

Reference: FOI.ICB-2627/015

Subject: Liothyronine Audit (2021): Purpose and Scope of Review, Personal Data, National Guidance and Feedback

I can confirm that the ICB does hold some of the information requested; please see responses below:

QUESTION	RESPONSE
<p>Thank you for your previous response. I would be grateful for a little further clarification so I can better understand the response and the review process.</p> <p>FOI.ICB-2526/447: Liothyronine Audit (2021)</p>	
<p>1. If there is a document (for example a briefing document, email, committee paper or minutes) that sets out the purpose or scope of the review, I would be grateful if you could share it, as it would help me understand the context more clearly.</p>	<p>The ICB does not hold a recorded document, such as a briefing paper, email (except that already shared), committee paper or minutes, that formally sets out the purpose or scope of the review.</p>
<p>2. You mentioned in the FOI response that the information used in the review was not considered personal data. Please could you explain how that assessment was made?</p>	<p>The data used in the review did not enable the ICB to identify any individuals. The ICB has no reasonable means of re-identification, and therefore the information was assessed as anonymised data rather than personal data.</p>
<p>3. So I have understood your response correctly, did the information listed at section 3.2 of the FOI response form the national guidance referred to in section 3.1? Based on the response, am I correct that this would be indirect care and a commissioning activity?</p>	<p>The information listed did not form the national guidance. This was not part of a commissioning activity.</p>
<p>4. Please could you confirm if there was an assessment made on the need for patient-level information for the review set out at 3.1, rather than aggregated or anonymised prescribing data?</p>	<p>The information requested for the review was adequate, relevant and limited to what was necessary, in line with data protection legislation and the data minimisation principle.</p>

	<p>The information provided to the ICB did not enable the identification of individuals, either directly or indirectly. The ICB does not hold, and did not request, additional information that would reasonably allow re-identification of individuals.</p> <p>Personal data was not necessary or needed for the review. Aggregated data would not be sufficient for the purposes of the safety/quality review as there was a requirement to check if a review had taken place.</p>
<p>5. Finally, FOI section 3.1 states that the work was <i>“to review the prescribing of the liothyronine medication to ascertain if this was prescribed in line with national guidance to support patient safety and quality of prescribing. It also helps to understand whether patient reviews and appropriate monitoring was happening.”</i></p> <p>Please could you outline how the information was used — for example, how the review was reported internally, who the information was shared with (roles or groups), how those who received the data used it, and any decisions, feedback or actions resulting from the review? If there is a document (other than at point 1 above) that would help explain this, I would be grateful if you could share it.</p>	<p>The ICB does not hold any recorded information other than that already described.</p> <p>No further records are held detailing outcomes, feedback, decision-making, or subsequent actions resulting from the review.</p>

The information provided in this response is accurate as of 21 April 2026 and has been approved for release by Dr Ananthakrishnan Raghuram, Chief Clinical Leadership and Delivery Officer for NHS Bristol, North Somerset and South Gloucestershire ICB.