



Health Research Authority
Confidentiality Advisory Group
On behalf of the Secretary of State for Health

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5 September 2013

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Dear Mr Seccombe

Study title: CQC 2013 Inpatients Survey
CAG reference: CAG 6-03(PR5)/2013

Thank you for your service evaluation application, submitted for approval under the Health Service (Control of Patient Information) Regulations 2002 to process patient identifiable information without consent. Approved applications enable the data controller to provide specified information to the applicant for the purposes of the relevant activity, without being in breach of the common law duty of confidentiality, although other relevant legislative provisions will still be applicable.

The role of the Confidentiality Advisory Group (CAG) is to review applications submitted under these Regulations and to provide advice to the Secretary of State for Health on whether an application should be approved, and if so, any relevant conditions. The application was considered at an office level as it was noted that this was a repeat of the 2012 acute inpatient survey and therefore fell within proportionate review criteria 14: repeat projects.

Secretary of State for Health approval decision

The Secretary of State for Health, having considered the advice from the Confidentiality Advisory Group as set out below, has determined the following:

1. The application is approved, subject to compliance with the standard and specific conditions of approval.

This letter should be read in conjunction with the outcome letter dated 23 August 2013.

Context

Purpose of application

This application set out details of the transfer of patient identifiable data from acute and specialist trusts to defined survey contractors for the purpose of mailing out questionnaires for the 2012 acute inpatient survey.

The cohort would relate to inpatients aged 16 years or over who were discharged from acute and specialist NHS hospitals in June, July or August 2012 (earlier for smaller trusts), who had

had one overnight stay in hospital. Inpatients treated for obstetrics/maternity or psychiatric reasons, private patients, current inpatients, those without a full UK postal address, and those who are found to be deceased prior to the start of the mailings would not be included in the cohort. Such checks would be carried out locally by the Trusts. A recommendation of support was requested to cover the transfer of patient identifiable information (as listed within the application) from trusts and the subsequent processing of this information by specified contractors. It was indicated that that NHS trusts would be advised to employ the service of one of the specified 'approved contractors' to reduce the cost, burden and risk in the provision of survey data.

The applicant confirmed that the methodology and sampling frame were identical to those used for the 2012 acute inpatient survey. It was noted that anonymised data would be shared with NHS England and the Department of Health for specific purposes and that the completion of the questionnaire on-line would be piloted.

It was confirmed that Patient Perspective, Quality Health and Picker would be the specific contractors used to administer surveys.

CAG advice conclusion

CAG agreed that the minimum criteria under the Regulations appeared to have been met, and therefore advised recommending support to the Secretary of State for Health, subject to compliance with the specific and standard conditions of support as set out below.

Specific conditions of support

1. Confirmation of suitable security arrangements via IG Toolkit submission for each of the survey companies. **Confirmation has been received in relation to Picker, Patient Perspective and Quality Health.**
2. Small numbers generated by rare diagnoses should not be included within the sample file sent to survey contractors. **It was confirmed that ICD10 codes would no longer be collected, in order to avoid generation of small numbers.**

As the above conditions have been accepted and/or met, this letter provides confirmation of final approval. I will arrange for the register of approved applications on the HRA website to be updated with this information.

Annual review

Please note that this approval is subject to submission of an annual review report to show how you have met the conditions or report plans, and action towards meeting them. It is your responsibility to submit this report annually and to report any changes such as to the purpose or design of the proposed activity, or to security and confidentiality arrangements. We are also streamlining the process to facilitate the service we provide to applicants. This means that annual reviews will be batched such that the approval will last until the last day of the preceding month before the date of approval, and should be submitted 4 weeks before this date. An annual review should therefore be provided each year no later than 2 August.

Please do not hesitate to contact me if you have any queries following this letter. I would be grateful if you could quote the above reference number in all future correspondence.

Reviewed documents

The documents reviewed by the Vice Chair were:

<i>Document</i>	<i>Version</i>	<i>Date</i>
Section 251 application form with changes highlighted		

With the Group's best wishes for the success of this project.

Yours sincerely

Claire Edgeworth
Deputy Confidentiality Advice Manager

Email: HRA.CAG@nhs.net

Enclosures: Standard conditions of approval

Standard conditions of approval

The approval provided by the Secretary of State for Health is subject to the following standard conditions.

The applicant will ensure that:

1. The specified patient identifiable information is only used for the purpose(s) set out in the application.
2. Confidentiality is preserved and there are no disclosures of information in aggregate or patient level form that may inferentially identify a person, nor will any attempt be made to identify individuals, households or organisations in the data.
3. Requirements of the Statistics and Registration Services Act 2007 are adhered to regarding publication when relevant.
4. All staff with access to patient identifiable information have contractual obligations of confidentiality, enforceable through disciplinary procedures.
5. All staff with access to patient identifiable information have received appropriate ongoing training to ensure they are aware of their responsibilities.
6. Activities are consistent with the Data Protection Act 1998.
7. Audit of data processing by a designated agent is facilitated and supported.
8. The wishes of patients who have withheld or withdrawn their consent are respected.
9. The Confidentiality Advice Team is notified of any significant changes (purpose, data flows, data items, security arrangements) prior to the change occurring.
10. An annual report is provided no later than 12 months from the date of your final confirmation letter.
11. Any breaches of confidentiality / security around this particular flow of data should be reported to CAG within 10 working days, along with remedial actions taken / to be taken.