NHS Derby and Derbyshire Integrated Care Board

NHS Lincolnshire Integrated Care Board

NHS Nottingham and Nottinghamshire Integrated Care Board

Freedom of Information (FOI) and Environmental Information Regulations (EIR) Policy

October 2026 – October 2029

Policy purpose
The purpose of this policy is to ensure that the ICBs meet their statutory obligations under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) by establishing a consistent framework for the management of requests for information. The policy outlines the responsibilities of all staff in supporting compliance with legal and regulatory requirements, promoting openness and transparency, and ensuring that requests for information from members of the public are handled lawfully, efficiently and within statutory timescales.

CONTROL RECORD	
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This is a controlled document and whilst this policy may be printed, the electronic version available on the ICB's document management system is the only true copy. As a controlled document, this document should not be saved onto local or network drives.	

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1. Introduction

1.1 The Freedom of Information Act 2000 (FOIA) provides the public with a statutory right to request access to recorded information held by the ICBs and sets out how requests for information must be handled. FOIA also contains a number of exemptions that may apply where information cannot lawfully be disclosed.

1.2 Requests for environmental information are considered under the Environmental Information Regulations 2004 (EIR), which provide a separate right of access to environmental information held by public authorities. Environmental information may include information relating to land and buildings, energy usage, waste management, emissions and environmental impacts.

1.3 Compliance with FOIA and EIR is regulated by the Information Commissioner's Office (ICO), the UK's independent authority responsible for promoting openness by public authorities and upholding information rights. Failure to comply with statutory requirements may result in complaints, investigations and regulatory action.

1.4 FOIA and EIR do not affect the ICBs' obligations to protect personal data and confidential information in accordance with UK GDPR, the Data Protection Act 2018, the common law duty of confidentiality and other applicable legal requirements.

1.5 This policy applies to NHS Derby and Derbyshire Integrated Care Board, NHS Lincolnshire Integrated Care Board and NHS Nottingham and Nottinghamshire Integrated Care Board, collectively referred to as ‘the ICBs’.

1.6 The ICBs are separate statutory public authorities for the purposes of FOIA and EIR. This joint policy establishes a consistent approach across the ICBs but does not transfer or diminish the statutory responsibilities of any individual ICB.

1.7 The ICBs operate a shared FOI and EIR service. Under approved governance, confidentiality, access-control and information-sharing arrangements, the shared service may receive, coordinate and administer requests on behalf of any of the three ICBs. The relevant ICB remains the responding public authority and retains legal accountability for its response.

2. Purpose

2.1 This policy sets out the approach of the ICBs to managing requests for information and complying with the requirements of the Freedom of Information Act 2000, the Environmental Information Regulations 2004 and relevant Information Commissioner's Office (ICO) guidance.

2.2 The policy aims to ensure that requests for information are recognised, handled consistently, lawfully and within statutory timescales across the ICBs. It defines the responsibilities of staff and the shared FOI and EIR service, supports openness, transparency and accountability, establishes arrangements for publication schemes and disclosure logs, and provides a framework for governance, monitoring, reporting and continuous improvement.

3. Scope

3.1 This policy applies to all individuals working for or on behalf of the ICBs who may receive, identify, manage, create, hold or disclose information within the scope of the Freedom of Information Act 2000 (FOIA) or the Environmental Information Regulations 2004 (EIR). It establishes the requirements for responding to requests for recorded information and for meeting the ICBs' statutory duties under FOIA and EIR.

3.2 This policy applies to all recorded information held by, or on behalf of, the ICBs for the purposes of FOIA and EIR, regardless of format, location, age or creator. Recorded information includes information held electronically, on paper, or in any other recorded form, including information held within corporate systems, emails, Teams and other messaging platforms, databases, audio and visual recordings, notebooks and paper files.

3.3 This policy applies to information held by, or on behalf of, an ICB for the purposes of FOIA and EIR in connection with its functions, activities and statutory responsibilities.

3.4 The ICBs are committed to openness and transparency and will make recorded information available wherever possible. However, this policy does not override obligations to protect personal data, confidential information, commercially sensitive information or any other information that is exempt from disclosure under FOIA or excepted from disclosure under EIR.

3.5 Where information is withheld, the ICBs will apply the relevant exemption under FOIA or exception under EIR and, where required, undertake and document the public interest test before issuing a response.

3.6 This policy does not replace the arrangements for managing subject access requests, other information rights requests under data protection legislation, access to health records requests, routine business enquiries, complaints or media enquiries. Where a request falls within the scope of FOIA or EIR, it will be handled in accordance with the relevant legislation regardless of how the request is described, labelled or submitted.

4. Definitions

4.1 Definitions of key terms referenced in this policy are described in Appendix A.

5. Roles and responsibilities

5.1 Key responsibilities for specific roles and staff groups are described below:

Role	Responsibilities
Chief Executive	Has overall accountability for ensuring that the ICBs comply with their statutory obligations under the Freedom of Information Act 2000 (FOIA) and Environmental Information Regulations 2004 (EIR) and maintain effective governance arrangements for compliance.
Director of Corporate Governance and Assurance	Provides executive oversight and assurance regarding FOIA and EIR compliance. Ensures appropriate arrangements, resources and controls are in place to support compliance, provides or commissions specialist advice where required, and maintains the ICBs' publication schemes.
Assistant Director of Risk Management and Information Governance	Provides operational leadership and oversight of FOIA and EIR compliance arrangements. Oversees performance, monitoring and reporting, provides advice on complex cases, supports continuous improvement, and acts as a senior point of escalation for significant issues, complaints and internal reviews.
Corporate Information Team	Acts as the central coordination point for FOIA and EIR requests. Receives, validates, logs, acknowledges, allocates and coordinates requests; provides advice and guidance to staff; monitors statutory timescales; maintains case records, disclosure logs and management information; supports the application of exemptions and exceptions; undertakes quality assurance; and issues responses on behalf of the ICBs.
Directors, Associate Directors and Senior Managers	Ensure requests are prioritised within their areas of responsibility and that timely, complete and accurate information is provided to support compliance with statutory deadlines. Approve responses in accordance with policy requirements.
Information Asset Owners and Subject Matter Experts	Support proportionate and reasonable searches, identify and provide relevant information, explain search methodologies where required, and ensure information held within their area is appropriately managed, searchable and retained.
All Staff	Must recognise potential FOIA and EIR requests and promptly forward them to the Corporate Information Team. Staff must preserve relevant information, cooperate with searches and

Role	Responsibilities
	reviews, maintain records appropriately, and support compliance with this policy and associated procedures.

6. Rights of applicants

6.1 The Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) provide a general right of access to information held by the ICBs. Subject to the requirements of the legislation and any applicable exemptions or exceptions, applicants have the right:

- to be informed whether the ICBs hold the requested information; and
- to receive that information within the relevant statutory timescale.

6.2 Requests for information under FOIA must be made in writing, including by email or other written electronic communication. Applicants are not required to refer to FOIA when making a request. All staff must be able to recognise and appropriately manage requests for information made under FOIA.

6.3 Requests for environmental information under the EIR may be made either verbally or in writing. Where a verbal request is received, staff should ensure sufficient details are recorded to enable the request to be processed in accordance with the Regulations.

6.4 Requests for information under FOIA or the EIR should be directed to the Corporate Information Team via nnicb-nn.dln.fois@nhs.net Requests may also be submitted through other published contact routes. Current contact details for each ICB are available on the relevant ICB website. Any request received elsewhere within an ICB must be forwarded promptly to the Corporate Information Team to ensure compliance with statutory timescales.

7. Publication Scheme

7.1 Each ICB will adopt and maintain a publication scheme in accordance with section 19 of the Freedom of Information Act 2000 and the model publication scheme issued by the Information Commissioner. The publication scheme will describe the classes of information routinely made available, how that information can be accessed and whether any charges may apply.

7.2 The ICBs will make information available through their publication schemes and other appropriate publication arrangements to support openness, transparency and compliance with statutory duties. Information published routinely should be kept under review to ensure it remains accurate, relevant and up to date.

7.3 The ICBs may maintain disclosure logs or other mechanisms for publishing responses to requests for information where this is considered appropriate and in the public interest. Any information published in this way will be reviewed to ensure that personal data, confidential information and exempt information are not disclosed.

7.4 In accordance with the Environmental Information Regulations 2004, the ICBs will take reasonable steps to organise and make environmental information available through accessible electronic means wherever appropriate. Environmental information should be published proactively and updated as necessary to support active dissemination and public access.

8. Responding to requests for information

8.1 The ICBs will manage requests for information under the Freedom of Information Act 2000 (FOIA) and the Environmental Information Regulations 2004 (EIR) in accordance with the requirements of the legislation, relevant Codes of Practice and guidance issued by the Information Commissioner's Office (ICO). The ICBs will:

a) determine whether the requested information is held;

b) identify and retrieve relevant recorded information held by or on behalf of the ICBs;

c) provide reasonable advice and assistance to applicants in accordance with section 16 of FOIA;

d) disclose information unless a valid exemption under FOIA or exception under the EIR applies; and

e) respond within the applicable statutory timescales.

8.2 Requests will normally be responded to within 20 working days of receipt. Where clarification of a request is required, the statutory timescale may be suspended in accordance with legislative requirements until sufficient clarification is received. Where legislation permits an extension of time, including for consideration of the public interest test, applicants will be informed of the reasons for the extension and the anticipated response date.

8.3 Information held on behalf of the ICBs by contractors, commissioned providers, consultants or other third parties may fall within the scope of FOIA or the EIR. The ICBs will take reasonable steps to establish whether such information is held and whether it is disclosable under the legislation.

8.4 Requests may be refused, in whole or in part, only where a relevant exemption under FOIA or exception under the EIR applies. Where information is withheld, the ICBs will provide an appropriate refusal notice explaining the basis for the decision, except where legislation permits otherwise. Further information

regarding exemptions and exceptions is provided in Appendix C. Information regarding the duty to confirm or deny and the circumstances in which a neither confirm nor deny response may be appropriate is provided in Appendix F.

8.5 Where a qualified exemption under FOIA or an exception under the EIR requires consideration of the public interest test, the ICBs will undertake a public interest assessment and will disclose the information unless the public interest in maintaining the exemption or exception outweighs the public interest in disclosure. Further information is provided in Appendix C.

8.6 The ICBs will provide reasonable advice and assistance to applicants to help them make or refine requests for information. This may include assisting an applicant to clarify the scope of a request, directing them to information already published, or helping them refine a request where the cost of compliance is likely to exceed the appropriate limit. Further information regarding charges and the application of the appropriate limit is provided in Appendix E.

8.7 The ICBs may refuse a request that is considered vexatious in accordance with section 14 of FOIA. Any decision to refuse a request on this basis will be considered on its own merits and supported by appropriate evidence and governance oversight. Further information is provided in Appendix D.

8.8 Where information provided by, or relating to, a third party is under consideration for disclosure, the ICBs may consult the third party where appropriate and lawful to do so. The final decision regarding disclosure remains the responsibility of the ICBs.

8.9 Information will not be destroyed, altered, concealed, blocked, erased or otherwise disposed of following receipt of a request where doing so would prevent or frustrate disclosure. The ICBs will comply with the requirements of section 77 of FOIA and the NHS Records Management Code of Practice. Records that are the subject of a request must be retained until the request and any subsequent review, complaint or appeal process has concluded.

8.10 Applicants have the right to request an internal review of a decision made under FOIA or the EIR and thereafter complain to the Information Commissioner's Office. Further information is provided in Section 6.

8.11 Information supplied by the ICBs may be subject to copyright and re-use provisions. Requests to re-use information will be considered in accordance with applicable legislation, licensing arrangements and organisational copyright requirements.

9. Description of information requested

9.1 Applicants must describe the information they wish to receive with sufficient clarity to enable the ICBs to identify and locate the information requested.

9.2 Where a request does not provide sufficient detail to identify the information sought, the ICBs will seek clarification from the applicant and provide reasonable advice and assistance to help them submit a valid request.

9.3 Where clarification is required before a request can be processed, the statutory timescale for responding may be suspended in accordance with the requirements of the Freedom of Information Act 2000 until sufficient clarification is received.

9.4 Where the scope of a request is unclear, excessively broad, or is likely to exceed the appropriate cost limit, the ICBs will provide reasonable advice and assistance to help the applicant refine the request where appropriate. Further information regarding the appropriate limit and charging arrangements is provided in Appendix E.

9.5 Where an applicant does not provide the clarification necessary to enable the ICBs to identify the information requested, the ICBs may close the request and notify the applicant accordingly.

10. Internal reviews and complaints

10.1 Applicants who are dissatisfied with the outcome of a request for information, or the way in which their request has been handled, have the right to request an internal review.

10.2 An internal review may be requested where an applicant believes that:

a) the request has not been handled in accordance with the requirements of the Freedom of Information Act 2000 (FOIA) or the Environmental Information Regulations 2004 (EIR);

b) information has been incorrectly withheld;

c) a relevant exemption or exception has been incorrectly applied;

d) the response exceeded the applicable statutory timescale; or

e) the request has otherwise not been handled appropriately.

10.3 Internal reviews will be undertaken by an appropriately senior and independent individual who was not involved in the original decision-making process.

10.4 The ICBs will aim to complete internal reviews promptly and, wherever possible, within 20 working days. Where a review is particularly complex, the ICBs may require additional time; however, applicants will be kept informed of progress and the reasons for any delay.

10.5 The outcome of an internal review will be communicated to the applicant in writing and will explain the decision reached and any action to be taken as a result.

10.6 Following completion of the internal review process, applicants have the right to complain to the Information Commissioner's Office if they remain dissatisfied with the outcome.

10.7 General complaints that do not relate to the handling of a request for information will be managed in accordance with the ICBs' relevant complaints procedures.

11. Records management and retention

11.1 Records relating to requests for information, responses, internal reviews, complaints and associated correspondence will be created, maintained, stored and disposed of in accordance with the NHS Records Management Code of Practice and the ICBs' approved retention schedules.

11.2 The ICBs will maintain appropriate records of requests for information, responses, disclosure decisions, decisions to apply exemptions or exceptions, internal reviews, complaints and related correspondence to support compliance with FOIA, EIR and organisational governance requirements.

11.3 Where information is disclosed in redacted form, sufficient records will be retained to demonstrate the basis of the disclosure decision and any exemptions or exceptions applied.

12. Equality and diversity statement

12.1 The ICBs pay due regard to the requirements of the Public Sector Equality Duty (PSED) of the Equality Act 2010 in policy development and implementation, as commissioners and providers of services, as well as employers.

12.2 The ICBs are committed to ensuring that the way services are provided to the public and the experiences of staff does not discriminate against any individuals or groups based on their age, disability, gender identity (trans, non-binary) marriage or civil partnership status, pregnancy or maternity, race, religion or belief, gender or sexual orientation.

12.3 The ICBs are committed to ensuring that activities also consider the disadvantages that some people in the diverse population experience when accessing health services. Such disadvantaged groups include people experiencing economic and social deprivation, carers, refugees and asylum seekers, people who are homeless, workers in stigmatised occupations, people who are geographically isolated, Gypsies, Roma and Travellers.

12.4 To help ensure that these commitments are embedded in day-to-day working practices, an Equality Impact Assessment has been completed, and is included within this policy.

13. Communication, monitoring and review

13.1 This policy will be published on the ICBs' intranet and document management systems and will be accessible to all employees, contractors, temporary staff, volunteers and other individuals working on behalf of the ICBs.

13.2 The policy will be communicated through appropriate corporate communication channels and supported by guidance, awareness materials and training where required. Managers are responsible for ensuring that staff within their areas of responsibility are aware of this policy and understand their responsibilities under the Freedom of Information Act 2000 (FOIA) and Environmental Information Regulations 2004 (EIR).

13.3 All staff involved in the receipt, handling, review, approval or disclosure of information under FOIA or EIR must familiarise themselves with this policy and any associated procedures or guidance.

13.4 The ICBs will maintain appropriate records of requests for information, responses, disclosure decisions, decisions to apply exemptions or exceptions, internal reviews, complaints and related correspondence in accordance with legal, regulatory and records management requirements.

13.5 Compliance with this policy will be monitored through the ICBs' information governance assurance arrangements. Monitoring may include the volume and nature of requests received, disclosure decisions, application of exemptions and exceptions, response times, compliance with statutory timescales, internal reviews, complaints, ICO enquiries, risks, identified themes, lessons learned and improvement actions.

13.6 Information arising from requests, disclosure decisions, internal reviews, complaints and ICO enquiries will be used to identify opportunities for learning, service improvement and the ongoing development of policies, procedures and guidance.

13.7 Relevant performance, compliance and assurance information relating to FOIA and EIR activities will be reported through established governance arrangements, including the Information Governance Compliance Report, to provide assurance regarding compliance with legislative and organisational requirements.

13.8 Risks arising from FOIA and EIR activities, non-compliance, complaints, ICO enquiries or emerging themes will be managed through the ICBs' risk management arrangements in accordance with the Risk Management Policy.

13.9 This policy will be reviewed every three years, or sooner where required by changes to legislation, regulatory guidance, NHS requirements, organisational arrangements or identified learning.

13.10 Any queries regarding this policy, or how it applies in practice, should be directed to the Corporate Information Team.

14. Confidentiality

14.1 The ICBs recognise that the right of access to information under the Freedom of Information Act 2000 (FOIA) and Environmental Information Regulations 2004 (EIR) must be balanced against obligations arising under data protection legislation, the common law duty of confidentiality, contractual confidentiality provisions where lawfully applicable, and other legal or regulatory requirements.

14.2 Information will only be withheld where a relevant FOIA exemption or EIR exception applies and the requirements of the legislation have been met, including consideration of the public interest test where required.

14.3 Where requested information contains personal data, the ICBs will consider the requirements of the UK General Data Protection Regulation (UK GDPR), Data Protection Act 2018 and associated guidance to ensure that personal information is disclosed only where lawful and appropriate.

14.4 Where information has been provided in confidence, or where disclosure could otherwise result in a breach of confidence, the ICBs will consider the applicable legal obligations and the relevant FOIA exemption or EIR exception before deciding whether information can be disclosed.

14.5 The ICBs will seek to maximise openness and transparency wherever possible while ensuring that information is disclosed lawfully and that confidential, personal or otherwise protected information is appropriately safeguarded.

15. Staff training

15.1 All individuals working for or on behalf of the ICBs must complete mandatory information governance and data security training in accordance with the ICBs' training requirements and maintain an appropriate level of awareness of their responsibilities under the Freedom of Information Act 2000 (FOIA) and Environmental Information Regulations 2004 (EIR).

15.2 Managers are responsible for ensuring that staff within their area of responsibility complete mandatory training and have access to appropriate guidance, support and awareness resources to enable them to comply with this policy.

15.3 Staff who receive, manage, review, approve or contribute to responses under FOIA or EIR must ensure that they understand their responsibilities and seek advice from the Corporate Information Team where clarification or support is required.

15.4 The ICBs will provide appropriate guidance, awareness and training to support compliance with this policy. Additional or role-specific training may be provided where identified through monitoring activities, changes to legislation or guidance, incidents, complaints, lessons learned or operational requirements.

15.5 The Assistant Director of Risk Management and Information Governance is responsible for ensuring that suitable training, guidance and awareness arrangements are available to support implementation of this policy. Bespoke FOIA and EIR awareness sessions may be provided to teams and directorates on request.

16. Interaction with other policies

16.1 This policy should be read in conjunction with other relevant ICBs policies, procedures and guidance relating to information governance, confidentiality, data protection, information security and records management.

17. References

17.1 The following legislation, statutory codes of practice and guidance have been taken into consideration in the development of this policy:

a) Freedom of Information Act 2000.

b) Environmental Information Regulations 2004.

c) Freedom of Information Code of Practice (section 45 Code of Practice, 2018).

d) Section 46 Code of Practice on the Management of Records.

e) Data Protection Act 2018.

f) UK General Data Protection Regulation (UK GDPR).

g) Human Rights Act 1998.

h) Re-use of Public Sector Information Regulations 2015.

i) Common Law Duty of Confidentiality.

j) NHS England Records Management Code of Practice 2021 (including subsequent updates).

k) Model Publication Scheme for organisations operating within the NHS in England.

l) Information Commissioner's Office guidance on Freedom of Information and Environmental Information Regulations.

m) Data Security and Protection Toolkit.

18. Equality Impact Assessment

Date of assessment:	**September 2026**			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Age[1]	No significant adverse impact identified. Some people may experience barriers linked to digital access, digital literacy, communication needs or age-related accessibility requirements.	Requests may be submitted through different communication routes. The ICBs will provide reasonable advice and assistance under section 16 of FOIA and regulation 9 of EIR and will consider accessible formats and communication needs.	No specific unmitigated adverse impact identified. Keep contact routes, published information and response formats under review, using feedback, complaints and internal reviews to identify any emerging barriers.	Yes. The policy supports consistent and transparent access to recorded information regardless of age.
Disability (Including: mental, physical, learning, intellectual and neurodivergent)[2]	Yes. People may face barriers when making a request, explaining the information sought, using digital channels or accessing and understanding responses.	The ICBs will provide reasonable adjustments, accessible communication and alternative formats where required. Advice and assistance will be provided to help applicants describe the information sought.	A low residual risk remains if individual accessibility needs are not identified or communicated. Staff should ask about and respond to communication and accessibility needs, and accessibility issues should be	Yes. Accessible routes, reasonable adjustments and support to make requests promote more equitable access to public information.

[1] A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).

[2] 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.

Date of assessment:	September 2026			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
			monitored through feedback, complaints and internal reviews.	
Gender (including trans, non-binary and gender reassignment)[3]	No inherent adverse impact identified. There is a potential confidentiality risk if responses contain information that could disclose a person's gender history or identity.	Requests are handled consistently and disclosures are subject to data protection, confidentiality, exemption or exception assessment and appropriate redaction.	No specific unmitigated adverse impact identified. Continue privacy-aware quality assurance and avoid collecting or using gender information unless relevant and necessary.	Yes. The policy promotes equal treatment and transparent access to information regardless of gender or gender reassignment.
Marriage and civil partnership[4]	No inherent adverse impact identified.	The policy and request-handling arrangements apply consistently to all applicants, regardless of marriage or civil partnership status.	No specific unmitigated adverse impact identified. Monitor concerns through feedback, complaints and internal reviews.	Yes. The policy supports equal access to recorded information regardless of marriage or civil partnership status.

[3] The process of transitioning from one gender to another.

[4] 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'.

Date of assessment:	September 2026			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Pregnancy and maternity[5]	No inherent adverse impact identified. Some applicants may benefit from flexible and accessible communication arrangements.	Requests may be made through different communication routes, with alternative formats and reasonable flexibility considered where required.	No specific unmitigated adverse impact identified. Monitor concerns through feedback, complaints and internal reviews.	Yes. The policy supports equitable access to information during pregnancy, maternity and related circumstances.
Race[6]	Yes. People may experience language, literacy, cultural or digital barriers when making a request or understanding a response.	The ICBs will provide reasonable advice and assistance and consider accessible communication or alternative formats where appropriate. Requests will be handled consistently and without discrimination.	A low residual risk remains where language or communication needs are not identified. Keep accessibility and communication arrangements under review and respond to identified needs appropriately.	Yes. The policy promotes equal access to public information and transparent decision-making across diverse communities.
Religion or belief[7]	No inherent adverse impact identified.	The policy applies consistently regardless of religion, belief or lack of belief. Disclosure	No specific unmitigated adverse impact identified. Monitor concerns through	Yes. The policy supports fair and equal access to recorded

[5] 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 breastfeeding.

[6] 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.

[7] 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.

Date of assessment:	September 2026			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
		decisions are based on the legislation and the information requested.	feedback, complaints and internal reviews.	information regardless of religion or belief.
Sex[8]	No inherent adverse impact identified. There is a potential confidentiality risk if disclosed information contains sensitive personal information.	Requests are handled consistently. Disclosures are subject to data protection, confidentiality, exemption or exception assessment and appropriate redaction.	No specific unmitigated adverse impact identified. Continue privacy-aware quality assurance and monitoring.	Yes. The policy promotes equal treatment and transparent access to information regardless of sex.
Sexual orientation[9]	No inherent adverse impact identified. There is a potential confidentiality risk if responses contain information that could disclose a person's sexual orientation.	Requests are handled consistently. Disclosures are subject to data protection, confidentiality, exemption or exception assessment and appropriate redaction.	No specific unmitigated adverse impact identified. Continue privacy-aware quality assurance and avoid collecting or using information about sexual orientation unless relevant and necessary.	Yes. The policy supports equal access to recorded information regardless of sexual orientation.

[8] A man or a woman.

[9] Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none. https://www.equalityhumanrights.com/en/equality-act/protected-characteristics

Date of assessment:	September 2026			
For the policy, and its implementation, please answer the questions against each of the protected characteristic and inclusion health groups:	Has the risk of any potential adverse impact on people in this protected characteristic group been identified, such as barriers to access or inequality of opportunity?	If yes, are there any mechanisms already in place to mitigate the adverse impacts identified?	Are there any remaining adverse impacts that need to be addressed? If so, please state any mitigating actions planned.	Are there any positive impacts identified for people within this protected characteristic group? If yes, please briefly describe.
Carers[10]	Yes. Caring responsibilities may limit the time or methods available to submit a request, clarify its scope or engage with correspondence.	Requests may be made through different communication routes. The ICBs will provide advice and assistance and reasonable flexibility in communications where appropriate, while continuing to meet statutory requirements.	No specific unmitigated adverse impact identified. Keep contact routes and format options under review and respond flexibly to identified communication needs.	Yes. Flexible and accessible arrangements support access to information for people with caring responsibilities.

[10] Individuals within the ICB which may have carer responsibilities.

Appendix A: Definitions and glossary of terms

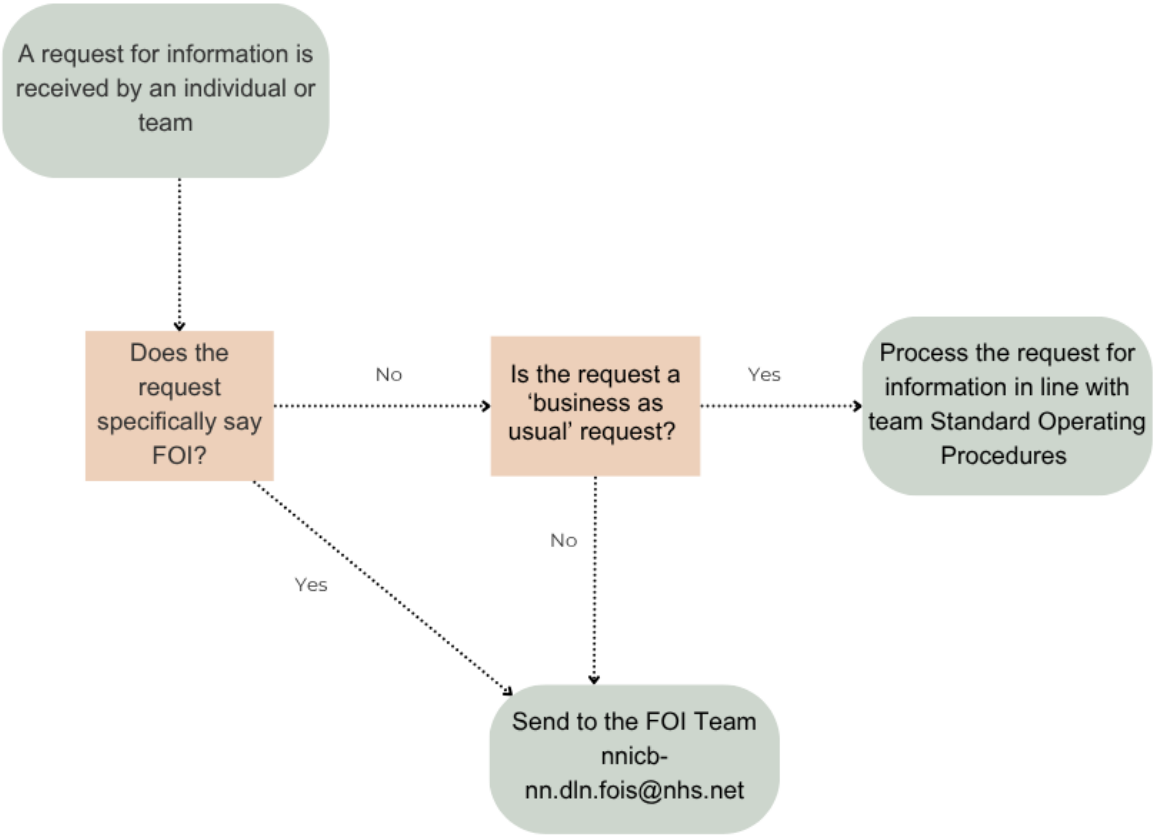
Definitions of key terms referenced in this policy are described in the table below:

Term	Definition
Absolute exemption	An exemption under FOIA that does not require a public interest test where the conditions for applying the exemption are met.
Applicant / requester	Any individual, organisation or representative making a request for information under FOIA or EIR.
Cost limit (appropriate limit)	The cost threshold prescribed by regulations above which a public authority is not required to comply with a FOIA request.
Disclosure log	A publicly available record of information requests and responses published by the ICBs to promote transparency and reduce repeat requests.
Duty to confirm or deny	The obligation under FOIA to state whether requested information is held, unless a relevant exemption removes that duty.
EIR	The Environmental Information Regulations 2004, which provide a right of access to environmental information held by public authorities.
Environmental information	Information within the meaning of Regulation 2(1) of EIR relating to the state of environmental elements, factors affecting them, measures, activities, policies, plans, emissions, waste, energy, land, water, biodiversity, or human health and safety as affected by environmental matters.
Exception	A provision within EIR that permits environmental information to be withheld in specified circumstances, subject to the public interest test where applicable.
Exemption	A provision within FOIA that permits information to be withheld or allows a public authority to neither confirm nor deny whether information is held in specified circumstances.
FOIA	The Freedom of Information Act 2000, which provides a general right of access to recorded information held by public authorities, subject to certain exemptions.
ICO	The Information Commissioner's Office, the independent regulator responsible for promoting and enforcing information rights legislation in the United Kingdom.
Information held	Recorded information held by an ICB or held on its behalf by another person or organisation, for the purposes of FOIA or EIR.
Internal review	A review of the handling of, or response to, a FOIA or EIR request following a request for reconsideration by the applicant.
NCND (neither confirm nor deny)	A response stating that the ICBs can neither confirm nor deny whether information is held because a relevant exemption or exception applies.
Public authority	An organisation listed in, or designated under, FOIA. Integrated Care Boards are public authorities for the purposes of FOIA and EIR.

Term	Definition
Public interest test	The process of considering whether the public interest in maintaining an exemption or exception outweighs the public interest in disclosure.
Publication scheme	A document that describes the classes of information a public authority routinely publishes, how the information can be accessed and whether any charges apply.
Qualified exemption	An exemption under FOIA that requires consideration of whether the public interest in maintaining the exemption outweighs the public interest in disclosure.
Recorded information	Information recorded in any form, including paper records, electronic records, emails, messages, audio recordings, video recordings, photographs, databases and other recorded media.
Repeated request	A request for the same or substantially similar information made by the same applicant where the ICB has previously complied with a request and a reasonable interval has not elapsed.
Section 16 duty	The duty under section 16 of FOIA requiring public authorities, so far as reasonable, to provide advice and assistance to applicants.
Third party information	Information relating to another individual, organisation or public authority that may require consultation or consideration before disclosure.
Vexatious request	A request that, when considered in the context of the circumstances of the request, would impose a disproportionate or unjustified burden on the public authority or otherwise represents an improper use of FOIA.

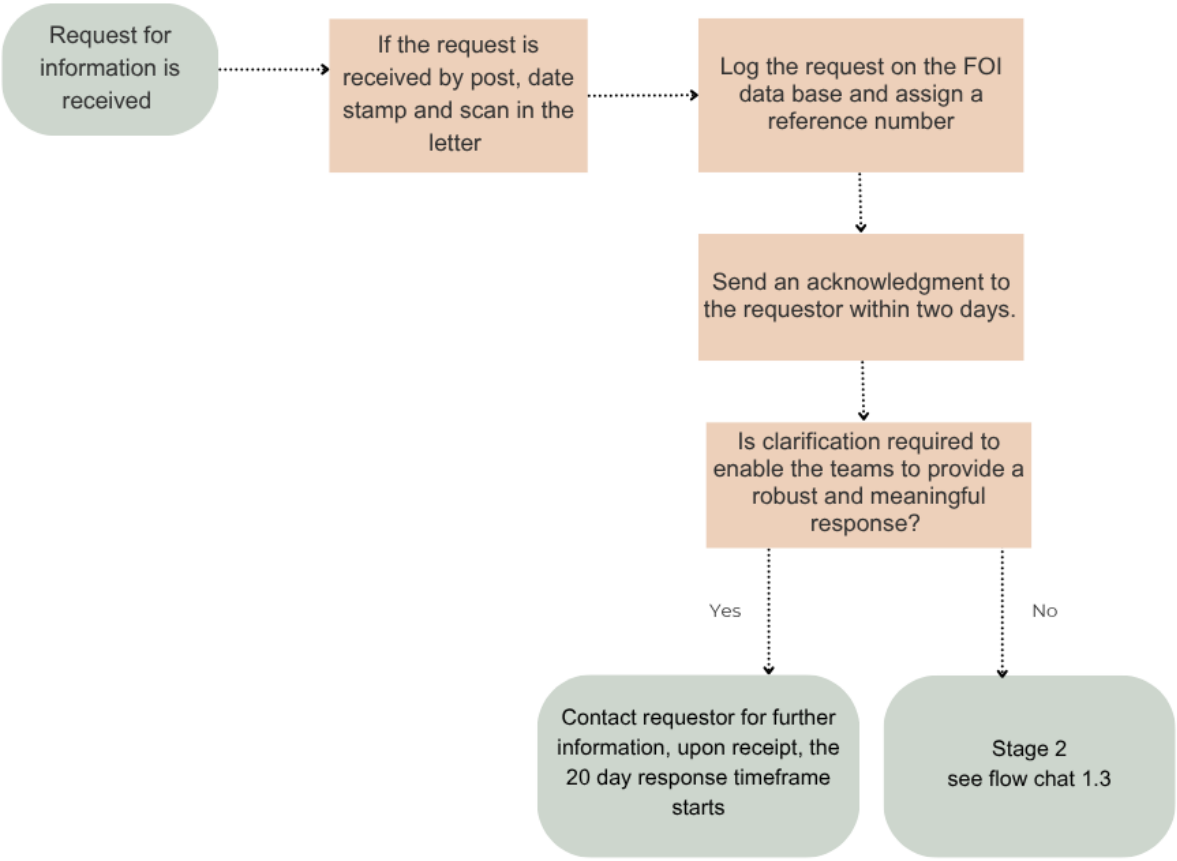
Appendix B: Flowcharts for responding to requests for information

1.1 Process for Handling Requests for Information



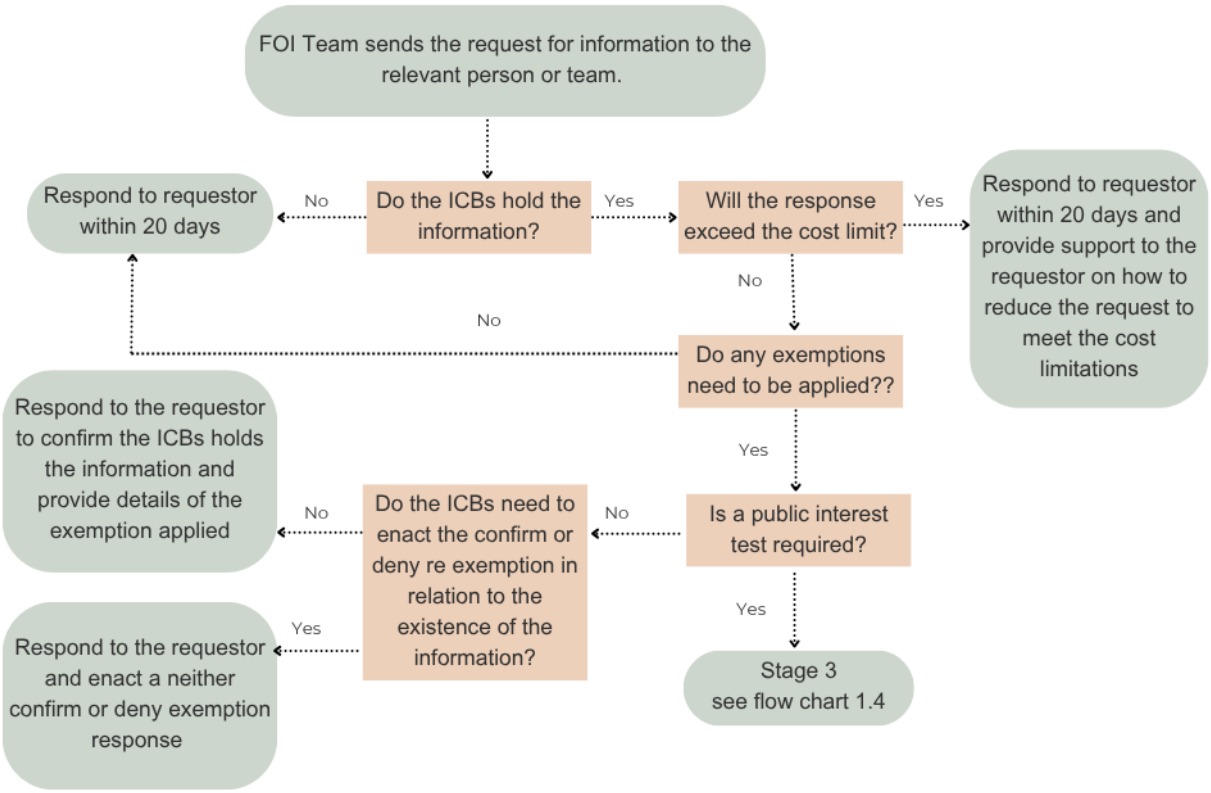
1.2 Process for Dealing with Requests for Information:

Stage 1 - Acknowledgement



1.3 *Process for Dealing with Requests for Information*

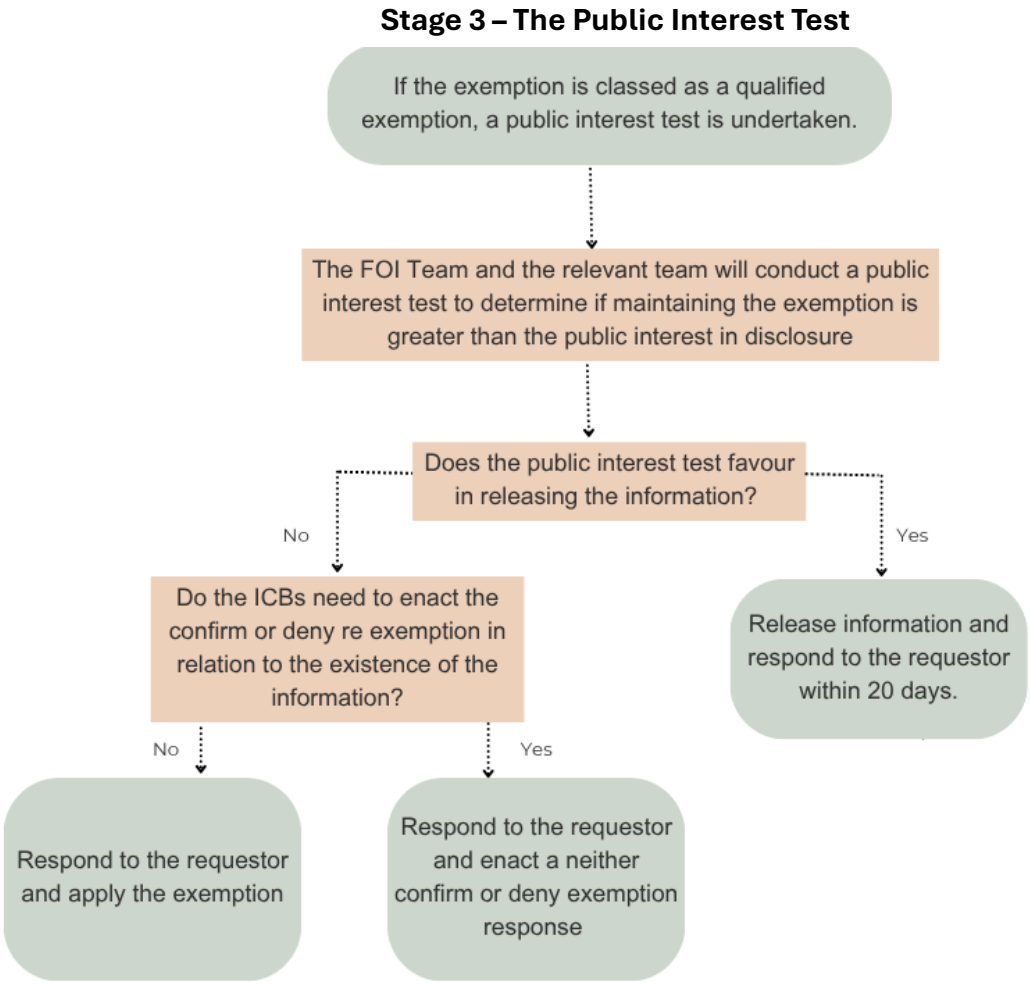
Stage 2 – Deciding whether to disclose



[2]See Appendix E– Charging Regime

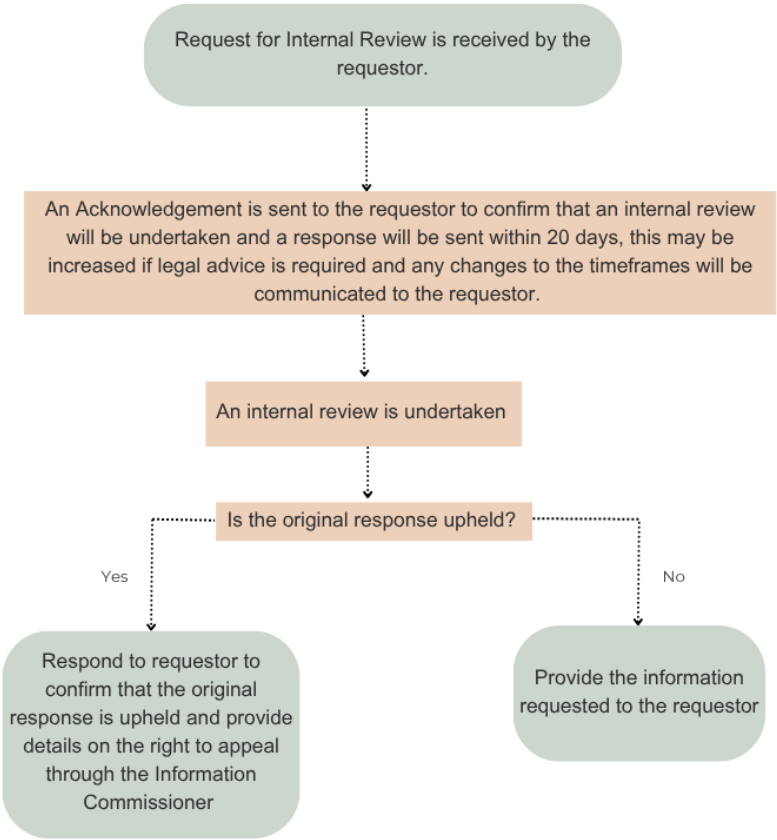
[3]See Appendix F - for more details on 'confirm or deny'.

1.4 Process for Dealing with Requests for Information



[4]See Appendix F for more details on 'confirm or deny'.

1.5 Process for Dealing with Requests for Internal Review



Appendix C: FOI exemptions and EIR exceptions

The Freedom of Information Act 2000 contains a number of exemptions which may permit information to be withheld in full or in part where disclosure would be inappropriate or where the legislation otherwise provides protection. The Environmental Information Regulations 2004 contain a similar framework of exceptions that may apply to environmental information.

The application of an exemption or exception should be considered on a case-by-case basis and in accordance with relevant legislation, statutory codes of practice and Information Commissioner's Office guidance. Further information relating to exemptions and exceptions is available from the Information Commissioner's Office.

When considering whether an exemption or exception may apply, factors that may need to be taken into account include:

a) the nature and content of the requested information;

b) the circumstances in which the information was created, obtained or recorded;

c) the source of the information;

d) any legal, operational, commercial or security implications of disclosure;

e) whether the information includes personal data relating to identifiable individuals;

f) whether disclosure could result in a breach of confidence or another legal obligation; and

g) whether information can be disclosed in part through redaction rather than withheld in full.

Where a qualified exemption or exception applies, the public interest in maintaining the exemption or exception must be weighed against the public interest in disclosure. The outcome of this assessment must be documented.

Potential exemptions and exceptions will normally be identified and considered by the Corporate Information Team. Where an exemption or exception is considered complex, contentious, high-risk or may have a significant operational, financial, legal or reputational impact, advice and approval may be sought from appropriate senior officers within the Corporate Information Team and/or the wider Office of the Chair and Chief Executive function.

Appendix D: Vexatious requests

Under section 14(1) of the Freedom of Information Act 2000, the ICBs are not required to comply with requests that are considered vexatious.

Each request will be assessed on its own merits and in the context in which it is made. The ICBs recognise that individuals have a statutory right to request information and that requests should not be regarded as vexatious simply because they are challenging, critical, numerous, or inconvenient.

In determining whether a request is vexatious, the ICBs will consider all relevant circumstances, including the nature of the request, the value and purpose of the information sought, any history of correspondence, and the impact of responding on the organisation.

A request may be considered vexatious where one or more of the following factors apply:

a) the request would impose a disproportionate or unjustified burden on the ICBs;

b) the request appears intended to cause disruption, annoyance, harassment or distress;

c) the request lacks any serious purpose or value when considered objectively;

d) the request forms part of an obsessive, persistent or unreasonable pattern of correspondence;

e) the requester repeatedly raises substantially the same issues despite those issues having been addressed through previous responses, reviews or complaints processes;

f) the request is designed primarily to disrupt the work of the organisation rather than obtain information; or

g) the cumulative effect of the request and associated correspondence would place an unreasonable burden on the ICBs.

When considering whether a request would impose a disproportionate or unjustified burden, the ICBs may consider factors such as:

a) the volume, frequency and scope of requests and correspondence received from the requester;

b) the resources required to locate, retrieve, review, redact and disclose information;

c) the level of disruption to normal business activities and the ability of staff to carry out their substantive duties;

d) the extent to which the request duplicates, overlaps with, or follows previous requests, reviews, complaints or other correspondence;

e) whether the request would require extensive consultation across multiple teams, services or external organisations;

f) the cumulative burden created by the request when considered alongside previous requests and related correspondence from the same individual; and

g) whether the burden imposed is proportionate to the value and purpose of the request.

No single factor will be determinative. Decisions will be based on the circumstances of the individual case and a balanced assessment of the request as a whole.

The ICBs may take into account the wider context and history of correspondence when assessing whether a request is vexatious. This may include previous requests, internal reviews, complaints, repeated challenges to responses, or other communications that are relevant to understanding the impact of the request on the organisation.

Any decision to refuse a request under section 14(1) will be appropriately reviewed and authorised in accordance with the ICBs' governance arrangements. The reasons for the decision will be fully documented and retained to provide a clear audit trail. The requester will be informed of the decision and advised of their right to request an internal review and subsequently complain to the Information Commissioner's Office.

Appendix E: Charging regime

The ICBs aim to make information available wherever possible free of charge through their websites and Publication Scheme.

Where information is not routinely available through the Publication Scheme, any charges will be determined in accordance with the Freedom of Information Act 2000, the Freedom of Information and Data Protection (Appropriate Limit and Fees) Regulations 2004, the Environmental Information Regulations 2004 and relevant Information Commissioner's Office guidance.

Information provided electronically will normally be supplied free of charge.

Where information is provided in hard copy or another physical format, the ICBs may charge reasonable disbursement costs incurred in communicating the information to the requester. Such costs may include:

- printing or photocopying;
- postage and packaging; and
- the provision of information in an alternative format where appropriate.

Under the Freedom of Information Act 2000, public authorities may refuse a request where the cost of complying would exceed the appropriate limit. For NHS organisations, the appropriate limit is £450, calculated at a rate of £25 per hour. Activities that may be taken into account when estimating costs include:

a) determining whether the requested information is held;

b) locating the information;

c) retrieving the information; and

d) extracting the information from documents or other records.

Where the estimated cost exceeds the appropriate limit, the ICBs will consider whether advice and assistance can be provided to help the requester refine or narrow their request to bring it within the appropriate limit.

Where a fee is payable, the requester will be issued with a fees notice. The statutory time limit for responding to the request will be paused from the date the fees notice is issued and will recommence upon receipt of payment. Where payment is not received within three months of the fees notice being issued, the request may be treated as withdrawn and closed.

Information that is exempt from disclosure under the Freedom of Information Act 2000, or subject to an exception under the Environmental Information Regulations 2004, will not be disclosed through the Publication Scheme or in response to requests unless disclosure is required by law.

Appendix F: Duty to confirm or deny

Under section 1(1)(a) of the Freedom of Information Act 2000, applicants are generally entitled to be informed whether the ICBs hold the information requested. This is known as the duty to confirm or deny.

In certain circumstances, the Freedom of Information Act 2000 and the Environmental Information Regulations 2004 permit the ICBs to refuse to confirm or deny whether information is held. This is commonly referred to as a 'neither confirm nor deny' (NCND) response.

An NCND response may be appropriate where confirming or denying whether information is held would itself reveal information that could harm an interest protected by an exemption or exception. The use of NCND is most commonly associated with areas such as law enforcement, regulatory investigations, national security, personal information and confidential matters, but may arise in other circumstances where legislation permits.

A decision to neither confirm nor deny whether information is held must be considered separately from any decision regarding disclosure of the information itself. The fact that information may be exempt from disclosure does not automatically mean that an NCND response is appropriate.

Before issuing an NCND response, the ICBs must be satisfied that:

a) a relevant exemption under the Freedom of Information Act 2000, or exception under the Environmental Information Regulations 2004, applies to the duty to confirm or deny;

b) where required, the public interest in maintaining the exclusion of the duty to confirm or deny outweighs the public interest in confirmation or denial; and

c) the rationale for the decision is capable of being evidenced and documented.

Where an NCND response is issued, the ICBs will normally identify the relevant exemption or exception being relied upon unless doing so would itself undermine the purpose of the response.

Any decision to neither confirm nor deny whether information is held must be appropriately considered, reviewed and authorised in accordance with the ICBs' governance arrangements. The reasons for the decision, including any public interest considerations, must be fully documented to provide a clear audit trail.