

In-house perspective and Caldicott Principles

Safe Projects

18-19 September 2015

About the Health Foundation

Who we are

- The Health Foundation is an independent charity working to improve the quality of health care in the UK.
- We are here to support people working in health care practice and policy to make lasting improvements to health services.
- We carry out research and in-depth policy analysis, run improvement programmes to put ideas into practice in the NHS, support and develop leaders and share evidence to encourage wider change.
- We fund health care research, fellowships and improvement projects across the UK

In-house Data Analytics

- In-house research and service evaluation
- 7 Analysts

- Typical datasets:
 - HES
 - SUS
 - GP data
 - NHS 111 and 999 data
 - (Social care data)

Different perspectives

Provider vs User

- Tony, John, Manpreet and Sarah talked about the perspective of a data provider
 - Well established pathways to access
- It is more than just jumping hoops!

How do you make sure as an organisation/user data are used for the right reason?

National vs Local

- National datasets (HES, HSCIC)
 - Frequently used
 - Established pathway
- Sometimes pathways are a lot less clear!
 - Local health care provider (e.g. GPs, NHS 111)
 - Who 'owns' the data?

How do you agree with a GP that a project is 'safe'?

When is a project 'Safe'?

Internal process

- Only perform research that aims to improve health or the quality of health or social care in the UK
- All projects require to be fit-with-strategy
- All projects members need to be trained
- Access to projects are on a need-to-know basis

Caldicott principles

1. Justify the purpose(s)
2. Don't use patient identifiable information unless it is necessary
3. Use the minimum necessary patient-identifiable information
4. Access to patient identifiable information should be on a strict need-to-know basis
5. Everyone with access to patient identifiable information should be aware of their responsibilities
6. Understand and comply with the law
7. The duty to share information can be as important as the duty to protect the patient confidentiality

Conclusion

- Is it easy to apply the Caldicott Principles?

NO!

- Is it easy to identify if a project is 'Safe'?

Probably not!

- Who is responsible to make sure a project is safe?

- Data Provider (e.g. HSCIC)?

- Data Controller (e.g. GP)?

- User (e.g. The Health Foundation)?

Everyone!

- In an in-house setting, that means saying 'No' to colleagues.

Difficult! → Safe people

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