						Project				How is the Common Law Duty	Legal Basis -	1									
DAAG date	Application Number	Proiect Name	Organisation making the request	ICO number	Approved in progress	/ Start s Date	Project End Date	Project description	Project Values/Uses	How is the Common Law Duty of Confidentiality met	COPI / S.251 / other	Legal Basis - UK GDPR	Identifiable/Pseudonymised/Aggregat e	Details of associated Data Sharing Agreements	Details of associated DPIAs	CIPHA data sources	NHS Digital Data	Data Transferred from (Organisation)	Data Transferred to (Organisation)	Method of data transfer	Aggregate data will be shared with
	DSR015	OpenZalely CIPHA Recovery Classinstery Proof	University of Liverpool / University of Cleford	26390075	Approved	19/07/21	06/08/21	Opposition is never upon of messace platem for access health date explicits. Overlaped of the Tokenship of Calcel's Advancements to the end of on power without restings, in decilip access the date for Calcel's	The cutput from this project is not intended as research. It is a simply to set the subcrisings, However, it should need that the output can be reade available to the Cheshine and Marray region The Recovery Cheshine and Marray region The Recovery Cheshine and the support on local implementation.	Researches will not have access to any identifiable or pseudonyment date.  Date will be achieved as full pseudonyment primary		6(1)(n) 9(2)(i)	Pseudorymined	Eviding CRYA DEA		GP data		GP / Graphent	University of Livespool / University of Carlord	ТВС - Sесим	Only aggregated data will flow from CIPHA to University of Liverpool / Oxford.
	DSRote	System P	Mensey Care are host of System P but this CAM ICS project working with University of Iverpool, Liverpool Health partners	Z0634416	Approved	01/09/21	28/02/24	System P aims to be file whole system approach to addressing health and related demands, bringing CAM expertise in data, enforces and employed beginning System P projects will achieve an areas of multiplicated, elementaries and multiplicating System P aims and advantage of the second multiplicating system and advantage of the second multiplicating system and discounting and the CES system, programme and glade.	I terprovement in patternt quality and safety outcomes.	Researches will not have access to any claimfulable or pseudonymised data.		5(1)(e) 9(2)()	Pseudonymined	Pregulation Health DSA		Data from CPPA for CSM  -Acate Providers  -Acate Providers  -Acate Round Docust Care  -Acate Round Docust Care  -Acate Round Docust Care  -Acate Round Docust Care  -Acate Round Part Round  -Architecturity Health  -Architecturity Health  -Architecturity Health  -Architecturity Care (Indiabate (for architecturity) Acate (Indiabate (For architecturity) Care (Indiabate (For Architecturity) Care (Indiabate (I	"Data from NHS D and Inhabite for information and not part of the data access request into CEPHA, Made writibles -Secondard into CEPHA, Made -Secondard (SES) -Jernardy Care (CEDS) -Hernial Health (MHMCS)*	CEPHA partners, as atteid in the Population Health DSA	Data will be directly accessed either on the CPHA infrastructure or the DSCRO infrastructure (none the DSA with NHS Digital for pop health is approved across the ICS)	n NJA	C&M ICS- Providers, commissioners, LA/CHAMPS.
	DSR017	RESTORE - Freezenh le Egylabla BySTen Respúns avi Rezenty	University of Liverpool	25390075	Approved	01/07/21	31,01/23	This is a reason't project disregard to find the most effective approaches for beautifying "of fails" groups for several advisor and continues and the COCOS 55 copy has to be one details recognitive fails. As the continues and the COCOS 55 copy has to be for most details recognitive fails. The security of public fails are study, or separate to study as entirely and the continues and details are secured to the continues of the the co	well as versions that can be implemented on the more limited linked data available nationally. -Estimates of the potential benefits and harms of at least 2 estating segmentation approaches including those used in identify	Researches will not have access to any charaftable or pseudonymead data.		6(1)(a) 9(2)(i)	Paradireprised	Prodution Hallin DSA		Intend data ben CPPN No. CAM (Date of the Section of Control of Co	Ones how NMS CO and Evolution Services and Morradoy security South, AVE South Services South Ser	СРЧА	СРЧА ТПЕ	TBC - Secure	NHS England, MHCLQ, the Association of Dreasters of Public Health, the Local Control of the Control NHS Confederation and the Department for Health and Social Care, PHE, the Public.
	DSR018	Impact of deprivation on lung cancer patient outcomes in the CSM area.	Clatterbridge Cancer Cent	w Z7367711	Approved	01/10/21	Ongoing	Reinsegedin entiglish of all lung contain patients trained at OCC between 2016/2018 with 2 pages below sp. Pre-Contil. We would like to vanishe data had been privary your with data had at OCC to entiglish soldiness indicates researce.	Report with recommendations and a publication in a peer review journal.	Analysis is buing done with pseudonymised data therefore the Common Law Duty of Confidentiality doesn't apply.		S(1)(n) S(2)(h)	Pseudorymised	Population Health DSA		CO-MORBIDITIES CO-MORBIDITY SCORES FRALEY NOBPENDENCY DEPRIVATION		All primary care organisations and secondary care organisations where patients from the cohort have been treated.	Clatterbridge Cancer Centre	Paeudonymised data will be made assistable in a secure customer database	CCC Governance - Lung Site Resource Group (SRG) initially - then SRG leads to MAC - Medical Advisory Cormities. Externally to GP's in C&M, CPHA population. Appropriate patient groups.
	DSR019	Covid build back: supporting elective restoration - Perioperative case	C2-A in pseudonymized form	Cannot find ICO number	Approved	01/11/21	31/03/22	COUR has counted a building of particle setting for deather care. As part of the National Elective Restoration Programme, Nutriting upon the prior agreemed for fireing the passed privateless setting file and outgested death in the primary care data caresa CAME to orderend requestly for those weekings. Use the Consecues qualified register and death continue wastes greatly post to use of the Individual and setting deap interpretation pathways through without setting deap management to grainfor health countries greatly as settlement of the Consecue and the Consecu	A statistication of the elective waiting list at protect two, identifying an outcome risk for these waiting to selective procedure.  An explain of these waiting stressfed by variable in the german particular more dut alone again, exception, and the premark particular more dut ach as again, exception, health initios, signe of destroration. The premark particular procedures are despiration, health initios, signe of destroration or procedures are selected to the procedure of the p	Pasudonymised data will be used for planning purposes, and so this data flow ian't owed a duty of confidence. For direct case CLDoC can be addressed by implied consent.	The Health Service (Control of Patient Information) Regulations 2002 Section 3. Communicable disease and other risks to public health	6(1)(n) 9(2)(i)	identifiable Passudonymised	Tier 2 Population Health Data Sharing Agreement An Addendum will be required to add CZ-AI as a data processor A Data Processing Agreement with CZ-AI will be required		Acute Walting List data Outputients Data GP Data		Data Controllers listed in Tier 2 S2C Data Sharing Agreement Workstream COVID Intelligence V3 Extension	C2-N in pseudonymized form	SFTP	Health care providers, patients on elective waiting lat
	DSR(20	NHS England and Improvement / Optum Population Health Management Development	ортим	ZA085401	Approveid	01/11/21	30,06/22	ts and is the development of approaches to population health management using data analytics within Action Learning Sala is 19thed as a Rham and if Privary Care Miletonics.  The process which include providing pseudorymeat date from a number of extensity (Spitu under content to NVSSI helps local learns to extensity proving waters and disappropriate presentatives which are then mobiled for effectiveness.	The initial data processing silows highlighting of consistion areas where the locality might be an outlier in areas which may be succeptible to actions which will impact wellings and reduce correspond of resources. Once an areas in identified, further, more detailed investigation will follow and start eventures post into regard in them reasoned to judge in the federiveness and how desirable it might be to repeat at larger scale.	The CLDoC doesn't apply in this situation as previously missed and or aggregated data isn't owed a duty of confidence.		S(1)(a) 9(2)(i)	Pseudonymised	Tier Two Population Health DSA. An Addendum to the Tier Two Population Health DSA is required to add Option as a Data Processor.		General practice and Local Authority Data from the CPHA Platform will be linked with Consensative (2005), secula (SUS), Mental Health (MHSDS), National Wildeling Let Data and Abult Social Care Data (National Plox) from NHS Digital.	Community (CSDS), acute (SUS), Merital Health (SUS), Merital Health (MHSDS), National Waiting List Data and Adult Social Care Date (Netional Flow) from NHS Digital.	Wintel and PCN residents from across providers where relevant for Wating list, Acute, Community and Mertal Health, Local Authority and GP. CIPHA partners, as stated in the Population Health DSA.	OPTUM	Secure transfer	Wirral as a Place and 4 PCNs (2 in Wirral and 2 catalds). This work will be aligned with C&M System P work to provide learning across the ICS.
	DSRc21	Civic Data Cooperative / David Salac	The University of Liverpool	26390975	Approved	15/11/21	31,03,25	Phijori shius as Tarapanong, Engowersel, Impowersel and Trubhibasa.  Uses Season-band irrection planes by Linguid Chill Rigid in Inhibitions. Generalized and Communications model is take assessment and dender board in the use of health and care didn't research and the boards. No tent bring.	The development of the infrastructure, people and processes to deliver an operational CDC, which can deliver data-based mights to improve health and care improvements via materior of research projects each with its own benefits and outputs.	The CLDC doesn't apply in this situation as pseudonymised under aggregated data insit owes duty of confidence. Data will be de-fertified. Tetribre details will be determined and documented on a project-by-project basis within the CDD regarrense. Access to data will be managed according to the argued measure from DPM will be processes, and will only be undertaken with prior approved from the CDPM.		S(1)(a) S(2)()	Pseudonymined	Twe Two TRE DGA		СЕНА		In order to act as the Data Manager for the CEPHATEE file role will need to access all CEPHA data.	Subsets of CEPHA data to individual projects will be made available to researches within the CEPHA TIRE.	or Informal CEPHA TRE transfer.	
	bšku2	Knowledge support to General Practitioners and pastents: evaluation of the effectiveness of periodic feedback, decision support during consultations and peer comparisons in multi-arm cluster randomised trial (BRIT 2).	Health eResearch, University of Manchester	26797610	Approved	ASAP	30/11/23	disciplinate institution and projections are two many printing for \$100. Then, there is considerable within the printing of the prematic and of the North Representation of the North Representation of the North Representation of the North Representation of the Projection and Projection Representation (Institution Control Projection Representation Control Projection Representation	Deahboards for general practices, content of patient leaflets (with individualized content based on our analyses), and acientific manuscripts.	The CLDcC doesn't apply in this situation as pseudorymised and/or aggregated data into own of a duty of confidence. Crely anonymised patient-level data will be used.		S(1)(n) S(2)(i)	Pseudonymised	We have a small number of DSA in place with few general practices and UoM for the precursor project BRST 1. The preference is to use CRPHA DSA for research use; abstractively we can seek to collect DSA for BRST 2 specifically.		Patieré-level anonymissed primary care data of patients registered in practices; hospital admission date and admission diagnosis; microbiology data; il available. Racial or ethnic origin, il available. Code lats and mapping and meta-data.		Partner organisations to CIPHA	Health effesserch, Unive	Data to remain within Graphnet TRE.	
	DSR024	Covid-19 vaccine-associated thrombosic thrombosyloperia surveillance (requested by Medicines and Healthcare products Regulatory Agency (MHRA) CMO)	University of Liverpool	26390975	Approved	ASAP	Stage 1 to be reviewed 1 month after start. Stage 2 will require further development and approval a that review Stage 1 to be reviewed	This research is research goods of common closer or risk a second off could it receives to resident a spatial resident of the country of the	Outputs remain the same	Pseudonymised data will be used for planning purposes, and so this data flow ian't owed a duty of confidence. For direct case CLDoC can be addressed by implied consent.		S(1)(n) 9(2)(i)	tderriffsbire Pseudonymised	Linked to existing CSM HSC DSA (Tier Two) – Worksheam. COVID-19 Intelligence		SUS / HES Vaccination data, NPEX and other pathology data required Primary Care Data	sus	СРНА	University	SQL access from CIPHA to University of Liverpool	
	DSR025	Health Inequalities Surveillance for Inclains Deployment (HSD)	Innovation Agency (Academic Health Science Network for the North Wes Cosst)	28391306	Approved	ASAP	01/03/23	Practice data will be search to consent Prime with your of the highest cold of conformation in rooms in the communities section in the new seatment.  Additionally, with such in determinant the impact of the programme on chickened banks, prescribing and compliance.	Phase Gover, Establish a separing structure to finalisation the signals or inclaims necessitistic Cheerine & Marraysida and highlight amous of inveguility.  Phase Tran Andrea I assuring health system to provide specific interventions in areas of high providing specific interventions in areas of high resolution specific weights and monitor the effectiveness of the same.  Society of the control of the effectiveness of the same of the control of the second of the control o	Pseudorymised data will be used to establish a reporting structure. Data will only be reported in an aggregate / anonymised form.		5 (1) (a) 9 (2) (i)	Aggregated Pseudonymand	Using under existing CIPHA Population Health DSA		-SUS / HES -Psihology Data -Persary Care Data		NA.	NA.	Securely - only aggregated data will be extracted.	
	DSROS	CCV/D Vaccination in Pregnant women	Back to organisations acro CSM via Power SI dashboard in CIPHA	28340514	Approved	01/09/21	Ongoing	exponenter in class quality of the program, register discussions from export by each procedure relatively leaves producing aggregate date on vectoralisms relate duling to size of your class can be or gridde and single interventional transmissional contents.  Assign to size of your class can be or gridde and single interventional transmissional contents.	toupprist from speace across cregating thought the AMSN Network.  -soccurate covid vaccination rates reported in existing Vaccination reports on the CEPHA platform in power Bil -spidemiological valight into cohorts with low uptable rates reported on the CEPHA platform in power Bil .	The common lise duty is met by the COPI Regulation 2002 (3) communicable disease and other risks to public health	The Health Service (Control of Patient Information) Regulations 2002 Section 3. Communicable disease and other risks to public health	S(1)(a) 9(2)(h)	tderriffsbrie	CAM H&C DIVA - Worksheam COVID-19 Intelligence - being reviewed to add to pop health DSA once COPI expires on 3006/22	C&M H&C D&A (Tier Two) - Workstream COVID-19 Intelligence	Flow of pregnancy data flow into CPHA Data cut is aggregate within CPHA Power Bl dashboard.		Data would flow into CPHA from the 7 Provider trusts.	Back to organisations across C&M via Power B dashboard in CBPHA.	I SFTP	
	DSM027	Early Interventions – Adulta Social Cens – Lightfungs	Liverpool Ringuisty With the option to extend to the inchase additional local surhorities as they onboard i.e. Delton and Dt Helens.	nis 28340514 i.	Approved	04/10/21	Ongoing	The CPTA system will use data analytics to family people at risk, and CPs and their continents with a data sharing agreement will content the second or better the second or the second or better the	Clary Support for Asiah and currently in movest of hard authority social care.  Clispost to Pacific Street House Country Good care Assaring Sharmac Country Country Country Country Clisty Assaring Sharmac Country Country Street House Country Clisty Assaring Sharmac Country Clisty Assaring Sharmac Country Clinical Country Clinic	The Common law duty of confidentially is addressed by consent for dwot patient before the property of the prop		6(1)(a) 9(2)(b) 9(2)(t)	Monthalis	Dwing under seeining CPPIA Psychiesin Health DSA	HCP CM CIPHA population health CIPU.	See appendix A - May need to extend as CPHA date set grows. Or hased or service of the set of the set of the excluded with meet a set of others working board Alexandry, Age 164-), and on or emos of the following and the set of the set of the set of set of	sus	CIPHA Platform	Liverpool Knowsky Whend With the option to extend this to include additional local subnetties and consilustrations and 31 Helsera.	We would be looking to utilise the existing control of CPVA approved of CPVA approved on the control of CPVA approved on accessing the data, supersock.  We have a wide experience of dealing with different methods of data sechange through existing control relatification control relatification of control of CPVA approved of the CPVA approved of the CPVA applications of the CPVA system from Social Care.	

			Organisation makin	9	Approved	Project / Start s Date	Project End			How is the Common Law Duty of Confidentiality met	Legal Basis - COPI / S.251 /	Legal Basis - UK	Identifiable/Pseudonymised/Aggregat		Details of associated			Data Transferred	Data Transferred to (Organisation)	Method of data	Aggregate data will
DAAG date	Application Number	Proiect Name	the request	ICO number	In progres	s Date	Date	Project description	Prolect Values/Uses  Enable much richer and more informed conversations with patients, as well as the grouping	of Confidentiality met	other	GDPR	e	Details of associated Data Sharing Agreements	DPIAs	CIPHA data sources	NHS Digital Data	from (Organisation)	(Organisation)	transfer	be shared with
	DSRcors	CIPHA Support for rMABs process	Cheshire & Mersey ICS (MLCSU)	ZB340514 & Z2950066	Approved	10/01/22	твс	Hazanking Montocked Artificiate (MMA) has have found to be desired in proving power disease and med for impossibilities in management of the proving power disease and med for impossibilities in management of the proving power disease. The proving power disease is all power disease, and the proving power disease and power disease, and the proving power disease is all power disease. The proving power disease is the montock Oppins Asserts on CPMA, it is possible to extend the primaries with their content. The stranger disease is the proving power disease is the montock Oppins Asserts on CPMA, it is possible to extend the primaries with their content and indicate the primaries with their content and indicate the primaries with their content and indicate the primaries of the primari	conversations with patients, as well as the grouping or oplastic into colonis to help rearrage demand across the ICS.  replantariting this process (via CPHA) will also a enable basiness intelligence on the service and help with capacity and demand forecasts to this and associated services, including overlap with other covid services (preventing displacation of effort).	For COVID Cheshire & Menseyside - The common law duty is met by the COPI Regulation 2002 (3) communicable disease and other risks to public health		5(1)(e) 9(2)(h) 9(2)(i)	sternifishis	Linked to adding CSM MSC DSA ("fer Yee) – Workstream: CCVRD-10 histiligence - being reviewed to add to pop health DSA once COPI expires on 3006/22	The Data Protection Impact Assessment (DPN) under the Data Sharing Agreement (The Two) COVID-19 Intelligence	Patient details/ identifiers for all patients who are eligible for the nMABs service.		Patient identifiers from NHS-Digital.	Patient contact details an their clinical cohort data to be shared with Primary Care providers to enable coboarding of patients.	d TBC	
	DSR009	CIPHA Support for Covid virtual want and Outmetry at Horne	Cheshire & Mersey ICS (MLCSU)	ZB340514 & ZZ550065	Approved	10/01/22	твс	An estimation are being procedurity patients as part of the NNS magazine as COSIO-15. This section assigned people at home with himself and approximately ap	More componentive patient habits date to enable richer convenience with patient, nore effective demand ranagement, transparent business virialigence and prevent displication of effort across cools support services.	For COVID Cheshire & Merseyside - The correct lise day is rest by the COPI Regulation 200 (3) communicable disease and other risks to public heath		E(1)(n) S(2)(h) S(2)(i)		CHSC.DEA  **CHPC.CAM Data Behring Agreement (Tier Two) COVID-19  **Challpana.**Chall Data Charring Agreement (Tier Two) COVID-19  **Anddendung G, to the InCPC.CAM Data Charring Agreement (Tier Two) COVID-19 indisignons, includes the Docaton-lead  **Behrich disease an admission failt from length of the longer of the contents in the longer of the covidence or dain processing, said a rowe  **American Charring Charles or dain processing, said a rowe for algorithm of the covidence of the processing of the resignation of the formation makes than  **Best previouscular to add to pop health DSA once COPI expires  **To 2006/22**	The Data Protection Impact Assessment (DPA) under the Data Strang Agreement (The Two) COVID-19 Intelligence	Passert details' identifiers for all passents who are alighte for Covid virtual word! Opinistry at Horns.		Patient identifiers from NHS-Digital	Patient contact details an their clinical cohort data is be ahared with Primary Care providers to enable onboarding of patients.	d TBC	
29/03/22	DSR(0) 1	Comp term caterina vaccine effectiveness in fa Col Co.	University of Unexpect of the New York Health Production Research Use I Castronistational Practor	nd 20000075	Approved	01/02/22	31,01/23	Project Values: Transparency, Efficiency, Health, This impact definition was recipied in the fact of colors and project definition has been well described and in- minimal formers are improved prior efficiencies in some reader to the order and project definition has been well described and in- minimal formers are given in efficiencies in color reader to the order that and project to the order in the order	Phase I Assess the feasibility of using CPPA for evaluating splitters occurred in use.  Assess the feasibility of the school of	Tax CLDC datash qupy in the situation as pseudopointed as the control of the cont		Access to data will be immaged accessed, and the magnet accessed, and will be immaged accessed, and will be accessed as a second and a second accessed as a	Penaderyoland	rsc	твс	UPOSA Second Generative Developes Spinne (BDS) relative public assis and control public cases and control developes and control developes and control and control grape selection and and correlative public control and control grape selection and control grape selection.	50.5	СІРНА	CPHATRE project specific data mada socialists for project researchers.	Indernal CIPHA TRE transfer	
01/03/22	DSR034	COVID-13 Children Young Plenstra MH Ness enalysis	ds Mersey Care NHS Foundation Trust	20034416	Approved	21/02/92	01/01/23	How do patients leave CYP or transition to adult services? What are their outcomes (both short- and long-term)? If they transition out of CYP, are there any tasses on their transition?	It will highlight any issues with transitional service tomic CAMHST to Auth Mrt.  It will improve integration between providers and the wider system.  This work will have focus on the family unit highlight in MH with households.			5 (1) (e) 2 (2) (i)	Pseudorymand	Psychology health OSA	Population health DPIA	Data from CPP4A for CSM  -Acata Provides  -Acata Provides  -Community Health  -Community Came (DUS)  -Community Came (DUS)  -Adental Health (MrMDDS)  -Adental Health (MrMDDS)  -JPPNN	Data from NHS D and Inhabit (for information and part of the data access request into CIPHA). Secondary Care (SUS). Community Care (SUS). Community Care (SUS). Writing Care (SUPRI). Mental Health (MHMDS).	СРНА	Data will be directly accessed either on the CDPHA infestatuture or the DSCRO infrastructure	NA will not leave CIPHA	Data will be directly accessed either on the CPHA Interacture or the SCCRO or Refrastructure.
	DSROOS	Pregnert Women COVID-19 Vaccination Campaign	Liverpool CCG	ZA008971	Approved	Started	TBC	1. Degress spake of COVID-19 arrange proposed source. 2. Accounts of this local of channes or of branch.	Lasgood CCG and Lasgood Council ans teppding specific meretims of the Lawgood population to suppose COVID-19 vaccoration update nates no rate propose COVID-19 vaccoration update nates no rate of this work in to large meretane of the population- most of this. this specific project bosons on pregner The project arise undergrave program section have not been vaccoration to provide where are to have not been vaccoration of where allow, to look patients in for vaccoration.	The information will only be used in accordance with the specific purpose that it is provided for any libe at all firms in an invalid or confidential and northed in a Three shared for the fallowing. Where the shared in the sha		6(1)(a) 8(2)(h)	therefishing	Control of Pallars Information Natios for COVID (CCP) and a Dose Sharing Apparenet. COVID-10 Nation for COVID (CCP) and to Dose Sharing Apparenet. COVID-10 National Pallars I limit (Fig. 4) Among Circum and Covid Covid National Among Covid Covid National Among	Control of Patient Information Nation for COVID (COPI) and a Dasis Sharing (COPI) and a Dasis Sharing Agreement, COVID-10 has been provided to the Covid Cov	Program Wilman Dale Sat – based on weekly software by CEM Provision containing National Provision containing National Provision containing National Provision Containing National Provision (National Provision Provision Pro		СІРНА	Livespool CCG	via secure NHS errail (rsbs.net)	
	DSROOM	CIPHA analysis - the value of population healt resigna	ih CIPHA	23340514	Approved	18/02/22	0403/22	and programmes such as Blood pressure remitting at horse have proved useful tools to help patients self-manage asserting at horse without a Hypertension diagnosis and to a 40% diagnosis rate by GPs with a threventions such as reviewing patients with high blood pressure without a Hypertension diagnosis led to a 40% diagnosis rate by GPs with a	at CS-CCG-PCN-Precion level. No patient identifiable data will be made swallable. The odputs will be integrated into a piece of written analysis to demonstrate the value of collaborative working.			5 (1) (e) 9 (2) (i)	Augmaniad	Population hash DSA	Population health DPA			СРНА	СРНА	NA will not leave CIPHA	
29/03/22	DSR037	Investigating the impact of SARS-CoV-2 refection on gastrointentinal finess using advanced linked data systems	University of Liverpool a NNHR Health Protection Research Unit in Gastrointestinal Infection	nd 20390075	Approved	01/10/21	01/08/25		events that may not currently be documented in the literature. This may help inform future healthcare practice and COVID-19 vaccination policy.			S (1) (a) 2 (2) (i)	Aggragated	THE DSA	TRE DPIA	UNISA Second Generation Surveillance System (SCSS) ander pathology reports to identify COVID-19 positive cases and control. HES satisties patient care / SUS to identify cases and control. OF records for COVID-19 irreunisation status, control group selection and Reference laboratory frig records of COVID-19 positive cases from UNI-SA.	SUS	CIPHA as C&M HCPYCS	CPHA TRE, project apecific data made available to project researchers.	Internal CEPHA TRE transfer.	
1406/22	DSR042	S117 Coretron Data Register	Liverpool Council	Z1024756	Approved	01/06/22	01/08/22	Length caused are safety within their desired frame that the safety date on section 117 patients. S117 patients are slightly for scaled clare within the safety of their state of the safety of the safety of their state of the safety of their state	The bondfil is that we made sure every patient eligible for \$217 in optioned and files we prevent eligible for \$217 in optioned and files we prevent exhaust-less and the confidence and exhaust-less and the confidence and exhaust-less and the confidence and made haship proclined. In Taggible for Consider and Management and pages and source organizations for disk cleaning and records assure organizations for disk cleaning and records assured segmentations for disk cleaning and records and the confidence and the confidence or less than the confidence of the confidence or for the confidence of the confidence or for the confidence of the confidence or for the confidence of segmentation to see the confidence of segmentation or seed to segment and segment and segmentations.	The CLDoC down1 apply in the situation the appropriate data and rounds a day of controllana.  The ward of identifiable data will be seated by a replied consent		5 (1) (e) 2(2)(h)	Aggregated tearnfaibles	COPHA Psychologia Madili Tur 2	CIPHA Population Health	5117 (as per data spec data items listes balow) Cacal Unique Reference: Cacal Unique Reference: Cacal Unique Reference: Charles Cacal Unique Reference: Charles Cacal Unique Reference: Charles Cacal Unique Reference: Cacal		Cheshire and Manayaid bool authorities, Manaycan MtS Foundation Trust	e CIPHA/Graphnat	Encrypted data bransfer via errail, or alternation, Le. EGRESS	
1801/22	DSROKS	Cheshire & Menorpide Integrated Contact Tracing Programme	Cheshiru & Menseyside i	CS 28340514	Approved	Dec 2021	Ongoing for Covid work, for the foreseeable future.	The PMSC removal sub-roll to exercisc his hother decision as interested violent for Contest Traction in Chambia & Monumolek in analysis	A continuous quality improvement plan will enable	The common law duty is mel by the COPI Regulation 2000 (24) communication distances and other risks to public health	The Health Service (Control of Patient Information) Regulations 2002 Section 3. Communicabile disease and other risks to public health	6 (1) (a) 9 (2) (b) 9 (2) (b) 9 (2) (b)	Manafilible	Chainhe and Manayodo Dafa Diarrig Aguarmer (Ter Too)  Tool Property of the Chairman Aguarmer (Ter Too)  Anno (Critical Statistics of the Specialism hash Adon (Critical Could Post Aguarmer as Manayota - Stagrada Coulded Tradig Propertiesm in Stemanyola - Stagrada Coulded Tradig Propertiesm in Stagrada Coulded Tradig	The Microsoft Dynamical Class Monagement System will enable a more robust and integrated of activities of the control of activity business and process activity business and process activity business and process activities as a CAM system aligned to developments within the proposal.  With using another product Microsoft Dynamics, a DPM please see DPM embedded below.	CTAC Daily Line List PME Stautistrast Englower Import Template Completed by LAY Care Postcode Cainoidence Line List		National Test and Trace team Local Test and Trace team	National Test and Trace team Local Test and Trace team	Data will come into the system via email or electronic file. Case creation will be automated using workflow.	

			Organisation making		Approved /	Project Start	Project End Date			How is the Common Law Duty	Legal Basis - COPL/ S 251 /	Legal Basis - UF	K Identifiable/Pseudonymised/Aggregat		Details of associated			Data Transferred	Data Transferred to	Method of data	Aggregate data will
DAAG date	Application Number	Prolect Name  Deneils Realization for Digitally Erabled Care	the request	ICO number	In progress	Date	Date	Protect description  Study Solidatic Cere of throw (SCCION) mixture of programmes that provide appropriate and trappelled and the patients in her own horse, solidating from with the use of individual policy and recomposers. The use as with recopy of programmes that it makes the contraction of the patients in the patient in the patients in the patients in the patients in the pat	Prolect Values/Uses  The cutput of this project will be mapping what outcomes last to what benefits and what data is as seen as choosing but all the data of the d	of Condidentiality met  The Common Law Duty of Confidentiality down? apply in this situation as passuborymised and/or appropried data min news a day for confidence.	other	GDPR  6 (1) (a) 9 (2)	Dawdooniised	Details of associated Data Sharina Acreement THE DSA - Bis is still in data, and seeds to go out for IC correlations to the CAM SDA methors, and the ICS DSC correlations to the CAM SDA methors, and the ICS DSC	DPIAs	CPHA data sources  whereas supply of say for elective parters and professional supply of say for non-elective dead days dead days disadratisation relates disadratisation relates disadratisation relates disagratic ora situation disadratisation relates disagratic ora situation disagratic disagratic ora situation disagratic di	NHS Diolital Data	from (Organisation)	(Organisation)	transfer	be shared with
		@ Home	Northwest Cosst					end and date is number to the junction of the statistics of first the project in social profession to the statistics of the statistic of the statistics of the statistics of the statistics of the statistic of the statisti	and CALYs and following have outcomes to investigate with trending or debermely area. Create as benefits death-board which will be added to over term. Establishing between the SALPs are the second of the second of the added to the death-board.	pseudonymised and/or aggregated data isn't owed a duty of confidence.		9 (2) (		menthers.		and respiratory apscisitions of therables for elective recovery dynapton monitoring discribed recovery dynapton monitoring discribed rates with proxy and proxy and a second control of the proxy discribed to virtual ward viverage ineigh of stay for virtual ward viverage ineigh of stay for virtual ward discribed through William Ward Schellerts through William was discribed through William was discribed through William was discribed through William was discribed to the week per pathway.					
03/05/22	DSR049	Eady Warning System to support the public health approach to COVID in Cheshire East	Cheshire East Council	Ž15431 15	Approved	01/04/22	01/09/22	Name (in disease) COVD (asset COVD (asset and asset as a consideration of the covd (asset asset asset as a covd (asset as a covd (as a cov	This will support Cheshine East Council Public Health Issures to: which is a decision-making loot to inform public health exist as a decision-making loot to inform public health response whitelipently allocate resource according to COVID rak & subnessbilly whitigate negative impacts of COVID-19	pseudonymixed data lan't owed a duty of confidence.		5 (1) (a) 9 (2) (h)	Passudonymised	To be provided by Cheshire Council	To be provided by Cheshine Council	NR/S, COVID dashboard		CIPHA Graphnet Platform	Cheshire East LA	Dataflow with Dynamics	CE DsPH (Directors of Public Health), Local Public Health Corsustants, and Local Authority Public Health bases, Circical Commissioning Group
0306/22	DSR450	Creative and Managoids Electric Resource, Restriction and Transformation - PTL Execut	Cheshire and Merseyside ICS with Attain	28349514	Approved	11/04/22	01/06/22	The project aim is to debeas unwaverable variation and requally in access, experience and columns scream the projection of Charles & Mosapasia.  Whenevolves the recovery and extending which is baday of indicing calling him and baday and politic gashing which bad by a year of the access that the projection of the safety and projection of the safety and the safety of the safety and the safety of the safety	because for surgery is increasing and from an large instancing for each form of the control of t	pseudonymized and therefore is not osed a duty of confidentiality. Data will only be reported in aggregate / anonymized form.		5 (1) (e) 3 (2) (h)	Aggregated	GMM-population health DSA	CIPHA Pop health DPIA	Waiting last Persony care data. Persony care data. Activity and types of cases grouped (e.g. sension)		CIPMA data conholists – Acute trusts and CCGMGP's	NA - CIPHA TRE	TRE	Specially and Programme Leads.
24/05/22	DSRc61	Mullimorbidly and socioeconomic status: impact on health care use	Edge Hill University	Z5265461	Approved	15/05/02	15/05/23	Named Teachers (Teach & Named by 10 February and Recomby Feedings Regulary Stage (See See See See See See See See See S	Project Output: White passages 1 AE - Outcome - Health Services White passages 2 AE - Outcome - Health Services White passages 2 AE - Outcome - Health Services White passages 2 AE - Output markpian will knowled by states and an accordance of the passages	The data being accessed to paraclerymized and flavorities in not osed in day of confidentially.		6 (1) (a) 9(2) (j)	Pseudorymined	CIFFA population health DSA	Population Health DPIA	St Halens Shared Care Record		264	NA.	NA.	Health and Care Providers, Health and Carin Reassachers, Palestra with multiple otheric coordinate, and the control of the control Groups such as the Society for Andersic Primary Care, RCCP, ARC NNC, University- PPD students, Propagacides and Public Advisors, Students, Ann. Primars and Public Advisors, Students, St
24/05/22	D\$R662	ACMI - Development of a learning system to optimize anti-hallmagic medication prescribing to clade people long with healty.	University of Liverpool	26390975	Approved	18/05/22	1805/23	We will develop, whicke, replacement and workers an Architecturing to Medication Index (ACM) is uptimes an infraringing prescribing in hardy. Programs made development and validation will use 180,000 project ages for its in the Connected Development and under the second section of the Connected Development and the Connected Developme	The project will benefit date people here with hash by opinioning AR residence prescribing, such than by opinioning AR residence prescribing, such that did not have due to adverse a feets and exerta-, it is indipulsable that one will improve an an electric and services, will be a confirmed to the considerable benefits for the NNS and according any proportioner in their according all their considerable benefits for the NNS and according any proportioner in their according all and the larger learn benefit, including allowing of bissa of highly proposed proposed polypsical function, but of independence and share dements that will not be captured within this project flow will be present pulsable.	The Common Law Duty of Confidentially down? paging in this shaaten as presendominate distinct agreepated data inn't owed a duty of confidence.		5 (1) (a) 9(2)(h)	Pseudorymiaed	CPPHA page health for 2	Population health	Primary care AC medication exposure (prescriptions), Primary care demographics inc pseudo geospatial data posta for residential lively.  In the control of t		NA TRE	NATRE	NATRE	Results would be used to develop a score available to GP's and Pharmacuts to identify at raik patients and to afore medication reviews
05/07/22	D\$R053	AF and Stroke pathway	SehK	Z5040527	Approved	1306/22	29/02/24	Tils are set op is a *resecch isom ocnolog will Di Andrew 1985. Dicida Consultent Physicism, is ingoped an NEC indiants assessed as an experiment of the second of the sec	The two clinical research fellows will be able to incorporate elements of their work on and insights gained from the NSS initiative into MD theses, which they plan to halve with the Maragement and Trustess on completion	Not applicable. The project is expected to involve handling only pseudo-ancrymised data within CPHA. We will not be working with any identifiable data within CPHA. We are planning an IRAS application to the HRA in respect of the project as a whole			Pseudonymised	CIP1A pop health lier 2	Population health	CEPHA including individual CCG shared care records SUS distaset	sus	Integrated Core System STHK	STHK	From STHK via STHI secure erral	ς.
160822	DSROSS	Beyond CYP Transformation Programme Data Agenda	Aider Hey Children's NHS Foundation Trust	Z1435601	Approved	22/08/22	твс	Designing and Developing Data Science based solutions for Beyond CYP Transformation Programme	Establish the data science agends to support the Beyond CYP Transformation Programme -fastablish evidence-based recommendations -Development of analytical and predictive models to support -Adrocate the use of data science to support the programme priorities Outputs will be decided together between	The Common Law Duty of Confidentiality doesn't apply in this situation as passudonymised ancilor aggregated data ian't owed a duty of confidence.		6 (1) (f) 6(1)(a) 9(2)(h)	Pseudonymised	CIPHA Tier two Population Health DSA	Population health	-CPHAPrimary care data -SUS – inpatient, cutpatient and emergency care -CYP tables in in Anare DME	sus	Beyond Programms covers 9 Places: Chushine East, Cheshine West, Hallon, Knowsley, Liverpool, Seffon, St Helens, Warrington, Winsi	NA.	Microsoft login with MFA (secure databas access)	
06/09/22	DSRoca	Omenderived	Diverpost City Council	27024755	Approved	01/09/22	30/08/22	Pad Mathew Adden has commissioned a project from the Ground/Med Connection date learn, but by Seeth Resignar and Med Graves.  Name is not for a promptly to provide all to success to the Longoor GCD, control SCDL, and for learn are to a Longoor good Longoor GCD, and the learn are to Longoor good Longoor GCD, and the control learn a Longoor good Longoor good and control learn and the Longoor good Longoor good good and the Longoor good good good good good good good	Output the first and the control of policy to branches where the day of the control of policy to the control of the control o	NA, because data is pseudorymined.		G (1) (a)	Presidenyment	CRYA Psycholon Peath DSA	Propulation hastin	Compagnitio Commission of Commission and Artic data data data data data data data dat	ofett-D Adult Social Care Client level date (ACEM) Mercel Nation that Adverse Nation Health and Control Nation Health and Control Nation Health and Control Health and Nation Adverse	CPMA. Liverpoil City Coxest. Liverpoil Liverpoil. Liverpoil Combined Region	NA.	Asure DME	Liverpool City Council
27/09/22	Dáltosa	нар	Liverpool University Hospitals NHS Foundation Trust	Z9553640	Approved	01/11/22	31/10/23	the ern is clearly cases of the point Auguste Powerment (MP) from models data bases.  We see that the point of the point o	Interestinate renteres on an exercicities on self or The ultimate aim of this work in to better understand risk associated with HAP with a view to preventing correct cases. Molecure, we hope to identify patients at risk of adverse outcomes following HAP to facilitate targeted interventions.	The CLDoC doesn't apply in this situation as pseudorymised data isn't owed a duty of cortidence.		5 (1) (a) 9(2)()	Passudonymised	CIPHA Population Health DSA	Population health	SE CEPHA GP Data SE CEPHA Secondary Care data (Acute) SE CEPHA Community data SE CEPHA Social Care data SE SUS/ ECDS		CIPHA to LUNFT	CPHA to LUMFT	Asure DME	
18/10/22	DEROSO	TRACS	University of Liverpool	28390075	Approved	01/01/23		Actinizable resistance is a significant threat to many of the advances of modern residine. Puople in hospital and long-term care facilities are at increased risk of resistant infections but the notes of transmission of resistant bacteris within and between health and social care facilities are lapsify unknown.	Understanding Interestation routes of ESSLECTE in care horse and hoppils of all door us beings inversely to the control of the size of the control of the size of the control of the size of the control	Copilot consent for access to dela	N/A	S (1) (a) S(23)(j)	Appropried	<b>ТИБ</b>	TRE	Medicines prescribed in the year prior is arrofinent in TRACS and for the duration of TRACS (CPHA Primary Care - Medicalities (CPHA Primary Care)  Commissions recorded at envolvent (CPHA Primary Care)	Admissions to hospital in thy year prior to enrollment in TRACS and for the duration of TRACS (CIPHA Acute or SUS)	СРНА.	TRE and Data will be transferred to Liverpool School of Tropical Medicine servers	ТРЁ едунаа	DoH Healthcare providers Social care providers

			Organisation making	_		Project	t Devices F	nd Project description		Name to the Common Law Posts	Legal Basis -	Legal Basis - UK	Identifiable/Pseudonymised/Aggregat		Date to ad accordate of			Data Tamadamad   Da	to Tournel to Mari		Aggregate data will
	Application Number	Project Name	the request	ICO number		s Date	Date	Project description  This risubhours links in nations with a position Could test result with information from the notionary rare served. Provides lond to Health's whose	Project Values/Uses	How is the Common Law Duty of Confidentiality met	other	GDPR	e	Details of associated Data Sharing Agreements	DPIAs	CIPHA data sources Sources	NHS Digital Data	Data Transferred Da from (Organisation) (O	roanisation) tran	sfer t	be shared with
31/03/21	DSR061	Paxlovid	Cheshire & Mersey ICB	ZB340514	Approved	07/02/22	Ongoing (sin	Protect describbion  This desc		NA - Set aside by COPI Agreement		S(1)(1) S(2)(1)	Identifiable	CIPHA Covid intelligence DSA	CIPHA Covid intelligence DPIA	- Pillar 2 test data	sus				
31/03/21	DSR062	Waiting list	Cheshire & Mersey ICB	28340514	Approved	09/08/21	Ongoing (ar review)	neal Provides a demographic breakdown by Provider, Place, PCN & Practice of patients on the waiting last stratified for risk of an adverse outcome. Ability to cohort patients waiting by waiting time, specialty, condition, deprivation, protected characteristics (e.g. Learning disability) and many other variables.		NA - Set aside by COPI Agreement		5(1)(e) 9(2)()	Identifiable	CIPHA Covid intelligence DSA	CIPHA Covid intelligence DPIA	CIPHA Primary Care	Waiting List MDS SUS				
31/03/21	DSR063	Vaccine ep.	Cheshire & Mersey ICB	28340514	Approved	05/04/20	Ongoing (an	This report companies COVID-19 vaccine uptake with COVID-19 hospital admission rates, both through visualizations and through the calculation of crude odds ratios. Time after vaccination is taken into account, so all comparisons can either be done comparing against		NA - Set saids by COPI Agreement		6.1 (f) 9. 2 (i)	Identifiable	CIPHA Covid Intelligence DSA	CIPHA Covid intelligence	Vaccinations (NMS) Primary Care Pillar 2 testing	sus				
210201	Deport	Long covid	Cheshire & Mersey ICB	_	Approved	13/09/21	Ongoing (ar	immediately post-vaccination or 3+ weeks post-vaccination.  This analysis provides a view of Long covid disease profile and referrels to service through the lens of primary care with the ability to compare.		NA - Set aside by COPI Agreement		6 (1) (f) 9 (2) (i)	Identifiable	CIPHA Covid intelligence DSA	CIPHA Covid intelligence	Pillar 2 testing Primary Care					
31,0321	DUNION	Long cova	Chesnie & Mensey ICO	28340514	Approved	130921	review)	against tris general population, includes previousnos by geography and woar observants, datease protein, reneral to servicia accivid clase rates.  Retrospective analysis of all lung cancer patients treated at CCC between 2016/2015 with 2 years follow up. Pre-Covid. We would like to		NA - Set aside by COP1 Agreement		9 (2) ()	IOENTRIDE	COMA Cond manigance USA	DPIA	Primary Care	505				
01/08/21	odinoso	Nump Customes	The Clatterholds Carcar Care N45 FT	22367711	Approved	01/10/21	Ongoing (an reviews)	Theory would work were warmed by the control of the	Assess the circial needs of catents based on	Analysis in losing drive with prevention made that therefore the prevention of the control of the con		6 (1) (a) 9(2)(h)	Presidenyment	CPHA population health DSA	Propulation Health	(CPSA Primey Care)		All primary care organizations and secondary case secondary case patients from the conduct laws. Nation beautiful.	Prince of the remodylate of the second distorted distorted of the second distorted disto	dispriminal data. 6 cm control of the control of th	CCC Governance - Lung Site Researce Group Site Researce Group Site Control Site McG- McGard Advancy College Site Control Site Site Site Site Site Site Site Site
09/01/23	DSROES	TRO Mensycane (Previously Martal Health Research for Introvation Centre (M-RCI))	Mersey Care NHS FT with University of Liverpool are co-hosts of M-RIC	th. Uc.L - ZECIRO975 MCare - ZGE34416	Approved	01/02/23	28/02/24	Analog see have exceeded in the OSA and of the Science (C.S.) sites a principally of Marrier can MoST F or the 1 showing of showing a classification programs on the site changing due in them show have a deep supplier. The foreign of sites of the MoST MoST MoST MoST MoST MoST MoST MoST	Benefits  - d'ubitic. New insights, tools and therapies to improve mental health d'arvices: Merital healthcare improves systematically though explaining outcome-variation and integrating care.			5 (1) (e) 2 (2) (f)	Pseudorymand	CIPHATer two Population Health DSA	Population hastith	20 CPHA GP Data 20 CPHA Secondary Care data (Acute) 20 CPHA Community data 20 CPHA Comic Care data 20 CPHA Mercial Health data 21 Vecchisation data 21 Vecchisation data 28 Reference data: ambulance	00 SUS/ ECDS 00 CSDS 00 MHMDS 00 Adult Social Care		ta will be directly seased on the DSCRO NA sofructure	4 m m m m m m m m m m m m m m m m m m m	The Cheshins and Mensyside ICS mental health transformation programms, 481% and local Authority providers of merital health services in Cheshine and Mensyside 4040c and patients
31/01/23	DSR071	CVD Pathways analysis	SIHK	25040527	Approved	01/02/23	01/02/24	To shortly propin with an elevated did of hypercosion, and lifetimes and lipids using population health analysis. This will be appropriate and not defined eath. Assume the others is destined using patient recovery inclinately and take preventions action to induce the prevention of stoke and other whited correlations, such as heart takes.	The value is to reduce the incidence of stroke, both tom a patient health perspective (i.e. sovid strokes) and from an economic perspective to a) incidence demand on the health and care economy and b) to reduce the economic impact of stroke on the wider economy.	The CLDoC doesn't apply in this situation as pseudonymised and/or appropried data isn't owed a duty of confidence.		5 (1) (e) 9 (2) (h)	Pseudonymised	CIPHA Tier two Population Health DSA	CIPHA Tier two Population Health DPIA	SE CIPHA GP Data SE CIPHA Secondary Care data (Acute) SE CIPHA Community data	m SUS/ECDS m CSDS	Hospitals (SUS), Whiaton and St Helen's, community and GP data within the geography and same for whole of Cheshire & Marseyside if available	siston Hospital and Secu cobo Ltd Acce	ns FTP or Direct P	AHSE Executive Board, DoH
21/02/23	DSRc074	DynAffic Dynamic prescribing optimisation chrical feasibility study	Liverpool University Hospitals NHS Foundation Trust (+ University of Liverpool)	90	Approved	01/02/23	01/05/25	In all the deleting is griffer the forestation result of a reduction on the control privacy and the past integration of build result because the control privacy and the past integration of build result because the control privacy and the past integration of the past int	Values: Service improvement, efficiency, Uses: DYMART will emodificate the way that indicates fredicties reviewe are understaten in the which will profit them that shart of brands the services assess and more three efficiency. The given assess and more three efficiency. The profit is the service of the services of the services assess and more three efficiency. The profit is the service of the services of the se	The CLD-C dozen't apply in this situation as prescribingment in the owed a duty of confidence.  Access to data will be managed according to the appead DPN and processes and will only see the desired that the duty of the desired that the duty of the desired and will be desired to the appear of the duty of the desired and will be desired to the duty of the desired and will be desired to the duty of the desired to the duty of		6 (1) (e) 9 (2) (i)	Passaduryminad	CMMA Text two Population Health CSA	Population health	ss CPHA GP Data 32 CPHA Secondary Care data (Acute)	m sus/ecos	CIPHA Acc	Desired vis Asure DME DME	ssed via Acuse p	Health and care providers, local authorities, public
040423	DSRor7	Life Roome Evaluation	Mersoy Care		Approved	22/03/23	31,03,06	Money Ce se conducting on inspectation of what the first first from works, with a veriest consistent storpics and I'd work are consistent from Central Consistent of the Cent	This project will provide a cost-benefit analysis of the Life Rooms, which will be used to inform the future of the service and its strategy. The evaluation will better inform the social model of health, and validate the snecdost success of the LIF. The project will bring preventative measures to the toerloot, with the logs to alleviate pressure on primary case and clinical services.	Researchers will not have access to any identifiable data.  The CLDGC doesn't apply in this situation as pseudonymised and/or aggregated data isn't owed a duty of confidence.		5 (1) (a) 9 (2) (i)	Pseudorymised	Population Mealth DPW	DPIAs for Mensey Care NHS Foundation Yazat Life Rooms Data Linkage for Service Evaluation is in place	EX CIPHA GP Data EX CIPHA Secondary Care data (Acute) EX CIPHA Community data EX CIPHA Social Care data EX CIPHA Social Care data EX CIPHA Mental Health data EX CIPHA Mental Health data EX CIPHA Mental Health data EX Reference data: Articulance	80 National Waiting List D 80 SUS/ ECDS 80 CSDS 80 MHMDS 80 MHMDS 80 Adult Social Care ID Mortalities	Data will be directly accessed on DSCRO accessed on DSCRO infrastructure.	ta will be directly researd on DSCRO NA sestructure.		Tessits are to be shared with the steering committee, as well as the select stakeholder group, which will include Life Rooms service users.
040423	coshors	Sweety & Novel Health	1950 Cheshin and Managodis (A), University of Liverpool (D)	77)	Approved	15/04/23	i 310304	Namely has it is applicant the sound find our higger more serials mental health problems. Provides studied has discretized and has been discretized and has discretized and has been discretized and	The walls required the last printings are set and confidence and c	Nail, because data is providen provided	NA.	E(1) (e) E(1) (f) 9 (2) (f)		CPRA Population (Matth OSA)	Prepulation Health DPIA	on CPNA GP Plan.  In CPNA GP Plan.  In ONNA Security of an Allowed Plan.  In ONNA Security of an Allowed Plan.  In CPNA Security of an Allowed Plan.	III National Welling List Dis State Forces III State Forces III Hand Constitution III Management Constitution III Management Constitution III Management Cons	CEPHA NA	Assert	DAME	CB stateholders (Place Precious, Neath and Counties, Chemisted Counties, Chemisted Department, Departm
040423	DERCEO	CND in Primary Care	7845 <u>22</u>		Approved	01/06/23	I engoing	Owns for the Character (CSL) as a large serior continue has being for the open and pushed in Plays and the Disease and high beat of the CSL and the CS	Animonals deathcoard which release and monitors patient based data on two metrics to sleenly control based data on two metrics to sleenly control based data on two metrics to sleenly control based data on the control production and expension patients based on an extra control patients based on since the control based on the control patients based on the control based on the control patients in such data on the control patients in such data of the control patients in such data of the control patients in such data of the data from softward and such data of the control patients in such data of the data from softward or control patients and such data of the control patients	there is the Common Lan Duty of Confidentially suitable/Thin down't egyly to pseudorymited or aggregate date.	NA.	6 (1) (n) 9(2)(h)	Presidentymized	Production House (For Tary DSA	Population Health DPIA.	E CPMA OF Date OCPMA Generally date OCPMA Conventy date OCPMA Conventy date OCPMA Conventy date OCPMA Metal Health date OCPMA Metal Health date OCPMA Metal Health date OCPMA Metal Health date Ochterstein date Ochterstein date	20 National Whiting List D (for discussion) as SULP ECIS SULP ECIS LIST CONTROL OF THE CONTROL OF THE LIST CONTROL OF THE CONTROL OF T	Arden and GEM CSU Do	rth Weat Kidney entiroral Delivery SPT I	7 / Anama DIME: C	Gurth West Kidney "Dennitored Delivery Webson's which constate of NHS England colleagues, Local Collection from providence includes from providence from the providenc
250423	DSRc61	Lymphosdima MSX and WiC DPO Applicator	Mersey Care NHS Foundation Trust (Lymphosidess and WIC) and Arden & GEM CSU (MSK)		Approved	0406/23	300623	Name y Care is currently professing an establishment of the jumphrostems, MSC and Wild in Contin warrises to test if it is first proposed in the control of the proposed in the regulation for signate these sentence (self-control and Memorytic), sent the respective for sentence (self-control and memorytic), and the respective for the proposed in the sentence (self-control and sentence). The depression will be a greatedy assess that are proposed for the sentence of the sentence for the sentence (self-control and sentence (self-control and sentence) and sentence (self-control and sentence) and sentence (self-control and sentence) and control and sentence (self-control and sentence) and sentence (self-control and sentence	For Lymphodema and MEK, the project will support with season derivate improvement programmes and formation and the model for production of the MEX projection and whether associate with microscopic will be modeled for the MEX projection and whether associate with microscopic will be modeled for the MEX projection of the MEX projection and on one to a consideration of the MEX projection and one to the a consideration part of the microscopic part of production. The many label particles are considered to the set of the MEX projection of the MEX pro	Researching will not have access to any identification date.  The CLDEC describinging in the situation as previously make a factor aggregated date and owned a day of confidence.	NA.	5 (1) (4) 3(2)(h)	Pseudorymiaed	Prepulation Meetin (Tier Tend OSA	DPA for the Population Health DSA	EL CITHA GIP Data SE CITHA Secondary Care data (Acuto) SE CITHA Secondary Care data (Acuto) SE CITHA Secondary data CITHA Secondary data CITHA Secondary Care CITHA Secondary Care CITHA Secondary Care CITHA Secondary Care	☐ National Waiting List D SISS ECOS ECOS ☐ MH4MDS ☐ Adult Social Care ☐ Mortalities	cirkA Cod	to will be descrip researd on the DSCRO Asset solivulum.	DME S	Outputs will be compled zito vasious formats imports, allelae, etc.) and shared with staff within the sancius. Feedback will likely be taken to improve outputs to provide better imagint.

						Project					Legal Basis -										
			Organisation making		Approved /	Start	Project End			How is the Common Law Duty	COPI / S.251 /		Identifiable/Pseudonymised/Aggregat		Details of associated			Data Transferred	Data Transferred to	Method of data	Aggregate data will
DAAG date	Application Number	Project Name	the request	ICO number	In progress	Date	Date	Project description		of Confidentiality met	other	GDPR	e	Details of associated Data Sharing Agreements	DPIAs	CIPHA data sources	NHS Digital Data	from (Organisation)	(Organisation)	transfer	be shared with
2004/23	DSR062	Progen Applie Establishing advanced Charles and Movepada	Unit, CCC-L MALE NACE of committee Maringvishe		Agground	01/04/23	1/4/2025 (in final instance)	The principal and of its project is to context on administrating splant to enable a fire distributed of our resistantic breast careaut (MEC) projection.  The second certaint is a bitmaring that objective.  The second certaint is a primate projection one in the second certainty of the primate projection one in the second certainty of the primate projection one in the second certainty of t	Demonstrate Continues by an Elevanian to CCC. The American State of the Continues of the Section of the Continues of the Cont	d There would be no identifiable data present.	NA	6 (1) (e) 9(78)	Penduyettel	Previous Navie (Ter Tere) DSA	DPA for the Regulation Pleasiffs DSA	III CHMA OF Point  III CHMA Ger Point  III CHMA Semonthry Cove date (André)  III CHMA Semonthry date  III CHMA Semonthry	Or National Wissing List Clear on Station Comp. O Catholica O Medical Clear O Mortalise	LUBST CCC (Including Liverpools) CCC (Including Liverpools) AM, Hallon Garsens, Chester)	СРНА	Asure DME	Duck medical field and flar public.