

Freedom of Information Policy

Is this document a:

Policy Procedure Protocol Guideline

Title of PPPG	Freedom of Information Policy		
Development/Person/Team/Committee/Group:	Ms. Marianne Coady, Business Manager/Freedom of Information Officer (Information Officer)		
Approved by:	Ms. Susan Reid, Director of Finance		
Reference Number:	Gen053		
Version Number:	01		
Publication Date:	February 2025		
Date for revision:	February 2028		
Director of Service:	Ms. Susan Reid, Director of Finance Signature: <i>Susan Reid</i> Date: 20/02/25		
CEO:	Mrs. Tanya King, CEO Signature: <i>Tanya King</i> Date: 20/02/2025		
Version	Date Approved	List section numbers changed	Author
1	February 2025	New policy	Ms. Marianne Coady

Table of Contents	
--------------------------	--

	Page
1.0 Policy Statement	3
2.0 Purpose	3
3.0 Scope	3
4.0 Legislation/other related policies	3
5.0 Glossary of Terms and Definitions	3-4
6.0 Roles and Responsibilities	4-5
7.0 Policy Procedure	5-9
8.0 Revision and Audit	10
9.0 References	10
10.0 Appendices	10-13
Appendix I: FOI Request Form	
Appendix II: Policy Acknowledgement Form	

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

1.0 Policy Statement

- 1.1 The Freedom of Information Act 2014 (hereafter known as the FOI Act/the Act) repealed the previous Acts of 1997-2003, made several changes to the system and widened the range of bodies to which the legislation applies.
- 1.2 The primary purpose of the Act is to promote transparency and accountability in the public sector. The Act enables members of the public obtain access, to the greatest extent possible and consistent with the public interest and the right to privacy, to information in the possession of public bodies, and other bodies in receipt of funding from the State.
- 1.3 The Act also supports individuals in their right to have access to personal information relating to them and to have inaccurate information on file amended.

2.0 Purpose

- 2.1 The Freedom of Information Policy aims to provide an overview of the main points of the Act and outline the procedure for processing applications made under the Act.

3.0 Scope

- 3.1 Peamount Healthcare comes within the scope of the Act. The organization holds a varied range of records and information relating to its services, and associated individuals. Peamount Healthcare recognise our responsibility in relation to these records.

4.0 Legislation/other related policies

- Freedom of Information Acts 1997-2014
- FOI Amendment Act 2003
- Data Protection Acts 1988-2018
- General Data Protection Regulation 2018
- Data Protection Policy
- Data Subject Rights Policy
- Data Retention Policy GDPR
- Healthcare Records Policy
- Dignity at Work Policy
- Trust in Care Policy

5.0 Glossary of Terms and Definitions

5.1 Record

A record under the Act is:

- a) A book or other written or printed material in any form (including in any electronic device or in machine readable form),
- b) A map, plan or drawing,
- c) A disc, tape or other mechanical or electronic device in which data other than visual images are embodied so as to be capable, with or without the aid of some other mechanical or electronic equipment, of being reproduced from the disc, tape or other device,

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

<Freedom of Information>

- d) A film, disc, tape or other mechanical or electronic device in which visual images are embodied so as to be capable, with or without the aid of some other mechanical or electronic equipment, of being reproduced from the film, disc, tape or other device and
- e) A copy or part of anything which falls within paragraph (a), (b), (c) or (d), and a copy, in any form, of a record shall be deemed, for the purposes of this Act, to have been created at the same time as the record.

A record may be in any paper or electronic form (this includes emails, scanned documents etc.)

5.2 Personal Information

Personal Information is considered to be information about an identifiable individual which would ordinarily be known only to the individual, or their family or friends, or is held by a public body on the understanding that it would be treated as confidential. It may include information relating to:

- a) Education, medical, psychiatric or psychological history;
- b) Financial affairs of the individual;
- c) Employment, employment history;
- d) Personnel records;
- e) Criminal history;
- f) Religion, age, sexual orientation or marital status;
- g) Social Welfare entitlements;
- h) Assessment of liability to pay tax or duty to the State, Local Authority or HSE;
- i) Property of the individual;
- j) Name, symbol or code identifying and individual in public records containing personal information;
- k) Views or opinions of another person about the individual.

Personal Information regarding staff / person(s) providing a service under contract for services does not include:

- a) Name of Staff or Director;
- b) Information relating to office / position held;
- c) Terms of occupancy or position or terms of contract;
- d) Anything written or recorded by staff in the course of performing the functions of office or position.

This type of information on staff or management may be released by an organisation, subject to other exceptions.

6.0 Roles and Responsibilities

6.1 Chief Executive Officer

6.1.1 Approve the Freedom of Information Policy, procedures and its updates.

6.1.2 Review the operation of this policy as part of Peamount Healthcare's overall governance review and regular operational reviews.

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

6.2 Executive Management Team

6.2.1 Ensure that all managers and heads of department are aware of their responsibilities in the implementation of the Freedom of Information Policy and its procedures.

6.3 Line Managers

6.3.1 Inform the Information Officer of Freedom of Information requests received for processing by the Information Officer and relevant administration support, to complete searches for information and redactions as appropriate.

6.3.2 Ensure that all staff are aware of the freedom of Information policy and its procedures, how to access it, have read the policy and signed the acknowledgement sheet.

6.3.3 Ensure staff are aware that they must inform their line manager of all freedom of information requests received.

6.3.4 Ensure the appropriate training is made available to support staff to follow this policy.

6.4 All Employees

6.4.1 Read and understand the Freedom of Information Policy/Procedures and sign the policy acknowledgement sheet.

6.4.2 Inform their line manager, or a designated manager of freedom of information requests received.

6.4.3 Attend/complete relevant training.

6.6 Information Officer (Business Manager)

6.6.1 Update the freedom of information policy/procedures as required for approval by the Chief Executive.

6.6.2 Provide support to line managers and staff on the freedom of information policy and its procedures.

6.6.3 Prepare regular reports on freedom of information statistics for submission to the HSE and Executive Management Team.

7.0 Policy Procedure

7.1 Records that can be requested under the Act

a) All records created after 21st April 1998.

b) Earlier records necessary to the understanding of a current record even if created prior to 21st April 1998.

c) Personal records irrespective of when they were created.

d) Any official records held by public bodies may be sought under the Act. A record must exist in order to consider it for release. Exemptions may apply to certain records.

7.2 Record Keeping

The Act has implications for all staff in relation to the standards of report writing and record management within the organisation. When compiling reports, staff need to ensure the information is factual, only relevant and objective details are recorded, reports on Service Users must be individually recorded and all records are filed appropriately. Records must be accurate, legible, held in a secure manner and archived in accordance

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

with good practice and the Record Retention/Records Management Policy of the organisation.

7.3 Procedure for processing Freedom of Information Requests

7.3.1 All requests must:

- a) Be in writing and submitted to the Information Officer by letter or email. The information request form (Appendix 1) can be used but is not essential.
- b) Reference the FOI Act and specify the form of access required
- c) Contain sufficient particulars to enable the records sought to be identified, by taking reasonable steps. Any FOI requests submitted by any means to any person within the organisation must be referred to the Information Officer without delay.

7.3.2 If, in dealing with a normal administrative request for information, an administrator finds it inappropriate to continue, they will advise the requestor to make an application under the FOI Act. Similarly, if an FOI request can be dealt with outside the scope of the Act, consultation may take place to ascertain if the requestor is happy to deal with it in that fashion.

There is an onus on the service to be supportive and assist any persons making a request to identify what they are looking for and to ensure their request is valid.

7.3.3 If a requestor is seeking information which is personal, they will be required to supply sufficient identification as required under the act.

(Appropriate identifying documentation may include: a Birth Certificate, Passport, or current Driving License with photo.)

7.3.4 If a requestor is seeking to access records relating to a deceased person under Section 38 (8), they will be required to provide additional details in order to exercise these rights.

7.3.5 If a requestor is seeking to access records of a third party, written consent from the third party is required (where appropriate), and in the event of next of kin requests; evidence of guardianship/next of kin/authorisation.

If a request does not comply with the above criteria, it can be referred back to the requestor for further clarification. Once a request is confirmed as valid, the clock starts in regard to time constraints.

7.3.6 The Information Officer, on receipt of the request will assume responsibility for processing the request or delegate that to one of the nominated Decision Makers as required by the act. We are legally required to acknowledge the request within 10 working days and close the request providing access to relevant records if applicable within 20 working days. This timeline can be extended in situations whereby the service needs to consult with a third party and/or where there is a large number of records to review.

7.3.7 The Chief Executive Officer retains the role of Internal Reviewer.

7.4 Ownership of Records

Records are the property of Peamount Healthcare, should be kept under adequate security at all times and only removed from the service upon:

- a) A Court Order;

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

- b) A Subpoena;
- c) A Search Warrant;
- d) By the Information Commission / Data Protection Commission;
- e) By an officer authorised by the Minister for Health or;
- f) If authorised by the Chief Executive Officer.

Note: Original records are not provided in response to an FOI request. Photocopies or softcopy will be provided as necessary. Viewing of originals will be acceded to, if required. Requestors may hear/view audiovisual records or obtain a transcript of a tape or video recording.

7.5 The Role of the Decision Maker(s)

The Decision Maker(s) is responsible for the processing of the request to decision state. Decision Makers may act alone, in unison or form a panel. The Decision Maker(s) will:

- 7.5.1** Inform the relevant staff member, upon receipt of the request, so that the necessary file(s) can be retrieved.
- 7.5.2** Acknowledge the request within 10 working days of receipt; clarifying the expected decision date, outlining circumstances whereby the decision date may be extended, informing the requestor of their rights in terms of any appeal and determining any applicable charges as permissible by the Act.
- 7.5.3** Examine the file(s) for any issues which may invoke applicable exemption(s).
- 7.5.4** Apply exemption criteria to any record or part thereof, and engage in consultations as necessary
- 7.5.5** Inform the requestor of the decision within 20 working days of receipt of the request or inform the requestor of the decision to extend the period (up to a further 20 working days) if justified under the Act.
- 7.5.6** Compile a schedule of records examined, numbering each and indicating those to be released and those to be refused.

7.6 Reasons for refusing to grant access

There are a number of reasons whereby access can be refused or deferred. These can be grouped into categories:

7.6.1 Administrative Grounds

The record(s) is of a type not covered by the Act, e.g. Courts and Tribunals, or contains judicial records.

The request is not in the specified format, does not state FOI Act, or specify the record(s) requested. The record does not exist or cannot be found after all reasonable steps to ascertain its whereabouts have been taken.

The FOI body intends to publish the records within 6 weeks of the request.

7.6.2 Exemptions under the FOI Act (Part 4)

These exemptions are designed to protect the right to privacy and the public interest. They include; Legal & Professional Privilege, Law Enforcement & Public Safety, Commercially Sensitive Information, Personal Information and Information Obtained in Confidence.

7.6.3 Input from Health Professionals

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

Upon receipt of a request for access to health records, it is regarded as good practice that the application is discussed with the relevant health professional(s). The records may contain information which in the opinion of the service provider could have a detrimental effect on the physical, mental health, well-being or emotional condition of the requestor. Access to the information sought may best be dealt with initially outside the scope of the FOI Act (via the individual and treating professional)

NB. A person who is materially affected by a decision of Peamount Healthcare may seek under Section 10 of the Act, a statement of the reasons for the decision and any findings made for the purpose of reaching the decision.

7.7 Right of Appeal

In the event of a refusal, the requestor has the right of appeal.

7.7.1 An appeal is made in the first instance to the Internal Reviewer (Chief Executive Officer). The Internal Reviewer will have had no part in the processing of the request up to the point of appeal.

7.7.2 In the event the Internal Reviewer also refuses the request for information, the details of the next stage of the appeals system is set out in the correspondence informing the requestor of that decision.

7.7.3 If the requestor is dissatisfied with the decision s/he may appeal at this stage to the Information Commission under Section 22 of the Act, within 6 months of the date of notification for Peamount Healthcare.

7.8 Fees

Fees may be levied in accordance with the Act, appropriate to the cost of the search, retrieval and provision of the requested information. There is no applicable charge for the request is for personal information, subject to volume. Further detail on fees is available from the Information Commissioner.

7.9 Publications

FOI bodies are required to produce publications in accordance with Section 8 of the Act. These are known as Model Publication Schemes and must be adopted by all FOI bodies, to make information available as part of their normal business activities. Under the Scheme, each FOI body shall:

Set out information to assist members of the public understand the body and its functions. Publish the information it holds under specific headings.

Explain the procedure to get access to information or to establish what information the body holds.

7.10 Access to Information without the Act

7.10.1 Administrative Access:

Many requests can be managed without resorting to the Freedom of Information Act. A non-FOI request can be made in writing to the Information Officer of the organisation. If the information required cannot be released routinely, the requester will be advised accordingly.

7.10.2 Subject Access Request:

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

<Freedom of Information>

Requests for personal information relating to yourself can be made under the General Data Protection Regulation. The Information Officer can provide further advice.

7.10.3 Information made available through publications:

The service makes information routinely available via The Model Publication Scheme, Annual Reports and various information leaflets.

7.11 Training

The organisation ensures that those charged with operating the Act are properly equipped to do so. Training and conferences are facilitated by the FOI Central Policy Unit and Peamount Healthcare is represented on the NFVSP FOI Network by the Information Officer.

7.12 FOI Contact Details

For further enquiries on Freedom of Information please contact:

Marianne Coady, Information Officer
Peamount Healthcare., Peamount Road, Newcastle, Co. Dublin, D22 Y008.
Telephone: 01-6010308
Email: mcoady@peamount.ie/ foi@peamount.ie
Website: www.peamount.ie

Decision Makers

Marianne Coady, Information Officer
Peamount Healthcare., Peamount Road, Newcastle, Co. Dublin, D22 Y008.
Telephone: 01-6010308
Email: mcoady@peamount.ie/ foi@peamount.ie

Vivienne Nolan, CEO Office
Peamount Healthcare., Peamount Road, Newcastle, Co. Dublin, D22 Y008.
Telephone: 01-6010347
Email: vnolan@peamount.ie/ foi@peamount.ie

FOI Internal Reviewer (Internal Appeal)

Mrs. Tanya King, Chief Executive Officer
Peamount Healthcare., Peamount Road, Newcastle, Co. Dublin, D22 Y008.
Telephone: 01-6010347
Email: tking@peamount.ie

Information Commissioner (External Appeal)

Mr. Ger Deering, Information Commissioner
Office of the Information Commissioner, 6 Earlsfort Terrace, St. Kevin's, Dublin 2, DO2 W773
Telephone: 01-6395689
Email: info@oic.gov.ie

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

8.0 Revision and Audits

- 8.1 The Freedom of Information policy will be kept under review by the Information Officer and the Senior Management Team will approve any amendments as required.
- 8.2 All Heads of Department will monitor the implementation of this policy.
- 8.3 This policy will be reviewed and audited every 3 years.

9.0 References

- 9.1 Code of Practice for Freedom of Information for Public Bodies, September 2015
- 9.2 <https://foi.gov.ie> Freedom of Information Website maintained by the Freedom of Information Central Policy Unit in the [Department of Public Expenditure & Reform](#)

10.0 Appendices

PPPG Title: <policy>	PPPG Reference No:	Version No:	Approval Date:	Revision Date:
Freedom of Information	Gen053	01	February 2025	February 2028

Appendix I: Freedom of Information Request Form

Application Ref No:

**Peamount Healthcare
REQUEST FOR ACCESS TO RECORDS
Freedom of Information Act, 2014**

1. Details of Requester (PLEASE USE BLOCK CAPITALS)

Surname:	Maiden Name:	First Name(s):
Address:		
Date of Birth:		
Telephone number:	E-mail:	

2. Personal Information (If request is for non-personal information, go to 3. below)

(a) Before you are given access to your personal information, you will need to provide proof of your identity. **A copy of the identifying document accompanies this Form:** [] Yes [] No (*tick one*)

(b) If you are requesting personal information in respect of another person, the consent of that person is also required. **A copy of this consent accompanies this Form:** [] Yes [] No (*tick one*)

3. My preferred Form of Access is: (please tick one)

(a) To receive photocopies by post [] (b) To inspect the original record []

(c) To receive 'soft' or electronic copies []

4. Signature & Date

Signed: _____ Date: _____

5. For Office Use Only

Date Received		Signed:
Date Acknowledged		Signed:
Identity Confirmed	[] Yes [] No	Signed:
Consent Verified	[] Yes [] No	Signed:
Access Granted	[] Yes [] No [] Partial	Date Signed:

