Health Research Authority

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26 June 2017

Carolina Casanas i Comabella
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Buxton Court
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Dear Ms Comabella

Application title: **2017 Adult Inpatient Survey**
CAG reference: **17/CAG/0070**

Thank you for your non-research application, submitted for approval under Regulation 5 of 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 (SofS) for Health on whether an application should be approved, and if so, any relevant conditions. This application was considered at the Sub-Committee of the CAG meeting held in correspondence.

Secretary of State decision

The Secretary of State for Health, having considered the recommendation 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 24 May 2017.

Context

Purpose of application

This non-research application from Picker Institute Europe, CQC and NHS England set out the purpose of carrying out the 2017 NHS Adult Inpatient Survey, using standardised methodology to build up a national picture of patient experiences. A set of aggregated statistical data was produced which was shared with individual Trusts, CQC, NHS England and the Department of Health and used to monitor and compare the performance of trusts, and to drive improvements.

This survey would be the 15th carried out to date. The methodology was well established and had been approved by the CAG via Precedent Set Sub-Committee.

Participating trusts identified the sample in line with the inclusion/exclusion criteria, and disclosed names and addresses to approved contractors for the purpose of mailing out the surveys (this data was held in a mailing file along with the unique identifying code which is printed on the survey itself). Demographic information for each potential participant was collected in a separate sample file, linked by the identifying code.

Picker Institute was commissioned to manage and coordinate the surveys under the title of the Patient Survey Coordination Centre, carrying out checks across the samples submitted by trusts and disseminating aggregated results (identifiable information was not received by the Patient Survey Coordination Centre).

This application was escalated from the Precedent Set review to the CAG meeting due to the addition of a new approach to be piloted with up to 10 of the Trusts: - sending SMS reminders to potential participants after the 1st and 3rd mailing of the survey (where the patient had not responded to the survey). As this was a new element where precedent advice had not been set, the advice of the CAG was sought.

If the pilot were successful, the applicant intended to request support for a roll-out of this approach as standard across the survey programme, citing reduced costs as the main benefit of text messages as opposed to postal reminders

<u>Confidential patient information requested</u>

Access was requested to data from participating trusts in relation to inpatients aged 16 years old or over who were discharged from acute and specialist NHS hospitals in July 2017 having had one overnight stay in hospital (various exclusions were listed in the application including deceased patients and those who had registered their dissent).

The mailing file sent to contractors would contain the following information:

- Trust code – included in the unique identifier, below.
- A standardised unique identifier code (application listed full details of how this was constructed)
- Title (Mr, Mrs, Ms, etc.)
- First name
- Surname
- Address Fields
- Postcode (where available)
- Mobile telephone number for those patients included in the pilot, from a total of up to 10 trusts

The following approved contractors would be used:

- Picker Institute

- Quality Health
- Patient Perspective
- Capita
- Membership Engagement Services
- The SMS provider Firetext

The sample data file (used to link demographic data to the survey responses, to aid analysis and to enable checks to be carried out for any errors in how the sample was drawn) would contain non-identifiable data (listed in the application).

The two sets of information would be submitted by trusts to approved contractors as one file. Approved contractors split the data out before sharing the sample file with the Coordination Centre (to enable centralised checks on the appropriateness of samples drawn).

Confidentiality Advisory Group advice conclusion

The CAG agreed that the minimum criteria under the Regulations appeared to have been met and that there was a public interest in projects of this nature being conducted, and therefore advised recommending support to the Secretary of State, subject to compliance with the specific and standard conditions of support as set out below.

Request for further information

1. Please provide the final wording of the text message reminders to be sent to patients.

The applicant provided the wording on 20 June 2017, via email:

- First SMS reminder:

You've been invited to take part in the largest NHS patient survey – please help improve care by posting back your questionnaire. To opt out, call NNNNNNNNNN.

- Second SMS reminder:

Don't forget – tell us what NHS care is like, good or bad, by posting back your inpatient questionnaire today. To opt out, call NNNNNNNNNN.

The information was reviewed by Sub-Committee members on behalf of the CAG, and deemed satisfactory. It was noted that the wording had been approved by the REC.

2. Please update the first mailing letter to patients to inform them that text message reminders will be sent.

The response was submitted via email on 20 June 2017:

'As the vast majority of the patients that will receive the survey letter will not take part in the study, and hence will not receive an SMS reminder, we agree that it is appropriate to have a separate letter for the pilot.'

The pilot letter was submitted, which stated clearly that text message reminders would be sent. **The Sub-Committee reviewed the letter and agreed that it was appropriate.**

Specific conditions of support

1. The findings of the pilot should be reported back to the CAG, when available. **The CAG agreed that this report could be provided at the time of the annual review.**
2. Confirmation from the IGT Team at the Health and Social Care Information Centre of suitable security arrangements via Information Governance Toolkit (IGT) submission. **IG Toolkit numbers provided for each of the named contractors, confirmed published and reviewed with the exception of Firetext (see below):**

   The applicant advised: '*The third party providing the SMS reminders for the pilot was changed to Healthcare Communications Ltd. This is because the third party originally proposed (FireText) was not registered with the IGT. The newly appointed third party Healthcare Communications has experience working with several NHS trusts on the Friends and Family Test, which also uses patients' mobile telephone details, and has a 100% satisfactory IGT score'*. **The CAG was satisfied with this arrangement and the toolkit confirmed published and reviewed.**

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 your 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 also your responsibility to submit this report on the anniversary of your final approval and to report any changes such as to the purpose or design of the proposed activity, or to security and confidentiality arrangements. An annual review should be provided no later than 26 June 2017 and preferably 4 weeks before this date. If at any stage you no longer require support under the Regulations as you will cease processing confidential patient information without consent you should inform the Confidentiality Advice Team of this in writing as soon as possible.

Reviewed documents

The documents reviewed at the meeting were:

Document	*Version*	*Date*
CAG application from (signed/authorised)		31 March 2017
Covering letter on headed paper	1	31 March 2017
Other [Pilot-Sampling-flowchart-PROTECT]		
Other [Model-service-contract PROTECT]	1	
Other [Description of process for respecting dissent]		
Other [Letter to Hammersmith ethics board (background information)]		27 April 2007
Other [Instructions Trust using contract]	7	
Patient Information Materials [Opt out poster]	2	

Patient Information Materials [First reminder letter]	4	08 May 2016
Patient Information Materials [Second reminder letter]	4	08 May 2016
Patient Information Materials [CQC Flyer]	2	
REC favourable opinion letter and all correspondence [Favourable REC opinion for 2007 pilot (background information)]		21 June 2007
CAG response letter		20 June 2017
First mailing letter	3	6 July 2017

Membership of the Committee

The members of the Confidentiality Advisory Group who were present at the consideration of this item or submitted written comments are listed below.

User Feedback

The Health Research Authority is continually striving to provide a high quality service to all applicants and sponsors. You are invited to give your view of the service you have received and the application procedure. If you wish to make your views known please use the feedback form available on the HRA website: http://www.hra.nhs.uk/about-the-hra/governance/quality-assurance/

Yours sincerely

Rachel Heron
Confidentiality Advisor

Email: HRA.CAG@nhs.net

Enclosures: *List of members who considered application*
Standard conditions of approval

Confidentiality Advisory Group sub-committee meeting 26 June 2017

Group Members:

Name	*Profession*	*Present*	*Notes*
Dr Kambiz Boomla		Yes	
Dr Patrick Coyle		Yes	
Ms Kim Kingan		Yes	
Dr Harvey Marcovitch	Dr	Yes	

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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.