



Health Research Authority

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30 July 2026

Dr Marisa Mason
NCEPOD Chief Executive
Ground Floor Abbey House
74-76 St John Street
London
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Dear Dr Mason,

Application title: Medical and Surgical Clinical Outcome Review
Programme
CAG reference: 26/CAG/0008 (previously PIAG 4-08 (b) 2003)

Thank you for your modification request to the above non-research application, submitted for support under Regulation 5 of the Health Service (Control of Patient Information) Regulations 2002 to process confidential patient information without consent. Supported applications enable the data controller to provide specified information to the applicant for the purposes of the relevant activity, without being in breach of the common law duty of confidentiality, although other relevant legislative provisions will still be applicable.

The role of the Confidentiality Advisory Group (CAG) is to review applications submitted under these Regulations and to provide advice to the Secretary of State for Health and Social Care on whether an application should be supported, and if so, any relevant conditions.

Secretary of State for Health and Social Care support decision

The Secretary of State for Health and Social Care, having considered the advice from the Confidentiality Advisory Group (CAG) as set out below, has determined the following:

1. The modification, to include the first retrospective case note review for 2026, investigating the care of patients admitted with acute sigmoid volvulus, is supported, subject to compliance with the standard conditions of support.

Modification request

This application is for the Medical and Surgical Clinical Outcome Review Programme core methodology, to allow NCEPOD to run confidential enquiries to improve the quality of care for future patients, and identify avoidable harm. Confidential patient information regarding all eligible cases is disclosed from participating healthcare providers to the National Confidential Enquiry into Patient Outcome and Death (NCEPOD), a sample is selected, and confidential patient information is used to follow-up with clinicians involved in the patients care by way of questionnaire (completed online in pseudonymised format), and relevant copies of extracts from the patient's case notes are also disclosed from treating clinicians to NCEPOD.

In line with the original application, the applicant has been commissioned by HQIP to undertake two confidential reviews of case notes every year. This amendment covered the first of the

reviews due to take place for 2026, which will explore current care pathways for patients admitted with acute sigmoid volvulus.

The applicants aim to publish the study in 2027, and identifiable data will be held until then.

Confidentiality Advisory Group advice

The modification requested was considered by Chairs' Action. The Alternate Vice-Chair recommended support, however made a recommendation to change one of the links regarding CAG in the patient facing material.

Confidentiality Advisory Group conclusion

In line with the considerations above, the CAG agreed that the minimum criteria under the Regulations appeared to have been met for this modification, and therefore advised recommending support to the Secretary of State for Health and Social Care.

Specific conditions of support

1. Confirmation provided from the DSPT Team at NHS England to the CAG that the relevant Data Security and Protection Toolkit (DSPT) submission(s) has achieved the 'Standards Met' threshold **Confirmed:**

The NHS England 24/25 DSPT reviews for **National Confidential Enquiry into Patient Outcome and Death (NCEPOD), Amazon web services, & Microsoft UK** were confirmed as 'Standards Met' on the NHS England DSPT Tracker

Reviewed documents

<i>Document</i>	<i>Version</i>	<i>Date</i>
CAG modification form		08 July 2026
NCEPOD_ASV_Study_protocol		
NCEPOD_ASV_STUDY_Patient Poster		
NCEPOD_ASV_STUDY_Patient_Information_Leaflet		

Please do not hesitate to contact me if you have any queries following this letter. I would be grateful if you could quote the above reference number in all future correspondence.

Yours sincerely

Caroline Watchurst
Confidentiality Advisor

On behalf of the Secretary of State for Health and Social Care

Email: cag@hra.nhs.uk

Enclosures: Standard conditions of support

Standard conditions of support

Support to process confidential patient information without consent, given by the Secretary of State for Health and Social Care, is subject to the following standard conditions of support.

The applicant and those processing the information will ensure that:

1. The specified confidential patient information is only used for the purpose(s) set out in the application.
2. Confidentiality is preserved and there are no disclosures of information in aggregate or patient level form that may inferentially identify a person, nor will any attempt be made to identify individuals, households or organisations in the data.
3. Requirements of the Statistics and Registration Services Act 2007 are adhered to regarding publication when relevant, in addition to other national guidance.
4. All staff with access to confidential patient information have contractual obligations of confidentiality, enforceable through disciplinary procedures.
5. All staff with access to confidential patient information have received appropriate ongoing training to ensure they are aware of their responsibilities.
6. Activities remain consistent with the General Data Protection Regulation and Data Protection Act 2018.
7. Audit of data processing by a designated agent is facilitated and supported.
8. The wishes of patients who have withheld or withdrawn their consent are respected.
9. Any significant changes (for example, people, purpose, data flows, data items, security arrangements) must be supported via formal modification prior to changes coming into effect.
10. An annual review report is submitted to the CAG every 12 months from the date of the final support letter, for the duration of the support.
11. Any breaches of confidentiality around the supported flows of information should be reported to CAG within 10 working days of the incident, along with remedial actions taken / to be taken. This does not remove the need to follow national/legal requirements for reporting relevant security breaches.