Primary Care data extracts - Using a trusted third party as a data processor to anonymise or aggregate data.

In an information age where virtually every transaction is recorded the need for protection of personal information becomes ever more important. This is nothing new, traditionally, sensitive paper based records were kept under lock and key with access physically restricted. If information was to be released it was fairly easy to copy the pages or part of records required, possibly with some redaction to remove sensitive information.

In electronic systems it can be much more challenging to provide only the information required. Extracting sub sections of data from complex integrated record systems, requires specialist technical skills, if this is not done correctly then patient, third party or related information can be revealed breaching data protection guidelines. The technical process of extracting this information will by necessity expose unrelated confidential information sometime of a highly sensitive nature which the requestor may not have the approval, need or wish to see.

With the increasing demand for statistical, research and service planning information from primary care records a solution is required to reduce this exposure of patient and clinician information to the requesting organisations to a minimum. The accepted method of achieving this is by using a trusted third party (TTP) as an intermediary between organisations which significantly reduces the number of individuals with access to identifiable information. The TTP acts as a data processor on the providers (Data Controllers) behalf and is contractually bound by the same data protection rules.

In this case the TTP’s role is to provide the technical skills to extract the required information from the Data Controllers electronic records and process this into a form that is both fit for purpose and complies with principal 3 of the data protection act. This may require the removal/replacement of identifiers or the use of redaction techniques when only statistical information is required prior to release of information to the beneficiary.

A TTP is required to operate to strict guidelines:

- It may only processes data in accordance with instructions from the data controller and to a specification previously agreed by both data requestor and data provider.
- It acts as a Data Processor on behalf of the Data Controller and abides by the principles defined in the data protection act. (Principle 7)
- Is registered as a data processor with the ICO
- It provides a secure storage facility which operates procedural, physical and electronic access controls to protect the data it processes.
- It has no specific interest in, not is affiliated to any organisation that has an interest in any data provided to it.

Albasoft maintains a secure data processing and storage facility at the Centre for Health Science adjacent to Raigmore hospital in Inverness, this facility is solely hosted on the NHS network. No information is transferred outwith the NHS network. Our existing middleware platform Escro is an advanced practice based reporting system and is used to securely process data locally at the practice before transferring the results to our secure repository. Escro is widely used to support the Scottish Therapeutics Utility and enhanced service reporting, the system is available in most practices.

Our experience in providing TTP and data processing services over the past ten years has allowed us to develop very efficient models of maintaining records of practice consent. As a data processor we must contract separately with each data controller. If a provider wishes to opt-out for any reason this supersedes any SLA put in place with the requestor. We have systems in place to both record consent and remove information from aggregated datasets where a provider subsequently withdraws permission.

The role of a specialist Trusted Third Party is ideally suited to small independent organisations as they generally do not have a vested or commercial interest in the data that larger organisations may have, this allows them to maintain complete independence and to put the interests of the public and health care professionals they act on behalf of first.

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