

National Respiratory Audit Programme (NRAP)

Primary Care Audit: Fair Processing Information/Privacy Policy

Version 1.0: September 2023

The [Healthcare Quality Improvement Partnership \(HQIP\)](#) and [Digital Health Care Wales \(DHCW\)](#) are the joint data controllers for Welsh service users for all data collected and reported on by the NRAP primary care audit. All data collected by the audit programme are processed to ensure patient confidentiality is maintained. Data processors include:

- **Digital Health and Care Wales (DHCW)** – who provide access to aggregated practice level data and the provision of the respiratory DHCW Primary Care Information portal for quarterly reporting of audit results back to practices. DHCW will also provide analysed, aggregated practice level data to RCP and Imperial College London for national reporting.
- **Royal College of Physicians (RCP)** – who run the audit and produce national and local reporting outputs.
- **Imperial College London** – who provide reporting and statistical data analysis support where necessary.

Approvals and legal basis

Common Law Duty of Confidentiality

This audit is not subject to Common Law Duty of Confidentiality as all data collected are aggregated at practice level and cannot be used to identify any individuals. Neither Confidentiality Advisory Group (CAG) approval nor patient consent is required. More information about the audit data flows (also outlined below) and the data queries (including the Read codes that will be used) is available via the [audit resources page](#). Patient information sheets and posters are also available via this [link](#).

General Data Protection Regulation (GDPR)

The primary care audit's legal basis under GDPR is:

- **Article 6 (1) (e) processing is necessary for the performance of a task carried out in the public interest or in the exercise of official authority vested in the controller.** This is justified through commissioning arrangements which link back to Welsh Government and other national bodies with statutory responsibilities to improve quality of health care services.

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- **Article 9 (2) (h) processing is necessary for the purposes of preventive or occupational medicine, for the assessment of the working capacity of the employee, medical diagnosis, the provision of health or social care or treatment or the management of health or social care systems and services on the basis of Union or Member State law or pursuant to contract with a health professional and subject to the conditions and safeguards referred to in paragraph 3.**
- **Article 9 (2) (i) processing is necessary for reasons of public interest in the area of public health, such as protecting against serious cross-border threats to health or ensuring high standards of quality and safety of health care and of medicinal products or medical devices, on the basis of Union or Member State law which provides for suitable and specific measures to safeguard the rights and freedoms of the data subject, in particular professional secrecy.** This is justified as the primary care audit aims to drive improvements in the quality and safety of care and to improve outcomes for people with asthma and chronic obstructive pulmonary disease (COPD).

The data provider for the Wales primary care audit undertaken as part of NRAP is Digital Health and Care Wales (DHCW).

The Data Quality System (DQS) approval

Specific approval for NRAP to conduct this audit in conjunction with DHCW was given by the DQS.

Main data flows

Data for the NRAP audit will be collected at regular intervals (quarterly) starting in Autumn 2023. No patient level data are collected or held by any of the data processors, as the data collected is aggregated at practice level only.

For the 2023 audit the Royal College of Physicians (RCP) engaged with the DHCW to access data required for this audit. An Audit+ NRAP module will be deployed to all general practices in Wales. Aggregated general practice data will be accessed by DHCW to be processed and present within the Primary Care Information Portal. The Audit+ module will allow practices to identify patients (registered with their practice) who have not met audit requirements for asthma and COPD care and prompt them to take action. This is to facilitate best practice and improvements in asthma and COPD care. This information will not leave the practice (as data controller) and will not be available to the NRAP, DHCW or Imperial teams.

For the purposes of the audit, data will be aggregated to the Cluster, Local Health Board (LHB) and all-Wales level to enable appropriate views of the data for a user of the Primary Care Information Portal. DHCW will use the aggregated data to update the Primary Care Information Portal on a quarterly basis to facilitate reporting of audit results back to individual practices and produce national audit results (all-Wales, Cluster and LHB). Practice-level reports will be made available to each individual practice via the DHCW Primary Care Information Portal but are **not** made publicly available. Only aggregate data are presented, and no information will be released on the portal that could be used to identify individuals.

Third party data requests

Third party organisations may also request to use aggregated practice level data for research, audit and service evaluation purposes. The main use of data will always be to improve care and services for people with asthma and COPD. NRAP will not share any of these data unless the appropriate legal, ethical and security arrangements are in place to keep it safe and secure.

Data retention

Data will be retained by NRAP over the period that the audit continues to operate. This will allow post-audit queries to be answered, outstanding longitudinal analyses to be completed and for third party data requests to be approved and completed. In addition, the [Information Governance Alliance \(IGA\)'s Records Management Code of Practice for Health and Social Care 2016](#) specifies that clinical audit records must be kept securely for a minimum period of 5 years after the audit has been completed and if the NRAP closes in the future, this requirement will be considered by NHS England and the Welsh Government and appropriate arrangements made as required.

Saying 'no thank you'

National clinical audit works best when it includes information about as many patients as possible. In previous rounds of the audit, patients were able to opt out of sharing their information to the audit and this was done so by using READ/SNOMED CT codes which were related to patient dissent for the use of information for secondary purposes.

Because the Wales Primary Care audit, under NRAP, will not use patient information at all and only aggregated practice level data will be accessed, the need to apply opt out codes will no longer be required as there is no risk of individual patients being identified through the audit.

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As stated above:

- practice-level reports will be made available to each individual practice via the DHCW Primary Care Information Portal but are **not** made publicly available.
- the Audit+ module will also allow practices to identify patients (registered with their practice) who have not met audit requirements for asthma and COPD care and prompt them to take action. This information will not leave the practice or be made available to audit providers.

Right to complain to a supervisory body

If a patient thinks that their information is being used inappropriately, they have the right to complain to the Information Commissioners Office (ICO).

If you have any queries regarding the processing of data as part of this audit, please contact a member of the audit team at nrapinbox@rcp.ac.uk.