

## Data Protection Impact Assessment (DPIA) – Adult Social Care System

<b>Project Name:</b>	Liquid Logic – Adult Social Care System development and implementation.
<b>Project Manager or Sponsor (PM):</b>	Dave Briggs – Head of Digital Operations (Corporate Sponsor)
<b>Name of person completing the DPIA if different to (PM):</b>	Jen Re (as requested by System Procurement Team)
<b>Service Team and Department:</b>	Adult Social Care – Health, Wellbeing and Adults
<b>Relevant Director and Executive Director:</b>	Guy Van Dichele – Executive Director Annette McPartland – Director of Operational Services
<b>Cost Code:</b>	
<b>Date DPIA received by the IMT:</b>	May 2019 / Legal July 2019
<b>Date approved by DPO:</b>	
<b>Date approved by IMT :</b>	

### 1 Project Scope

*You should describe here the nature, scope, context and purpose of the processed processing.*

*(Include the projects aims, potential impact, all individuals involved in the project and those that may be affected by it. The stakeholders should be as broad as possible so that the list can be edited down after consultation. You should summarise why you identified the need for a DPIA).*

The aim of this project is to identify the current pathways in use by the Adult Social Care service inform the collection of data linked to local authority Social Care and Health statutory duties and identify the functional requirements of systems to enable a contribution to the wider requirements for an integrated Health and Social Care function within the London Borough of Croydon (LBC).

Aligned to the Data Sharing agreements which are in place through the Alliance and in line with the South West London (SWL) sharing protocols for Direct Care and to align fully to the development work for Phase Two of the agreements for Social Care. To complete and ensure robust governance arrangements through the Change Control group and the IM / IG groups in place to ensure practice is followed.

There are full Privacy Notices published for Social Care and Health which are here:

<https://www.croydon.gov.uk/democracy/data-protection-freedom-information/croydon-adult-social-care-fair-processing-notice>

A new integrated case management system would require information sharing potentially across multiple agencies/services within the Alliance across Health, Wellbeing and Adults Department to deliver it's objectives.

The initial scope for System Review

1. Support and enable social care and health managers (where possible) and staffing groups across the localities to apply best practice procedures within the system, closely aligned with the changes and practices identified corporately in line with training and guidance provided.

Ensure that the system provides management and staff with the reports and outputs they need to support their work, closely aligned with the changes identified and implemented by other council wide change programmes and in line with the requirements of an integrated social care and health system that is strength based in its approach to recording and achieving the operational aims and objectives

## 2 Data Description

*Answer the questions below so that there is a clear understanding about how the information will be used, who will use it etc. Remember that it's personal information (i.e. information about individuals) that you need to be concerned with. If you do not have answers to all the questions at this time, simply record what you do know.*

<p>Whose information is being used?</p> <ul style="list-style-type: none"> <li>- <i>Are there additional concerns that need to be considered due to individuals sensitive/ complex circumstances? i.e. vulnerable person</i></li> </ul>	<p>Social Care data of those held within the system, including families and carers / other professional data.</p> <p>The majority of the data on the system is personal / sensitive / complex / a mix of ordinary and special category data</p> <p>It relates directly to users of the service that have come into contact with Social Care i.e. name, address, DOB, ethnicity, medical, social, other support in place, advocacy, safeguarding and case note records etc.</p>
<p>What information is being used?</p> <ul style="list-style-type: none"> <li>- <i>Consider the nature of this information E.g. Child's social care file</i></li> </ul>	<p>All of the data on the system is relating to social care and health activity (as the development of integrated social care and</p>

	<p>health progresses):-</p> <ul style="list-style-type: none"> <li>• Contact / referral</li> <li>• Assessment</li> <li>• Planning and Brokerage</li> <li>• Reviewing</li> <li>• Safeguarding</li> <li>• Social Work and Occupational Therapy</li> <li>• Sensory</li> <li>• Day Services</li> <li>• Learning / Physical Disability</li> <li>• Mental Health</li> <li>• Carers</li> <li>• MCA / DoLS</li> </ul>
<p>Does it include special category or criminal offence data?</p>	<p>Yes – some of the data classified as special category data is / can be included / recorded within the system:</p> <ul style="list-style-type: none"> <li>• race;</li> <li>• ethnic origin;</li> <li>• religion;</li> <li>• health;</li> <li>• sex life; or</li> <li>• sexual orientation.</li> </ul> <p>Dependent on case work with individuals accessing social care the above could be included within the case files.</p>
<p>Can an individual be identified easily from the information?</p>	<p>Yes. The basic demographic relating to a Social Care involvement will be visible in terms of a person/s name, address, date of birth, family members / case note recording etc.</p>
<p>What is the potential impact on privacy of this information?          - <i>What are the risks/ impact to an individual if this information was lost, stolen or</i></p>	<p>There is a risk that information about an individual is shared with people who do not have a legitimate need to know / data breaches in terms of human error within the</p>

<p><i>manipulated?</i></p> <ul style="list-style-type: none"> <li>- <i>E.g. could it be sold?</i></li> </ul>	<p>system / malicious breaches of staff accessing information is a possibility. This could lead to harm and distress to the individual.</p> <p>There is a risk of Reputational damage and possible enforcement action against partner agencies as well as loss of confidence and trust if data is lost or misused / shared. However, this is formed within the contracting arrangements with the supplier and any associated partner/s.</p> <p>However, corporate policies / guidance / GDPR roll out across the department inform staffing accessing the system and the consequences of misusing / sharing data where not permitted will be mitigated through staff accessing the system being trained in data protection and information management to ensure this does not happen, if a breach occurs, the breach policy is applied alongside data sharing agreements in place.</p>
<p>Will this change the manner in which we handle, use or protect this information? <i>e.g. should it be encrypted?</i></p>	<p>Adult Social Care and Health will at all times minimise the risk that information is shared with the wrong people through the Corporate guidance and training / polices in place.</p> <p>There will be appropriate technical measures in place to ensure that only appropriate officers have access to information they need (and not unnecessarry information).</p> <p>Clear Information sharing agreement with the Alliance – the Council will continue to work with the Alliance in relation to Schedule 2's to ensure all data sharing activities are covered by the Agreement.</p>

## 3 Consultation process

Consider how to consult with relevant stakeholders.

<p>When did you consult individuals?</p>	<p>Consultation with internal stakeholders during the commissioning of the systems has been followed by the Procurement Systems Team.</p> <p>Due process has been followed for sign off: of the wider procurement of the system/s by:</p> <ul style="list-style-type: none"> <li>• SMT</li> <li>• CCB</li> <li>• Director of Legal</li> <li>• HR</li> <li>• Croydon Digital Services (CDS - from 01/04/19 when Systems Team moved into CDS)</li> <li>• Commissioning &amp; Procurement</li> <li>• Appropriate Lead Members are informed</li> </ul> <p>Any changes in processing in the future will be assessed and consideration will be given under GDPR to notify any data subjects where it is deemed necessary to do so.</p>
<p>How did you consult individuals?</p>	<p>Internal case management system / consulted with relevant staffing members as above as part of the procurement process through Gateway Services (now transferred to CDS 01/04/19).</p>
<p>If not explain why it is not appropriate.</p>	<p>As above.</p>
<p>Who else within the organisation have you consulted with?</p>	<p>IT colleagues have been involved in commissioning to ensure service proposals meet GDPR requirements and to identify any risks, including updates to TAG coordinated through and by the Systems Procurement Team who have attended relevant meetings with staff, the project has moved over from Gateway to Croydon Digital Services (CDS) as above therefore CDS are fully informed of the requirements</p>

	of information management and will also inform the DPIA.
Do you need to speak with your processor to assist?	<p>Information security is included in:</p> <ul style="list-style-type: none"> <li>• Functional specification</li> <li>• Applicant clarification meetings</li> <li>• Contract clarification meetings</li> <li>• Mobilisation</li> <li>• Contract management meetings</li> </ul> <p>As co-ordinated through the Systems Procurement Team (Gateway Services CDS from 01/04/19) the contract arrangements in place should detail all security and data processing requirements and for who is responsible for the secure environment for data processing. Legal checks and clarity for due diligence relating to security and data processing has been undertaken through the contracting team following the Legal sign off of the contract in March 2019.</p>
Do you plan to consult information security experts or any other experts?	Contract is in place and approved via Legal and Council procurement processes. This includes GDPR compliance check by the ICT & Digital Transformation Team prior to contract award co-ordinated via the Systems Procurement Team.

#### 4 Assessment of necessity and proportionality of data usage

What is your lawful basis for processing?	The data being processed, is processed in accordance with the Council's Statutory powers in respect of social care services. See Croydon Privacy Notice in place (link above).
Is consent being relied upon to share the information? Has explicit consent been obtained? Are data subjects able to opt out from giving consent?	This is explained in Privacy Notice for Social Care which is published on the Council website.
Does the processing actually achieve your purpose?	Yes

<p>How will the information be collected? Verbally, forms, intranet, interview, 3<sup>rd</sup> party, anonymous)</p>	<p>Secure data exchange through partners / Egress for example / information received via new front door arrangements, through communication with residents, carers, relatives etc. Information can be provided anonymously if required.</p> <p>The named liaison officer from the council is Una Kroll as a Senior Data Quality Officer working on the quality, security and quality of data as part of wider Business Support Team in CDS.</p>
<p>Is there another way to achieve the same outcome?</p>	<p>No</p>
<p>How will the information be used? <i>e.g. to write a report</i></p>	<p>The information will be used to assess / support / provide statutory services / early intervention and prevention provision through community led services to provide choice and control / and more independence, better outcomes to people living in Croydon.</p>
<p>Do the individuals know and understand how their information will be used? If there are changes to their information does the privacy notice need to be amended?</p>	<p>Yes, through robust conversations with individuals who access services within the department at the first point of access and through day to day contact with staffing across social care and health, consent to share information is discussed and works alongside the other elements outlined above in this document. A Fair Processing Notice as published on the council website to inform people of the statutory information sharing output of the department.</p>
<p>How will it be stored, kept up to date and disposed of when no longer required? <i>e.g. stored in locked cabinet/securely shredded</i></p>	<p>The data will be stored securely as part of the Contracting arrangements with the supplier.</p> <p>All information and data will be electronic.</p> <p>The new system can set the retention dates in line with the statutory retention across ASC / the disposal of data will be</p>

	<p>managed through set retention and / the Business Systems Team (BST). Retention schedules are in place for ASC as per the requirements of the Council and also the system requires retention / within ASC there are statutory retention periods in place.</p> <p>Within the contract there is the following GDPR Customer Statement:</p> <p>Confidentiality, pseudonymisation and encryption:</p> <p>1.1 (Liquidlogic centrally hosted systems)</p> <p>1.2 data is held in secure data centres located in England; and</p> <p>1.3 data is transmitted to and from Liquidlogic's data centres over secure links to customer networks;</p> <p>1.4 all server discs are encrypted other than in limited instances, which are only where the technology will not currently support this; older technology is being replaced as part of our continuous upgrade program. Until it is, alternative physical measures are in place to ensure no devices or disks can be compromised; and</p> <p>1.5 all equipment holding data is securely disposed of at the end of its life.</p>
<p>How will you ensure data quality and data minimisation?</p>	<p>BST ASC leads monitor data quality alongside the Quality Assurance team within the department and the Performance Team.</p> <p>It is also the responsibility of the HOS / Team Managers and all staffing collating</p>



	<p>and inputting data to be clear that data is an asset and that it is qualitative / accurate and timely.</p>
<p>Who will have access to the information within LBC? - <i>Include approximate number of users</i></p>	<p>Adult Social Care / authorised front door staffing / Alliance partners and Health users where integrated working deems it is a requirement to access Social Care data held on a need to know basis and as part of the core statutory business of Adult Social Care. There are 765 staffing who have access to the information in the system providing access to information that is required to progress the statutory requirements of the department.</p> <p>Staff accessing the system in Social Care will attend the relevant training for the system and will not be granted access until the training has taken place / also GDPR online course is undertaken – access to the system is through the Change Control Board and pre go-live reviews are underway for requirements to access the Liquid Logic system.</p> <p>Currently before staff access the system they have to sign the Caldicott and data protection agreement form as attached.</p> <p>This policy is currently under review with Nick Sherlock and Jonathan Craven being reviewed and updated as part of the IG/IM group activity.</p> <p>GDPR training is mandatory for all staff so all staff requiring access will have completed the training Corporately.</p> <p>There are the following staffing within organisations who access the data but majority of users on the system are within</p>

the Health Wellbeing and Adults department, other users are within:

- Croydon Hearing Resource Centre
- Carer's assessment team
- Able2 OT assessors
- Carers Centre

As above, some non-health / social care teams in the council need to have access to adults data as part of the health and social care integration and wider Alliance requirements / joint working and through relevant contract arrangements are through delegated authority (Care Act 2015) will complete statutory function on behalf of the council and therefore require access to the system to record statutory case work.

Access to Liquid Logic be requested and authorisation through the Change Control group. Full details of the reason for access and named people using the system will be mandatory and information kept and reviewed by the BST which has been in place for last 6 months and aligning to the existing case management system process review. People requiring access to the system will be through a relevant role profile governance so will get access to what is necessary.

Against this review there is also a change control board which meets every 3 weeks and has started at the end of April / Terms of Conditions and members are agreed as an additional mechanism to ensure changes and requests within the system are monitored and follow robust governance procedures.

The IG/IM group and the Change Control Board are in place to compliment each other and to ensure control is applied to the IM / IG of the department.

<p>Are there new or significant changes to the way we manage, use, handle or collect this information?          - <i>Include any identified concerns for the individuals, would these changes heighten risks involved</i></p>	<p>No new or significant changes.</p>
<p>Will individuals within an existing database be subject to new or changed handling?          - <i>If yes amendments need to be made to the privacy notice and these individuals need to be informed.</i></p>	<p>No</p>
<p>What are the internal arrangements for processing this information? <i>e.g. number of staff who will have access</i></p>	<p>There are currently 765 users of the existing case management system AIS – numbers of staff may / will change in relation to access to the new system (Liquid Logic) as all pathways are under review as part of the wider programme plan and transformation underway across Adult Social Care is also reconfiguring various structures / ways of working so number may fluctuate.</p> <p>All access requests to the system will move through the IG / IM Board already in place for discussion and decision.</p>
<p>How will the information be updated? <i>e.g. monthly check</i></p>	<p>Data and information will be kept up to date on a daily basis throughout the work force as part of their day to day responsibilities to ensure accurate and timely record keeping is in place, monitored through the Quality Assurance Team / Team Managers. There is a full Data Quality Improvement Plan in place which is managed through Business Support Team (BST) and reported into SMT monthly at the System Implementation SMT Board.</p>
<p>Does the project involve the exchange of information outside of the UK and are there set standards for how the information will be treated? How will you safeguard international transfers?</p>	<p>No exchange of information outside of the UK will be taking place.</p> <p>Within the contract there is the following GDPR Customer Statement:</p>

	<p>Confidentiality, pseudonymisation and encryption:</p> <p>1.5 (Liquidlogic centrally hosted systems)</p> <p>1.6 data is held in secure data centres located in England; and</p> <p>1.7 data is transmitted to and from Liquidlogic's data centres over secure links to customer networks;</p> <p>1.8 all server discs are encrypted other than in limited instances, which are only where the technology will not currently support this; older technology is being replaced as part of our continuous upgrade program. Until it is, alternative physical measures are in place to ensure no devices or disks can be compromised; and</p> <p>1.5 all equipment holding data is securely disposed of at the end of its life.</p>
<p>How will you prevent function creep?</p>	<p>Corporate Data protection porcedures are provided to all new users of the system and relevant policies Awaiting Corporate documentation to be provided for wider staffing training and guidance purposes relating to Information Management – these are required for roll out as soon as is possible.</p>

## 5 Assessment of the risks to the rights and freedoms of data subjects

*You must describe the source of risk and the nature of potential impact upon individuals and identify any additional measures to mitigate those risks.*

### 5a Security

<p>Who will be responsible for the control for this information?</p>	<p>The BST on behalf of Adult Social Care / wider Alliance Partners and in alignment with</p>
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	Coporate Croydon Digital Services (CDS) / Managers across the ASC department and all users of the system.
How will the access to this information be controlled?	<p>Request Forms completed for Users that require access to the system by their line managers.</p> <p>BST will review these and configure access as appropriate, based on permission structure and in agreement through the ASC IG/IM Board in place who will review each request – the roles and profiles are currently being worked on with the implementation partner and the department (system goes live in September 2020).</p> <p>Regular audits carried out by BST to ensure useage is relevant and up to date and to ensure any issues are reported and followed up.</p>
Is the data correctly managed to reduce the risk of collateral intrusion to the data subject?	Yes - the Business Support Team will control permissions through relvant roles and profiles for access to the system. Monthly audit will inform accounts to be closed / use of the system etc / built in auditing function within the system will be fully utilised.
Are there adequate provisions in place to protect the information? If so what are they? e.g. <i>Process, security</i>	System security measures including password conrolled access, permission rights – access control list i.e. levels of access, governed through data sharing agreement, training, auditing functionality to check individual record accessalongside quality assurance team who are conducting checks regularly on the data / it's accuracy / decision making and system use / data sharing agreements for safeguarding incorporated alongside the SWL DSA.

## 5b Sharing

Who is the information shared with, why are we sharing the information with this organisation?	Social Care are working on drafting Information Sharing Agreements with
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	<p>relevant partners as part of the wider work through the Alliance / Locality working.</p> <p>This area is under review and through the Alliance – where other partners come into view a new and / or revised schedule 2 will be included in the Data Sharing Agreement.</p>
<p>What purpose does the information we are sharing have to the third party?</p> <ul style="list-style-type: none"> <li>- <i>Ensure that we only share relevant information and not excessively</i></li> </ul>	<p>Fulfilling statutory obligations as outlined in the underpinning legislation of the department i.e. Care Act (2015), Mental Capacity Act (under review nationally) and NHS Five Year Forward statutory guidance (many more).</p> <p>The information to be shared is defined with the statutory guidance and/or within information sharing agreements.</p> <p>Information is shared with relevant people where required by statutory duty and / or to safeguard vulnerable adults and not to excessively share / remain proportionate in approach in line with the SWL DSA in place across the Alliance and its partners and wider developments of the service underway.</p>
<p>Who will have access to the information, externally?</p> <ul style="list-style-type: none"> <li>- <i>Include approximate number of users</i></li> <li>- <i>Describe any sharing arrangements and what the level of access is. It may help to produce a diagram to show the data flows.</i></li> </ul>	<p>Social Workers / Occupational Therapists / Health &amp; Wellbeing staffing / Locality Officers / Providers / Education / Alliance Health Partners / Support Professionals – obviously on a strict need to know basis and access to the system will be monitored as detailed above through the relevant governance channels.</p>
<p>How will it be transmitted to third parties and when? How often?</p>	<p>Secure Portals or egress secure emails.</p> <p>Information could be shared on a daily, weekly, monthly or annual basis dependent on Service area and on a need to know basis.</p>
<p>Is there a data sharing agreement in place?</p>	<p>Yes, as part of the wider SWL data sharing agreement as detailed above.</p>
<p>At what stage will the information be transferred?</p>	<p>As above</p>



## 5c Identified Risks and assessment:

*You should take into account the sensitivity of the information and potential harm that inappropriate disclosure or use of the information could cause to any individuals concerned. You should also consider the reputational loss to the Council and the potential for financial penalties being imposed by the ICO.*

To assess the level of risk you must consider both the **likelihood** and the **severity** of any impact on individuals. A high risk could result from either a high probability of some harm or a lower possibility of serious harm.

The severity impact level and likelihood should be scored on a scale of 1 to 10 with 1 being low severity and 10 high. The two scores should be **added** together. The RAG status is derived from the following scale:

Score:

- 15 to 20 = Red (High)
- 8 to 14 = Amber (Medium)
- Below 8 = Green (Low)

### To be completed by Project Sponsor

Risk Identified	Severity of Impact	Likelihood of harm	Overall RAG rating
Provider is unable to meet our contractual requirements in relation to collection and processing of personal information. (Mitigation – contract will not be agreed and therefore no personal information transferred)	8	6	14
Information breach by Provider	8	6	14
Information breach by LA	8	6	14
Information breach by External User	8	6	12

**The above indicates 3 risks which are outside of the control of the department and the Local Authority will work with Providers / External Users / internal Corporate Procurement Team to ensure any risk to data / information within the system is mitigated and remains secure, accurate and people using the system are clear of their day to day roles and responsibilities relating to information management / Adult Social Care and Health await further documentation / guidance from Corporate IM Service.**



## 6 Identify measures put in place to reduce risk.

*You must now identify additional measures you could take to reduce or eliminate any risk identified as medium or high risk in step 5.*

### To be completed by the Project Sponsor

Risk Identified	Options to reduce or eliminate risk	Effect on risk	Residual risk	Measure Approved
		Eliminated / reduced / accepted	Low / medium / high	Yes / No
Information breach by Provider	<p>Robust procurement process conducted with appropriate due diligence checks completed via Systems Procurement Team.</p> <ul style="list-style-type: none"> <li>• Requirements and KPIs in contract</li> <li>• Contract monitoring</li> <li>• Staff training</li> <li>• Secure technology, processes and protocols</li> <li>• Immediate alert to LA of any breach</li> </ul>	Reduced	Low	
Information breach by LA	<ul style="list-style-type: none"> <li>• Secure technology, processes and protocols in place Coporately.</li> <li>• Restricted access to information, with regular review of permissions.</li> <li>• Staff training on system and GDPR requirements.</li> <li>• Accurate and current data recording ensuring all contact information is current.</li> <li>• Regular monitoring and checks on process compliance.</li> </ul>	Reduced	Low	

Risk Identified	Options to reduce or eliminate risk	Effect on risk	Residual risk	Measure Approved
		Eliminated / reduced / accepted	Low / medium / high	Yes / No
Information breach by External User	<ul style="list-style-type: none"> <li>• Secure technology, processes and protocols.</li> <li>• Data Sharing Agreement with all External Parties.</li> <li>• Communication package describing process and use of data.</li> <li>• Restricted access to information, with regular review of permissions.</li> <li>• Staff training on system and GDPR requirements.</li> <li>• Regular monitoring and checks on process compliance.</li> </ul>	Reduced	Low	

**Sign off and Record sheet**

Item	Name/date	Notes
<p>Measures approved by:</p>   <p>Residual risks approved by:</p>		<p>Integrate actions back into project plan, with date and responsibility for completion.</p>  <p><b>If accepting any residual high risk must consult ICO before going ahead.</b></p>
<p>DPO advice provided:</p> <p>Thank you for your replies to my queries about the Project and the DPIA.</p> <p>Please find Data Protection Officer Comments below:</p> <p>This Project relates to the implementation of a new case management system. The system will hold a very large amount of personal and special category information relating to a numerous residents in the borough, including those who are vulnerable. It is necessary for the Council to have a reliable electronic database to enable it to fulfil its statutory functions and provide services to the residents.</p> <p>The contract with Liquid Logic has already been awarded and should be on the Council's standard terms so that the correct 'data processing terms' are incorporated.</p>	<p>Nicola Thoday Corporate Solicitor On behalf of Data Protection Officer – Sandra Herbert.</p>	<p><b>Summary of DPO advice:</b></p> <p>I am happy for this Project to proceed.</p>  <p><i>(DPO should advise on compliance, measures to mitigate risk and whether processing should proceed).</i></p>

<p>In the future the plan is that there will be information sharing with the Alliance Partners (3rd parties). <u>Before this can happen</u> the Alliance Data Sharing Agreement must updated to include a clear section/Schedule which specifically covers each data sharing activity. This may also involve separate DPIA's to ensure data protection has been fully considered.</p> <p>Given the wide range of data being processed across a range of services, care is required to ensure that the requirements of 'Privacy by Design' are complied with, and that access to data is restricted on a need to know basis and that all sharing whether internal or with external 3rd parties is carefully controlled and reviewed.</p> <p>There needs to be clear understanding of when data is being processed on the basis of Consent and where this processing is taking place on a statutory basis.</p> <p>As a result of these proposals, if the processing significantly changes or data is shared with services within the Council and/or 3rd parties previously not notified to the data subjects, consideration will need to be given to whether or not there is a requirement under GDPR to notify the data subjects of the changes in processing.</p> <p>The identified risks include data</p>		
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<p>being wrongfully disclosed, lost, or stolen or unlawfully accessed (by various parties from the provider, Council or external user. These risks have been mitigated through various safeguards as shown in the DPIA Form at page 17-18. I consider these safeguards adequate to protect the data subjects from risks of personal data breach or any harm.</p> <p>I would like to take this opportunity to thank the team for their detailed consideration of privacy and data protection as outlined in this DPIA.</p> <p><i>(DPO should advise on compliance, measures to mitigate risk and whether processing should proceed)</i></p>		
<p>Consultation responses reviewed by:</p>		<p>If your decision departs from individuals views you must explain your reasons.</p>
<p>DPIA to be keep under review by:</p>	<p>Every 3 years, or when the Project changes.</p>	

**If you require further guidance to complete this DPIA please contact:**

**Information Management Team (IMT)**

Ext: 47777

Email: [information.management@croydon.gov.uk](mailto:information.management@croydon.gov.uk)

**Data Protection Officer**

Email: [DPO@croydon.gov.uk](mailto:DPO@croydon.gov.uk)