# COVID-19 Clinical Risk Assessment Tool Privacy Notice

**1. Title of service: COVID-19 Clinical Risk Assessment Tool**

**2. Contact details**

| Name and contact details of Controller | East and North Hertfordshire NHS Trust |
|---|---|
| Contact details of our Data Protection Officer | dataprotection.enh-tr@nhs.net |

**3. Our purposes for processing your personal information**

This COVID-19 Clinical Risk Assessment Tool Privacy Notice is provided to explain how your personal information is used when we use the COVID-19 Clinical Risk Assessment Tool (the Tool). This notice is an additional notice to our full privacy notice which explains how we process your personal information more generally and is available on request and on our website.

The Tool is an online tool, provided by the NHS, that assesses the risk to you of coronavirus. It has been designed for use during a consultation with a patient and otherwise to support direct patient care. Your doctor or healthcare professional (clinician) inputs information about you into the Tool, to generate individual risk assessment results for you (see section 4 below which describes how this works).

Using information provided by you or obtained by your clinician, for example your weight and information from your health record, your clinician answers the questions in the Tool. The Tool will then generate risk assessment results based on this information. The results will give you or your clinician a better understanding of your risks of infection and potential consequences for you of infection from coronavirus. Your clinician may discuss the result with you to give you personalised health advice.

In addition to using the Tool to support the individual care of our patients, we will be providing information about your experience to NHS Digital, which provides the Tool. Anonymous data collected through the Tool will also help NHS Digital and the University of Oxford, who developed the QCovid® model used in the Tool, to develop and improve the Tool.

The Tool is registered as a medical device with the Medicines and Healthcare Products Regulatory Agency (MHRA).

**4. What is the Tool and how does it work?**

Your clinician will enter information into the Tool about you, your health and the medicines you take. Some of this information will be taken from your health record but your clinician may also need to ask you some questions about you and your health. They may also need to measure your height and weight to work out your body mass index (BMI).

The Tool will generate results for absolute risk and relative risk (see below), estimating how likely it is that you will:

- catch coronavirus and go to hospital
- catch coronavirus and die

All of the information used to answer the questions in the Tool is required because it has been identified as a factor which is relevant to the risk of catching and being hospitalised or dying from coronavirus.

The Tool has been developed from research by the University of Oxford about how people have been affected by coronavirus. The Tool uses a model called QCovid® which was developed based on information about people who had coronavirus in early 2020. The University of Oxford looked at data about people who went to hospital or died as a result of coronavirus during the first wave of the pandemic and combined it with data from hospital records and GP surgeries.

To develop the QCovid® model used by the Tool, the University of Oxford analysed this data to find out if certain things impact how coronavirus affects people. Researchers found that some things make it more likely that a person will need to go to hospital or die from coronavirus – these are called 'risk factors'.

Risk factors that were identified as important included: age; body mass index (BMI); ethnicity; certain health conditions and where people live. The University developed a model which weighted each of these factors and this is used within the Tool to generate risk assessment results from the information entered about you by the clinician. The results may support a discussion between you and your clinician about what your level of risk means for you or otherwise used by your clinician for your healthcare.

The Tool will estimate your 'absolute risk' and 'relative risk'.

'Absolute risk' is the risk of catching and being hospitalised or dying from coronavirus. This is based on data from the first wave, alongside a second time period (May-June 2020). For example, an absolute risk of 1% (or 1 in 100), would mean that we would expect 1 person to be hospitalised or die with the same characteristics and 99 to not be hospitalised or die.

'Relative risk' is the risk of catching and being hospitalised from coronavirus based on your information and risk factors compared with a person of the same age and sex, but no other risk factors. For example, a relative risk of 2 would mean that we would expect you to be twice as likely to catch and be hospitalised or die from coronavirus than somebody of the same age and sex with no other risk factors.

The risks factors used to develop the QCovid® model used in the Tool, are based on data collected in the first few months of the pandemic in 2020. These risks are changing over time in line with infection rates, social distancing measures and individual behaviour. It is based on data collected between February and April 2020, at a time when different measures were in place for shielding and social distancing

and different national restrictions were in place. This means that, although risk assessment results are generated for you using the Tool, your clinician will consider these alongside shielding, social distancing and local or national restrictions, which may be different from when the QCovid® model was developed.

Because we don't yet have enough research about some groups of people, risk assessment results may not be accurate for:

- People aged under 19 and over 100, because the research was done on adults aged from 19 to 100 and because very few children became seriously ill with coronavirus.
- People who are trans or intersex, because the research was done using information about the sex people were registered with at birth
- People who are pregnant, because only small numbers of pregnant people were included in the research so we cannot be confident about their level of risk.
- People who were asked to shield during the first wave because, when the research was done, many of these people were shielding at home and so were less likely to catch coronavirus. This means the Tool may underestimate the risk for these people.

Your clinician will explain more about these limitations when they tell you what your risk assessment means for you. Risk assessment results will not be used in isolation to remove anyone from the Shielded Patient List (SPL). However, your clinician may use the Tool as part of their assessment of whether you should be placed on the SPL.

Researchers are continuing to learn more about coronavirus as more information becomes available. The QCovid® model used in the Tool will change and be updated over time as more information becomes available. The online service will be updated to reflect changes to the model.

## 5. Our legal basis to process your personal information

Your clinician is processing your personal data in order to answer the questions in the Tool and to record the risk score in your health record.  This is to provide you with safe care and treatment**.**

Under the UK General Data Protection Regulations (UKGDPR) we are allowed to process your personal information using the Tool for the purposes of providing you with healthcare services. This is called "Public Task" under the UKGDPR and is allowed under Article 6(1)(e).

We are also processing personal information about your ethnicity and health conditions to use the Tool. This is also for a healthcare purpose and this is allowed under Article 9(2)(h) of the UKGDPR and under Schedule 1 of Paragraph 2 of the Data Protection Act 2018.

## 6. Categories of personal information we process when using the Tool

Your clinician will input the following about you into the Tool using information you have provided or taken from your health record:

- Age (19-100)
- Sex registered at birth
- Ethnic group
- Living arrangements (whether you live in your own home, in a care home or are homeless)
- Postcode (to identify a Townsend deprivation score, a well-known way of measuring deprivation based on data from the 2011 Census). Your postcode is deleted from the Tool once the Townsend score is created.
- Health information, including
  - Height (cm), Weight (Kg) – used to calculate BMI
  - Cardiovascular diseases
  - Respiratory diseases and treatment
  - Metabolic, renal and liver conditions
  - Neurological and psychiatric conditions
  - Autoimmune and haematological conditions
  - Cancer and Immunosuppressants– If you have a diagnosis of certain cancers and you have been prescribed if you have been prescribed 4 or more times with certain immunosuppressants in the last 6 months.

The Tool takes the answers we have provided to the questions above and generates a risk assessment result which will allow your clinician to provide personalised advice to you about your risk and otherwise for your healthcare.

## 7. Who we share your information with

We do not include any personal information that would identify you when we are answering the questions in the Tool.

The only information which could be used to potentially identify you is your postcode. For most people, postcode alone would not identify them because usually a number of different people live within a postcode area. However, just in case you are the only person who lives at your postcode, the Tool immediately converts your postcode to a number which relates to a Townsend deprivation score, a well-known way of measuring deprivation based on data from the 2011 Census. This number, which cannot identify you, is used by the Tool to generate risk assessment results and your postcode is then deleted from the Tool.

Anonymous data, which is the information provided to answer the questions in the Tool and which cannot identify you, will be collected by NHS Digital who provide the Tool. This anonymous data may be shared with the University of Oxford and the Department of Health and Social Care to help develop and improve the Tool and the QCovid® model developed by the University which is used in the Tool.

## 8. More information

For more information about:

- how long we keep your personal information for
- where we store your personal information
- your rights and choices in relation to how we process your personal information
- how to contact us; and
- how to complain to the Information Commissioner if you are unhappy about the way we are processing your personal information

please see our full Privacy Notice which is available on our website or on request.

## 9. Changes to this privacy notice

This privacy notice may change from time to time and the latest version number and date will be shown at the bottom of this document so you know when it was last updated.