

Policy for the Management of Freedom of Information (FOI) & Environmental Information Regulations (EIR) Requests

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Accessibility Statement

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1. Introduction

- 1.1. Central East Integrated Care Board (the ICB) is committed to openness, transparency and accountability in the way it conducts its business and makes decisions. This commitment supports public trust and ensures that the ICB can be held to account for the services it commissions and the functions it undertakes.
- 1.2. The Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) provide the public with rights of access to recorded information held by public authorities. These legislative frameworks support greater openness across the public sector and enable individuals to better understand how public bodies operate, how decisions are made, and how public resources are used.
- 1.3. This policy sets out the ICB's approach to managing requests for recorded information under FOIA and EIR. It describes the rights of access available to the public, the responsibilities of the ICB, and the processes for handling requests, in line with Information Commissioner's Office (ICO) guidance and NHS practice.
- 1.4. This policy describes what the ICB will do to meet its legal obligations.

2. Policy Statement and Principles

- 2.1. The Central East Integrated Care Board (ICB) is committed to complying fully with its statutory obligations under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR).
- 2.2. The ICB recognises the importance of openness, transparency and accountability in the conduct of its business and supports the public's right of access to information, subject to the appropriate and lawful application of exemptions and exceptions provided for in legislation.
- 2.3. In applying this policy, the ICB will ensure that requests for information are handled in a manner that is lawful, fair, consistent and timely, and that appropriate advice and assistance is provided to applicants where required.
- 2.4. The ICB will balance its duty to disclose information with its responsibility to protect personal data, confidential information and commercially sensitive information, in accordance with relevant legal and regulatory requirements.
- 2.5. This policy is informed by the Information Commissioner's Office (ICO) guidance and Codes of Practice and reflects NHS best practice.
- 2.6. All staff are expected to adhere to the requirements set out in this policy.

3. Purpose

- 3.1. The purpose of this policy is to set out the framework by which the Central East Integrated Care Board (ICB) will ensure compliance with its statutory obligations under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR).

of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR).

- 3.2. This policy supports openness, transparency and accountability by describing the principles, responsibilities and requirements for managing requests for access to recorded information held by the ICB.
- 3.3. The policy underpins the operational procedures and day-to-day activities connected with the handling of FOIA and EIR requests. Detailed operational arrangements for managing requests are set out separately.

4. Scope

- 4.1. This policy applies to all employees of the Central East Integrated Care Board, members of the ICB Board and its committees, and individuals working on behalf of the ICB, including contractors and others engaged to deliver functions or services for the ICB, where they are involved in the creation, receipt, handling or management of recorded information on behalf of the ICB.
- 4.2. This policy applies to all recorded information held by the ICB, regardless of format or medium. Recorded information includes information created, received and maintained by staff in the course of their work and may be held in paper, electronic or digital form, including emails, text messages, social media content, audio recordings and video recordings.
- 4.3. Where the ICB commissions services from external providers, those providers remain responsible for compliance with the Freedom of Information Act 2000 and the Environmental Information Regulations 2004 in respect of information they hold in their own right.
- 4.4. In accordance with contractual arrangements, commissioned providers may be required to provide reasonable assistance to the ICB to enable it to comply with its statutory obligations, including the provision of information relating to commissioned services where the ICB holds, or is deemed to hold, the information.

5. Definitions

Term	Definition
Applicant / Requester	Any individual or organisation making a request for information under the Freedom of Information Act 2000 or the Environmental Information Regulations 2004.
Environmental Information	Information relating to the state of the elements of the environment (such as air, water, land), factors affecting or likely to affect those elements, measures or activities affecting the environment, and reports on environmental legislation, as defined by the Environmental Information Regulations 2004.
Environmental Information Regulations (EIR)	The Environmental Information Regulations 2004, which provide a right of access to environmental information held by public authorities.
Freedom of Information Act (FOIA)	The Freedom of Information Act 2000, which provides a general right of access to recorded information held by public authorities, subject to specified exemptions.

Held / Held on Behalf of	Information is considered to be held by the ICB if it is held directly by the ICB or by another person or organisation on behalf of the ICB, in accordance with section 3(2) of the Freedom of Information Act 2000.
ICB	The Central East Integrated Care Board.
Information Commissioner's Office (ICO)	The independent regulatory authority responsible for upholding information rights in the public interest, including enforcing the Freedom of Information Act 2000 and the Environmental Information Regulations 2004.
NHS England (NHSE)	The national body responsible for leading the National Health Service in England and for setting national policy, guidance and oversight arrangements, and for issuing national guidance and contractual frameworks relevant to Freedom of Information and Environmental Information Regulations compliance.
Public Authority	An organisation listed in Schedule 1 of the Freedom of Information Act 2000 or otherwise designated as a public authority for the purposes of FOIA and/or EIR, including the Central East Integrated Care Board.
Public Interest Test (PIT)	The assessment required under certain exemptions in the Freedom of Information Act 2000 and exceptions in the Environmental Information Regulations 2004 to determine whether the public interest in maintaining the exemption or exception outweighs the public interest in disclosing the information
Recorded Information	Information held in any recorded form, including paper records, electronic documents, emails, text messages, social media content, audio recordings and video recordings.
Request for Information	A request made under FOIA or EIR for access to recorded information held by the ICB.
Subject Access Request (SAR)	A request made by an individual for access to their own personal data under data protection legislation. Subject Access Requests are not processed under FOIA or EIR and are outside the scope of this policy.

6. Roles and Responsibilities

The following have specific responsibilities in relation to this policy:

6.1. ICB Board

The ICB Board has overall accountability for ensuring that the Central East Integrated Care Board complies with its statutory obligations under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR), and for promoting a culture of openness, transparency and accountability across the organisation.

6.2. Chief Executive

The Chief Executive is accountable for ensuring that appropriate governance arrangements, resources and systems are in place to enable compliance with FOIA and EIR.

6.3. Senior Information Risk Owner (SIRO)

The Senior Information Risk Owner (SIRO) is responsible for providing strategic oversight of information governance arrangements within the ICB, including risks associated with information handling and disclosure. The SIRO provides assurance to the Board that information risks, including those arising from FOIA and EIR, are being appropriately identified and managed.

6.4. Caldicott Guardian

The Caldicott Guardian is responsible for safeguarding the confidentiality of personal information and advising on the appropriate balance between the duty to share information and the duty to protect confidentiality. The Caldicott Guardian may be consulted where FOIA or EIR requests involve complex issues relating to personal data or confidentiality.

6.5. Executive Lead for Freedom of Information

The Executive Lead for Freedom of Information is responsible for providing senior oversight of FOIA and EIR compliance and for ensuring that this policy is implemented effectively across the ICB.

6.6. Associate Director of Data Security & IG Risk (Data Protection Officer)

The Data Protection Officer provides advice and oversight in relation to the application of data protection legislation where FOIA or EIR requests involve personal data, complex exemptions or potential high-risk processing

6.7. Head of Patient Experience

The Head of Patient Experience is operationally responsible for the management and delivery of the ICB's Freedom of Information and Environmental Information Regulations function. This includes oversight of the FOI team and assurance that FOIA and EIR requests are handled lawfully, consistently and within statutory timescales.

6.8. Freedom of Information (FOI) Manager and FOI Team

The Freedom of Information Manager, supported by the FOI Team, is responsible for the day-to-day management of FOIA and EIR requests, including:

- receiving, logging and coordinating responses to requests
- providing advice and guidance to staff on FOIA and EIR obligations
- ensuring responses are issued within statutory timescales
- coordinating searches for information across the organisation
- advising on the application of exemptions and exceptions
- liaising with the Information Commissioner's Office where required
- maintaining appropriate records, disclosure logs and performance information.

6.9. Directors, Senior Managers and Service Leads

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Directors, Senior managers and service leads are responsible for:

- ensuring that staff within their areas are aware of and comply with this policy
- supporting the identification, retrieval and provision of information requested under FOIA or EIR
- ensuring that information is accurate, complete and provided within required timescales
- escalating risks or concerns relating to disclosure to the Freedom of Information Lead.

6.10. All Staff and Those Working on Behalf of the ICB

All staff, and those working on behalf of the ICB, are responsible for:

- complying with this policy and associated procedures
- creating, managing and retaining records in accordance with ICB policies
- promptly identifying and forwarding FOIA and EIR requests to the appropriate team
- cooperating with requests for information and searches when required.

6.11. Commissioned Providers

Commissioned providers are responsible for complying with FOIA and EIR in respect of information they hold in their own right. Where required by contractual arrangements, commissioned providers must provide reasonable assistance to the ICB to support its compliance with FOIA and EIR, including the timely provision of information relating to commissioned services.

7. Internal Reviews (FOI and EIR)

- 7.1. The ICB will offer a single-stage internal review process for FOIA requests as a matter of good practice under the Section 45 Code of Practice. Reviews will be conducted by someone not involved in the original decision and, wherever possible, by a more senior officer. Reviews should be completed within 20 working days, or 40 working days in exceptional circumstances.
- 7.2. For EIR requests, an internal review is required. Requesters must submit representations within 40 working days of the ICB's response. The ICB will acknowledge promptly and complete the review as soon as possible and no later than 40 working days of receiving the request for review.
- 7.3. The review may uphold, vary, or overturn the original decision. The outcome will include the right to complain to the ICO.
- 7.4. Internal reviews are coordinated by the FOI Manager in the Patient Experience function and signed off by the Head of Patient Experience (or the Executive Lead for FOI where appropriate), ensuring independence from the original decision-making process

8. Time Limits and Extensions

- 8.1. **FOIA:** The ICB will respond promptly and in any event within 20 working days of receipt. “20 working days” is a long-stop; responses will be provided earlier where reasonably practicable. Where a qualified exemption requires a Public Interest Test (PIT), the ICB may extend to a reasonable period and will notify the applicant within the initial 20 days. The fee-payment period is excluded from the time limit.
- 8.2. **EIR:** The ICB will respond as soon as possible and no later than 20 working days of receipt. For complex or voluminous requests, the ICB may extend to 40 working days and will notify the applicant within the initial 20 days.

9. Duty to Advise and Assist / Clarifying Requests

- 9.1. The ICB will provide reasonable advice and assistance to applicants and prospective applicants under FOIA s16 and the Section 45 Code of Practice (for EIR, Regulation 9 applies). This includes helping an applicant to clarify, refine or re-scope a request and explaining what is held or how to access it.
- 9.2. The ICB will interpret requests objectively and will seek clarification where a request is unclear or too general. Where clarification is required, the statutory response period will run from the date clarification is received; under the EIR, the ICB will provide advice and assistance to support clarification.

10. Fees and Cost Limits

- 10.1. **FOIA:** The ICB may refuse a request where the estimated cost of compliance exceeds the appropriate limit (currently £450 for most authorities, calculated at £25 per hour = 18 hours) and will give advice and assistance to help refine the scope.
- 10.2. **EIR:** The ICB may charge a reasonable amount for making environmental information available (including staff time to locate, retrieve and extract, and disbursements) but will not routinely charge. A published schedule of charges is required for EIR charging. Any charges under the Environmental Information Regulations will be reasonable, transparent and published in advance within the ICB’s schedule of charges, in line with Information Commissioner’s Office guidance

11. Vexatious, Repeated and Manifestly Unreasonable Requests

- 11.1. The ICB may refuse vexatious requests under FOIA s14(1) (no public interest test). Decisions will consider value and purpose, burden, and harassment/distress in context.
- 11.2. The ICB may refuse repeated requests under FOIA s14(2) where identical or substantially similar to a previous request by the same person and no reasonable interval has elapsed. Under EIR, the ICB may refuse manifestly unreasonable requests under Regulation 12(4)(b) (including on grounds of burden/cost or vexatiousness), applying the public interest test and the presumption in favour of disclosure.

12. Exemptions (FOIA) and Exceptions (EIR): Principles

- 12.1. **FOIA:** Exemptions under FOIA are either *absolute* or *qualified*. Where a *qualified* exemption is engaged, the ICB will apply the Public Interest Test (PIT) and will disclose the information unless the public interest in maintaining the exemption outweighs the public interest in disclosure.
- 12.2. Where the ICB decides to withhold information, it will issue a refusal notice under section 17 of the Freedom of Information Act 2000, setting out the exemption(s) relied upon, the reasons for the decision (including the outcome of the Public Interest Test where applicable), and the applicant's rights of review and appeal.
- 12.3. Subject to the application of any exemption, the ICB will confirm or deny whether it holds the requested information in accordance with section 1(1)(a) of the Act
- 12.4. **EIR:** Most exceptions require the ICB to apply the public interest test and the presumption in favour of disclosure. Where applicable, the ICB will consider special rules for emissions information and the "adversely affect" tests.
- 12.5. "Neither Confirm Nor Deny" (NCND)

Where confirmation or denial of holding information would itself engage an exemption/exception and cause prejudice, the ICB may neither confirm nor deny that it holds the information, explaining the legal basis in its response.

12.6. Consultation with Third Parties

Where disclosure may affect the rights/interests of third parties (e.g., commercial interests, confidential information, or personal data), the ICB will consult those parties where appropriate before reaching a decision, in line with the Section 45 Code of Practice.

12.7. Datasets and Re-use

If a requester asks for a dataset under FOIA, the ICB will, as far as reasonably practicable, make it available in a re-usable electronic form and include it in the ICB's publication scheme unless not appropriate. Charges/licensing for re-use are handled under Re-use of Public Sector Information Regulations (RPSI) where applicable; otherwise FOIA dataset licensing provisions apply. Where RPSI Regulations do not apply, the ICB will apply the dataset licensing provisions under the Freedom of Information Act

13. Exemptions

This policy is applied in line with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. In certain limited circumstances, exemptions may apply to specific data protection rights and obligations.

- Exemptions are not applied routinely and must be considered on a case-by-case basis.
- Any decision to rely on an exemption must be lawful, necessary, proportionate, and appropriately documented.

- Where an exemption applies, only the minimum necessary departure from the usual requirements will be applied.
- Where an exemption no longer applies, the organisation will comply fully with the relevant UK GDPR requirements.

Further guidance on data protection exemptions is published by the Information Commissioner's Office (ICO) and must be referred to when considering the use of any exemption.

14. Publication Scheme and Proactive Disclosure

The ICB adopts the ICO's Model Publication Scheme and will maintain a Guide to Information setting out the classes of information published, how to access them, and any charges. The scheme supports proactive disclosure and should minimise the need for requests.

15. Records Preservation and Offence of Concealment

It is a criminal offence under FOIA s77 to alter, deface, block, erase, destroy or conceal records with the intention of preventing disclosure where the applicant would be entitled to the information. The ICB requires all staff and those working on its behalf to preserve records relevant to a live request.

16. Escalation to the Information Commissioner's Office (ICO)

If the requester remains dissatisfied following an internal review, they may complain to the Information Commissioner's Office (ICO). The ICB will include ICO contact details in refusal notices and internal review outcomes.

17. Process and Procedure for Handling FOIA and EIR Requests

The following processes must be followed to comply with this policy:

17.1. Receipt of Requests

- Requests for information under the Freedom of Information Act 2000 (FOIA) or the Environmental Information Regulations 2004 (EIR) may be received by the ICB in writing, including by email or other electronic means.
- Requests may be received by any member of staff. All staff are responsible for promptly forwarding any FOIA or EIR request to the FOI team in line with this policy.
- Requests for information do not need to reference FOIA or EIR explicitly to be valid. Any written request for recorded information should be treated as a potential FOIA or EIR request and referred accordingly.

17.2. Logging and Acknowledgement

- All FOIA and EIR requests will be logged by the FOI team on receipt, including the date of receipt, requester details, request scope and statutory deadline.
- The statutory response timescale will begin on the first working day after the request is received by the ICB.
- The FOI team will issue an acknowledgement to the requester, within five working days, confirming receipt and the applicable response deadline.

17.3. Validity and clarification of requests

- The FOI team will assess whether the request is valid and whether it falls under FOIA or EIR.
- Where a request is unclear, ambiguous or too broad, the FOI team will seek clarification from the requester and provide reasonable advice and assistance to help refine the request.
- Where clarification is required:
 - FOI - the statutory response timescale will not commence until clarification is received
 - EIR - the ICB will continue to provide advice and assistance in line with regulatory requirements.

17.4. Allocation and Information Searches

- The FOI team will coordinate searches for information across relevant services, teams or individuals.
- Senior managers and service leads are responsible for ensuring that searches within their areas are thorough, proportionate and completed within the timescales set by the FOI team.
- Searches must cover all relevant locations where information may be held, including electronic systems, shared drives, emails and paper records.
- Staff must not delete, amend or otherwise dispose of information once a FOIA or EIR request has been received.

17.5. Review of Information and Decision-making

- The FOI team will review information returned from services to determine whether it can be disclosed in full, in part, or whether an exemption (FOIA) or exception (EIR) may apply.
- Where exemptions or exceptions are considered, the FOI team will:
 - identify the relevant provision(s)
 - assess whether a public interest test applies

- document the rationale for decisions taken
- Advice may be sought from the Caldicott Guardian, SIRO, legal advisors or other relevant officers where requests involve complex issues of confidentiality, personal data or commercial sensitivity.

17.6. Drafting and Issuing Responses

- Following receipt of completed information from the relevant directorates or teams, the FOI Team will coordinate the collation and issue of the response to requests made under the Freedom of Information Act (FOIA) and the Environmental Information Regulations (EIR) on behalf of the ICB
- Responses will:
 - confirm whether the ICB holds the requested information
 - provide the information requested where appropriate
 - clearly explain any information withheld and the reasons for doing so
 - include details of the requester's right to an internal review and to complain to the Information Commissioner's Office.

Where only part of the information is disclosed, redactions will be applied securely and proportionately.

17.7. Refusals, Extensions and Fees

- Where a request is refused in whole or in part, a written refusal notice will be issued in accordance with statutory requirements.
- Where additional time is required to consider the public interest test, the requester will be informed within the original statutory timescale.
- Where a fee is applicable, a fees notice will be issued and the statutory clock paused in line with legislation.

17.8. Internal Reviews

- Where a requester expresses dissatisfaction with the handling or outcome of a FOIA or EIR request, this will be treated as a request for an internal review.
- Internal reviews will be coordinated by the FOI Manager and conducted by an officer not involved in the original decision.
- The outcome of the internal review will be communicated in writing, including details of the right to complain to the Information Commissioner's Office.

17.9. Disclosure Log and Records Management

- The FOI team will maintain a disclosure log of FOIA and EIR responses, where appropriate, to support transparency and consistency.
- Records relating to FOIA and EIR requests will be retained in accordance with the ICB's records management and retention policies.

A flowchart showing the FOI and EIR process is included at Appendix 3 to this policy.

18. Performance Monitoring

18.1. Where risks, delays or non-compliance are identified, these will be escalated in line with internal governance arrangements, including to the Head of Patient Experience and the Executive Lead for Corporate Services as appropriate.

18.2. Summary information on FOIA and EIR performance and compliance will be reported through relevant governance forums to provide assurance and support organisational learning and improvement.

19. Training and Awareness

The Central East Integrated Care Board (ICB) recognises that effective compliance with the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) depends on staff awareness and understanding of their responsibilities.

19.1. Mandatory Awareness

All staff, and those working on behalf of the ICB, are required to complete information governance training appropriate to their role. This will include awareness of FOIA and EIR obligations, how to recognise a request for information, and the requirement to promptly forward requests to the FOI team.

Additional, role-specific training will be provided as appropriate, including for:

- the FOI Manager and FOI team
- senior managers and service leads responsible for coordinating information searches
- staff involved in drafting responses or advising on exemptions, exceptions or public interest considerations.

This training will support consistent and lawful handling of requests and ensure that decisions are made in line with legislation and Information Commissioner's Office (ICO) guidance.

20. Ongoing Support and Updates

The FOI team will provide advice, guidance, including where there are changes to legislation, ICO guidance, NHS best practice or local procedures. Awareness-raising activity may also include internal communications, guidance materials and learning from internal reviews, complaints or

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ICO decision notices.

21. Policy Compliance

The Central East Integrated Care Board (ICB) will monitor compliance with this policy to ensure that requests made under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) are handled lawfully, consistently and within statutory timescales.

21.1. Monitoring Arrangements

Compliance with this policy will be monitored through a range of mechanisms, including:

- monitoring of response times against statutory deadlines
- oversight of internal reviews and outcomes
- analysis of themes, trends and learning arising from FOIA and EIR requests
- monitoring of complaints and correspondence from the Information Commissioner's Office (ICO).

The FOI Manager will maintain appropriate records to support monitoring and provide assurance on compliance.

Failure to comply with this policy may result in reputational risk, regulatory scrutiny or enforcement action by the ICO. All staff and those working on behalf of the ICB are expected to comply with this policy and to cooperate fully with FOIA and EIR processes.

22. Approval and Review

22.1. Approval

This policy has been developed to support the Central East Integrated Care Board's statutory obligations under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR).

The policy will be formally approved in accordance with the ICB's governance arrangements and is effective from the date of approval.

22.2. Review

This policy will be reviewed on a two-yearly basis, or earlier where required, to ensure it remains current, compliant with legislation and aligned with Information Commissioner's Office (ICO) guidance and NHS best practice.

The policy may be reviewed sooner where there are:

- changes to relevant legislation or statutory guidance
- significant changes to ICO guidance or enforcement practice
- organisational or structural changes affecting the handling of FOIA or EIR requests
- learning arising from internal reviews, complaints or ICO decision notices.

Responsibility for initiating the review of this policy sits with the Executive Lead for Corporate Services, supported by the Head of Patient Experience.

23. Associated Documents

This policy should be read in conjunction with the following documents and guidance, where applicable:

- Freedom of Information Act 2000
- Environmental Information Regulations 2004
- Data Protection Act 2018 and UK General Data Protection Regulation (UK GDPR)
- Information Commissioner's Office (ICO) guidance and Codes of Practice relating to FOIA and EIR
- ICB Information Governance Framework and associated policies
- ICB Management of Enquiries Concerns and Complaints Policy
- NHS England Freedom of Information and Environmental Information Regulations Policy
- NHS Standard Contract (FOIA and EIR provisions)

Operational procedures, templates and guidance supporting this policy are maintained separately and are available to staff via internal systems.

24. Statutory and National Guidance

This policy has been developed with reference to the following statutory and national guidance:

- **Freedom of Information Act 2000**
<https://www.legislation.gov.uk/ukpga/2000/36/contents>
- **Environmental Information Regulations 2004**
<https://www.legislation.gov.uk/uksi/2004/3391/contents/made>
- **Information Commissioner's Office (ICO) Guidance**
Information held for the purposes of the Freedom of Information Act 2000
<https://ico.org.uk/for-organisations/foi/freedom-of-information-and-environmental-information-regulations/information-you-hold-for-the-purposes-of-foia/>

Information held for the purposes of the Environmental Information Regulations 2004
<https://ico.org.uk/for-organisations/foi/freedom-of-information-and-environmental-information-regulations/information-you-hold-for-the-purposes-of-the-eir/>
- **NHS England Policy and Contractual Framework**
NHS England Freedom of Information and Environmental Information Regulations Policy
<https://www.england.nhs.uk/long-read/freedom-of-information-and-environmental-information-regulations-policy/>
- **NHS Standard Contract (Freedom of Information and Environmental Information provisions)**
<https://www.england.nhs.uk/nhs-standard-contract/>

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- ***ICO guidance on data protection exemptions:***
A guide to the data protection exemptions – Information Commissioner's Office

Appendix 1: Equality Impact Assessment

Please answer the questions against each of the protected characteristic and inclusion health groups. If there are significant impacts and issues identified a full Equality / Quality Impact Assessment (EQIA) must be undertaken. It is against the law to discriminate against someone because of these protected characteristics. For support and advice on undertaking EQIAs please contact: agcsu.equalities@nhs.net

Name of Policy:	Policy For the Management of Freedom of Information (FOI) and Environmental Information Regulations (EIR) Requests
Date of assessment:	10/03/2026
Screening undertaken by:	Maureen Walton, Enquiries & Experience Manager

Protected characteristic and inclusion health groups. Find out more about the Equality Act 2010, which provides the legal framework to tackle disadvantage and discrimination: https://www.equalityhumanrights.com/en/equality-act/protected-characteristics	Could the policy create a disadvantage for some groups in application or access? (Give brief summary)	If Yes - are there any mechanisms already in place to mitigate the potential adverse impacts identified? If not, please detail additional actions that could help. If this is not possible, please explain why
Age A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).	No. This policy sets out internal processes for responding to requests for recorded information and does not determine eligibility for services, access to care, or decision-making affecting individuals.	N/A. The policy supports fair and equal access to information for all applicants. Requests can be made by any individual or organisation, and reasonable advice and assistance will be provided to support accessibility, including alternative formats on request.
Disability A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.	See above	
Gender reassignment The process of transitioning from one gender to another.	See above	
Marriage and civil partnership Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.	See above	
Pregnancy and maternity Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is	See above	

breastfeeding.		
Race Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour and nationality (including citizenship) ethnic or national origins.	See above	
Religion or belief Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.	See above	
Sex A man or a woman.	See above	
Sexual orientation Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none.	See above	
Carers Individuals within the ICB which may have carer responsibilities.	See above	
Please summarise the improvements which this policy offers compared to the previous version or position.		
This policy provides a clear, comprehensive and up-to-date framework for handling Freedom of Information and Environmental Information Regulations requests in line with current legislation, ICO guidance and NHS best practice. It clarifies roles, responsibilities, timescales and escalation routes, supporting consistency, transparency and lawful decision-making.		
Has potential disadvantage for some groups been identified which require mitigation?		
No potential disadvantage has been identified. A full Equality / Quality Impact Assessment is therefore not required.		

Appendix 2: Data Protection Impact Assessment

Screening questions to determine if a full DPIA is required. Guidance on handling personal and sensitive data.

Data protection is the fair and proper use of information about people. Before completing this form, please refer to the Data Protection Impact Assessment (DPIA) Guidance in the Information Governance (IG) section on the staff Intranet or contact the Data Protection Officer for support via **(insert email address once confirmed)**

A DPIA is a process to help you identify and minimise the data protection risks. You must do a DPIA for processing that is likely to result in a high risk to individuals. You can use our screening checklist below to help you decide when to do one. If you have answered 'Yes' to any of the 10 screening questions, you must then carry out a full DPIA using the Stage 2 form, which is also available on the Intranet in the IG section.

Name of Policy:	Policy For the Management of Freedom of Information (FOI) and Environmental Information Regulations (EIR) Requests
Date of assessment:	10/03/2026
Screening undertaken by:	Maureen Walton, Enquiries & Experience Manager

Stage 1 – DPIA form

please answer 'Yes' or 'No'

1. Will the policy result in the processing of personal identifiable information / data? This includes information about living or deceased individuals, including their name, address postcode, email address, telephone number, payroll number etc.	Yes
2. Will the policy result in the processing of sensitive information / data? This includes for living or deceased individuals, including their physical health, mental health, sexuality, sexual orientation, religious belief, National Insurance No., political interest etc.	Yes, in limited circumstances
3. Will the policy involve the sharing of identifiers which are unique to an individual or household? e.g., Hospital Number, NHS Number, National Insurance Number, Payroll Number etc.	No
4. Will the policy result in the processing of pseudonymised information by organisations who have the key / ability to reidentify the information? Pseudonymised data - where all identifiers have been removed and replaced with alternative identifiers that do not identify any individual. Re-identification can only be achieved with knowledge of the re-identification key. Anonymised data - data where all identifiers have been removed and data left does not identify any patients. Re-identification is remotely possible, but very unlikely.	No
5. Will the policy result in organisations or people having access to information they do not currently have access to?	No
6. Will the policy result in an organisation using information it already holds or has access to, but for a different purpose?	No
7. Does the policy result in the use of technology which might be perceived as being privacy intruding? e.g., biometrics, facial recognition, CCTV, audio recording etc.	No
8. Will the policy result in decisions being made or action being taken against individuals in ways which could have a significant impact on them? Including profiling and automated decision making. (This is automated processing of personal data to evaluate certain things about an individual i.e., diagnosis and then making a decision solely by automated means - without any human involvement)	No

9. Will the policy result in the collection of additional information about individuals in addition to what is already collected / held?	No
10. Will the policy require individuals to be contacted in ways which they may not be aware of and may find intrusive? e.g., personal email, text message etc.	No

This policy does not introduce new processing activities or changes to the way personal data is processed. Any consideration of personal or sensitive data arises incidentally and unavoidably when assessing requests under the Freedom of Information Act 2000 or the Environmental Information Regulations 2004, particularly when determining whether exemptions apply. Processing is minimal, limited in scope, and carried out under clear statutory obligations with established safeguards.

Appendix 3: Process for the Management of Freedom of Information (FOI) & Environmental Information Regulations (EIR) Requests
A text-based description of this process is set out in Section 17 of this policy

