

Privacy Notice – Use of Artificial Intelligence

| Version | Edited by | Date issued | Next review date |
|---------|----------------|-------------|------------------|
| V5 | Helen Conaghan | 13.09.2025 | 13.09.2026 |

| Position | Named individual |
|-------------------------------|------------------|
| IG Lead | Helen Conaghan |
| Data Protection Officer (DPO) | Helen Conaghan |
| Data Controller | Dr Aman Khaira |

Table of contents

| | | |
|----------|--|----------|
| 1 | Introduction | 2 |
| 1.1 | Policy statement | 2 |
| 1.2 | Status | 2 |
| 2 | Compliance with regulations | 2 |
| 2.1 | Data Protection Act 2018 and UK GDPR | 2 |
| 2.2 | Communicating privacy information | 2 |
| 2.3 | What is AI? | 3 |
| 2.4 | Guidance for IG professionals | 3 |
| 2.5 | Guidance for healthcare workers | 4 |
| 2.6 | Guidance for patients and service users | 4 |
| 2.7 | Consent and medical research | 5 |
| 3 | Further information | 5 |
| 3.1 | Available resources | 5 |
| | Annex A – Use of artificial intelligence privacy notice | 6 |

1 Introduction

1.1 Policy statement

This policy outlines how this organisation will provide information to patients regarding how Artificial Intelligence (AI) is both used and processed for the provision of direct care, research, audit and screening programmes.

This policy is to be read in conjunction with the organisation's UK General Data Protection Regulation (UK GDPR) Policy, which can be found [HERE](#).



GDPR POLICY.docx

1.2 Status

In accordance with the [Equality Act 2010](#), we have considered how provisions within this policy might impact on different groups and individuals. This document and any procedures contained within it are non-contractual, which means they may be modified or withdrawn at any time. They apply to all employees and contractors working for the organisation.

2 Compliance with regulations

2.1 Data Protection Act 2018 and UK GDPR

The General Data Protection Regulation (GDPR) became law on 24 May 2016. This was a single EU-wide regulation on the protection of confidential and sensitive information. It entered into force in the UK on the 25 May 2018, repealing the Data Protection Act (1998).

Following Brexit, the GDPR became incorporated into the [Data Protection Act 2018 \(DPA18\)](#) at Part 2, Chapter 2 titled the UK GDPR.

This organisation will ensure that any personal data is processed in accordance with [Article 5 of the UK GDPR](#) and information about how this is done will be provided in a format that is compliant with [Article 12 of the UK GDPR](#).

2.2 Communicating privacy information

AI use is the biggest and fastest moving change to computing in recent years and is becoming commonplace across all industry including primary care. With this being new technology, there is a requirement for additional Information Governance (IG) measures to ensure its use is safe and does not expose personal data about both patients and staff to any unnecessary risks.

This organisation will provide information about how data is processed in the form of a Use of Artificial Intelligence Privacy Notice and will provide information on how personal data is protected when both using AI Tools, and any software applications that incorporate AI technologies.

The Information Commissioner's Office (ICO) has provided a [privacy notice checklist](#) that can be used to support the writing of this privacy notice. A privacy notice template is available at [Annex A](#).

2.3 What is AI?

In the NHS England document titled [Artificial Intelligence](#), AI is defined as being the use of digital technology to create systems capable of performing tasks commonly thought to require human intelligence. The NHS England guidance focuses on the IG implications of using AI in health and care settings and should help to support the lawful and safe use of data for [AI innovations](#).

The use of AI could include visual perception, text generation, speech recognition or translation between languages.

AI tools can be both standalone products or embedded into other services and are used to give this organisation the ability to create human-like text and context and answer questions in a conversational manner and also to simplify processes to improve the efficiency, quality and speed of the organisation's business processes.

Examples of typical AI use in primary care include:

- Generation of business meeting notes and any action points
- Support for clinicians during consultations to compile and document medical records
- Generation of summaries of various team meetings where service users and patients cases are discussed
- Generation of statistics for medical research purposes

2.4 Guidance for IG professionals

Refer to the NHS England guidance titled [Artificial Intelligence](#) as this provides detailed guidance on:

- Data Protection Impact Assessment (DPIA)
- Purpose and legal basis
- Controllers and processors
- Statistical accuracy in AI
- Fairness
- Transparency
- Using the minimum amount of data for the purpose
- Security
- Automated decision making

Further reading for IG professionals can be sought from the Health Research Authority guidance titled [How we are supporting data driven technology](#).

2.5 Guidance for healthcare workers

Data can lawfully be used to support AI although there needs to be process that has been undertaken prior to AI being used. The IG Lead, DPO and Data Controller will all undertake measures to ensure the safe implementation of any new AI tool.

A DPIA is a legal requirement under the [Data Protection Act 2018](#) to have been undertaken prior to implementation of any AI tool. The DPIA is to manage and mitigate the likelihood and severity of any potential harm to individuals when using AI tools, coupled with ensuring that the organisation meets its obligations and accountability principles. The DPIA will need to demonstrate and document how all data protection risks are being analysed, identified and minimised.

Detailed information being found in ICO's guidance titled [The basics of explaining AI: Legal Framework](#), the NHS England guidance titled [Artificial Intelligence](#)

The DPIA template can be found in the organisation's UK GDPR Policy.

2.6 Guidance for patients and service users

This organisation may use a patient's personal information in AI systems to provide their individual care. AI can help a health and care professional to reach a decision about care, for example, diagnosing a condition, or helping to choose a treatment option. In these cases, [consent](#) to the use of data is implied.

Decisions will not be made by the AI system as the healthcare professional will always provide advice and allow the patient to make the final decision as to the care and treatment they receive. In most circumstances health and care staff will rely upon consent as the basis for accessing and using confidential patient information.

The two types of consent are:

| | |
|----------|--|
| Implied | <p>Should a patient's confidential information be accessed and used for their individual care then the patient's consent is implied. This can occur without the patient having explicitly said so. This is because it is reasonable to expect that relevant confidential patient information will be shared with those caring for the patient on a need to know basis.</p> <p>Should a patient wish to withdraw consent for information about them to be used to support individual treatment, then the patient should let their healthcare professional know. It should be noted that this may result in the healthcare provider not being able to continue providing care or treatment. In all circumstances the healthcare professional will explain this to the patient.</p> |
| Explicit | <p>Should confidential patient information be used for purposes beyond their individual care, for example a research project, then it will normally be necessary for staff to obtain explicit consent from the patient. This is a very clear and specific statement of consent. It can be given in writing, verbally or through another form of communication such as sign language.</p> <p>As stated in the NHS Constitution for England, patients have the following rights about how their confidential patient information is used beyond their own individual care:</p> |

| | |
|--|--|
| | <ul style="list-style-type: none"> • To request that confidential information is not used beyond the patient's individual care • When their wishes cannot be followed by healthcare staff, to be told the reasons why, including the legal basis; and • For objections to information sharing to be considered by healthcare organisations <p>Patients can find out more about their options on how confidential patient information is used beyond their own individual care on the Your NHS Data Matters guidance page.</p> |
|--|--|

2.7 Consent and medical research

If it is not practicable to seek consent for purposes beyond individual care, approval for sharing for medical research or health service planning can be sought from the Health Research Authority or the Secretary of State for Health and Social Care under the [Health Service \(Control of Patient Information\) Regulations 2002](#). This is often known as 'Section 251 support' and this enables the common law duty of confidentiality to be lifted for a period of time, subject to review, so that confidential patient information can be used without breaching the duty of confidentiality.

For further reading, refer to [HRA guidance](#). Additionally, refer to the [Data Protection Act 2018](#) for further information including how this organisation will comply with this.

3 Further information

3.1 Available resources

The following further reading to is available on AI intelligence within a healthcare setting.

- [Office for Artificial Intelligence](#)
- NHS England [AI knowledge repository](#)
- NHS England [Artificial Intelligence \(AI\) and machine learning](#)
- NHS England [The impact of Artificial Intelligence \(AI\)](#)
- NHS England [Artificial intelligence in specialist search and knowledge management](#)

Annex A – Use of artificial intelligence privacy notice

Introduction

At Park Lane Surgery, we have a legal duty to explain how we use any personal information we collect about you at the organisation.

Why do we have to provide this privacy notice?

We are required to provide you with this privacy notice by law. It provides information about how we use the personal and healthcare information we collect, store and hold about you and is aligned to the Practice Privacy Notice. If you have any questions about this privacy notice or are unclear about how we process or use your personal information or have any other issue regarding your personal and healthcare information, then please contact our Data Protection Officer, Mrs Helen Conaghan, Practice Manager at reception.parklanesurgery@nhs.net

The main things the law says we must tell you about what we do with your personal data are:

- We must let you know why we collect personal and healthcare information about you
- We must let you know how we use any personal and/or healthcare information we hold about you
- We need to inform you in respect of what we do with it
- We need to tell you about who we share it with or pass it on to and why
- We need to let you know how long we can keep it for

The General Data Protection Regulation (GDPR) became law on 24 May 2016. This was a single EU-wide regulation on the protection of confidential and sensitive information. It entered into force in the UK on the 25 May 2018, repealing the Data Protection Act (1998). Following Brexit, the GDPR became incorporated into the [Data Protection Act 2018 \(DPA18\)](#) at Part 2, Chapter 2 titled The UK GDPR.

For the purpose of applicable data protection legislation (including but not limited to the Data Protection Act 2018 (DPA2018) and Part 2 the UK GDPR).

Lawful basis

The lawful basis to process your personal data does not change because we use Artificial Intelligence (AI). This notice is in addition to our Practice Privacy Notice which can be viewed on our website.

Which AI Tools will we use?

This organisation uses AI tools to give us the ability to create human-like text and context and answer questions in a conversational manner. These AI tools are used to simplify processes to improve the efficiency, quality and speed of our business processes so valuable clinical staff time can be better used in delivering patient care.

As time progresses, it is likely that we will expand the use of AI, but each use case will be subject to the same high level of scrutiny.

At Park Lane Surgery the following AI tools are used:

- AccuRx Scribe, Information can be found [HERE](#).
-

AccuRX Scribe is used as a recording tool that records patient information that can then be saved onto the patient's electron record.

How do we use AI?

The use of AI is the biggest and fastest moving change to computing in recent years. It is a new technology that requires careful governance to ensure its use is safe and does not expose personal data about our service users and staff to unnecessary risk.

Examples of its use include:

- Internal business meeting notes and any action points
- Summaries of multi-disciplinary team meetings where our service users and patients cases are discussed
- To support both the compiling and documenting of a patient's clinical record
- Data gathering for research purposes

Should you not wish the clinician to use any AI during your consultation, please make them aware of this.

Governance of AI

We are aware of the risks when using AI. It is totally dependent upon development and training so we must be mindful of some key risks when it can:

- Get things wrong and present incorrect statements as facts (a flaw known as 'AI hallucination')

- Be biased and often gullible when responding to leading questions
- Be coaxed into creating toxic content as it is prone to 'prompt injection attacks'
- Be corrupted by manipulating the data used to train the model (a technique known as 'data poisoning')

Before their use is approved, AI tools are subject to enhanced Data Protection Impact Assessments for the specific use case requested. These are considered by the Information Governance Lead and Data Protection Officer to decide if they are fit for use.

At this organisation, we see AI as a tool to support our work. However, ownership and accountability will always remain with our staff members who use and double check the product generated by AI, e.g., the accuracy of a clinical note.

We are required by law to provide you with the following information about how we handle your information:

| | |
|------------------------------------|---|
| Data Controller | Dr Aman Khaira |
| Data Protection Officer | Mrs Helen Conaghan |
| Purpose of the processing | <p>In support of direct health or social care to individual patients.</p> <p>The main types of personal data that will be processed during a consultation or multi-disciplinary meeting would be the patient's name, contact details, medical history, diagnosis, treatment information, and any other information shared during consultations or the meeting.</p> <p>This may also include an audio recording of the clinician(s), although this is to detail their professional identifiers such as name and title.</p> <p>To check and review the quality of the AI use which is called audit and clinical governance.</p> |
| Lawful basis for processing | <p>These purposes are supported under the following sections of the GDPR:</p> <p>Article 6(1)(c) 'processing is necessary for compliance with a legal obligation'</p> <p>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'</p> <p>Should information be gathered by AI for medical research purposes, then there are Article 9 conditions:</p> |

| | |
|--|---|
| | <p>Article 9(2)(h) ‘necessary for the purposes of preventative or occupational medicine for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services...’</p> <p>Article 9(2)(i) ‘processing is necessary for reasons of public interest in the area of public health, such as protecting against serious threats to health or ensuring high standards of quality and safety of health care and of medicinal products or medical devices...’</p> <p>Article 9(2)(j) ‘processing is necessary for archiving purposes in the public interest, scientific or historical research purposes or statistical purposes’</p> <p>Furthermore, the Data Protection Act 2018, Schedule 1: Part 1 describes conditions for processing personal data for health, public health, social care and research purposes. Part 2 sets out the conditions for processing personal data on the grounds of substantial public interest</p> <p>Healthcare staff will also respect and comply with their obligations under the common law duty of confidence.</p> |
| Recipient or categories of recipients of the processed data | <p>The data will be shared with:</p> <ul style="list-style-type: none"> • AI specialised data centre as detailed within the Data Protection Impact Assessment (DPIA) Healthcare professionals and staff at this organisation • For medical research, the data will be shared with the research organisation conducting the research or who the research is conducted for. |
| Right to access and correct | <p>You have the right to access your medical record and have any errors or mistakes corrected. Please speak to a member of staff or look at our Access to Medical Records Policy.</p> <p>We are not aware of any circumstances in which you will have the right to delete correct information from your medical record; although you are free to obtain your own legal advice if you believe there is no lawful purpose for which we hold the information and contact us if you hold a different view.</p> |
| Retention period | <p>Records will be kept in line with the law and national guidance. Information on how long records are kept can be found in the Records Management Code of Practice.</p> |

| | |
|--------------------------|--|
| Right to complain | <p>In the unlikely event that you are unhappy with any element of our data-processing methods, do please contact the Practice Manager in the first instance. If you feel that we have not addressed your concern appropriately, you have the right to lodge a complaint with the Information Commissioner's Office (ICO).</p> <p>Further details, visit https://ico.org.uk/for-the-public/ and select "Make a complaint" or telephone: 0303 123 1113.</p> |
|--------------------------|--|