



# Health Research Authority

## Confidentiality Advisory Group On behalf of the Secretary of State for Health

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25 June 2014

Dear Mr Williamson

**Study title:** 2014 Community Mental Health Survey  
**CAG reference:** CAG 9-07 (b)/2013

Thank you for your amendment request, 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. This amendment was considered on the 15 May 2014.

### 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 to receive mental health care cluster is approved.

This letter should be read in conjunction with the outcome letter dated 22 January and 30 May 2014.

### Context

#### Purpose of application

This application from the Care Quality Commission (CQC) set out the purpose of carrying out the Community Mental Health Survey, one of the surveys within the NHS national patient survey programme. The survey data would be used by NHS trusts and Clinical Commissioning Groups (CCG's) in local improvement activities. CQC would use data as part of its regulatory and surveillance activities and other relevant functions and data would also be shared with NHS England and the Department of Health.

A recommendation for class 5 and 6 support was requested to cover access to confidential patient data from mental health trusts providing mental health services to one of four 'approved' contractors and to the central coordinator (Picker Europe), to enable contractors to send out questionnaires.

#### Confidential patient data requested

Access was requested to name, address, year of birth, gender, ethnicity, date of last contact, CPA status and mental health care cluster code.

#### **Background**

Following consideration of the application at the January 2014 CAG meeting it was agreed that the application should be supported to allow the survey to proceed unchanged from previous applications. CAG did not recommend approval for the aspect of the application which referred to the receipt of mental health care cluster and GP practice code. Members requested that the applicant provide further justification in relation to the requirement for the mental health care cluster code and explore the feasibility of the HSCIC carrying this out using a pseudonymised linkage process.

The applicant provided further information at the May 2014 CAG meeting which detailed the following as further justification for the addition of mental health cluster code:

1. To enhance survey results by cluster.
2. To enable the survey to have a greater role in contributing to service improvement.
3. To allow the survey approach to be refined to appeal to any groups found not to be responding.
4. To provide the only independently collected information of this nature that could be used for benchmarking.
5. To provide a breakdown of survey results to NHS trusts by superclass.

The following information was provided in relation to whether the HSCIC carrying out a pseudonymised linkage process:

1. The HSCIC would want to link datasets using NHS number and therefore identifiable data including mental health care cluster code would be required.
2. There would be an additional cost in using the HSCIC.
3. The role of the co-ordination centre was important and it would be necessary for the co-ordination centre to receive the data in order to carry out production of reports.

The request to include GP practice code was withdrawn.

#### **Confidentiality Advisory Group advice**

CAG agreed that the minimum criteria under the Regulations appeared to have been met for this amendment, and therefore advised recommending conditional support to the Secretary of State for Health. A response to the condition of support outlined below was provided and is summarised.

#### **Specific conditions of support**

1. Confirmation of the controls that would be placed around the further disclosure of data that included mental health care cluster code.

*The applicant confirmed that mental health care cluster code would only be available to the Coordination Centre and CQC and would be removed from the data set prior to disclosure to NHS England.*

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

### **Reviewed documents**

The documents reviewed were:

<i>Document</i>	<i>Version</i>	<i>Date</i>
Section 251 application form		06/12/2013
CQC proposal for collecting additional sample file information for the 2014 Community Mental Health survey		
Response from CQC		09 June 2014

### **Membership of the Group**

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

There were *no* declarations of interest in relation to this item.

Yours sincerely

Claire Edgeworth  
Deputy Confidentiality Advice Manager

Email: [HRA.CAG@nhs.net](mailto:HRA.CAG@nhs.net)

*Enclosures: List of members who were present at the meeting*

Standard conditions of approval

**Confidentiality Advisory Group  
Attendance at meeting on 15 May 2014**

**Group members**

Name	Capacity
Dr Mark Taylor (Chair)	Lay
Professor Ann Jacoby	
Dr Kambiz Boomla	
Dr Tony Calland (Vice Chair)	
Dr Robert Carr	
Mrs Hannah Chambers	Lay
Professor Barry Evans	
Professor Julia Hippisley-Cox	
Dr Patrick Coyle (Vice Chair)	
Mr Anthony Kane	Lay
Professor Jennifer Kurinczuk	
Ms Clare Sanderson	
Dr Murat Soncul	
Mr C. Marc Taylor	
Ms Gillian Wells	Lay
Dr Miranda Wolpert	

**In attendance**

Name	Position (or reason for attending)
Ms Natasha Dunkley	Confidentiality Advice Manager, HRA
Ms Claire Edgeworth	Deputy Confidentiality Advice Manager, HRA
Mr David Evans	Expert advisor – Data Protection, Information Commissioner's Office
Mr John Robinson	Confidentiality Advisor, HRA
Mr Stephen Robinson	Corporate Secretary, HRA (observing)
Ms Joan Kirkbride	Director of Operations, HRA

## **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.