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Chris Graham
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15 July 2016

Dear Mr Graham

Study title: 2016 Adult Inpatient Survey
CAG reference: 16/CAG/0041

Thank you for your amendment request to the above <application type> 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 for Health on whether an application should be approved, and if so, any relevant conditions.

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 amendment is approved, subject to compliance with the standard and specific conditions of support.

Context

Purpose of application

This application from Care Quality Commission set out the purpose of the 2016 Inpatient Survey. The inpatient survey would include all eligible trusts who would be asked to conduct the survey with preparations expected to begin in August 2016. All trusts will draw a sample of patients according to set criteria, and follow standardised materials and procedures for all stages of the survey. Administration of the Inpatient survey requires NHS trusts to share two distinct sets of information with their approved contractor; a mailing file and a sample data file.

The end product from this survey will be a set of aggregate statistical data that does not contain patient identifiable information. This statistical dataset is used for a wide variety of purposes to support ongoing improvement in overall patient experience: The survey data

is used extensively by NHS trusts and Clinical Commissioning Groups (CCG's) in local improvement.

Approximately 1,250 patients would be included at each trust. These are inpatients aged 16 years old or over who were discharged from acute and specialist NHS hospitals in July 2016 (and earlier for smaller trusts), having had one overnight stay in hospital.

A recommendation for class 5 and 6 support was requested to cover access to information from relevant trusts to allow surveys to be administered.

Confidential patient information requested

Access was requested to; name address and postcode, ethnicity, year of birth, date and time of attendance, CCG code, ICD10 code, NHS site code on admission or discharge, main specialty on discharge, whether admission from Treatment Centre, route of admission.

Amendment request

An amendment was requested for access to additional data items with a change to the sampling methodology for the study. Access was requested to treatment function code. This item of data will allow trusts to more accurately identify patients who are ineligible, particularly patients who have been treated for planned termination of pregnancy. In previous surveys, trusts had used "main specialty" to identify these patients, but there are problems with the accuracy of these codes in terms of the actual treatment received in certain cases. After trialling the collection of 'treatment function' code in 2016, the applicant would stop collecting 'main specialty' in 2017 onwards.

The "treatment function" data would also allow more accurate sub-group analysis of results than "main specialty." "Main specialty" is the specialty under which a consultant is registered at the trust. So he or she may work in different specialties (obstetrics and gynaecology is a common example) but will be registered against one or the other – not both.

Confidentiality Advisory Group advice

Members agreed that the additional data item was not a significant change to data being disclosed and not overly intrusive of participant information but would allow better analysis and identification of patients' eligibility.

Members noted that approval for collection of this additional data item would be too late to implement for the 2016 Adult Inpatient survey, however if approved it would allow this data item to be collected for any application for the 2017 Adult Inpatient Survey and it to be reviewed under the Precedent Set review process under the category repeat projects, if no further substantive changes were received.

Confidentiality Advisory Group conclusion

In line with the considerations above, the Chair agreed that the minimum criteria under the Regulations appeared to have been met for this amendment, and therefore advised recommending support to the Secretary of State for Health.

Specific conditions of support

1. Confirmation of suitable security arrangements via IG Toolkit submission.

Reviewed documents

<i>Document</i>	<i>Version</i>	<i>Date</i>
20160509_IP16_S251_Amendment_v2_FINAL	2	09/05/2016

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

Ben Redclift
Confidentiality Advisor
On behalf of the Secretary of State for Health

Email: HRA.CAG@nhs.net

Enclosures: Standard conditions of approval

Standard conditions of approval

The approval provided by the Secretary of State 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.