Harbourside
Family Practice

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16				

Harbourside
Family Practice

HARBOURSIDE FAMILY PRACTICE - FAIR PROCESSING & PRIVACY NOTICE

How Harbourside Family Practice uses your information to provide you with healthcare

This practice keeps medical records confidential and complies with the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018. We hold your medical record so that we can provide you with safe care and treatment. We will also use your information so that this practice can check and review the quality of the care that we provide. This helps us to improve our services to you.

- This practice keeps data relating to who you are, where you live and what you do; your family, possibly your friends and your employers; your habits, your problems and diagnoses, and the reasons you seek help; your appointments, where you are seen and when you are seen and who by; referrals to specialists and other healthcare providers, tests carried out here and in other places, investigations and scans, treatments and outcomes of treatments, your treatment history, the observations and opinions of other healthcare workers, within and outside the NHS; as well as comments and aide memoires reasonably made by healthcare professionals in this practice who are appropriately involved in your health care.

- We obtain most of your personal information directly from you when you register with the Practice or receive care from us. We may also receive information from:
    - your authorised representative, parent or legal guardian (where appropriate);
    - other GP practices;
    - NHS hospitals and community healthcare providers;
    - ambulance services and NHS 111;
    - pharmacies;
    - social care organisations;
    - NHS England and other NHS organisations involved in your care;
    - private healthcare providers involved in your treatment (where applicable); and
    - other organisations or healthcare professionals involved in your care.

- We will share relevant information from your medical record with other health or social care professionals and organisations involved in your care, or where we are required to do so by law. These may include NHS England, Integrated Care Boards (ICBs), NHS Trusts, community healthcare providers, Primary Care Networks (PCNs), pharmacies, laboratories, approved data processors and other organisations involved in delivering health and social care. For example, your GP will share information when referring you to a specialist in hospital or when sending details of your prescription to your chosen pharmacy. When you receive treatment from other healthcare providers, it is usual for them to send us information about that care, which we will retain as part of your medical record. We may also receive information from non-NHS healthcare providers where appropriate, although this is not always the case. Where information is shared for your direct care, this is carried out in accordance with UK GDPR, the common law duty of confidentiality and other applicable legal requirements.

- Healthcare staff working in A&E and out of hours care will also have access to your information. For example, it is important that staff who are treating you in an emergency know if you have any allergic reactions. This will involve the use of your Summary Care Record. The Summary Care Record is an English NHS development. It consists of a basic medical record held on a central government database on every patient registered with a GP surgery in England. The basic data is automatically extracted from your GP's electronic record system and uploaded to the central system. GPs are required by their contract with the NHS to allow this upload. The basic upload consists of current medication, allergies and details of any previous bad reactions to medicines, the name, address, date of birth and NHS number of the patient. Summary Care Records can only be viewed within the NHS on NHS smartcard controlled screens or by organisation, such as pharmacies, contracted to the NHS. For more information see: https://digital.nhs.uk/summary-care-records.

- You have the right to object to information being shared for your own care. Please speak to the practice if you wish to object. If you believe information we hold about you is inaccurate or incomplete, you have the right to request that it is corrected. We will consider your request in accordance with UK GDPR and NHS record-keeping requirements.

- Third party processors - In order to deliver the best possible service, the practice will share data (where required) with other NHS bodies such as other GP practices and hospitals. In addition the practice will use carefully selected third party service providers. When we use a third party service provider to process data on our behalf then we will always have an appropriate agreement in place to ensure that they keep the data secure, that they do not use or share information other than in accordance with our instructions and that they are operating appropriately. Examples of functions that may be carried out by third parties include:
  - Companies that provide IT services & support, including our core clinical systems; systems which provide patient facing services (such as our website and service accessible through the same); data hosting service providers; systems which facilitate appointment bookings or electronic prescription services; document management services etc.
  - Delivery services (for example if we were to arrange for delivery of any medicines to you).
  - Payment providers (if for example you were paying for a prescription or a service such as travel vaccinations).

  Further details regarding specific third party processors can be supplied on request.

Other important information about how your information is used to provide you with healthcare

Harbourside
Family Practice

Registering for NHS care

- All patients who receive NHS care are registered on a national database.
- This database holds your name, address, date of birth and NHS Number but it does not hold information about the care you receive.
- The database is held by NHS England a national organisation which has legal responsibilities to collect NHS data.
- More information can be found at: https://digital.nhs.uk/

Harbourside
Family Practice

Identifying patients who might be at risk of certain diseases

- Your medical records will be searched by a computer programme so that we can identify patients who might be at high risk from certain diseases such as heart disease or unplanned admissions to hospital.
- This means we can offer patients additional care or support as early as possible.
- This process will involve linking information from your GP record with information from other health or social care services you have used.
- Information which identifies you will only be seen by this practice.

Safeguarding

- Some members of society are recognised as needing protection, for example children and vulnerable adults. If a person is identified as being at risk from harm we are expected as professionals to do what we can to protect them. In addition we are bound by certain specific laws that exist to protect individuals. This is called "Safeguarding".
- Where there is a suspected or actual safeguarding issue we will share information that we hold with other relevant agencies whether or not the individual or their representative agrees.
- There are three laws that allow us to do this without relying on the individual or their representatives agreement (unconsented processing), these are:
- Section 47 of The Children Act 1989 : (https://www.legislation.gov.uk/ukpga/1989/41/section/47),
- Section 29 of Data Protection Act (prevention of crime) https://www.legislation.gov.uk/ukpga/1998/29/section/29
- And section 45 of the Care Act 2014 http://www.legislation.gov.uk/ukpga/2014/23/section/45/enacted.
- In addition there are circumstances when we will seek the agreement (consented processing) of the individual or their representative to share information with local child protection services, the relevant law being; section 17 Childrens Act 1989 https://www.legislation.gov.uk/ukpga/1989/41/section/17

Harbourside
Family Practice

How your information is used for medical research and to measure the quality of care

Medical research

Harbourside Family Practice shares information from medical records:

- to support medical research when the law allows us to do so, for example to learn more about why people get ill and what treatments might work best;
- we will also use your medical records to carry out research within the practice.

This is important because:

- the use of information from GP medical records is very useful in developing new treatments and medicines;
- medical researchers use information from medical records to help answer important questions about illnesses and disease so that improvements can be made to the care and treatment patients receive.

We share information with the following medical research organisations with your explicit consent or when the law allows: Clinical Practice Research Network and National Institute for Health Research

You have the right to object to your identifiable information being used or shared for medical research purposes. Please speak to the practice if you wish to object

Checking the quality of care - national clinical audits

Harbourside Family Practice contributes to national clinical audits so that healthcare can be checked and reviewed.

- Information from medical records can help doctors and other healthcare workers measure and check the quality of care which is provided to you.
- The results of the checks or audits can show where hospitals are doing well and where they need to improve.

- The results of the checks or audits are used to recommend improvements to patient care.
- Data are sent to NHS England, a national body with legal responsibilities to collect data.
- The data will include information about you, such as your NHS Number and date of birth and information about your health which is recorded in coded form - for example the code for diabetes or high blood pressure.
- We will only share your information for national clinical audits or checking purposes when the law allows.
- For more information about national clinical audits see the Healthcare Quality Improvements Partnership website: https://www.hqip.org.uk/ or phone 020 7997 7370.
- You have the right to object to your identifiable information being shared for national clinical audits. Please contact the practice if you wish to object.

Harbourside
Family Practice

How your information is shared so that this practice can meet legal requirements

The law requires Harbourside Family Practice to share information from your medical records in certain circumstances. Information is shared so that the NHS or Office for Health Improvement and Disparities can, for example:

- plan and manage services;
- check that the care being provided is safe;
- prevent infectious diseases from spreading.

We will share information with NHS England, the Care Quality Commission and local health protection team (or UK Health Security Agency (UKHSA)) when the law requires us to do so. Please see below for more information.

We must also share your information if a court of law orders us to do so.

NHS England

- NHS England is a national body which has legal responsibilities to collect information about health and social care services.

- It collects information from across the NHS in England and provides reports on how the NHS is performing. These reports help to plan and improve services to patients.

- This practice must comply with the law and will send data to NHS England, for example, when it is told to do so by the Secretary of State for Health or NHS England under the Health and Social Care Act 2012. Examples include; A/E and outpatient waiting times, the numbers of staff in the NHS, percentage target achievements, payments to GPs etc and more specific targeted data collections and reports such as the Female Genital Mutilation, general practice appointments data and English National Diabetes Audits.

- GPs are required by the Health and Social Care Act to provide NHS England with information when instructed. This is a legal obligation which overrides any patient wishes. These instructions are called 'Directions'. More information on the directions placed on GPs can be found at https://digital.nhs.uk/about-nhs-digital/corporate-information-and-documents/directions-and-data-provision-notices/secretary-of-state-directions and www.nhsdatasharing.info

- More information about NHS England and how it uses information can be found at: https://digital.nhs.uk/home

- NHS England sometimes shares names and addresses of patients suspected of committing immigration offences with the Home Office. More information on this can be found here: https://www.gov.uk/government/publications/information-requests-from-the-home-office-to-nhs-digital

Care Quality Commission (CQC)

- The CQC regulates health and social care services to ensure that safe care is provided.
- They inspect and produce reports on all English general practices in a rolling 5 year program. The law allows CQC to access identifiable patient data as well as requiring this practice to share certain types of data with them in certain circumstances.
- The law says that we must report certain serious events to the CQC, for example, when patient safety has been put at risk.
- For more information about the CQC see: http://www.cqc.org.uk/

Public Health

- Public Health encompasses everything from national smoking and alcohol policies; the management of epidemics such as flu; the control of large scale infections such as TB and Hepatitis B; to local outbreaks of food poisoning or Measles.
- The law requires us to share data for public health reasons, for example to prevent the spread of infectious diseases or other diseases which threaten the health of the population.
- We will report the relevant information to local health protection team or UK Health Security Agency (UKHSA).
- For more information about Office for Health Improvement and Disparities and disease reporting see: https://www.gov.uk/guidance/notifiable-diseases-and-causative-organisms-how- to-report

National screening programmes

- The NHS provides national screening programmes so that certain diseases can be detected at an early stage.
- These screening programmes include bowel cancer, breast cancer, cervical cancer, aortic aneurysms and a diabetic eye screening service.
- The law allows us to share your contact information with Office for Health Improvement and Disparities so that you can be invited to the relevant screening programme.
- More information can be found at: https://www.gov.uk/topic/population-screening-programmes.

Payments

Contract holding GPs in the UK receive payments from their respective governments on a tiered basis. Most of the income is derived from baseline capitation payments made according to the number of patients registered with the practice on quarterly payment days.

The amount paid per patient per quarter varies according to the age, sex and other demographic details for each patient. There are also graduated payments made according to the practice's achievement of certain agreed national quality targets known as the Quality and Outcomes Framework (QoF), for instance the proportion of diabetic patients who have had an annual review.

Practices can also receive payments for participating in agreed National or Local Enhanced Services, for instance opening early in the morning or late at night or at the weekends. Practices can also receive payments for certain national initiatives such as immunisation programs and practices may also receive income relating to a variety of non-patient related elements such as premises.

Finally there are short term initiatives and projects that practices can take part in. Practices or GPs may also receive income for participating in the education of medical students, junior doctors and GPs themselves as well as research[2].

In order to make patient based payments basic and relevant, necessary data about you needs to be sent to the various payment services. The release of this data is required by English laws[1].

1. NHS England's powers to commission health services under the NHS Act 2006 or to delegate such powers to CCGs and the GMS regulations 2004 (73)1

2. For more information about payments for English GPs please see; https://digital.nhs.uk/data-and-information/publications/statistical/nhs-payments-to-general-practice and http://www.nhshistory.net/gppay.pdf

Direct Care - Emergencies

- There are occasions when intervention is necessary in order to save or protect a patients life or to prevent them from serious immediate harm; for instance during a collapse or diabetic coma, or serious injury, or accident. In many of these circumstances the patient may be unconscious or too ill to communicate. In these circumstances we have an overriding duty to try to protect and treat the patient. If necessary we will share your information and possibly sensitive confidential information with other emergency healthcare services, the police or fire brigade, so that you can receive the best treatment.

- The law acknowledges this and provides supporting legal justifications.

- Individuals have the right to make pre-determined decisions about the type and extend of care they will receive should they fall ill in the future, these are known as 'Advance Directives'. If lodged in your records these will normally be honoured despite the observations in the first paragraph.

Comissioning, Planning, risk stratification, patient identification

- The records we keep enable us to plan for your care.

- This practice keeps data that we apply searches and algorithms to in order to identify preventive interventions.

This means using only the data we hold or in certain circumstances linking that data to data held **elsewhere** by other organisations, and usually processed by organisations within, or bound by contracts with, the NHS.

- If any processing of this data occurs outside the practice your identity will not be visible to the processors. Only this practice will be able to identify you and the results of any calculated factors, such as your risk of having a heart attack in the next 10 years or your risk of being admitted to hospital with a complication of chest disease

- You have the right to object to our processing your data in these circumstances and before any decision based upon that processing is made about you. Processing of this type is only lawfully allowed where it results in individuals being identified with their associated calculated risk. It is not lawful for this processing to be used for other ill defined purposes, such as 'health analytics'.

- Despite this we have an overriding responsibility to do what is in your best interests. For example, if we identify you as being at significant risk of having a heart attack or stroke, we are justified in performing that processing.

Heidi Health

Purpose: The practice uses 'Heidi' to process and transcribe clinical conversations, either between a clinician and patients or of a clinician dictating their clinical findings/management plan during, before or following patient consultations. The technology looks to capture relevant details such as different speakers, medical terminology and symptomatology.

Legal Basis:

Article 6(1)e "processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller"

Article 9(2)h "processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services"

At the time of publication of this Privacy Notice, Heidi Health does not routinely transfer personal information outside the United Kingdom.

Automated Patient Registration – Healthtech-1

Purpose: The aim of the Healthtech-1's service is to reduce the time practice staff spend on administration and improve the patient's experience of engaging with the practice.

For Healthtech-1 to complete an automated patient registration, the primary data source is from the patient who will manually enter their personal details using their digital device onto the website.

Additional special category data points are collected from the patient for the purpose of increasing quality of care for that patient at the relevant GP surgery.

Legal Basis:

Article 6(1)e - "processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller";

Article 9(2)h - "processing is necessary for the purposes of preventive or occupational medicine.

Processor: Healthtech-1

Elemental

Purpose:
Elemental will be integrated with Primary Care EMIS enabling GP's to easily make referrals to Social Prescribing Link Workers via the Elemental Platform.

Legal Basis:

1. **Article 6(1)e**
"processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller";

2. **Article 9(2)h**
"processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services"; and

Processor: ACCESS UK LTD

OpenSAFELY COVID-19 and Data Analytics Services

Purpose:
"NHS England has been directed by the government to establish and operate the OpenSAFELY COVID-19 Service and the OpenSAFELY Data Analytics Service. These services provide a secure environment that supports research, clinical audit, service evaluation and health surveillance for COVID-19 and other purposes.

Each GP practice remains the controller of its own GP patient data but is required to let approved users run queries on pseudonymised patient data. This means identifiers are removed and replaced with a pseudonym.

Only approved users are allowed to run these queries, and they will not be able to access information that directly or indirectly identifies individuals.

Legal Basis –
UK GDPR – Article 6 basis:
UK GDPR Article 6(1)(c) - processing is necessary for compliance with a legal

obligation to which the controller is subject (the Directions).
UK GDPR Article 9 basis:
UK GDPR Article 9(2)(g) - processing is necessary for reasons of substantial public interest, on the basis of domestic law which shall be proportionate to the aim pursued, respect the essence of the right to data protection and provide for suitable and specific measures to safeguard the fundamental rights and the interests of the data subject, by virtue of compliance with a direction supplemented by:

Patients who do not wish for their data to be used as part of this process can register a type 1 opt out with their GP.
Here you can find additional information about OpenSAFELY."

Processor:
NHS England
The Phoenix Partnership (TPP)
EMIS

MDT meetings - Chronic Kidney Disease

Purpose – For Chronic Kidney Disease the practice participates in meetings with staff from North Bristol NHS Trust (NBT) involved in providing care, to help plan the best way to provide care to patients with this condition. Personal data will be shared with NBT in order that mutual care packages can be decided.

Legal Basis –
Article 6(1)(e) '…necessary for the performance of a task carried out in the public interest or in the exercise of official authority…'; and
Article 9(2)(h) 'necessary for the purposes of preventative or occupational medicine'

Organisation – North Bristol NHS Trust (NBT)

Social Prescribing services

Purpose: General Practices will refer children and young people (around age 6 and up) for support with their mental health, wellbeing, and social needs. Referrals will be made through the Elemental system, including personal details, reason for referral, and confirmed consent in line with Elemental's data protection guidelines.

Legal Basis:

- Article 6(1)(e) '…necessary for the performance of a task carried out in the public interest or in the exercise of official authority…'; and
- Article 9(2)(h) 'necessary for the purposes of preventative or occupational medicine'

North Somerset Council to provide the Social Prescribing services.

Gordano Valley Primary Care Network (PCN)

Purpose: Data is shared to enable PCNs to provide a wider range of integrated health and social care services. This includes proactive care, managing long-term conditions, and providing extended access to appointments. The individual GP practice and the PCN are "data controllers," meaning they are responsible for how your information is handled. All staff, including those working for the PCN, are bound by confidentiality agreements.

Legal Basis:

- Article 6(1)(e) '…necessary for the performance of a task carried out in the public interest or in the exercise of official authority…'; and
- Article 9(2)(h) 'necessary for the purposes of preventative or occupational medicine'

Harbourside
Family Practice

Your Rights

Under UK data protection law, you have a number of rights in relation to your personal information.

Right of access
You have the right to request a copy of the personal information we hold about you, together with information about how we use it.

Right to rectification
If you believe any information we hold about you is inaccurate or incomplete, you have the right to ask us to correct or update it. We will consider your request in accordance with UK GDPR and NHS record-keeping requirements.

Right to restriction of processing
You have the right, in certain circumstances, to request that we temporarily restrict how we use your personal information whilst concerns about its accuracy or processing are resolved.

Right to object
You have the right to object to certain types of processing where the law allows. This includes, in some circumstances, processing carried out in the public interest or for direct marketing. We will consider any objection in accordance with UK GDPR and our legal obligations to provide healthcare.

Right to data portability
In limited circumstances, where processing is based on your consent or a contract and carried out by automated means, you may have the right to receive certain personal information in a structured, commonly used and machine-readable format.

Automated decision-making
Harbourside Family Practice does not make decisions about your care based solely on automated processing which produce legal or similarly significant effects. Clinical decisions are always made by appropriately qualified healthcare professionals.

Right to withdraw consent
Where we rely on your consent to process your personal information, you have the right to withdraw that consent at any time. This will not affect any processing carried out before consent was withdrawn.

Right to complain

If you have concerns about how we use your personal information, please contact the Practice in the first instance. You also have the right to complain to the Information Commissioner's Office (ICO). Details of how to contact the ICO are provided in this Privacy Notice.

Data Protection Complaints

If you have any concerns about how the Practice has collected, used, shared, stored, or otherwise processed your personal information, you have the right to raise a data protection complaint directly with the Practice.

Data protection complaints can be submitted to:
Contact: The Practice Manager
Email: harbourside.practicemanager@nhs.net
Telephone: 01275 868500
Postal Address: Harbourside Family Practice, 2 Haven View, Portishead, Bristol, BS20 7QA

The Practice will investigate your concerns and provide a response in accordance with its Data Protection Complaints Procedure.

You also have the right to raise your concerns with the Information Commissioner's Office (ICO), the UK's independent authority for data protection matters. Details of how to contact the ICO can be found at www.ico.org.uk.

We are required by law to provide you with the following information about how we handle your information in relation to our legal obligations to share data.

1**) Data Controller** contact details	Harbourside Family Practice, 2 Haven View, Portishead, BS20 7QA Telephone: 01275 868500 Website: https://www.harboursidefmp.nhs.uk/ Email: reception.harbourside@nhs.net ICO Registration Number: Z5294070
2) Data Protection Officer contact details	Email: gp-igenquiries.scwcsu@nhs.net

3) **Purpose** of the processing	The practice performs computerised searches of some or all of our records to identify individuals who may be at increased risk of certain conditions or diagnoses i.e. Diabetes, heart disease, risk of falling. Your records may be amongst those searched. This is often called 'risk stratification' or 'case finding'. These searches are sometimes carried out by Data Processors who link our records to other records that they access, such as hospital attendance records. The results of these searches and assessment may then be shared with other healthcare workers, such as specialist, therapists, technicians etc. The information that is shared is to enable the other healthcare workers to provide the most appropriate advice, investigations, treatments, therapies and or care to you.
4) **Lawful basis** for processing	The legal basis for this processing is *Article 6(1)(e); "necessary… in the exercise of official authority vested in the controller'* And *Article 9(2)(h) 'necessary for the purposes of preventative or occupational medicine for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services..."* We will recognise your rights under UK Law collectively known as the 'Common Law Duty of Confidentiality'*
5) **Recipient or categories of recipients** of the shared data	The data will be shared for processing with: • NHS England, • Bristol, North Somerset and South Gloucestershire ICB, • NHS Trusts, • Office for Health Improvement and Disparities, • Pharmacies, • Community providers, • Gordano Valley PCN, • Approved data processors, • Laboratories • Other Government direct or contracted organisations, • and for subsequent healthcare with Health and Care professionals and support staff in this surgery and at hospitals and diagnostic and treatment centres who contribute to your personal care.

6) **Rights to object**	You have the right to object to this processing where it might result in a decision being made about you. That right may be based either on implied consent under the Common Law of Confidentiality, Article 22 of GDPR or as a condition of a Section 251 approval under the HSCA. It can apply to some or all of the information being shared with the recipients. Your right to object is in relation to your personal circumstances. Contact the Data Controller or the practice.
7) **Right to access and correct**	You have the right to access the data that is being shared and have any inaccuracies corrected. There is no right to have accurate medical records deleted except when ordered by a Court of Law.
8**) Retention period**	Medical records are retained in accordance with the NHS Records Management Code of Practice 2021. GP medical records are normally retained for ten years after the patient's death. Other records are retained in accordance with the applicable NHS retention schedule. https://digital.nhs.uk/data-and-information/information-governance/guidance/records-management-code-of-practice#download-the-pdf-version
9) **Right to Complain**.	You have the right to complain to the Information Commissioner's Office, you can use this link https://ico.org.uk/global/contact-us/ or calling their helpline Tel: 0303 123 1113 (local rate) or 01625 545 745 (national rate) There are National Offices for Scotland, Northern Ireland and Wales, (see ICO website)

* 'Common Law Duty of Confidentiality', common law is not written out in one document like an Act of Parliament. It is a form of law based on previous court cases decided by judges; hence, it is also referred to as 'judge-made' or case law. The law is applied by reference to those previous cases, so common law is also said to be based on precedent.

The general position is that if information is given in circumstances where it is expected that a duty of confidence applies, that information cannot normally be disclosed without the information provider's consent.

In practice, this means that all patient information, whether held on paper, computer, visually or audio recorded, or held in the memory of the professional, must not normally be disclosed without the consent of the patient. It is irrelevant how old the patient is or what the state of their mental health is; the duty still applies.

Three circumstances making disclosure of confidential information lawful are:

- where the individual to whom the information relates has consented;
- where disclosure is in the public interest; and
- where there is a legal duty to do so, for example a court order.