

PCN Wording for a Privacy Notice

Primary Care Network

We are a member of [X] Primary Care Network (PCN). This means we will be working closely with a number of other Practices and health and care organisations to provide healthcare services to you.

During the course of our work we may share your information with these Practices and health care organisations/professionals. We will only share this information where it relates to your direct healthcare needs.

When we do this, we will always ensure that appropriate agreements are in place to protect your information and keep it safe and secure. This is also what the Law requires us to do.

If you would like to see the information the PCN holds about you please contact the [Data Protection Officer] at [X]. See also your rights as a patient listed below.