

Independent Group Advising on the Release of Data (IGARD)

Minutes of meeting held 9 March 2017

Members: Sarah Baalham, Chris Carrigan (Chair), Debby Lennard, Nicola Fear, Jon Fistein, Kirsty Irvine, Eve Sariyannidou, James Wilson

In attendance: Louise Dunn, Alan Hassey (observer), James Humphries, Stuart Richardson, Joanne Treddenick (observer), Vicki Williams

Apologies: Joanne Bailey, Anomika Bedi

1	<p>Declaration of interests</p> <p>No declarations of interest were noted.</p> <p>Review of previous minutes and actions</p> <p>The minutes of the 2 March IGARD meeting were reviewed and agreed as an accurate record of the meeting.</p> <p>Action updates were provided (see Appendix A).</p> <p>Out of committee recommendations</p> <p>An out of committee report was received (see Appendix B).</p>
2 2.1	<p>Data applications</p> <p><u>East Riding of Yorkshire Council (Presenter: Louise Dunn) NIC-80632-R9D6T</u></p> <p>Application: This application requested access to pseudonymised data through the HES Data Interrogation Service (HDIS), including the ability to download record level data, for public health purposes. It was noted that the applicant organisation did not currently hold any HES data but had been granted access to PCMD data.</p> <p>Discussion:</p> <p>IGARD raised queries with regard to the standard template presented and noted that previous amendments had not be incorporated and asked that the updated standard template be brought back to IGARD before the end of March 2017, including version numbering. IGARD members asked if information in the abstract of the application could include signposts to similar applications previously considered by IGARD, to aid learning and development of the members.</p> <p>It was suggested that NHS Digital should update section five of the application to specify that the applicant does not hold any other HES data and to incorporate the special conditions so these would be visible when information about the application was later published in the data release register. IGARD also noted that on renewal the applicant would need to provide clearer benefits and outputs achieved.</p> <p>IGARD noted that the fair processing link within section six of the application was incorrect and it was suggested that NHS Digital update to include the correct link.</p> <p>Outcome: Recommendation to approve</p> <p>IGARD advised the application should be amended to indicate in section five that the applicant does not currently hold any other HES data and to adequately reflect the relevant special conditions. The application should be amended to ensure the correct fair processing link was</p>

	<p>updated within section six.</p> <p>IGARD also advised that the standard template should be updated to include amendments previously advised and that a revised standard template be brought back to a future meeting and before the end of March 2017.</p>
2.2	<p><u>NHS Digital – National Diabetes Audit (Presenter: Louise Dunn) NIC-392221-P4V1G</u></p> <p>Application: This application is to link HES data already held by the applicant to an additional 'National Diabetes Transition Audit', and was previously considered by DAAG on the 15 March 2016. The National Diabetes Audit and National Paediatric Diabetes Audit datasets are being linked to enable the care of young people with diabetes to be tracked during transition from paediatric diabetes services to adult diabetes services.</p> <p>Discussion:</p> <p>IGARD noted that not all supporting documentation was relevant to the application presented and asked in future the abstract clearly state which document was relevant and for documentation to be clear as to whether it was for background or to support the application.</p> <p>IGARD asked for confirmation that the applicant is clear that data from Welsh GP practices will be provided to NWIS and data from English GP practices will be provided to NHS Digital with no cross-border sharing.</p> <p>IGARD sought for confirmation as to whether the legal basis for the processing of ONS data is still in place and whether the named researchers in the application have an 'approved researcher' status to process ONS data as it was not clear in the application of supporting documentation provided.</p> <p>IGARD advised that the applicant update their fair processing wording to accurately reflect the current processing activities and the applicant make a commitment to NHS Digital to publish the updated fair processing wording online within six weeks. IGARD advised the application should be amended to adequately reflect the relevant special conditions.</p> <p>It was the opinion of DAAG that this application would not be appropriate to renew or extend through the delegated authority process and would be expected to be brought back to IGARD</p> <p>Outcome: Recommendation deferred, pending:</p> <ul style="list-style-type: none"> • Confirmation that the applicant is clear that data from Welsh GP practices will be provided to NWIS and data from English GP practices will be provided to NHS Digital with no cross-border sharing. • Confirmation as to whether the legal basis for the processing of ONS data is still in place and whether the named researchers in the application have an 'approved researcher' status to process ONS data. <p>IGARD advised that the applicant update their fair processing wording to accurately reflect current processes and the applicant make a commitment to publish the updated fair processing wording online within six weeks.</p> <p>It was the opinion of IGARD that this application would not be appropriate to renew or extend through the delegated authority process and would be expected to be brought back to IGARD.</p>
2.3	<p><u>NHS Airedale, Wharfedale and Craven CCG (Presenter: Stuart Richardson) NIC-90767-Y3J0B</u></p> <p>Application: This application requested consolidation of five DSA's into one DSA and collaborative sharing of record level data previously approved by DAAG between NHS Airedale Wharfedale and Craven CCG, NHS Bradford City CCG and NHS Bradford Districts CCG to enable collaborative reporting. The collaborative agreement is to enable each CCG to receive the record level data for each CCG and act as joint Data Controller for all flows of pseudonymised data between CCGs, for collaborative reporting in any combination of CCGs within the group or at an individual CCG level to support the delivery of their commissioning</p>

agendas.

The presenter noted that applications 3.3, 3.4 and 3.5 were similar and that any differences would be pointed out to IGARD.

Discussion:

IGARD noted their difficulty in considering the application in isolation to NHS Bradford City and NHS Bradford District CCG applications due to the co-dependency of the three CCG applications.

IGARD noted that the data flow diagram did not accurately reflect the wording within section five of the application and should be updated. IGARD also noted that data flow diagram used the term clear data rather than 'identifiable', as advised previously. IGARD asked that the application be updated to clarify that data will not be shared with regard to invoice validation and risk stratification.

It was suggested that in future, applications should indicate whether or not the Kier Business Services and Dr Foster Limited's DPA registration wording appropriately reflected the processing of data for public health purposes about patients or health service users. IGARD also noted that Kier Business Services Limited DPA registration was shortly due to expire and would need to be renewed.

IGARD advised that fair processing notices be updated to adequately reflect current processes, including the sharing of data with NHS Bradford City CCG and NHS Bradford District CCG.

Outcome: Recommendation to approve

IGARD advised that the data flow diagram be updated to accurately reflect the wording within section five of the application. IGARD advised that future data flow diagrams should use the term clear data rather than 'identifiable' and that the application be updated to clarify that data will not be shared with regard to invoice validation and risk stratification.

It was suggested that the Kier Business Services Limited & Dr Foster Limited should ensure their DPA registrations wording appropriately reflected the requested use of data and the relevant data subjects. IGARD noted that Kier Business Services Limited DPA registration was shortly due to expire and would need to be renewed.

IGARD advised that fair processing notices be updated to adequately reflect current processes, including the sharing of data with other CCG's.

2.4

NHS Bradford City CCG (Presenter: Stuart Richardson) NIC-90638-Q3T5B

Application: This application requested consolidation of five DSA's into one DSA and collaborative sharing of record level data previously approved by DAAG between NHS Bradford City CCG, NHS Airedale Wharfedale and Craven CCG and NHS Bradford Districts CCG to enable collaborative reporting. The collaborative agreement is to enable each CCG to receive the record level data for each CCG and act as joint Data Controller for all flows of pseudonymised data between CCGs, for collaborative reporting in any combination of CCGs within the group or at an individual CCG level to support the delivery of their commissioning agendas.

Discussion:

IGARD noted their difficulty in considering the application in isolation to NHS Airedale, Wharfedale & Craven CCG and NHS Bradford District CCG applications due to the co-dependency of the three CCG applications.

IGARD noted that the data flow diagram did not accurately reflect the wording within section five of the application and should be updated. IGARD also noted that data flow diagram used the term clear data rather than 'identifiable', as advised previously. IGARD asked that the

2.5	<p>application be updated to clarify that data will not be shared with regard to invoice validation and risk stratification.</p> <p>It was suggested that the Kier Business Services Limited & Dr Foster Limited should ensure their DPA registrations wording appropriately reflected the requested use of data and the relevant data subjects. IGARD noted that Kier Business Services Limited DPA registration was shortly due to expire and would need to be renewed.</p> <p>IGARD advised that fair processing notices be updated to adequately reflect current processes, including the sharing of data with NHS Airedale, Wharfedale & Craven CCG and NHS Bradford District CCG.</p> <p>Outcome: Recommendation to approve</p> <p>IGARD advised that the data flow diagram be updated to accurately reflect the wording within section five of the application. IGARD advised that future data flow diagrams should use the term clear data rather than 'identifiable' and that the application be updated to clarify that data will not be shared with regard to invoice validation and risk stratification.</p> <p>It was suggested that the Kier Business Services Limited & Dr Foster Limited should ensure their DPA registrations wording appropriately reflected the requested use of data and the relevant data subjects. IGARD noted that Kier Business Services Limited DPA registration was shortly due to expire and would need to be renewed.</p> <p>IGARD advised that fair processing notices be updated to adequately reflect current processes, including the sharing of data with other CCG's.</p> <p><u>NHS Bradford Districts CCG (Presenter: Stuart Richardson) NIC-90642-L4S7D</u></p> <p>Application: This application requested consolidation of five DSA's into one DSA and collaborative sharing of record level data previously approved by DAAG between NHS Bradford Districts CCG, NHS Bradford City CCG and NHS Airedale Wharfedale and Craven CCG and to enable collaborative reporting. The collaborative agreement is to enable each CCG to receive the record level data for each CCG and act as joint Data Controller for all flows of pseudonymised data between CCGs, for collaborative reporting in any combination of CCGs within the group or at an individual CCG level to support the delivery of their commissioning agendas.</p> <p>Discussion:</p> <p>IGARD noted their difficulty in considering the application in isolation to NHS Bradford City and NHS Airedale, Wharfedale & Craven CCG applications due to the co-dependency of the three CCG applications.</p> <p>IGARD noted that the data flow diagram did not accurately reflect the wording within section five of the application and should be updated. IGARD also noted that data flow diagram used the term clear data rather than 'identifiable, as advised previously. IGARD asked that the application be updated to clarify that data will not be shared with regard to invoice validation and risk stratification.</p> <p>It was suggested that the Kier Business Services Limited & Dr Foster Limited should ensure their DPA registrations wording appropriately reflected the requested use of data and the relevant data subjects. IGARD noted that Kier Business Services Limited DPA registration was shortly due to expire and would need to be renewed.</p> <p>IGARD advised that fair processing notices be updated to adequately reflect current processes, including the sharing of data with NHS Bradford City CCG and NHS Airedale, Wharfedale & Craven CCG.</p> <p>Outcome: Recommendation to approve</p> <p>IGARD advised that the data flow diagram be updated to accurately reflect the wording within</p>
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	<p>section five of the application. IGARD advised that future data flow diagrams should use the term clear data rather than 'identifiable and that the application be updated to clarify that data will not be shared with regard to invoice validation and risk stratification.</p> <p>IGARD advised that the Kier Business Services Limited & Dr Foster Limited should ensure their DPA registrations cover processing data for public health purposes about patients or health service users. IGARD noted that Kier Business Services Limited DPA registration was shortly due to expire and would need to be renewed.</p> <p>IGARD advised that fair processing notices be updated to adequately reflect current processes, including the sharing of data with other CCG's.</p>
2.6	<p><u>NHS Calderdale CCG Vanguard (Presenter: Stuart Richardson) NIC-83772-T4M1V</u></p> <p>Application: This was a new application requesting SUS and local flow data (acute and ambulance) to secure improved health outcomes for the local population from services that can deliver high quality as well as making best use of resources.</p> <p>Discussion: IGARD noted the importance of Vanguards and that they would be considering more application of this type in the future.</p> <p>IGARD noted that the terminology within the application was not clear and asked for clarification of how the purpose of the application relates to the overarching programmes. IGARD also sought clarification as to who has access to the data and their involvement as it was not clear whether access was by individuals, programmes or organisations.</p> <p>Outcome: The application was recommended for approval, subject to conditions:</p> <ul style="list-style-type: none"> • Clarification of how the purpose of the application relates to the overarching programmes, including clarification as to who has access to the data and their involvement. <p>It was agreed that these conditions would be reviewed out of committee by the IGARD Chair.</p>
2.7	<p><u>Group application from 42 CCGs (Presenter: Stuart Richardson)</u></p> <p>Application: The application was to amend 42 CCG DSA's due to DSCRO South London and DSCRO NEL merging and South East CSU and NEL CSU merging, to enable the continuation of NEL CSU being used as a landing place for all data disseminated from NEL DSCRO. No additional data was requested nor extension to the retention period for each CCG.</p> <p>Discussion: IGARD noted the need to rationalise applications but asked NHS Digital to consider splitting applications, where appropriate, in order to aid transparency of process. IGARD also asked NHS Digital to provide data flow diagrams to accompany applications. IGARD also asked NHS Digital to provide a briefing note with future applications of this type, to aid learning amongst new members.</p> <p>IGARD noted that the application should be updated to correct typographical errors and it was noted that these errors should be addressed prior to producing a data sharing agreement, including clarification of the CAG terminology within the table of difference.</p> <p>IGARD noted that DPA registrations for a number of CCG's were due to expire shortly and should be renewed. It was also noted that four Data Sharing Framework Contracts were due to expire before the end of May 2017 (NHS Lambeth CCG, NHS Richmond CCG, NHS Thanet CCG and NHS Guildford & Waverley CCG) and NHS Digital.</p> <p>IGARD noted that data destructions certificates should be issued to relevant data processors at the same time of the data dissemination to the new data processors.</p>

	<p>Outcome: Recommendation to approve</p> <p>IGARD noted that the application should be updated to correct typos and errors before a DSA was issued, including clarification of the CAG terminology within the table of difference. IGARD noted that DPA registrations for a number of CCG's were shortly due to expire and should be renewed. IGARD noted that four Data Sharing Framework Contracts were due to expire before the end of May 2017 (NHS Lambeth CCG, NHS Richmond CCG, NHS Thanet CCG and NHS Guildford & Waverley CCG). IGARD noted that data destructions certificates should be issued to relevant data processors at the same time of the data dissemination to the new data processors.</p> <p>ACTION: IGARD asked NHS Digital to ensure that for all future applications, data flow diagrams should be provided and where appropriate the applications should be split in order to aid transparency of the process.</p>
2	<p>Any other business</p> <p>No other business was raised.</p>

Appendix A: Summary of Open Actions

Date raised	Action	Owner	Updates	Status
15/11/16	To update DAAG on the feasibility of providing random samples of data to applicants, and to ask the Production Team to provide DAAG with further information about the options for data minimisation	Garry Coleman	<p>06/12/16: This action was ongoing and it was anticipated an update would be available in mid-January. There had also been a discussion during the training session about data minimisation, with a suggestion for Peter Short to contact the Production Team for further information, and it was agreed that would be incorporated into this action.</p> <p>20/12/16: It was anticipated an update would be available in mid-January.</p> <p>10/01/17: Ongoing. It was agreed that this action would be taken forward by Alan Hassey rather than Peter Short.</p> <p>17/01/17: A number of internal discussions had taken place and it was anticipated an update would be brought to DAAG within the next few weeks.</p> <p>31/01/17: Ongoing. It was agreed the IGARD Chair would request an update on progress of this action.</p> <p>09/03/17: Ongoing. A number of internal discussions continued to take place and it was agreed the action would be taken forward by Garry Colman.</p>	Open
06/12/16	To query the privacy notice review process within NHS Digital.	Chris Carrigan	<p>13/12/16: This had been discussed with the Caldicott Guardian but further clarification was needed.</p> <p>20/12/16: This action was ongoing in light of developments in other areas, including the drafting of minimum criteria. It was agreed that the action would be taken forward by Dawn Foster and Noela Almeida.</p> <p>10/01/17: Ongoing, pending updated criteria.</p> <p>17/01/17: DAAG were given a brief verbal update on the work taking place.</p> <p>24/01/17: Work was ongoing following receipt of the final DAAG</p>	Open

			<p>comments on the minimum review criteria.</p> <p>31/01/17: A meeting was scheduled to discuss this later in the week.</p> <p>09/02/17: Ongoing. It was agreed this action would be taken forward by the IGARD Chair.</p> <p>16/02/17: It was noted that a meeting with the NHS Digital Caldicott Guardian was scheduled to discuss this.</p> <p>02/03/17: This had been discussed at the educational session and it was agreed the IGARD Chair would contact the Caldicott Guardian following that discussion.</p> <p>09/03/17: Ongoing.</p>	
10/01/17	To speak to NHS Digital colleagues regarding security assurance for HQIP.	Garry Coleman	<p>24/01/17: This had been raised with NHS Digital.</p> <p>31/01/17: This had been raised with HQIP and it was thought that work was underway to provide assurances.</p> <p>16/02/17: Ongoing. It was suggested that Jon Fistein could support this work.</p> <p>02/03/17: It was agreed the action should be taken forward by Garry Coleman.</p> <p>09/03/17: Security assurance discussions with HQIP and NHS Digital had taken place and it was hoped to be resolved by the end of the month.</p>	Open
17/01/17	To provide an update on the security assurances that NHS Digital would seek for applicants using contractors.	Garry Coleman	<p>24/01/17: It was anticipated this update would be provided to a meeting within the next few weeks.</p> <p>09/03/17: Ongoing. It was agreed that the IGARD chair would contact Garry Coleman.</p>	Open
09/02/17	To provide an update on the out of committee sign-off of NIC-69707 KPMG.	Garry Coleman	<p>23/02/17: A brief update was provided by email and IGARD requested sight of the final application.</p> <p>09/03/17: the final application was disseminated to IGARD Members</p>	Close
09/03/17	NHS Digital to ensure that for all future DSfC applications, data flow diagrams should be provided and where appropriate the applications should be split in order to aid transparency of the process.	Stuart Richardson	09/03/17:	open

Appendix B: Out of committee report (as of 03/03/17)

These applications were previously recommended for approval with conditions by IGARD, and the conditions have subsequently been agreed as met out of committee.

The following application conditions have been signed off by IGARD:

- NIC-26815-F8H6B Royal College of Surgeons (*considered at the 16/02/17 IGARD meeting*)