

1 February 2018

Agenda Item: 4

REPORT OF DIRECTOR OF PUBLIC HEALTH

RESULTS OF NHS DIGITAL AUDIT OF DATA SHARING AGREEMENTS WITH PUBLIC HEALTH

Purpose of the Report

1. To update Members on the outcome of an audit of a data sharing agreement between the Council and the NHS and to seek comments on the actions undertaken in response.

Information and Advice

2. The Public Health division includes a specialist Public Health intelligence function, which provides information to support production of the Joint Strategic Needs Assessment, provision of specialist Public Health advice to CCGs, and to inform Public Health service commissioning. As Public Health services are planned according to population need, the team requires access to data to enable it to undertake these tasks.
3. Hospital Episode Statistics (HES) is a NHS data warehouse containing details of all admissions, outpatient appointments and Accident & Emergency attendances at NHS hospitals in England. This data is collected during a patient's time at hospital and is submitted to allow hospitals to be paid for the care they deliver, but is also designed to enable secondary use for non-clinical purposes. The Public Health intelligence team uses the data to identify patterns and levels of disease in the local population, which is essential for planning health and care services and also to inform development of services to improve health at a population level: the key function of Public Health.
4. Formal agreement is in place with the NHS in order for the Public Health team to receive and use de-personalised HES information. The Audit report refers to the data as pseudonymised: this means the process of distinguishing individuals in a dataset by using a unique identifier which does not reveal their 'real world' identity.' This definition and discussions around the difference between pseudonymisation and anonymisation can be found in the Information Commissioner's Office Anonymisation Code of Practice at <https://ico.org.uk/media/1061/anonymisation-code.pdf>
5. It is a condition of the data sharing agreement that NHS Digital is able to conduct an audit of how the organisation complies with the information sharing requirements. One such audit was conducted at the end of June 2017.

6. The audit evaluated how the Council conforms to the requirements of the data sharing framework contract (DSFC) and the data sharing agreement (DSA) with respect to the provision of the following HES datasets:

HES Dataset	Level of data	Dataset period
Admitted Patient Care	Pseudonymised /Anonymised Non Sensitive	2016-2017 (M11 to M13 including AR) 2017-2018 (M2 to M10)
Outpatients	Pseudonymised /Anonymised Non Sensitive	2016-2017 (M11 to M13 including AR) 2017-2018 (M2 to M10)
HES Accident and Emergency	Pseudonymised /Anonymised Non Sensitive	2016-2017 (M11 to M13 including AR) 2017-2018 (M2 to M10)

7. The overall findings of the Audit were either of substantial or moderate assurance, as set out in the table below:

Information Transfer	Moderate assurance
Access Control	Substantial assurance
Data Use and Benefits	Substantial assurance
Risk Management	Substantial assurance
Operational Management and Control	Moderate assurance
Data Destruction	Moderate assurance

8. The full report of the Auditors is contained in Annex A.
9. The Audit report contained a number of observations and recommendations. The report was taken to the Council's internal Information Management Group and an Improvement Plan was drawn up by the Council to address the observations. The agreed improvement plan is contained in Annex B, including information on progress to date.

Other Options Considered

10. None. It is a condition of the Data Sharing Agreement that the Council will participate in audit as required by NHS Digital, and respond to the findings of any audit through an improvement plan.

Reason for Recommendation

11. The audit report was initially submitted to the internal Information Management Group, which identified that the report should be brought to Members for scrutiny.

Statutory and Policy Implications

12. This report has been compiled after consideration of implications in respect of crime and disorder, data protection and information governance, finance, human resources, human

rights, the NHS Constitution (public health services), the public sector equality duty, safeguarding of children and adults at risk, service users, smarter working, sustainability and the environment and where such implications are material they are described below. Appropriate consultation has been undertaken and advice sought on these issues as required.

Financial Implications

13. The costs of the activities associated with the data referred to are met out of the Council’s allocation of Public Health grant. There are no financial implications relating to the outcomes of the audit.

RECOMMENDATION

- 1) That Committee receive and comment on the audit report and the proposed actions

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Constitutional Comments (SLB 20.12.2017)

14. Governance and Ethics Committee is the appropriate body to consider the content of this report.

Financial Comments (DG 08.01.2018)

15. The financial implications are contained within paragraph 13 of this report.

Background Papers and Published Documents

Except for previously published documents, which will be available elsewhere, the documents listed here will be available for inspection in accordance with Section 100D of the Local Government Act 1972.

- none

Electoral Division(s) and Member(s) Affected

- All