

National Lung Cancer Audit (NLCA)

Privacy & Fair Processing Notice

What is the aim of the National Lung cancer Audit (NLCA)?

The aim of the National Lung Cancer Audit (NLCA) is to assess the process of care and its outcomes in patients diagnosed with lung and to determine where hospitals are doing well, and areas in which the quality of care can be improved. By producing information for all NHS providers, the NLCA allows cancer services to compare themselves with others in England and Wales and share examples of good practice.

From the 1st February 2022, the Clinical Effectiveness Unit at the <u>Royal College of Surgeons of England</u> (RCSEng) is commissioned to deliver the NLCA. The NLCA will continue to strive to raise standards across all lung cancer clinical teams in order to improve treatment and outcomes for patients with lung cancer.

Where is patient-level data collected from?

The NLCA Prospective Audit does not 'collect' clinical data directly from patients. The National Lung Cancer Audit (NLCA) utilises the nationally mandated flows of data from lung cancer patients to the <u>The National Cancer Registration and Analysis Service</u> (NCRAS) and the <u>Wales Cancer Network</u>, <u>Public Health Wales</u>.

The NLCA receives clinical information for every patient diagnosed with lung cancer since 1st January 2017 in England and Wales. Data from NHS trust/Health Board data submissions are linked to selected data items from national health care datasets to provide information on the diagnosis, management and treatment of all patients who are newly diagnosed with lung cancer. The data received by the NPCA includes: type of lung cancer, date of cancer diagnosis, disease stage, comorbidities, surgical procedure or intervention details, radiotherapy and chemotherapy details, and hospital readmissions.

Patient identifiable information including name, address, date of birth, address, postcode and NHS number held by NCRAS in England and WCN in Wales is not shared with the NLCA. The data are deidentified before they are securely transferred to the NLCA Project Team. The NLCA presents the results from analysing these data in annual and quarterly reports to provide information regarding the type and extent of lung cancer that patients are diagnosed with, and the quality of lung cancer services and treatment in England and Wales. Patients cannot be identified from this information.

Data controller

The NLCA is commissioned by the Healthcare Quality Improvement Partnership (HQIP) on behalf of NHS England (NHE/I) and the Welsh Assembly Government, as part of the National Clinical Audit and Patient Outcomes Programme. <u>HQIP</u> and NHSE/I are joint data controller for the linked de-identified dataset that is supplied to the NLCA Project Team for analysis. Information about the data controllers for the individual national datasets utilised by the NLCA can be found <u>here</u>.

Legal basis for processing patient-level data

The NLCA has approval for processing data under articles 6 (1) (e) and 9 (2) (i) of the General Data Protection Regulation (GDPR) as the data are needed to carry out a task in the public interest to ensure high standards of quality and safety of healthcare.



Patient confidentiality and level of data collected

The patient-level information received and managed by the NLCA Project Team is treated as confidential. When analysing the data to produce the information on patient care and outcomes, the NLCA use deidentified data and so the team analysing the data cannot identify individual patients.

The NLCA is also careful to only publish statistics, graphs or tables that do not allow individuals to be identified. To ensure this, the Audit follows guidelines on publishing statistics issued by the <u>Office for</u> <u>National Statistics - Review of the Dissemination of Health Statistics: Confidentiality Guidance (PDF)</u>.

Management of patient-level data by the NLCA team

The NLCA Project Team are based at the Clinical Effectiveness Unit, RCSEng. The RCSEng has strict security measures in place to safeguard the use and storage of de-identified patient-level information, which is handled in accordance with the GDPR. All de-identified data extracts are stored on a password protected encrypted server at the RCS with restricted access to named analysts in the NLCA Project Team.

Who do we share data with?

The NLCA only shares patient-level data following a strict governance procedure to ensure compliance with the GDPR. Researchers may apply to the NLCA Data Controller (HQIP) if they want to use the patient data for a research study. These requests undergo a stringent approval process as outlined <u>here</u>.

What if I do not want my patient-level information used by the Audit?

The <u>National Cancer Registration and Analysis Service (NCRAS)</u> in England and the <u>Wales Cancer Network</u> are allowed to collect data on patients diagnosed with cancer. Information on how to opt out of data collection is provided <u>here</u>.

Provider team contact information held by the NLCA

The NLCA holds contact information (name, email address and hospital name) for key members of each extended provider team (Clinical Lead, MDT coordinator, audit department and cancer services designated contacts). This information enables the NLCA to distribute newsletters with important updates about the audit and to administer the prospective audit outlier process.

Our legal basis for collecting and processing contact information is legitimate interest, which is handled in accordance with the GDPR and will not be used for any other purpose without consent. If you believe that any contact information we are holding on you is incorrect or incomplete, please contact us as soon as possible. We will promptly correct any information found to be incorrect.

How to contact us

Please contact us if you have any questions about our privacy policy or information we hold about you nlca@rcseng.ac.uk

Changes to our Privacy Policy

We keep our privacy policy under regular review and we will publish updates on our website.