner.

## **8. IMPLEMENTATION AND TRAINING**

8.1 The Charity will establish effective arrangements for communicating the requirements of this policy. This will include:

- All new starters being briefed on the requirements of this policy as part of their induction to Brunelcare.
- An annual reminder of the existence and importance of this policy via internal communication methods.

8.2 All colleagues will undertake mandatory training on information governance and security which they will re-take every year. In addition, all colleagues will be required to attend a more detailed data protection training protection training module as part of their induction.



## **9. MONITORING AND REVIEW**

9.1 The implementation of this policy, and the effectiveness of the arrangements detailed within it, will be monitored by the Company Secretary and Director of Corporate Services.

9.2 The Performance, Quality and Experience Committee will be responsible for undertaking reviews of decision-making processes to ensure that the Policy is applied effectively and where further controls are required will advise accordingly.

9.3 The Performance, Quality and Experience Committee will commission reviews where the Policy has not been adhered to to identify any lessons learnt and advise on changes to systems and processes as appropriate.

9.4 This policy will be reconsidered against any legislative changes and reviewed at least every three years.