

Independent Group Advising on the Release of Data (IGARD)

Minutes of meeting held 29 June 2017

Members: Anomika Bedi (agenda item 3 only) Chris Carrigan, Kirsty Irvine, Eve Sariyiannidou (items 1 – 2.9), James Wilson

In attendance: Jane Cleave (observer), Garry Coleman, Dave Cronin, Louise Dunn, Frances Hancox, Louise Hill, Stuart Richardson, Vicki Williams

Apologies: Sarah Baalham, Joanne Bailey, Nicola Fear, Jon Fistein

1	<p>It was noted that Debby Lennard had resigned as an IGARD member. IGARD offered her their thanks for all her work to date, and their best wishes for the future.</p> <p>Declaration of interests</p> <p>No relevant interests were declared.</p> <p>Review of previous minutes and actions</p> <p>The minutes of the 22 June 2017 IGARD meeting were reviewed and a number of proposed changes were discussed. It was agreed that the proposed changes to outcome wording were stylistic rather than substantive and the original wording would therefore be retained; in addition a point of accuracy was raised regarding the proposed change to the wording of an AOB discussion item. Other than these exceptions the proposed changes were accepted and the amended minutes were 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>North East Hampshire and Farnham CCG (Presenter: Stuart Richardson) NIC-43549-Z5T2V</u></p> <p>Application: This application was to amend the existing data sharing agreement to change data processors from North East London CSU to South Central and West CSU, and to add identifiable Secondary Uses Service (SUS) data for the purposes of invoice validation and risk stratification as well as extending previously agreed data flows. IGARD were informed of an error in the application's summary section, as this at one point stated that invoice validation and risk stratification were not requested but this was incorrect.</p> <p>Discussion: IGARD noted that the application listed a DPA registration expiry date for the CCG that had now passed and it was agreed the application should be updated to include the new expiry date.</p> <p>There was a discussion about the change of data processors and the need to ensure appropriate data destruction by the former data processor. IGARD asked for the application to be amended to include a special condition about this; it was suggested that data should not be disseminated to the new data processor until the former data processor had confirmed data destruction, but that it might be necessary to allow a brief overlap window to ensure continuity</p>

of service. IGARD asked the presenter to contact the DARS team within NHS Digital regarding their standard process for data destruction when changing data processors, and suggested that the special condition should be worded accordingly.

The CCG privacy notice was briefly discussed and IGARD suggested that the applicant should ensure that this was easily accessible on the CCG website.

Outcome: Recommendation to approve.

The application should be amended to reflect the new DPA registration expiry date for the CCG. The application should also be amended so that the special condition regarding data destruction states that there will be no dissemination involving the new data processor until appropriate data destruction has taken place at the former data processor.

It was noted the summary section would be corrected to indicate that data was requested for invoice validation and risk stratification.

Action: Stuart Richardson to contact DARS regarding standard data destruction timescales and processes where data processing is moving from one data processor to another.

2.2

Guildford and Waverley CCG (Presenter: Stuart Richardson) NIC-43466-P5J3F

Application: This application was to amend the existing data sharing agreement to change data processors from North East London CSU to South Central and West CSU. IGARD were informed of an error on the application as this was referred to in the summary section as a new application, but was in fact an amendment.

Discussion: IGARD queried a reference in the summary section to a number of CCGs using North East London CSU 'to ensure they are reviewing comparable data', and it was explained that this was intended to refer to sharing only aggregated outputs with small numbers suppressed. IGARD queried whether the CCG would continue to use North East London CSU as a data processor but it was confirmed that this application was to move from using that data processor to instead use South Central and West CSU. It was agreed the application wording should be amended to clarify this. In addition IGARD reiterated the point raised during the discussion of NIC-43549-Z5T2V North East Hampshire and Farnham CCG about the need for appropriate special condition wording around data destruction.

A query was raised about the description of the requested data as 'SUS (all datasets)' as it was noted that SUS data was not requested for invoice validation or risk stratification under this application. It was explained that this referred to the different types of data available within the SUS dataset, rather than to the purposes for which the data would be used (such as commissioning or risk stratification), but it was agreed the wording would be clarified.

IGARD noted that the privacy notice link provided was for Surrey Heath CCG rather than Guildford and Waverley CCG, and asked for the correct link to be provided. It was confirmed that the privacy notice for Guildford and Waverley CCG have been reviewed by NHS Digital against the agreed nine criteria and that it had passed review. IGARD members confirmed that the Guildford and Waverley CCG privacy notice was available on the CCG website, and it was agreed that the CCG should update their privacy notice to include more information about their use of data processors. It was agreed that there should be a wider discussion about privacy notice reviews at an upcoming educational session.

Outcome: Recommendation to approve

The application should be amended to remove a reference to all SUS datasets, to amend references to North East London CSU to be clear that this application requests an amendment to change data processors and to provide the correct privacy notice link for this CCG. The application should also be amended so that the special condition regarding data destruction

	<p>states that there will be no dissemination involving the new data processor until appropriate data destruction has taken place at the former data processor.</p> <p>IGARD advised that the CCG should update their privacy notice to include more information about their use of data processors.</p> <p>It was noted the summary section would be corrected to indicate that this is an amendment rather than a new application.</p>
2.3	<p><u>Surrey Heath CCG (Presenter: Stuart Richardson) NIC-43558-V8K7Z</u></p> <p>Application: This application was to amend the existing data sharing agreement to change data processors from North East London CSU to South Central and West CSU, and to add identifiable SUS data for the purposes of invoice validation only.</p> <p>Discussion: IGARD reiterated the point raised during the discussion of NIC-43549-Z5T2V North East Hampshire and Farnham CCG about the need for appropriate special condition wording around data destruction.</p> <p>Outcome: Recommendation to approve.</p> <p>The application should also be amended so that the special condition regarding data destruction states that there will be no dissemination involving the new data processor until appropriate data destruction has taken place at the former data processor.</p>
2.4	<p><u>Heywood, Middleton and Rochdale CCG (Presenter: Stuart Richardson) NIC-90049-D5S8M</u></p> <p>Application: This application had previously been considered at the 25 May 2017 IGARD meeting, when IGARD had deferred making a recommendation pending further information. The updated application now provided additional detail about the risk stratification services that would be offered by MSD Healthcare Services, and it was anticipated that a separate application would be made at a later date for the tool development purposes that had been removed from this application.</p> <p>Discussion: IGARD noted that the previously raised queries regarding software development had been addressed as that element had been removed from this application. There was a discussion about how data access would be restricted within MSD Healthcare Services to only staff carrying out relevant functions, and it was agreed that this should be more clearly explained within the application such as by describing the use of role based access controls or confirming whether data access would be restricted to specific teams.</p> <p>A statement that Arden and GEM CSU would pass ‘the pseudonymised, processed, identifiable data’ to MSD Healthcare Services was queried. It was clarified that this should only refer to pseudonymised data, and IGARD asked for the word ‘identifiable’ to be removed from that sentence. In addition IGARD noted that the application listed a DPA registration expiry date for the CCG that had now passed, and asked for the application to be amended to reflect the new expiry date. IGARD reiterated the point raised during the discussion of NIC-43549-Z5T2V North East Hampshire and Farnham CCG about the need for appropriate special condition wording around data destruction.</p> <p>It was noted that at the 22 June 2017 IGARD meeting there had been a discussion about how the legal basis to disseminate pseudonymised data under the Health and Social Care Act 2012 was described, and that in future applications should include the relevant subsections such as section 261(2)(b)(ii).</p> <p>There was a discussion of the role of MSD Healthcare Services in providing risk stratification, and IGARD noted that while additional information about this was provided in the summary section this was not fully reflected in section five of the application which would form the data</p>

sharing agreement. It was agreed that section five should be updated to incorporate the additional explanation from the summary section, and should also include a clear statement that data provided under this application would not be used for software development. In addition any references to algorithms should be clarified.

A query was raised about the description of MSD Healthcare Services as 'a division of Merck Sharp and Dohme Limited'. IGARD asked for section five of the application to be updated to incorporate the explanation from the summary section of these two organisations, with clarification of whether MSD Healthcare Services was a legal entity in its own right. IGARD queried how one of the points previously raised in 25 May 2017 had been addressed, as the response said 'reference removed' but it was unclear what had been removed; it was suggested the presenter should ensure this had been appropriately addressed.

Concerns were raised regarding the CCG privacy notice as it was felt that references to withdrawing consent could be potentially misleading, given that consent was not used as the legal basis to disseminate this data. It was agreed that this section of the privacy notice should be amended to improve clarity.

Outcome: Recommendation to approve, subject to conditions:

- Providing further clarification on what teams or groups of staff within MSD Healthcare will have access to this data, for example by more clearly describing the use of role based access controls.
- The CCG privacy notice should be amended to remove misleading references to withdrawing consent for data processing.

A reference to passing identifiable data to MSD Healthcare should be corrected to be clear this will be pseudonymised data. The processing activities section of the application should be amended to add a statement that this data will not be used for software development, including explanation currently provided in the summary section, and to be clearer what risk stratification services are currently offered by MSD Healthcare with clarification of a reference to an algorithm. Section five should also be amended to incorporate the explanation from the summary section about MSD Healthcare being a division of Merck Sharp and Dohme Limited, with an explanation of what type of legal entity MSD Healthcare is.

The application should also be amended so that the special condition regarding data destruction states that there will be no dissemination involving the new data processor until appropriate data destruction has taken place at the former data processor. The application should also be amended to include the new DPA registration expiry date for the CCG.

A typo regarding the section 251 support would be corrected.

It was agreed the above conditions would be reviewed out of committee by the IGARD Chair.

2.5

Sheffield CCG (Presenter: Stuart Richardson) NIC-89613-L9D8C

Application: This application had previously been considered at the 11 May 2017 meeting when IGARD had deferred making a recommendation. The application had now been updated to remove the involvement of Sheffield Council, as it was anticipated a separate application would be submitted later to request their use of data. Additional information had also been provided about the different roles of the various data processors with clarification of references to a CLARHC, and Sheffield CCG had provided a draft updated privacy notice. IGARD were informed that the application listed a DPA registration expiry date for Sheffield CCG that had now passed, and that this would be updated within the application.

Discussion: IGARD discussed the large number of data processors involved in this application and it was felt that while this was understandable due to the contractual arrangements in place, it was possible that the general public would have some concerns about possible duplication of processing when a large number of different data processors were involved such as with this application. On balance it was felt that sufficient information had been provided about the different activities that would be carried out by the various

organisations, although it was suggested that the role of Sheffield Hallam could have been explained more clearly.

There was a brief discussion about the use of data to evaluate the Test Bed Programme and whether this could potentially include any commercial elements, but on the whole it was agreed that this was not an area of concern for this application.

IGARD discussed the draft privacy notice and reflected that while this described the use of some data processors, Rotherham CCG appeared to have been omitted and it was suggested that this organisation should also be listed as a data processor. Moreover IGARD noted that the description of risk stratification referred to using anonymised data and it was suggested that this wording should be updated to more clearly reflect the data processing that would take place including the dissemination of identifiable data for this purpose.

Outcome: Recommendation to approve, subject to a condition:

- The CCG should amend their privacy notice to more accurately reflect the type of data that is processed for the purpose of risk stratification, and to include Rotherham CCG when adding details about data processors.

The application should be amended to include the correct DPA registration expiry date for the CCG. The application should also be amended so that the special condition regarding data destruction states that there will be no dissemination involving the new data processor until appropriate data destruction has taken place at the former data processor.

It was agreed the above condition would be reviewed out of committee by the IGARD Chair.

2.6

Group of 3 CCGs¹ (Presenter: Stuart Richardson)

Application: This application was to extend the existing flows of pseudonymised data for commissioning purposes (SUS, local flows, MHMDS, MHSDS, MSDS, MHLDDS, IAPT, CYPHS, DIDs) and for the three CCGs to share pseudonymised data between each other to enable collective reporting.

Discussion: It was noted that at the 22 June 2017 IGARD meeting there had been a discussion about whether CCGs sharing data in a similar way should be considered joint data controllers, or data controllers in common. It was suggested that in some circumstances the organisations might act as joint data controllers, whereas for other uses of data they would be considered data controllers in common; IGARD were informed that NHS Digital took the view that they should be described as data controllers in common for this type of application.

IGARD suggested that the wording in section five should be updated to more clearly reflect that data would be shared with three CCGs, for example by referring to multiple CCGs rather than 'the CCG' in singular. A description of further expected benefits was queried and IGARD asked for this to be more clearly worded. In addition a reference to 'extending' data flows was queried and IGARD asked for this to be explained within the application to be clear whether any additional data would be disseminated.

The CCGs' privacy notices were discussed and some IGARD members reported difficulties accessing these via the CCG websites. IGARD emphasised that CCGs should ensure their privacy notices would be easily accessible from different devices and browsers. In addition to this one CCG seemed to have two different versions of the privacy notice visible on their website and IGARD noted that this could be confusing and misleading if a member of the public accessed the out of date notice. More generally it was agreed that each CCG should ensure that their privacy notice accurately described the type of data used, how individuals can opt out, what organisations data is shared with and should correct any misleading

¹ NIC-47167-H3M4V NHS South Warwickshire CCG; NIC-82378-M2B6C NHS Coventry and Rugby CCG; NIC-82394-W7G7J NHS Warwickshire North CCG

statements. IGARD were informed that work was underway within NHS Digital to review and further develop the nine point privacy notice criteria and IGARD requested an update on this work.

IGARD noted the data sharing and handling agreement between the three CCGs, and queried the description within that agreement of the purposes for which data could be used as this could be interpreted as restricting the use of data to risk stratification only rather than also permitting commissioning purposes.

It was noted that the CCG IG Toolkit version 14 scores were currently self-assessed rather than reviewed and IGARD asked the presenter to ensure that the appropriate special condition was included in the data sharing agreement.

Outcome: Recommendation to approve, subject to a condition:

- 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.

The processing activities section wording should be updated to be clear that data will be used by multiple CCGs rather than a single CCG. An explanation of further expected benefits should be clarified to make better use of Plain English. A statement that data flows will be extended should be more clearly explained. The application should be updated to ensure that a special condition regarding the IG Toolkit score will be included within the DSA.

IGARD advised that the collaboration agreement between CCGs should be amended to be clearer that data can be shared for the purposes of commissioning and risk stratification. It was agreed the above condition would be reviewed out of committee by the Chair.

2.7

Group of 4 CCGs² (Presenter: Stuart Richardson)

Application: This application was to extend the existing flows of pseudonymised data for commissioning purposes (SUS, local flows, MHMDS, MHSDS, MSDS, MHLDDS, IAPT, CYPHS, DIDs) and for the four CCGs to share pseudonymised data between each other to enable collective reporting.

Discussion: It was noted that these CCGs made use of the same data sharing and handling agreement provided for the previous group of three CCGs, and IGARD reiterated their comments on how this described the purposes for which data could be used. In addition the points raised about the IG Toolkit special condition, and about clarifying the 'extension' of data flows, were also repeated. The previous discussion regarding joint data controllers or data controllers in common was noted.

The CCG privacy notices were discussed and there were concerns that some elements of these could be potentially misleading. It was agreed that each CCG should ensure that their privacy notice accurately described the type of data used, how individuals can opt out, what organisations data is shared with and should correct any misleading statements.

IGARD noted that the privacy notice for one CCG referred to HSCIC rather than NHS Digital, and while it was noted that this was the organisation's legal name it was suggested the CCG should ensure that any website links using the previous HSCIC website address were still functional.

Outcome: Recommendation to approve, subject to a condition:

² NIC-112258-C9G8J NHS Erewash CCG; NIC-94822-W1K3T NHS Hardwick CCG; NIC-94879-K5S4D NHS North Derbyshire CCG; NIC-82384-W1T6C NHS Southern Derbyshire CCG

2.8	<ul style="list-style-type: none"> The CCGs should update their privacy notices to accurately describe the type of data used, how individuals can opt out, what organisations data is shared with and correct any misleading statements. <p>A statement that data flows will be extended should be more clearly explained. The application should be updated to ensure that a special condition regarding the IG Toolkit score will be included within the DSA.</p> <p>IGARD advised that the collaboration agreement between CCGs should be amended to be clearer that data can be shared for the purposes of commissioning and risk stratification. It was agreed the above condition would be reviewed out of committee by the Chair.</p> <p><u>Deloitte (Presenter: Louise Dunn) NIC-45464-F7W3C</u></p> <p>Application: This was a new application requesting pseudonymised Hospital Episode Statistics (HES) data, for use with the applicant's client base of health and social care organisations. The application confirmed that data would not be used for any marketing purpose, or for any commercial clients without a partnership with an NHS organisation.</p> <p>Discussion: A query was raised about the indicative data retention period, as the information provided did not clearly explain why data would need to be retained for this period. It was agreed that this should be clarified.</p> <p>IGARD discussed the projects and purposes for which data would be used, and it was considered that the information provided was too open-ended and not sufficiently specific in line with the type of information provided in similar applications. It was agreed that the application ought to make clear that data would only be used for the specific projects listed, with any additional projects being subject to the applicant submitting an amendment application to NHS Digital to include these. In addition it was considered unclear which of the projects described would make use of HES data in the immediate future, which were previous projects that had ended and would not use data or if any were potential future projects that had not yet been confirmed. IGARD queried the description of the applicant's customer base as it was unclear what approximate number of clients were NHS organisations as opposed to other types of organisations.</p> <p>IGARD noted that the application indicated data would only be used for commercial clients where the commercial client is 'working in partnership' with an NHS organisation, and queried how this was defined. It was agreed that in order to appropriately assure the public that data would be used appropriately, this should be a formal partnership between two organisations and more information was requested about this.</p> <p>There was a discussion about the importance of transparency and ensuring that information was available for the general public to explain how data is used. IGARD advised that the applicant should consider providing more information for the general public about their uses of healthcare data.</p> <p>Outcome: Recommendation deferred, pending:</p> <ul style="list-style-type: none"> Providing more information about the number of different types of customer organisations for whom this data will be used, and more specific examples of projects for which data would be used in the immediate future. Updating the information about the projects for which data will be used to be clear that data will only be used for these specific projects and that any additional uses of data must be subject to an amendment application to NHS Digital. The wording within the application should be updated to be clearer that data can only be used for organisations with a formal partnership with an NHS organisation, with an explanation of how this is determined such as whether contractual arrangements must be in place. <p>The application should be amended to include a clearer explanation for why data needs to be</p>
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retained for 36 months.

IGARD advised that the applicant should consider making more information publicly available about the purposes for which they use HES data.

2.9

Advice on consent materials (Presenter: Dave Cronin)

Application: IGARD were asked to provide advice on the consent materials for four different studies (ADONeS, BASICS, SYCAMORE, EPIC) and whether these would be considered to provide an appropriate legal basis for the study to provide identifiable data into NHS Digital and for NHS Digital to disseminate HES data back to the study.

Discussion: There was a discussion of the history of consent material reviews carried out by DAAG, with acknowledgement that NHS Digital's predecessor bodies had recommended some consent material wording that would not today be considered ideal. IGARD noted that a more permissive approach had generally been taken with consent materials dating prior to 2015, with the view that if the consent wording providing enough general information and did not prohibit the type of data sharing being requested then it would be appropriate to provide the cohort with updated information about data sharing and offer the opportunity to withdraw consent, rather than needing to seek updated explicit consent from each participant. However it was felt that more recently produced consent materials should be held to a higher standard.

IGARD advised that consent materials should be sufficiently clear and unambiguous; should set out reasonable expectations for how data would be shared, used and linked; should explain the implications of data processing and the risks involved; should explain data security and any onward disclosure; and should not use coercive language, in addition to the points listed within the sample consent materials provided for this agenda item. IGARD also advised that consent forms should mirror the other consent materials to avoid inconsistencies between the two, and that they should not contain statements that the study would only last for a certain number of years if data processing would continue to take place beyond that time period. It was noted that one point on the information provided seemed to be inaccurate as the consent materials had been considered by DAAG for advice rather than for a recommendation.

It was noted that DAAG had previously published some guidance on consent material wording and IGARD queried whether this was still available on the NHS Digital website. There was a suggestion that IGARD could review and update this guidance.

IGARD discussed what approach would be appropriate for the specific sample consent materials provided. One IGARD member offered to share more specific comments via email. While it was acknowledged that in the past it might have been considered appropriate for studies with less serious problems with consent materials to provide updates to the cohort via fair processing information, with the opportunity to withdraw consent, it was felt that this approach would not be appropriate following the upcoming implementation of GDPR. IGARD therefore advised that studies should ensure that they had an appropriately future-proofed legal basis in place that would continue to provide cover under GDPR, for example by seeking updated consent or by seeking section 251 support via HRA CAG. IGARD reflected that consent materials should clearly describe all the planned data processing, not just the elements that involved providing data to or receiving data from NHS Digital.

Outcome: IGARD suggested that given the implementation of GDPR in May 2018, organisations should work to ensure that they have an appropriately future-proofed legal basis.

IGARD offered this advice without prejudice to the consideration of future applications.

Any other business

Harvey Walsh – Ten years of data for AF project only (Presenter: Garry Coleman) NIC-05934-M7V9K

Application: Following the discussion of the NIC-05934-M7V9K Harvey Walsh application at the 22 June 2017 meeting, when IGARD had deferred making a recommendation, IGARD were asked to consider a request for the applicant's current data sharing agreement to be updated to permit ten years of pseudonymised HES data to be used for one specific project only. This was described as the 'AF project' involving GMAHSN and relating to AF admissions and stroke admissions. An additional supporting document had been provided to justify the urgent need for this amount of data.

Discussion: IGARD queried the reason for submitting this request as an AOB item rather than waiting for the fully updated application to be submitted to a following meeting, and it was noted that this was due to the urgent need for data for this specific project

IGARD discussed the request to use ten years of data for this single project only. It was agreed that this request should be considered on its own merits, assuming no issues were raised by the ongoing work following a query raised by MedConfidential regarding this applicant's previous applications for data. The perceived time pressures around this particular project were noted, as well as the potential significance of the outputs. Overall, based on the information provided it was agreed that this seemed an appropriate use of data and that the amount of data was justified by the explanation provided.

It was noted that the application provided had not yet been updated to reflect that ten years of data would be used for only this single project (pending submission of a future amendment application for the wider use of ten years of data). IGARD noted that the data sharing agreement would need to make clear that the additional data years could only be used for the GMAHSN AF project described in the supporting documents, and that no other additional data or changes to the current data sharing agreement were included as part of this particular request.

Outcome: Recommendation to approve the use of ten years of data for the AF project only. The application would be amended to be clear that ten years of data must only be used for this specific purpose (the AF project) pending an upcoming amendment to request the wider use of 10 years of data. This updated application must not include any other additional data or other purposes beyond those already agreed in the current data sharing agreement. IGARD noted that this recommendation was given without prejudice to the consideration of a future amendment application.

There was a discussion about the standard application wording used to limit data access to substantive employees, as IGARD were informed that some organisations had raised concerns that this would be overly restrictive and cause problems with arrangements such as contractors, agency staff or seconded staff. Some alternative wording was proposed and it was agreed this would be discussed out of committee.

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> <p>23/03/17: Ongoing. There was a suggestion it might be helpful to discuss the type of sampling used by the Department for Work and Pensions.</p> <p>11/05/17: This action was not discussed due to time restrictions.</p> <p>18/05/17: IGARD received a verbal update on work underway to develop 'dummy data' for the purpose of developing tools and algorithms.</p> <p>15/06/17: It was agreed the IGARD Chair would contact Garry Coleman about this action and ask whether an update could be provided in the near future, or if not then agree to close the action</p>	Open

			and to raise the topic again at a later date. 29/06/17: Ongoing.	
23/03/17	To provide a response to previously raised IGARD queries about indemnity.	IGARD Secretariat	06/04/17: An update had been provided and the action remained open. 13/04/17: This was ongoing within NHS Digital. 01/06/17: The Caldicott Guardian had request a meeting with the IGARD Chair and others to discuss this. 08/06/17: A call had been scheduled to discuss this. 15/06/17: Ongoing pending the scheduled call. 22/06/17: This call had taken place and a note would be circulated to confirm the outcome. 29/06/17: Ongoing.	Open
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	29/06/17: 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.	Open
04/05/17	Robyn Wilson and Joanne Treddenick to agree updated wording for the PCMD application template on type two objections, ensuring that this is consistent with published NHS Digital information about exceptions to type two objections.	Robyn Wilson	11/05/17: The IG Advisor gave a verbal update with confirmation that in October 2016 NHS Digital had confirmed a decision that type two objections would not be considered to apply to this flow of data due to the specific legal gateways around ONS data sharing. Further work was planned to agree the specific application wording to describe this. 18/05/17: IGARD were informed by the Secretariat that Robyn and Joanne had agreed new draft wording, and that this would be circulated to IGARD for discussion out of committee. 25/05/17: The new draft wording had been circulated out of committee and members were reminded to provide any comments by email if they wished to do so.	Open

			<p>08/06/17: There had been a further discussion of the wording by email.</p> <p>15/06/17: IGARD had received an updated email response to the queries raised. IGARD were asked to provide any comments on this by the following week's meeting.</p> <p>22/06/17: This was currently with an IGARD member to respond.</p> <p>29/06/17: Ongoing pending a response from IGARD members.</p>	
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	<p>15/06/17: IGARD had been advised by email that a paper about this would be submitted to an upcoming IGARD meeting.</p> <p>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.</p>	Open
01/06/17	Garry Coleman to provide information about the process for applicants moving from the use of identifiable to pseudonymised data and what standard steps are taken when they opt to retain identifiable data as well as receiving new pseudonymised data.	Garry Coleman	29/06/17: Ongoing.	Open
15/06/17	NHS Digital to provide information about the standard approach to data destruction where an applicant has been provided with data for linkage, and whether the original data should be retained as well as the linked data.	Jen Donald	29/06/17: Ongoing.	Open
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.	Open
22/06/17	NHS Digital to ensure that in future applications using the Health and Social Care Act 2012 as a legal basis provide more detail about the applicable	Garry Coleman	29/06/17: Ongoing.	Open

	subsections, such as section 261(2)(b)(ii).			
29/06/17	Stuart Richardson to contact DARS regarding standard data destruction timescales and processes where data processing is moving from one data processor to another.	Stuart Richardson		Open

Appendix B: Out of committee report (as of 23/06/17)

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 the IGARD Chair:

- NIC-376599 NHS Digital (OG Cancer Audit) – (*Considered at 1 June 2017 IGARD meeting*)
- NIC-107814 NHS England (TNR IAPT) *previously* NIC-92346 – (*Considered at 4 May 2017 IGARD meeting*)