



Health Research Authority

2 Redman Place
Stratford
London
E20 1JQ

Email: cag@hra.nhs.uk

01 July 2024

Nicola Collins – Principal Researcher
Research Team
Data and Insight
Care Quality Commission
Citygate
Gallowgate
Newcastle Upon Tyne
NE1 4PA

Dear Nicola Collins,

Application title: Community Mental Health 2024 Survey
CAG reference: 24/CAG/0088

Thank you for submitting a **non-research** application under Regulation 5 of the Health Service (Control of Patient Information) Regulations 2002 ('section 251 support') to process confidential patient information without consent.

This application was considered at the Precedent Set Confidentiality Advisory Group (CAG) meeting held on 14 June 2024, under Precedent Set Category 11 (CQC annual surveys)– The methodology has been supported in principle by the CAG. [Precedent set criteria - Health Research Authority \(hra.nhs.uk\)](#) . This outcome should be read in conjunction the [minutes](#) of this meeting.

Confidentiality Advisory Group advice and Secretary of State for Health and Social Care decision

The 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 and Social Care.

The Secretary of State for Health and Social Care, having considered the advice from the Confidentiality Advisory Group as set out in the minutes, has determined the following:

- The application is **Conditionally supported**, subject to compliance with the [standard](#) and specific conditions of support.

Please note that the legal basis to allow access to the specified confidential patient information without consent is now in effect. A summary of the scope of support is provided in Appendix A.

Support provides a lawful basis to allow the information to be processed by the relevant parties for the specified purposes without incurring a breach of the common law duty of confidence only. Applicants must ensure the activity remains fully compliant with all other relevant legislation.

Specific conditions of support

1. Discuss the use of confidential patient information without consent within the upcoming cognitive testing and provide feedback to CAG when this is available.
2. Discuss posters for 2025 having the statement - 's251' support in place from the Secretary of State for Health and Social Care, on advice from CAG, in order to run the survey process, within the upcoming cognitive testing, and provide feedback to CAG when this is available.
3. Ensure a larger sample of patient representatives are involved for the 2025 survey.
4. Confirmation provided from the DSPT Team at NHS England to the CAG that the relevant [Data Security and Protection Toolkit \(DSPT\)](#) submission(s) has achieved the 'Standards Met' threshold. Confirmed:

The NHS England 22/23 DSPT reviews for **Patient Perspective, Explain, Picker Institute Europe & Quality Health** were confirmed as 'Standards Met' on the NHS England DSPT Tracker (checked 20 June 2024)

This letter provides confirmation of final support, and all the above conditions are expected to be met within the stated timeframe. I will arrange for the register of approved applications on the HRA website to be updated with this information.

Maintaining CAG support: Reporting requirements

Please note the following guidance on reporting requirements in order to maintain CAG support for the duration of the activity.

- **Annual review report:** It is your responsibility to submit an annual review report every 12 months for the entire duration that confidential patient information is being processed without consent. The next annual review should be provided no later than **01 July 2025** and preferably 4 weeks before this date. Further guidance and the annual review form is available on the [IRAS website](#).
- **Notifying amendments to the scope of CAG support:** Guidance on submitting CAG amendments and the amendment form is available on the [IRAS website](#).
- **Notifying the end of activity:** Guidance on notifying the end of activity and the end closure report form is available on [the IRAS website](#).
- **Register of supported applications:** It is a statutory requirement to publish all supported applications to process confidential patient information without consent. Supported applications are published on the [HRA website](#).

Approved documents

The list of documents reviewed and approved at the meeting are as follows.

<i>Document</i>	<i>Version</i>	<i>Date</i>
CAG application from (signed/authorised) [CMH24_CAG section 251 form non research applications]		
Confidentiality policy [Confidentiality Policy - Picker - June 2017 - V1.2]	v1.2	
Other [CMH24_Charity PR_V1.0]	v1.0	
Other [CMH24_GDPR Model service contract_V1_Protect]	v1	
Other [CMH24_Infographic_V1_Draft]	v1	
Other [CMH24_Postcode flow_V1]	v1	
Other [CMH24_Trust PR_V1.0]	v1.0	
Other [GDPR declaration for additional data analysts]		
Other [GDPR declaration of data compliance]		
Other [Sample construction spreadsheet for central online tool_]		
Other [Sample construction spreadsheet_]		
Other [Sample Declaration Form for trusts using contractors_]		
Patient Information Materials [16-17 year olds information leaflet]		
Patient Information Materials [2023 CMHS social media card_Reminder One]		
Patient Information Materials [2023 CMHS social media card_Reminder Three_V2]		
Patient Information Materials [2023 CMHS social media card_Reminder Two]		
Patient Information Materials [2023 CMHS social media card_Take Action]		
Patient Information Materials [CMH24_Core Questionnaire_Pre Cog testing_V1]	v1	
Patient Information Materials [CMH24_Draft Sampling instructions_]		
Patient Information Materials [CMH24_Draft Survey handbook]		
Patient Information Materials [CMH24_First mailing letter]		
Patient Information Materials [CMH24_Multilanguage Sheet_V1.0]	v1.0	
Patient Information Materials [CMH24_Second mailing letter_V1.0]	v1.0	
Patient Information Materials [CMH24_SMS Guidance and Content_V1.0]	v1.0	
Patient Information Materials [CMH24_Third mailing letter_V1.0]	v1.0	
Patient Information Materials [CMH24_Website Banner_V1 Draft]	v1	
Patient Information Materials [Dissent poster_English]		
Write recommendation from Caldicott Guardian (or equivalent) of applicant's organisation [20240524 CMH24 CMH Survey - Caldicott Guardian recommendation letter V1]	v1	

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.

Yours sincerely

William Lyse

Approvals Administrator

On behalf of the Secretary of State for Health and Social Care

Email: cag@hra.nhs.uk

Included: List of members who considered application
 Summary of scope of support

**Confidentiality Advisory Group meeting attendance
14 June 2024**

Members present:

<i>Name</i>	<i>Profession</i>
Professor Lorna Fraser	Interim Alternate Vice Chair
Dr Sandra Duggan	CAG Member (Lay)
Professor James Teo	CAG Member (Expert)

Also in attendance:

<i>Name</i>	<i>Profession</i>
Ms Caroline Watchurst	HRA Confidentiality Advisor
Mr William Lyse	HRA Approvals Administrator

Appendix A – Summary of Scope of Support

Summary of application

This non-research application from Picker Institute Europe on behalf of Care Quality Commission (CQC) is for the purpose of management of health and social care to administer the 2024 Community Mental Health Survey (CMH24).

CMH24 falls within the NHS Patient Survey Programme (NPSP). The NPSP was initiated in 2002 by the then Department of Health, and is now overseen by the CQC, the independent regulator of health and social care in England. CMH24 will be the twenty-first carried out to date. All 52 eligible mental health provider trusts will be asked to conduct the survey, drawing a sample of service users according to set criteria, and following standardised materials and procedures for all stages of the survey.

Trusts will collect information of all eligible patients and, following suitability checks, will share confidential patient information with one of the approved contractors, Patient Perspective, Explain, Picker Institute Europe or Quality Health, and separately with the coordination centre - Picker Institute Europe, in their role as 'Survey Coordination Centre' (SCC). Full postcode will be disclosed to the SCC (to map LSOA) – this is in line with other supported surveys.

Questionnaires will be distributed to patients using the approach detailed below;

- Contact 1: Letter with URL link for online questionnaire
- Contact 2: 5 working days after contact 1, SMS despatched with URL link for online questionnaire
- Contact 3: 10 working days after contact 1, letter with URL link for online questionnaire, and paper questionnaire
- Contact 4: 15 working days after contact 1, SMS despatched with URL link for online questionnaire
- Contact 5: 20 working days after contact 1, letter with paper questionnaire (no URL)

Ahead of each reminder, it will be necessary to remove all respondents who have completed the survey already, and to conduct a DBS or local check on the full sample to ensure any deceased individual is removed from the sample. If anyone has requested to be opted out of further reminders, they should also be removed at these timepoints.

A recommendation for class 5 and 6 support was requested to cover access to the relevant unconsented activities as described in the application.

Confidential patient information requested

The following sets out a summary of the specified cohort, listed data sources and key identifiers. Where applicable, full datasets and data flows are provided in the application form and relevant supporting documentation as this letter represents only a summary of the full detail.

Cohort	Patients aged 16 and over who had been in contact with NHS mental health services in the two-month period from 1 April to 31 May 2024, and who were receiving specialist care or treatment for a mental health condition, and fulfil the inclusion criteria as detailed in the application.
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	<p>1250 service users from each Trust, plus any 'boost' samples. Approximately 67,500 users of community mental health services in total.</p>
Data Sources	<ol style="list-style-type: none"> 1. Electronic patient records, Mental Health Trusts in England 2. NHS England - NHS Spine Personal Demographics Service (PDS)
Identifiers required for deceased check purposes	<ol style="list-style-type: none"> 1. NHS Number 2. Full date of birth
Identifiers required for contact purposes	<ol style="list-style-type: none"> 1. Trust code 2. A standardised unique identifier code 3. Title (Mr, Mrs, Ms, etc.) 4. First name 5. Surname 6. Address Fields 7. Postcode 8. Mobile phone number
Identifiers required for analysis purposes	<ol style="list-style-type: none"> 1. Trust code 2. A standardised unique identifier code 3. Year of birth 4. Postcode 5. Gender 6. Ethnic category 7. Date of last contact 8. Sub-ICB codes 9. Mental Health Inpatient indicator 10. Service or team type 11. Assessment service group 12. Severe mental illness indicator 13. Mode of contact
Additional information	<p>Trusts may also choose to collect additional sample variables outside of those detailed in the Survey Handbook. This can be valuable to trusts in enabling them to make greater use of their survey locally to target quality improvements.</p> <p>Sample and mailing data will be submitted by trusts to approved contractors in a single file. The file which contains both mailing and sample information will be split into separate files by the contractor before submitting only the sample information to the Coordination Centre for checking and approval.</p> <p>Please note that the Survey Coordination Centre does not receive any names or full addresses</p>