Independent Group Advising on the Release of Data (IGARD)

Minutes of meeting held 21 September 2017

Members: Sarah Baalham, Joanne Bailey, Chris Carrigan (Chair), Kirsty Irvine

In attendance: Dave Cronin, Louise Dunn, Frances Hancox, Dickie Langley, Vicki Williams

Apologies: Anomika Bedi, Nicola Fear, Jon Fistein, Eve Sariyiannidou

1	Declaration of interests
	Chris Carrigan noted his professional involvement with the University of Leeds in relation to NIC-367152-K6Y1D but noted no specific connection with that project or the staff involved.
	Review of previous minutes and actions
	The minutes of the 14 September 2017 IGARD meeting were reviewed and agreed as an accurate record of the meeting.
	Action updates were provided (see Appendix A).
	Out of committee recommendations
	An out of committee report was provided (see Appendix B).
2	Data applications
2.1	University College London - The relationship between education and health outcomes for children and young people across England (Presenter: Dickie Langley) NIC-27404-D5Z3F
	Application : This was a new application requesting pseudonymised Hospital Episode Statistics (HES) data and Office for National Statistics (ONS) mortality data for four cohorts each containing roughly 500,000 individuals. This would be linked to demographic data from the National Pupil Database, with NHS Digital then informing the Department for Education of which records should be sent to University College London. It was noted that HRA CAG had considered this case and confirmed that section 251 support was not required as only pseudonymised data would be provided to University College London.
	IGARD were informed that the legal basis for the use of ONS data was not yet fully confirmed and it was noted this would need to be in place before ONS data could be disseminated.
	Discussion : IGARD noted the unusual legal basis for data to be shared with NHS Digital under the Education Act 1996, and requested a briefing paper to provide more information about this and clearly explain the legal basis for this flow of data.
	IGARD discussed the documents that had been considered by HRA CAG and noted that these indicated that only anonymised data would be shared with University College London. It was confirmed that the applicant would not hold the pseudonymisation key that would allow the data to be re-identified, and that in the context of a data sharing agreement NHS Digital would consider the data disseminated to be anonymised. IGARD also raised that the HRA CAG documents referred to the need for suitable physical and technical security measures, and asked for section five of the application to be amended to reflect that suitable arrangements were in place to meet this requirement.

Data minimisation was discussed and IGARD noted that while the amount of data years had been justified and appeared proportionate, it was unclear why each of the four cohorts required data for 500,000 individuals. IGARD asked for a clearer justification to provide data about this amount of individuals and an explanation of why smaller cohort sizes would not be appropriate, particularly as the application referred to 'test cohorts' ahead of linking a full cohort.

There was a discussion of the proposed process for NHS Digital to inform the Department for Education about which education records should be sent to University College London for linkage, and IGARD raised concerns about whether this would be expected to contain any confidential data. Confirmation was requested that either no confidential data would be shared with the Department for Education, or of what the legal basis would be for this flow if any confidential data would be shared. In addition IGARD requested evidence that the flow of data into NHS Digital had been agreed by the appropriate Department for Education internal processes, including review by relevant committees if applicable.

It was noted that section five of the application set out three aims of the study, with the first of these being methodological work around the linkage success. IGARD queried whether this work around linkage success would need to be completed before the other work described could take place, but it was confirmed that the different areas of work could proceed in parallel. It was agreed the application should be updated to more clearly explain this, and to clarify statements elsewhere in the application that the study 'is largely methodological'.

IGARD discussed the purpose for this use of data and agreed that the application should more clearly explain this, with the explanation to be more closely aligned to the information provided in the study protocol and the information provided to CAG. It was suggested that a clearer data flow diagram, setting out the legal basis for each flow, might be helpful.

A reference to data linkage being carried out by the ADRC-E research team was queried; it was agreed this wording should be updated to be clear that this referred to a team within University College London.

IGARD noted that the application contained a special condition requiring an agreement to be in place between the Department for Education and University College London, and queried whether this was currently in place. It was confirmed that an agreement between the two organisations was in place and that the special condition was intended to emphasise that if that agreement ceased or changed then no further data flows would be permitted.

IGARD noted an incorrect link in the application to the Explanatory Memorandum relating to the Education Regulations 2009, and asked for this link to be corrected. A reference in the application to three datasets being shared with University College London and the Department for Education 'respectively' was queried as it was unclear which dataset would be sent to which organisation. Some minor typographical errors were noted.

It was noted that the application referred to addressing 'important policy issues' and IGARD requested a clearer explanation of how outputs would be disseminated to facilitate this. In addition IGARD noted a statement that the study would 'provide useful information for children and their parents' and requested more information about how outputs would be made available to the general public.

Outcome: Not able to recommend for approval.

- IGARD requested a briefing paper including relevant supporting documents to clearly explain the legal basis for receipt of data.
- Confirmation of ONS legal basis.
- Providing evidence that this use of data has been agreed by the appropriate Department for Education internal processes.

	 Providing a clearer justification for the cohort sizes and why it would not be appropriate to further minimize this 				
	 to further minimise this. Updating the application wording to be clear that NHS Digital will not send confidential 				
	data to the Department for Education, or if confidential data will be sent then				
	confirmation of the legal basis for this.				
	• A statement that this is largely a methodological study should be reworded for clarity,				
	and the application should more clearly explain that the uses of data for health purposes will not need to wait until the methodological work has completed.				
	 Section five should be updated to more clearly reflect the purpose in line with how this 				
	is described in the CAG application and the protocol.				
	Providing more information about how outputs will be shared in order to potentially				
	address important policy issues.				
	Clarification of how outputs will be made available to the general public, particularly				
	 given references to providing information for parents and children. Updating section five of the application to confirm that physical and technical security 				
	 Updating section five of the application to confirm that physical and technical security measures of a suitably high standard are in place in line with the requirements of 				
	CAG's decision.				
	 Clarifying a reference to linkage being carried out by the ADRC research team. 				
	 Correcting a link to the Explanatory Memorandum 				
	A reference to three datasets being shared with UCL and Department for Education				
	'respectively' should be clarified. The following advice was given:				
	 IGARD advised it would be helpful to have sight of a data flow diagram focusing on 				
	NHS Digital's involvement in this use of data, which should include the legal basis for				
	each flow.				
	IGARD advised that UCL should update their DPA registration to more clearly state				
	that data is processed about patients or health service users, rather than only patients				
	of partner NHS hospitals.				
	Action: Dickie Langley to provide a briefing paper (with relevant supporting documents)				
	regarding the legal basis for receipt of data from Department for Education, and for this to be reviewed by the IG Advisor prior to circulation to IGARD.				
2.2	NHS Blood & Transplant – Outcomes in the NIHR-funded ATTOM study (Presenter: Louise				
	Dunn) NIC-14342-Q8W0X				
	Application: This was a new application requesting pseudonymised HES data to support a				
	research study into Access to Transplant and Transplant Outcome Measures (ATTOM).				
	IGARD were informed that the cohort had originally consented to participate but that section				
	251 support had been obtained to permit identifiers to be shared with NHS Digital for linkage.				
	It was noted that the applicant intended to apply for ONS mortality data in future but that as the legal basis for this had not yet been confirmed, this was not included in the current application.				
	Discussion: IGARD noted the potential value of this research and expressed their support for				
	the aims of the study. A query was raised about references to patients' health literacy, as it				
	was unclear how this was measured, and it was agreed the application should be updated with				
	a clearer explanation of this.				
	IGARD queried the link between this particular use of data for a doctorate study and the wider				
	purposes of ATTOM as described within the application. It was agreed that the application				
	needed to provide a clearer explanation about the specific purpose and outputs of this specific				
	piece of work, rather than focusing on the wider work of ATTOM. In addition IGARD requested clarification of the funding arrangements in place, including clarification of any involvement by				
	the University of Cambridge as this organisation was referred to in the funding letter.				

A query was raised about a statement within the application that record-level data would be stored on a server with permissions specific to one 'statistician (data controller)' and the primary researcher; it was agreed this should be reworded for clarity. IGARD noted that the application included a special condition reminding all partied of the need to comply with the Data Sharing Framework Contract requirements around the use of data by personnel; it was agreed this should also be reflected within section five of the application in the interests of transparency. In addition IGARD requested a clearer explanation of a reference to outputs being relevant to other chronic disease groups. IGARD noted that patient information materials had been reviewed by HRA CAG in relation to patient notification, but raised some concerns that the applicant's website did not seem to include any fair processing information about ATTOM in general or about this particular use of data. It was agreed that the applicant should be advised to make appropriate fair processing information available through this website. Outcome: Recommendation deferred, pending: Clarifying how this use of data for a doctorate study relates to the wider purposes of ATTOM, with a clearer explanation of the funding arrangements in place and a clearer focus on the outputs and benefits of this particular piece of work. Providing a clearer explanation of how patient health literacy is measured. • Clarifying the description of permissions specific to the statistician and researcher. Updating section five to reflect the special condition relating to data access by personnel. A reference to results being 'relevant to other chronic disease groups' should be either further explained or removed. A reference to outputs influencing policy-makers should be either further explained or removed. The following advice was given: IGARD noted that the applicant's DPA registration was shortly due to expire and would need to be renewed in order for data to be disseminated. IGARD advised the applicant should review their website against the ICO's Privacy Notices Code of Practice to ensure they reflect best practice standards, and in the interests of transparency, update their privacy notice as soon as possible to provide information about the use of data for ATTOM. The EU General Data Protection Regulation recognises that pseudonymised data should be considered as information on an identifiable natural person and also places a greater focus on the need to demonstrate transparency of data processing in the information provided to data subjects. 2.3 Guy's and St Thomas' NHS Foundation Trust - HOT HMV Retrospective Mortality Data (Presenter: Louise Dunn) NIC-35239-W2W9R **Application:** This was a new application requesting ONS mortality data, including date and cause of death, for a small cohort based on informed patient consent. IGARD were informed that consent had been obtained in 2009, and that while the materials used would likely not meet current standards they had referred to using data from NHS Digital's predecessor body. Due to the nature of the cohort the applicant believed that the majority of participants would now be decease, but the applicant had committed to make appropriate fair processing information available. **Discussion:** IGARD recognised the potential significance of this study and expressed their support. The consent materials were discussed and on balance IGARD agreed that the proposed data dissemination would not be inconsistent with participants' expectations of how their data would be used. It was agreed that the steps taken to provide updates via fair processing information seemed appropriate.

A query was raised about a statement within section five of the application that data would not add to existing mortality information as 'local providers may already have mortality data on patients remaining under their care'. It was suggested that this wording was unclear and IGARD agreed that this sentence should be removed from the application.

There was a discussion about the planned dissemination of outputs and IGARD noted that the applicant intended to present a lay summary of the data to patient participation groups. A reference to targeting the British Thoracic Society in December 2017 was queried, as the application elsewhere noted that six months would be required to process the data, and it was suggested that this target date should either be updated or removed.

Outcome: Recommendation to approve.

The following amendments were requested:

- A reference to localities holding mortality data on patients under their care should be removed from section five.
- References to target dates in December 2017 should be updated or removed.
- Updating section five to reflect the special condition relating to data access by personnel.

2.4 <u>University of Leeds – Life After Prostate Cancer study (Presenter: Louise Dunn) NIC-367152-</u> K6Y1D

Application: This renewal application requested list cleaning of a study cohort to enable the study to contact the cohort while reducing the risk that they would attempt to contact a participant who had died. The application had most recently been considered by DAAG on 29 September 2015. IGARD were informed that the applicant's privacy notice had initially been assessed as not meeting the nine minimum criteria but that an updated draft had been produced and that this was expected to be published within roughly two weeks.

Discussion: IGARD noted that the application abstract did not indicate who had carried out the privacy notice review and suggested that this should be clarified. In addition it was noted that the SD numbers listed within the table of approval considerations was inconsistent with the supporting documents provided.

There was a discussion of the draft updated website wording and IGARD suggested that the current updated description of how to withdraw from the study could be potentially misleading, as this referred to withdrawing within six months but did not explain what other options were available to withdraw once more than six months had passed. IGARD noted that other sections of the website such as the FAQs and the summary information sheet did explain the options for withdrawal and it was suggested that the update wording should be amended to be consistent with those sections.

IGARD discussed the benefits of this work and suggested it would have been helpful to more clearly describe the benefits of list cleaning in section five, rather than focusing on the benefits of the wider study.

IGARD queried the Welsh cohort size, as this was not described consistently within the application; it was agreed this would be corrected. IGARD also queried the role of the Picker Institute Europe in this use of data and it was agreed that a brief explanation should be added to section five of the application, along with a commitment that NHS Digital data would not be shared outside the UK.

Outcome: Recommendation to approve.

The following amendments were requested:

- Updating the abstract to be clear who carried out the privacy notice review.
- The table of approval considerations should be amended to list the correct SD

numbers.

- Section five should include a clearer explanation of the role of the Picker Institute Europe, and adding a statement that data will not be shared outside the UK.
- Updating the stated cohort sizes for consistency.
- Updating section five to reflect the special condition relating to data access by personnel.

The following advice was given:

- IGARD advised that the University of Leeds should update their DPA registration to refer to processing data about patients or health service users.
- IGARD advised that the draft updated website wording regarding withdrawal should be updated to more clearly describe the options available to withdraw once six months have passed and ensure consistency with the summary information and FAQs available on the website.

2.5 Monitor (Presenter: Louise Dunn) NIC-15814-C6W9R

Application: This amendment application requested ONS mortality data and Diagnostic Imaging Dataset (DIDs) data, as well as the addition of the NHS Trust Development Authority as a data controller in common. IGARD were informed that NHS Digital had not yet received evidence of the legal basis for ONS data and therefore IGARD were asked to consider the application without the inclusion of that dataset, with the intention that a further amendment application would be submitted later for the addition of ONS data. In addition IGARD were informed that NHS Digital would work with Monitor to determine the best approach for future amendment applications, such as an anticipated amendment regarding PLICS data.

Discussion: IGARD noted the verbal update regarding ONS data and agreed that the application would need to be updated to remove the request for ONS data, to be clear that this would instead be requested as part of a future amendment application. In addition it was noted that the legal basis listed for ONS data within the application was not fully correct, so that when the amendment application for ONS data was submitted this would be expected to list the correct sub-section of the Health and Social Care Act 2012.

IGARD noted their concerns about how section five of the application had been drafted and updated across multiple amendment applications, as this was now difficult to follow and it was considered that this would not provide sufficient clarity and transparency for the general public when published as part of the data release register. IGARD welcomed NHS Digital's intention to work with the applicant to improve this for any future iterations.

A query was raised about PLICS data and IGARD asked for this dataset to be explained within the application. It was suggested that a brief explanation of the DIDs dataset should also be added to the application. A further query was raised about the number of years of DIDs data requested, as it was noted that roughly six years of data were listed in the table of data requested but that section five of the application appeared to describe the use of only two years of DIDs data. It was agreed that either section five should be amended to explain how the additional years of DIDs data would be used and why this amount of data was necessary, or if only two years were required then the table of data requested should reflect this.

IGARD queried when the dashboards described in the application might become publicly available, as it was agreed that further benefits could potentially be achieved through making these outputs more widely available. In addition IGARD queried the role of Advanced 365 Limited and it was explained that this organisation would provide data storage facilities. A point of accuracy was raised about the application history as described within the abstract section of the application; it was agreed this should be updated to reflect that the conditions set by IGARD in May 2017 had been agreed by the Director for Data Dissemination rather than being reviewed out of committee by IGARD.

	IGARD noted that section five of the application included a commitment that the application would not 'disseminate data in the format it is received' and suggested that this wording should be amended to the standard wording that the applicant would not share record level data, or aggregated data containing small numbers, with any third party organisation. There was a brief discussion of the definition of derived data and what applicants might reasonably be able to share; IGARD requested sight of the new data sharing agreement wording particularly in relation to this point.							
	 Outcome: Recommendation to approve (excluding the flow of ONS data). The following amendments were requested: References to ONS data should be removed from the application, as the legal basis for this flow has not yet been evidenced. Section five should be updated to more clearly state that the NHS Digital record level data or data containing small numbers will not be shared with any third parties, and clarify current wording about not disseminating data in the format received. The application should be amended to include an explanation of PLICS data and DIDs data. Further information was requested about when the dashboard referred to in the application will become publicly available. Clarification of the number of years of DIDs data requested, with section five to be updated to justify why this is required or section three to be updated to restrict data to only two years. The application history provided in the abstract should be updated to be clear that the previous conditions set by IGARD were agreed by the Director for Data Dissemination rather than being agreed out of committee by IGARD. Updating section five to reflect the special condition relating to data access by personnel. The following advice was given: IGARD advised the applicant should review their website against the ICO's Privacy Notices Code of Practice to ensure they reflect best practice standards, and in the interests of transparency, update their privacy notice as soon as possible. The EU General Data Protection Regulation recognises that pseudonymised data should be considered as information on an identifiable natural person and also places a greater focus on the need to demonstrate transparency of data processing in the information provided to data ubijects." IGARD advised that the DPA registration for Advanced 365 Limited should be updated to include processing data about patients or health service users, and IGARD note							
	Action: Dickie Langley to provide IGARD with a copy of the new standard DSA terms and conditions.							
2.6	University of York - Hospital use by babies enrolled in the PREVAIL randomised controlled trial (Presenter: Dave Cronin) NIC-73974-P0L1Z Application: This was a new application requesting the linkage of cohort identifiers to HES data (including date of exit from NHS) for a cohort of babies involved in a clinical trial, within a six month period following their recruitment to the study based on parental consent. IGARD were informed that NHS Digital had reviewed the consent materials and that this review had identified some issues, which the applicant had taken steps to address via updated fair processing information for parents. It was noted that NHS Digital intended to continue to work with the applicant to further improve their privacy notice. Discussion: IGARD noted the potential benefits of this work and expressed their support for the aims of the study.							
	the aims of the study.							

	IGARD discussed the consent materials for this application. A query was raised about whether a statement about using records 'up till 6 months after entering the trial' could be interpreted that data would not be used once more than six months had passed; however it was agreed that in general it was sufficiently clear that this referred to limiting the data to a period of six months.
	On balance IGARD agreed that while the consent materials were not fully adequate by current standards, the materials did not contain any wording that would lead participants to believe that their data would not be shared or would otherwise be incompatible with the requested data dissemination. IGARD took the view that the proposed use of data would likely be within participants' expectations of how data would be used, and that it would be appropriate to provide updated information to participants via fair processing materials such as the privacy notice. IGARD noted that NHS Digital intended to continue to work with the applicant to ensure that their privacy notice fully met the nine minimum criteria and IGARD expressed their support for this approach.
	IGARD queried a special condition within the application relating to data security as it was unclear why this had been included for this particular application and whether it should also be reflected within section five. It was clarified that the special condition had been set following a review of security arrangements by NHS Digital's security consultant, and that section five contained a lay summary of the arrangements rather than the technical detail.
	 Outcome: Recommendation to approve. The following advice was given: IGARD advised that the University of York should update their DPA registration to more clearly state that data is processed about patients or health service users. IGARD advised that University College London should update their DPA registration to more clearly state that data is processed about patients or health service users, rather than only patients of partner NHS hospitals. IGARD advised the applicant to work with NHS Digital to further improve their fair processing information.
2.7	London School of Hygiene & Tropical Medicine - Liver transplantation as treatment for patients with hepatocellular carcinoma (Presenter: Dave Cronin) NIC-72064-V5V2X
	Application : This application requested an amendment to an existing data sharing agreement, which had recently been considered by IGARD on 10 August 2017. Following the recommendation to approve the previous application, it had come to light that the agreement would not include all the data required by the applicant; this amendment application therefore requested to additionally receive a pseudonymised cohort of all individuals with certain diagnostic codes that had not been linked to the previous datasets, to help examine potential bias in the existing linked data.
	It was noted that the existing data sharing agreement included a special condition for the applicant to update the study website with additional fair processing information within one month of signing the data sharing agreement, but that this had not yet been completed. The applicant had provided a draft website update that it was anticipated would be published shortly. IGARD were informed that data had not yet been disseminated under that agreement.
	Discussion : IGARD discussed the special condition regarding fair processing and agreed it would be important for NHS Digital to ensure that this update took place within the anticipated time scales.
	IGARD queried a statement within the abstract section of the application that the additional data extract requested would not include 'data that would otherwise be omitted because of type 2 patient objections'. It was explained that patients who had registered a type 2 objection

	had been removed from the dataset defined by the existing agreement, and that the newly requested data would also not include any data on those individuals.
	 Outcome: Recommendation to approve. The following amendment was requested: A statement in the abstract about 'no data that would otherwise be omitted because of type 2 objections' should be clarified.
3	Any other business No other business was raised.

Appendix A: Summary	of Open Actions
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Date raised	Action	Owner	Updates	Status
20/04/17	IGARD Chair to contact key stakeholder organisations regarding the benefits of uses of data to feed into the IGARD annual report.	IGARD Chair	14/09/17: Ongoing. It was agreed this would be discussed during the educational session. 21/09/17: Ongoing.	Open
27/04/17	IGARD Chair to contact the NHS Digital Caldicott Guardian regarding GPs' data controller responsibilities for fair processing around risk stratification.	Arjun Dhillon	 18/05/17: Ongoing. It was agreed this would be discussed with the Deputy Caldicott Guardian. 22/06/17: Ongoing; it was suggested the Deputy Caldicott Guardian should discuss this in more detail with Joanne Bailey. 29/06/17: It was noted this action would be taken forward by the Deputy Caldicott Guardian, and the action owner was updated. 20/07/17: It was agreed the Deputy Caldicott Guardian would provide an update on the current status of this. 10/08/17: An update from NHS England had been requested. 21/09/17: Ongoing. 	Open
18/05/17	Garry Coleman to provide information about different arrangements for data storage and backup locations, for consideration of whether the organisations involved would be considered to be processing data.	Garry Coleman	 15/06/17: IGARD had been advised by email that a paper about this would be submitted to an upcoming IGARD meeting. 22/06/17: It was anticipated that this would be discussed at the 6 July 2017 IGARD meeting. IGARD asked for some information to be circulated by email prior to the meeting in order to inform members who would not be present at that particular meeting. 27/07/17: An email had been circulated requesting further information from IGARD members. 03/08/17: Two IGARD members had responded by email and the action remained ongoing. 10/08/17: It was anticipated that a paper on this would be brought to IGARD within the following two weeks. 24/08/17: The paper was in the process of being updated based on recently published ICO guidance. 14/09/17: Ongoing. IGARD noted that given the amount of time that 	Open

			had passed, they would consider starting to note this on relevant applications where a data storage location was not listed as a data processor. 21/09/17: Ongoing. IGARD asked for Dickie Langley to provide an update on Garry Coleman's open actions at the next meeting to help ensure timely progression.	
15/06/17	Data Services for Commissioners to work with NHS Digital IG staff to check the privacy notices for these 4 CCGs (South Kent Coast CCG; Ashford CCG; Thanet CCG; Canterbury & Coastal CCG) as part of the ongoing training, and provide a copy of the outcome of this check to IGARD for information.	Stuart Richardson	29/06/17: Ongoing. It was suggested it would be helpful to discuss this at an upcoming educational session. 21/09/17: Ongoing.	Open
06/07/17	Stuart Richardson to ensure that privacy notice checklists are provided for all DSfC applications for a trial period of three months from 13 July IGARD meeting.	Stuart Richardson	14/09/17: It was confirmed this would be discussed at the October education session. 21/09/17: Ongoing.	Open
20/07/17	Garry Coleman to provide an update within two weeks on how NHS Digital manage the risk involved in CCGs using South Central and West CSU as a data processor in light of data sharing breaches and recent audits.	Garry Coleman	 10/08/17: It was anticipated that a paper on this would be brought to IGARD within the following two weeks. 24/08/17: IGARD received a verbal update on the work that had taken place following both audits and verbal assurances that NHS Digital were content with the level of risk involved in this organisation continuing to act as a data processor. IGARD welcomed this update and requested written confirmation. 31/08/17: IGARD were notified that the requested written confirmation should be provided within one day. 14/09/17: An email response had been circulated on 31 August, and IGARD noted that they were awaiting receipt of the post-audit report. 21/09/17: Ongoing. 	Open
20/07/17	Garry Coleman to categorise different standard lengths of indicative data retention periods for general research and clinical trials, with appropriate justification.	Garry Coleman	21/09/17: Ongoing.	Open
27/07/17	Arjun Dhillon to provide information for IGARD about	Arjun	10/08/17: Ongoing. It was thought that this action might be	Open

	the robustness of different funding processes and how this might affect the level of scrutiny applied to or information included in applications provided to IGARD.	Dhillon	addressed within the context of a forthcoming paper on a risk-based approach to application, which it was anticipated would be brought to IGARD for discussion soon. 24/08/17: Ongoing, pending wider work on a risk-based approach. 21/09/17: Ongoing.	
31/08/17	Garry Coleman to report back on how cancer registration data was previously described as pseudonymised PDS data within older versions of applications, and present to a future education session on changes to how MRIS reports are now shown within applications.	Garry Coleman	21/09/17: Ongoing.	Open
14/09/17	Stuart Richardson to provide IGARD with a copy of the Directions relating to the Emergency Care Data Set (ECDS) with confirmation of the date this was approved by the NHS Digital Board.	Stuart Richardson	21/09/17: The Directions had been provided by email. IGARD members were asked to provide any comments by email, ahead of potentially closing the action at the next meeting. It was noted that confirmation would still be required of NHS Digital Board approval.	Open
14/09/17	Stuart Richardson to provide IGARD with a copy of the Directions relating to Social Care Data with confirmation of the date this was approved by the NHS Digital Board.	Stuart Richardson	21/09/17: The Directions had been provided by email. IGARD members were asked to provide any comments by email, ahead of potentially closing the action at the next meeting. It was noted that confirmation would still be required of NHS Digital Board approval.	Open
21/09/17	Dickie Langley to provide a briefing paper (with relevant supporting documents) regarding the legal basis for receipt of data from Department for Education, and for this to be reviewed by the IG Advisor prior to circulation to IGARD.	Dickie Langley		Open
21/09/17	Dickie Langley to provide IGARD with a copy of the new standard DSA terms and conditions.	Dickie Langley		Open

Appendix B: Out of committee report (as of 15/09/17)

These applications were previously recommended for approval with conditions by IGARD, and since the previous Out of Committee Report the conditions have been agreed as met out of committee.

NIC reference	Applicant	IGARD meeting date	Recommendation conditions as set at IGARD meeting	IGARD minutes stated that conditions should be agreed by:	Conditions agreed as being met in the updated application by:	Notes of out of committee review (inc. any changes)
Group 3 CCGs: NIC-47167- H3M4V; NIC-82378- M2B6C; NIC-82394- W7G7J	NHS South Warwickshire CCG; NHS Coventry and Rugby CCG; and NHS Warwickshire North CCG.	29 th June 2017	 The CCGs should update their websites to ensure that the correct version of the privacy notice is easily accessible across a range of different devices and remove any older versions that could be misleading. The CCGs should also ensure their privacy notices accurately describe the type of data used, how individuals can opt out, what organisations data is shared with and correct any misleading statements 	IGARD Chair	IGARD Chair	N/A
NIC-148071	Imperial College London	13 th July 2017	 Confirmation from NHS Digital of the legal basis under section 251, with provision of the most recent letter from CAG. Details of the Microdata Release Panel approval should be provided. 	IGARD quorum	IGARD quorum	N/A
NIC-110660	NHS Hartlepool & Stockton On Tees CCG	3 rd August 2017	The CCG should update their privacy notice in line with NHS Digital's nine criteria.	IGARD Chair	IGARD Chair	

In addition the following applications were not considered by IGARD but have been progressed for IAO and Director extension/renewal:

None