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Cardiff and Vale
University Health Board

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FREEDOM OF INFORMATION ACT 2000 AND ENVIRONMENTAL INFORMATION REGULATIONS 2004 PROCEDURE

Introduction and Aim

The Freedom of Information Act 2000, (Fol) and Environmental Information Regulations 2004 (EIR) are part of the Government's commitment to greater openness in the public sector. They give rights to the public to scrutinise the decisions of public authorities more closely and also provide a legal right for individuals to request information held by public authorities.

This procedure supports the Freedom of information Act Policy which falls within the scope of the UHB's overarching Information Governance Framework.

The procedure will ensure that the UHB fully complies with the legislative requirements of the Fol thereby mitigating any potential risks resulting out of non compliance enforcement notices from the Information Commissioner. This procedure will also demonstrate that the UHB operates in an open and transparent manner thereby enhancing the reputation of the organisation.

Objectives

In accordance with Fol this procedure will ensure that:

- All staff will be able to recognise requests and will know where they need to be sent for processing
- Staff responsible for managing and processing requests follow agreed and approved processes ensuring full compliance with Fol
- Requests are processed within the legislative timeframe
- Appropriate and relevant information will be released in accordance with Fol requirements
- Advice and assistance will be provided where appropriate and necessary
- Complaints about any aspect of the UHB's compliance with Fol are dealt with promptly and impartially
- Interests of third parties who may be affected by any disclosure of information are respected.

Scope

This procedure applies to all of our staff in all locations including those with honorary contracts

Equality Impact Assessment

An Equality Impact Assessment (EqIA) has been completed for the associated policy and this found there to be a positive impact. Key actions have been identified and these have been

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	2 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

	incorporated within the Procedure developed in support of the policy.
Documents to read alongside this Procedure	<ul style="list-style-type: none"> • Freedom of Information Act 2000 • Data Protection Act 2018 • Environmental Information Regulations 2004 • Re-Use of Public Sector Information Regulations 2005 • WHC (2000)71 – For the Record: Managing Records in NHS Trusts and Health Authorities • Freedom of Information Code of Practice Issued under section 45 of the Act (July 2018), the CoP sets out good practice in handling requests for information. It will be necessary to comply with the CoP to fulfil the duty set out in Section 16 of the Act. • Lord Chancellor’s Code of Practice on the Management of Records under section 46 of the Freedom of Information Act 2000 (July 2009) Part I sets out good practice in records management and applies to all FOI authorities and other bodies subject to the Public Records Act 1958 or the Public Records Act (Northern Ireland) 1923. • Data Protection Act Policy (to be removed) • Information Governance Policy • UHB Scheme of Delegation • Records Management Policy • Records Retention and Destruction Procedures
Approved by	Digital Health Intelligence Committee
Accountable Executive or Clinical Board Director	Medical Director
Author(s)	Information Governance Manager
Disclaimer	
<p>If the review date of this document has passed please ensure that the version you are using is the most up to date either by contacting the document author or the Governance Directorate.</p>	

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	3 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

Summary of reviews/amendments			
Version Number	Date of Review Approved	Date Published	Summary of Amendments
1	26/02/2105	13/04/2015	New document developed to supersede policy of predecessor organisations reference T151.
2	03/12/2019	13/01/2020	Updated

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	4 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

Contents Page

1	Background	5
2	Legal obligations	6
3	Review of requests	8
4	Complaints process	8
5	Conditions and exemptions	8
6	Public Sector Contracts	9
7	Consultation with Third Parties	9
8	Accepting Information in Confidence from Third Parties	10
9	Charges and Fees	10
10	Legal Advice	10
11	Responsibilities	10

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	5 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

1. Background

The Freedom of Information Act 2000 (Fol) and Environmental Information Regulations 2004 (EIR) are part of the Government's commitment to greater openness in the public sector. They give rights to the public to scrutinise the decisions of public authorities more closely and also provide a legal right for individuals to request information held by public authorities.

Subject to specified exemptions and certain conditions contained in the Fol, Section 1 of the Act gives a general right of access to recorded information held. Any person making a request in writing in accordance with the requirements of the Act has the right to:

- a) Be informed in writing whether we hold the information of the description as specified in the request (this is referred to as the "duty to confirm or deny"); and
- b) Have it communicated to them, if it is held

There is no requirement for applicants to specify that a request for information is being made in accordance with the provisions of the Fol or EIR. However, the provisions of this legislation will apply to all requests that are submitted to Cardiff and Vale University Health Board (the UHB) seeking information.

The aim of this procedure is to ensure that the provisions of the Fol, EIR and the associated Re-use of Public Sector Information (PSI) Directive are adhered to.

The UHB supports the principle that openness should be the norm in public life and it will help and inform the public in relation to individuals' statutory rights to know about the organisation by ensuring that we routinely publish appropriate information. The administrative processes outlined in this procedure will not obstruct any existing current processes of providing help and information to the public whether that is provided orally, or via information available within our [Publication Scheme](#).

The UHB accepts that individuals also have certain rights to privacy and confidentiality. The Fol clearly explains and defines the interface between the Freedom of Information Act 2000 and the General Data Protection Regulation (GDPR) and Data Protection Act 2018 (the DPA). This Procedure does not overturn the common law duty of confidence or statutory provisions (including the Human Rights Act 1998 and the Data Protection Act 2018) that prevent disclosure of personal identifiable information. The right to release personal identifiable information is covered by the subject access provisions of the GDPR and DPA and is dealt with in relevant UHB policies.

This procedure should not be read in isolation and consideration should be given to the Secretary of State's Code of Practice under Sections 45

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	6 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

and 46 on the practice to be followed in “Handling Requests for Information” and “Management of Records” respectively. The UHB further recognises that although these Codes are not legally binding, failure to comply with them may lead to a failure to comply with the Act

2. LEGAL OBLIGATIONS

The UHB will:

- **Adopt and Maintain a Publication Scheme as required**

The UHB will routinely publish information held in a [Publication Scheme](#) as required. The scheme will fully detail all the information it will make routinely available to the public and indicate what information will be available on request. The UHB will ensure that the scheme is populated, maintained and regularly updated. The maintenance of an up-to-date and easy to understand Publication Scheme is an essential part of the UHB’s commitment to openness. The more information published routinely the fewer formal requests will be received. Furthermore, when information can be made available under the Publication Scheme, then the administrative process necessary under the Freedom of Information Act rights of access are avoided, as published information qualifies for an exemption. The [Publication Scheme](#) will be available via the UHB web site.

- **Provide a General Right of Access to Recorded Information**

The Act states that all requests submitted to the University Health Board must be in a written format (this includes e-mail) and must detail:

- The name of the individual requesting the information
- An address for correspondence (postal or electronic)
- A description or details of the information requested

- **Provide Advice and Assistance to Requestors**

When a verbal request for information under Fol is made, the requestor must be asked to put their request in writing. If the requestor is unable to do this for any reason which includes some form of disability, they should be referred to the Information Governance Team who will provide advice and assistance in accordance with the requirements of the Act to ensure that all reasonable adjustments are made.

The only exception to this requirement relates to requests for information which will be eligible to be issued under EIR, such requests do not have the same requirement to be submitted in writing. Requests for information that would be covered within the confines of EIR can be made in writing, by e-mail, verbally over the telephone or by other means of communication for example such as by sign language.

When a request for environmental information is received by the UHB it will be handled in accordance with the requirements of the EIR and not the Fol.

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	7 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

There is no requirement to specify or provide a reason or purpose for requesting information. However, the UHB maintains a right to request further details and information about the information that is required in order to narrow down what might otherwise be a vague or broad request.

Requestors are entitled to request information, and receive a response, in the language of their choice and the UHB is committed to ensuring it corresponds in the preferred language wherever possible.

Fol is fully retrospective and will apply to all information held by Cardiff and Vale UHB at the time the request is made and also to information pertaining to all the previous organisations that fall under its authority following re-organisations. The importance of effective systems of records management within the UHB cannot be emphasised or stressed strongly enough and all staff must ensure that information is maintained and destroyed in line with the [Records Management Policy](#), [Retention and Destruction Protocol](#) and also guidance as contained in WHC (2000) 71 "For the Record: Managing Records in NHS Trusts and Health Authorities".

The provision of advice and assistance to members of the public about every aspect of the health services which the UHB provides is part of the day to day business process of the UHB. A key element of the procedure is that the release of information does not become cumbersome, time consuming or resource intensive. It is therefore expected that written requests for information which are part of our day to day business will continue to be handled in the normal way. The UHB will offer advice and assistance to any person wishing to make a request for information. We are committed to completing information requests within the statutory time scale of 20 working days and sooner wherever possible. In certain circumstances this time scale may be extended. Repeated or vexatious requests for information will be refused. The UHB will maintain its commitment to openness, scrutiny and the public interest while claiming exemptions where appropriate. Whilst the Act contains provision for the UHB to make charges when responding to requests, in the spirit of openness the UHB intends to provide as much information as possible free of charge. However, if a request is particularly complex or voluminous, or has a commercial implication, the UHB may request a fee in accordance with the [fees regulations as set out by the Secretary of State](#).

- The UHB will have in place an appropriate procedure for balancing the public interest when considering an exemption which requires such a test.
- Any request in writing for recorded information will be considered a Freedom of Information request. There is no need for requests to indicate they are made under the Act
- The UHB may refuse requests where the cost of supply of the information would exceed the appropriate limit in accordance with the

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	8 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

Fol and Data Protection (Appropriate Limit and Fees) Regulations 2004. This limit is currently £ 450.

- Where clarification is required or fees applicable, before providing the information, requesters will be informed in writing. The requester will be given two months to provide the clarification or fee and this will be communicated to the requester. If clarification or fees are not provided within this time the request will be closed and filed.
- Where we do not hold the information being requested but another organisation does, we will advise the requester to contact that other organisation. Wherever possible we will provide up to date contact details for that organisation.
- Where the information being requested is held by us but was created by a third party, we will make every reasonable effort to contact that third party and consult with them regarding the disclosure.

A Standard Operating Procedure (SOP) outlining the processing of requests is attached as attachment 1 and attachment 2 provides a flowchart for the process.

3. REVIEW OF REQUESTS

Where a requester appeals against a decision and requests a review of the response to their request, a review will be undertaken by the Head of Corporate Governance. The request for a review will be acknowledged within five working days of receipt and the UHB will aim to provide a full response within 20 working days beginning the day following receipt, in accordance with guidance from the Information Commissioner's Office. Following this further review, if there is no satisfactory conclusion and the requester remains dissatisfied, the matter can then be referred to the [Office of the Information Commissioner](#) who will act as an arbitrator in reviewing individual cases.

The UHB will accept a request for review in relation to an information request no more than six months after the date the response was originally sent. In the case of the EIR, a request for a further review must be made within 40 working days of receiving the initial response (i.e. on becoming aware of their dissatisfaction with it).

4. COMPLAINTS PROCESS

Although complaints about the UHB's alleged failure under Fol and EiR are exempt from the [NHS Wales Concerns Complaints and Redress Arrangements](#), complaints will be formally investigated by the UHB. The complaint will be acknowledged with the outcome of the investigation being formally documented and the complainant being notified of the outcome within 20 working days from the date of receipt of the complaint.

Complaints about the handling of a request for information will be addressed to Head of Information Governance and Assurance or the SIRO. The request for a review will be acknowledged within five working days of receipt and the

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	9 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

UHB will aim to provide a full response within 20 working days beginning the day following receipt, in accordance with guidance from the Information Commissioner's Office.

5. CONDITIONS AND EXEMPTIONS

Fol contains 25 exemptions to the right of access. The exemptions listed in part 2 of the Act set the boundaries to the rights of access: if information is exempt then individuals do not have a right of access to it under the Act. The exemptions ensure a proper balance is achieved between the right to know, the right to personal privacy and the delivery of effective governance.

In determining whether an exemption may apply, the UHB will ensure that it will provide any and all other information which is eligible for disclosure. The UHB procedures provide for the redaction of any material which cannot be disclosed when it appears within the content of an otherwise disclosable document.

It is a requirement of the Fol that requests are time limited for responses to be issued. The Act stipulates that all requests must be completed and responded to within 20 working days from the date of receiving the request within the organisation. Where the UHB applies a conditional postponement, or exercises an exemption to withhold the information, the applicant must again be notified of this and informed within the required 20 working days deadline. It is good practise to inform applicants of any decision as soon as this detail is known, as opposed to waiting for the 20 day deadline, and where ever possible this good practice will be implemented.

Fol details two categories of exemption, absolute and non-absolute. An absolute exemption means that the UHB does not need to confirm or deny that it holds the requested information. A non-absolute exemption means that the UHB has to consider the public interest test prior to making a decision. The UHB is committed to using these exemptions responsibly.

If the UHB decides to refuse a request for information under any of the exemptions, the applicant will be informed of the reasons for this decision as soon as possible as best practice dictates and at the very latest within the 20 working days deadline. As set out in section 17(7) of the Freedom of Information Act 2000, all applicants will also be informed of the standard UHB set procedures for making a complaint about the discharge of its duties under the Fol and of the right to complain to the Information Commissioner.

6. PUBLIC SECTOR CONTRACTS

The UHB procurement processes will be compliant with any applicable EC procurement regulations and also with the Fol. This Procedure should be read in conjunction with the UHB Procurement Policy. Partnership agencies and commercial suppliers of goods and services should be made aware of the

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	10 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

obligations under the FoI and under the Section 45 Code. In deciding whether any information may be exempt from disclosure because it may:

- Involve a breach of confidentiality imposed by a third party, or
- Breach a trade secret, or
- Prejudice the commercial interests of any party,

the UHB will take into account current guidance issued by the office of the Information Commissioner or the Department of Constitutional Affairs.

7. CONSULTATION WITH THIRD PARTIES

It is recognised that in some cases the decision to disclose information to an applicant may affect the legal rights of a third party, for example where information is subject to the common law duty of confidence or where it constitutes “personal data” within the meaning of the Data Protection Act 2018. Unless an exemption provided for in the FoI applies in relation to any particular information, the UHB will be obliged to disclose that information in response to a request.

8. ACCEPTING INFORMATION IN CONFIDENCE FROM THIRD PARTIES

Cardiff and Vale University Health Board

- will only accept information from third parties in confidence if it is necessary to obtain that information in connection with the exercise of any of the authority’s functions and it would not be otherwise provided.
- will not agree to hold information received from third parties “in confidence” which is not confidential in nature. Acceptance of any confidentiality provisions must be for good reasons, and capable of being justified to the Information Commissioner.

Internal University Health Board documents/correspondence cannot be classed as ‘in confidence’ for the purposes of FoI. Prior to the release of any documents or correspondence they will be reviewed and, where necessary, redaction will be undertaken in line with FoI principles.

9. CHARGES AND FEES

Generally, the UHB will not charge for information that it has chosen to publish within the Publication Scheme as contained within the web site. However, charges may be levied for hard copies, multiple copies or copying onto media such as CD-ROM. The [Publication Scheme](#) will provide further information and guidance on charges.

The UHB will follow the statutory Fees Regulations for general rights of access made under the FoIA. In all cases where there is a choice made to charge for information published through the Publication Scheme or levy a fee

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	11 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

arising from an information request under general rights of access, a fees notice will be issued to the applicant as required by section 9 of the FoIA. Applicants will be required to pay any fees within a period of three months beginning with the day on which the fees notice is given to them.

10. LEGAL ADVICE

Occasions will arise when there is a need for legal advice to be sought, and this process will be co-ordinated through the Board Secretary.

11. RESPONSIBILITIES

Chief Executive

The Chief Executive (CE) must ensure that the University Health Board complies with its statutory obligations under the FoIA, EIR and PSI. The CE is ultimately responsible for all processes and procedures put in place to continue to support the provisions of these pieces of legislation.

Medical Director – (Caldicott Guardian)

The Medical Director has responsibility for Information Governance within the UHB and will be the champion for FOI and EIR. The Medical Director will undertake board level responsibility for the FoI and EIR and Personal Sector Information. The Medical Director will ensure that there are effective arrangements in place within the UHB to ensure compliance with the provisions of the legislation and will ensure regular reports are produced, and an Annual Report, to provide assurance to the Board that compliance is met.

Senior Information Risk Owner (SIRO)

The SIRO will ensure that any complaints received in relation to the handling of FoI requests are fully investigated and requesters notified of the outcome of the investigation.

Head of Information Governance and Assurance

Will oversee the management of the Information Governance Team in respect of all related legislation.

Information Governance Manager

Information Governance Manager will be the lead for the UHB. This manager will be accountable for the administration of this procedure and will ensure that all the processes required to co-ordinate the work needed to adhere to the legislation are completed. The manager will ensure that all FoI, EIR and PSI matters are co-ordinated centrally and will have operational responsibility for implementing these procedures and for monitoring and reviewing its effectiveness.

Section 16 of the Act imposes a duty to provide advice and assistance to applicants and would-be applicants. The UHB will do this taking into account other statutory duties, e.g. the Disability Discrimination Act 1995. The

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	12 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

Information Governance Manager will co-ordinate the effective discharge of this duty.

Executive Functions

Executive Directors will ensure that requests received which are relevant for their areas will be delegated for processing by their most appropriate relevant deputy, assistant or other responsible individual as decided by them.

Executive Directors will authorise issue of completed responses in accordance with the Scheme of Delegation or in accordance with their individual internal delegation arrangements.

Clinical Boards Heads of Operations and Delivery (HoDs), Clinical Board Directors (CBDs) and Directorate Managers (DMs)

All HoDs, and CBDs and DMs will ensure that the requirements of this procedure are met within their own Clinical Board (CB) area. The DMs will arrange for information to be collated and provided to the Corporate Governance Senior Information and Communication Manager within 10 working days. If responses are not provided, requests will be escalated to the HoDs and CBDs. Draft responses will be submitted for approval to HoDs and CBDs for their authorisation and approval for issue in accordance with the UHB Scheme of Delegation. Reports on compliance with the 20 day time limit will be provided to CBs for information and action.

Staff

All staff have a responsibility to ensure they process information in accordance with the FoIA, PSI and EIR and the policies, standards, procedures and guidance agreed by Cardiff and Vale UHB. All UHB staff must be made aware of the implications of this procedure and their obligations to adhere to it.

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	13 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

Attachment 1

Standard Operating Procedure Freedom of information Act Processing

Stage 1 – Receipt of request

- 1.1 Requests received via e-mail or post
- 1.2 If request received via non central source it must be forwarded immediately to the Information Governance Team
- 1.3 Requests received in headquarters must be scanned and e-mailed to the generic FOI e-mail address
- 1.4 Requests will be logged by the IG team
- 1.5
 - i) If a request is sufficiently clear and does not require further clarification for processing, the request will be acknowledged.
 - ii) If clarification is required, the request will be acknowledged and the additional information will be asked for advising that the request will not be processed fully until the required clarification is received.
- 1.6 All requests from MP's, AM's, elected members and Trade Unions will be logged and acknowledged as normal.
- 1.7 All requests from the media will be advised to the communications team

Stage 2 – Accessing Information

- 2.1 The Fol lead in Information Governance Team will send details of the request to the relevant Clinical Board lead asking for a response to be provided within 2 weeks.
- 2.2 The department responsible must provide information within the two weeks deadline or advise the Fol lead of any delays or issues immediately.
- 2.3 If any concerns regarding the release of any of the requested information should arise, these must be discussed with the Fol lead in the Information Governance team.

Stage 3 – Providing information

- 3.1 Once the approved response is returned to the Fol lead, the word document will be saved in PDF format (protected) for issue.
- 3.2 If no fees or charges are payable or outstanding, or if no exemptions or exceptions are applicable, the Fol lead will provide the response to the requestor promptly within 20 working days.
- 3.3 Information will be provided to the requestor in a permanent form as acceptable to the applicant or through the provision of a reasonable opportunity to inspect a record containing the information or the provision of a summary of the information in permanent form as acceptable to the applicant.

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	14 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

- 3.4 The FoI lead will consider all circumstances of the request for communication of information by a particular means, including the cost of doing so. If it is determined that it is not reasonably practicable to comply with the preference of the requestor in their request they will be notified of the reason for this determination and the information will then be provided by such means deemed reasonable. The UHB will have regard for other statutory obligations placed upon it such as those established under the Disability Discrimination Act 1995 together with the UHB's duty of Provision of Advice and Assistance requirements under the FoI.
- 3.5 The database will be updated to reflect the date information provided and compliance with the time limits within the Act
- 3.6 If the request is of media interest, a copy of the response will be issued to the communications team.
- 3.7 If an exemption or exception is identified as valid, the refusal notice must be issued detailing the relevant exemptions under the Act.

Stage 4 – Disclosure Log

- 4.1 The Information Governance Team will update the disclosure Log on the UHB Internet site on a regular basis, at the very least monthly, providing a copy of all requests issued or indicating any refused requests with the reasons for refusal.

Document Title: Insert document title: Freedom of Information Act 2000 and Environmental Information Regulations 2004 Procedure	15 of 15	Approval Date: 03 Dec 2019
Reference Number: UHB 255		Next Review Date: 03 Dec 2022
Version Number: 2		Date of Publication: 13 Jan 2020

Attachment 2

FLOWCHART TO PROCESS REQUESTS UNDER FREEDOM OF INFORMATION & ENVIRONMENTAL INFORMATION REGULATIONS

