



DATA PROTECTION NOTICE

ERCEA Unit D.2 – “Human Resources”

Processing Health Data and Administrative Information linked to Health

This notice concerns the processing operation called "**Processing Health Data and Administrative Information linked to Health**". This applies for Contract Agent 3(a) and Temporary Agent 2(a) and 2(f). This processing requires the handling of personal data and is therefore subject to Regulation (EU) 2018/1725 (Data Protection Regulation)¹.

1. What personal information do we collect, from where and for what purpose?

1.a) Personal data

The ERCEA collects and processes the following types of personal data during this processing operation:

- **Identification data and data on telephone number and communications:**
 - First name, surname, personnel number, administrative address, private address (permanent or temporary), private phone number, private e-mail address, date and place of birth, gender, nationality.
- **Data concerning the data subject’s career and information concerning recruitment and contracts:**
 - Place of work (institution/agency, unit, office location), administrative status, type and duration of contract, grade/step, probationary period(s), career history.

- **Data concerning health:**

The Medical Service² of the European Commission keeps the medical data of staff member in their medical file. The ERCEA merely collects and processes administrative data linked to:

A) Preventive medicine:

- Pre-recruitment certificate of aptitude sent by the Medical Service to Unit D.2 – “Human Resources”.
- Ergonomic equipment: opinion from the Medical Service specifying the equipment to be provided.

B) Sick leave follow-up:

- Absences without certificate (as recorded in SYSPER).
- List of medical certificates of ERCEA staff members issued by the Medical Service on an almost daily basis: level of incapacity (including medical part-time); type of leave (illness, accident or illness during annual leave or maternity leave); status (approved Y/N); occasionally, additional comments from the Medical Service.

¹ REGULATION (EU) 2018/1725 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL of 23 October 2018 on the protection of natural persons with regard to the processing of personal data by the Union institutions, bodies, offices and agencies and on the free movement of such data, and repealing Regulation (EC) No 45/2001 and Decision No 1247/2002/EC.

² The Agency has a Service Level Agreement (“SLA”) with the European Commission (“SLA concerning the collaboration between DG HR and ERCEA” of 12 February 2018), which includes the provision of Medical Services.

- Application for authorisation to spend sick leave elsewhere than at the place of employment (according to Article 60 of the Staff Regulations) including the opinion from the Medical Service (i.e. approved Y/N).
- Medical advice (“avis médicaux”) issued by the Medical Service on a medical control requested by the Medical Service or the staff member: result (able or unable to work).

C) Special leave on medical grounds:

- Special leave for a medical consultation or treatment abroad (“VME”): list of the Medical Service stating medical examination/treatment and its opinion (i.e. approved Y/N).
- Maternity leave: pregnancy and birth certificates³.
- Special part-time for breastfeeding: breastfeeding certificate.
- Special leave for reasons concerning family members:
 - o Special leave for illness of relative in the ascending line;
 - o Special leave for serious illness of child;
 - o Special leave for very serious illness of a child (mainly hospitalisation);
 - o Special leave for serious illness of spouse/partner;
 - o Special leave for death of spouse/partner;
 - o Special leave for death of mother during/before maternity leave;
 - o Special leave for death of child;
 - o Special leave for relative in ascending line;
 - o Special leave for death of brother or sister;
 - o Special leave for adoption of child.
- Family leave: the opinion from the Medical Service (i.e. approved Y/N).

D) Requests for declaration of invalidity:

- Invalidity decision from the Medical Service and the AIPN (grade of incapacity).

E) Requests for recognition of an occupational disease or of an aggravation of a pre-existing disease:

- Report of the disease, professional circumstances (including, if applicable, information on harassment and/or inappropriate behaviour/workload).

• **Concerning leave and absences:**

- Length of absence, date of appointment of the medical consultation/treatment/control, information on the validity and reception of medical certificates, duration of invalidity, date of decision/launch of the procedure, period(s) of leave on personal grounds/part-time working, application of Article 42, supporting travelling documentation.

• **Information concerning pay, allowances and bank accounts:**

- Costs incurred by the services associated to preventive medicine, psychological and social support, sick leave, special leave, invalidity.
- Data necessary to determine the individual rights and financial entitlements related to the invalidity allowance:
 - o Staff member’s individual rights at the end of service (if applicable: expatriation/foreign residence/management allowance).
 - o Staff member’s allowances at end of service (if applicable: e.g. household allowance, (double) dependent child, pre-school allowance, education allowance).
 - o Information for the calculation of the pension: Transfer IN, severance grant.
 - o Situation before retirement: last place of employment, place of origin, revision of the place of origin, removal plans.
 - o Information regarding staff member’s intended gainful employment, copy of the most recent salary statement, staff member’s payslip of month of invalidity decision.

³ Pregnancy certificates reveal the estimated due date/delivery, single or multiple pregnancy, anticipated date of birth. Birth certificates disclose the name of the child and parents; gender; date, place, and in some cases the time of birth.

The ERCEA Unit D.2 – “Human Resources” may request additional financial information to establish individual rights.

- **Concerning data subject’s family and contact person:**

- First name, surname, private address, private phone number, private e-mail address, nationality, date and place of birth, marital status certificate/decision, professional activity, last annual taxable income, staff/pension number, birth certificates, name of school for children.
- Medical certificates for special leave for reasons concerning family members reveal further personal information depending on the certificate.
- For the application to spend sick leave abroad (Art. 60) and for special leave for a medical consultation or treatment abroad (VME), the ERCEA requests to provide the detailed address or telephone number at the place where the staff member will be staying.

- **Biometric data (signatures):**

- Hand-written signatures on supporting documents, request templates and decisions.

ERCEA staff members may spontaneously disclose further information related to health, which, if it is submitted to the ERCEA electronically or in paper form, is deleted or censored. The ERCEA recommends data subjects to censor any personal data going beyond the necessity to establish the rights. Data subjects should send certificates containing confidential and essential medical data only to the Medical Service. The Medical Service simply provides the administrative medical opinion to the ERCEA GECO team, so that they can take the necessary administrative steps.

Note: In case of force majeure situations, the ERCEA may in these exceptional circumstances process additional personal data about health, as may be necessary to ensure the safety and well-being of our staff. Please refer to the DPN on Business Continuity for further information.

The MEDICAL SERVICE separately collects and processes the following types of personal data upon recruitment and during the career of staff:

- **Identification data:**

- Surname, forename, personnel number, date and place of birth, nationality, language, gender, civil status, children, family history, postal address, e-mail address, telephone numbers, name of family doctor, languages, post requested, type of contract.

- **Data concerning health:**

- Medical history, objective examination, results of laboratory tests, x-rays, ECGs, allergies, treatments followed, usual medication, chronic diseases, pregnancy (since certain examinations and/or vaccinations can be contraindicated in this specific cases), results of other medical examinations (ophthalmic, audiometric, etc.) necessary for a particular individual, medical certificates, periods of absence and other medical records.

1.b) Purposes of the processing

The ERCEA handles personal data during this processing operation in order to ensure that staff members are physically fit to perform their duties, to monitor the state of health and to establish the individual rights in line with the applicable provisions of the Staff Regulations and the Conditions of Employment of Other Servants (CEOS).

The ERCEA processes financial information linked to health with the aim of settling the due amount with the Medical Service for its provision of services.

The Controller may envisage anonymous statistical analyses with the purpose of improving the quality of the processes and the management of human resources.

For the privacy statement of the Medical Service, please refer to the following link: <https://europa.eu/!bd78nk>.

For information on the processing of administrative health data concerning interim agents, trainees and Seconded National Experts, please refer to relevant DPNs available on the ERCEA intranet “Data protection & Privacy”: <https://europa.eu/!qW78GN>.

1.c) From where the data is collected

Data are collected directly from the data subject through the different request templates (for instance in the context of Article 60 or VME), supporting documents in electronic or paper form (such as certificates for special leave) as well as by e-mail.

The Medical Service provides administrative data linked to health to the ERCEA GECO team via e-mail and ARES.

Data regarding requests for recognition of occupational disease are sent by the PMO via ARES.

For reporting and statistical purposes as well as in order to process certain requests, data are drawn from SYSPER as encoded by the ERCEA GECO team and other authorised personnel dealing with time management.

2. Who has access to your information, how is it secured and to whom is it disclosed?

The HR Unit is responsible for the management of any documents produced, circulated and/or received, ensuring the appropriate treatment of all documents. The ERCEA's GECO team is responsible for undertaking the necessary measures to ensure that documents are processed and managed in a rule-compliant and secure manner.

E-mails including personal data should be sent via encrypted e-mail (SECEM). Access to information saved on the ERCEA's Shared Drive or the functional mailbox ERC-GECO@ec.europa.eu is limited to authorised personnel. Paper files are stored in the GECO team's locked archives that are accessible to authorised staff members only.

The official register of the Agency is ARES/NomCom and all files therein are processed using the restricted marking. SYSPER is the HR Information System of the European Commission; access to personal data is protected by means of the management of the access rights, which are strictly limited to authorised personnel.

The persons with access to your personal data, on a **need-to-know basis**, are:

- Members of the ERCEA's GECO team and duly authorised HR staff members dealing with time management and financial matters;
- The direct superior(s) of ERCEA staff, the Legal Affairs and Internal Control Unit of the ERCEA and the AHCC (Authority Empowered to Conclude Contracts), i.e., the ERCEA's Director;
- The Advisory Committee (in case of occupational disease) and the Invalidity Committee (in case of requests for declaration of invalidity);
- Services of the European Commission: the PMO (for calculation/payment of financial/leave rights) and the Medical Service (e.g. for special leave requests and partially for the payment of the provided medical services), OIB for the supply of ergonomic equipment;
- Joint Sickness Insurance Scheme (JSIS) (in case of exclusion from certain benefit for a period of 5 years from recruitment).

In addition, certain details may be disclosed, in compliance with the relevant current legislation and established case law, and on a temporary basis to legislative or supervisory bodies of the ERCEA or national authorities, as well as auditing bodies or courts.

The MEDICAL SERVICE keeps medical records in an individual file stored in secure archives accessible only to authorised persons. Electronic medical records are stored in a secure environment and accessible only to authorised persons. The protection measures of medical records are described in a document called "Protection et archivage des données à caractère personnel", available on request.

You have access to your medical file according to the rules defined in Conclusion 221/04 of the Heads of Administration; the document is available on request. Restrictions may be applied in accordance with the Commission Decision(EU)2019/154 of 30 January 2019, laying down internal rules concerning the restriction of the right of access of data subjects to their medical files. Your medical file can be transferred to another European Institution, with your prior agreement, when you move from an Institution to another. This process is described in the

document “Protection et archivage des données à caractère personnel” mentioned above. Access to your electronic medical file is only granted to Medical Service staff according to specific access rights described in a matrix, also available on request.

3. What are your rights?

You have the right to access the personal data the ERCEA holds about you and to request to have them rectified where necessary. Where applicable, you have the right to request restriction or to object to processing, to request a copy or erasure of your personal data held by the data controller.

To exercise any of these rights, you should apply to the Head of Unit D.2 – “Human Resources”, who is responsible for such processing (i.e. the Controller), by sending an e-mail specifying your request to the mailbox indicated in point 5 below. Please note that in some cases, restrictions under the terms and conditions of Article 25 of the Data Protection Regulation may apply.

For any comments or questions, any concerns or a complaint regarding the handling of medical files and personal data by the MEDICAL SERVICE, please contact their Data Controller using the contact information under point 5 below.

4. How long do we keep your data?

Currently, the ERCEA applies by analogy the principles and the retention periods indicated in the Common Commission-Level Retention List SEC(2019)900/2 of 19 April 2019 (CRL).

- Pre-recruitment certificates, breastfeeding and birth certificates, invalidity, occupational disease decisions and decisions on family leave are stored in the personal file. The CRL prescribes a retention period of 8 years after the extinction of all rights of the person concerned and of any dependents, and for at least 100 years after the recruitment of the person concerned.
- Ergonomic equipment: the opinion of the Medical Service is only kept until the launch the purchase process has been finalised.
- Sick leave: the list of medical certificates of ERCEA staff members issued by the Medical Service, the decision related to Article 60 and the medical advice (“avis mediceaux”) are stored for 4 years.
- Special leave: supporting documents for special leave for reasons concerning family members, the list of the Medical Service for VME and the pregnancy certificate are stored for 4 years.
- In the case of part-time employment, or family leave, supporting documents are also kept for 4 years.
- Files on occupational diseases may be reopened at any time. They are therefore kept for up to 30 years after death for occupational diseases.
- Invoices sent by the Medical services with the cost incurred by the services provided are kept for at least 5 years determined under the Financial Regulations.

In those cases where the operations are partly carried out using the SYSPER, the retention periods indicated in the SYSPER Data Protection Notice apply.

The ERCEA may envisage anonymous statistical analyses with the purpose to improve the quality of the processes and the management of human resources. However, the retention periods mentioned above will not be increased.

MEDICAL SERVICE: Medical files are kept for 30 years after you cease work at the Commission. In the case of persons exposed to carcinogens or mutagens, files are kept for 40 years after the last exposure incident or, in any event, until you reach the age of 75. (General Regulation for the protection of workers, Belgium, Article 16, occupational medical services). Pre-recruitment medical examination files for applicants who are not recruited will be destroyed after one year. In the event of a negative medical opinion, the file will be destroyed after 5 years if no complaint has been lodged.

For the retention period of PMO files, please refer to the following link: <https://europa.eu/!Rg79pB>.

5. Contact information

If you would like to receive further information, you can contact the responsible person (the Data Controller), Head of Unit D.2 – “Human Resources” via the mailbox: ERC-GECO@ec.europa.eu. The ERCEA Data Protection Officer is at your disposal for any clarification you might need on your rights under Regulation (EU) 2018/1725 at the following e-mail address: ERC-DATA-PROTECTION@ec.europa.eu.

You may lodge a complaint to the European Data Protection Supervisor (edps@edps.europa.eu) if you consider that your rights under Regulation (EU) 2018/1725 have been infringed as a result of the processing of your personal data by the Data Controller.

For information on your medical files, please contact the MEDICAL SERVICE at: hr-mail-D3@ec.europa.eu.

6. Legal basis

The legal basis applying to these processing operations is Article 5(1)(a) of the Data Protection Regulation given that 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 Union institution or body. More specifically, the processing of personal data is necessary for the management and functioning of the Union Institutions or bodies (Recital 22 of Regulation (EU) 2018/1725).

Specific legal basis applying to this processing operation:

- **Pre-recruitment medical visit:** Articles 28(e) and 33; Article 1 of Annex VIII of the Staff Regulations; and Articles 12(2)(d), 13 and 83 of the CEOS.
- **Annual medical check-up:** Article 59(6) of the Staff Regulations, and Articles 16 and 91 of the CEOS.
- **Sick leave:** Article 59 (1), (2), (3), (4) and (5) of the Staff Regulations and Articles 16 and 91 of the CEOS; Commission Decision C(2004) 1597/11 of 28 April 2004 introducing implementing provisions on absences as a result of sickness or accident; Commission Decision C(2013) 9051 of 16 December 2013 on Leave; Commission Decision C(2020) 1559 of 16 March 2020 amending Decision C(2013) 9051 of 16 December 2013 on leave.
- **Maternity leave:** Article 58 of the Staff Regulations and Articles 16 and 91 of the CEOS.
- Guidelines for special part-time arrangements for **breastfeeding** (Ares(2016)1218016 of 10 March 2016).
- **Family leave:** Article 42b of the Staff Regulations and Articles 16 and 91 of the CEOS; Commission Decision C(2010) 7494 of 5 November 2010 on Article 42b of the Staff Regulations concerning family leave.
- Requests for **recognition of an occupational disease:** Article 73(1) of the Staff Regulations; Article 3(1) and (2) and Article 16(2) of the Common Rules on the insurance of officials of the European Communities against the risk of accident and of occupational disease.
- **Invalidity** procedures: Articles 53, 59(4), 78 and 81; Articles 7, 8 and 9 of Annex II; Article 13 of Annex VIII of the Staff Regulations and Articles 33 and 102 of the CEOS.
- **Access to medical file:** Article 26(a) of the Staff Regulations and the Conclusion 221/04 of the "Collège des Chefs d'Administration" of 19 February 2004.