

Public Benefit and Privacy Panel for Health and Social Care

Application Form

Application Control			
<i>Applicants should not complete the “submitted date” field</i>			
Application Coordinator			
Application Number	1819-9999	Submitted Date	
Applicant Name	Sugarplum		
Proposal Name	Evaluation of the Tooth Fairy Services in UK		
Project End Date	31 st December 2022		

Pre-submission checklist	
<i>Applicants should not fill out this section – to be completed by the eDRIS coordinator</i>	
Approved Information Governance Training	<input checked="" type="checkbox"/> Approved training complete and certificates received <input type="checkbox"/> Approved training complete and certificates pending
Use of recognised safe haven	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
NHSCR Involvement	<input type="checkbox"/> Yes <input type="checkbox"/> Reference number:..... <input type="checkbox"/> Email Confirmation of approval supplied: <input checked="" type="checkbox"/> No
Is project covered by National Safe Haven generic ethics approval?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Supporting Documents
<p>Please list <i>only</i> supporting documents which you have clearly referenced in your application – the name of each should clearly indicate what the document/file/reference is about.</p> <p>Public Engagement for Tooth Fairy audit</p> <p>DPIA for Tooth Fairy audit</p> <p>Privacy notice for Tooth Fairy Website</p> <p>Variables for Tooth Fairy Audit</p>

Note to Applicants

Prior to completing your application form you should:

- Contact the eDRIS Team, who will assist you - Nss.edris@nhs.net or by phone on 0131 275 7333
- Read and understand the separate Guidance for Applicants

Your application should be typed, not handwritten. Your eDRIS application coordinator will inform you of how to submit your application form and any supporting evidence. Before submitting your completed application, you should ensure that:

- All relevant sections of the application are complete
- Relevant supporting evidence is attached
- Individuals named on the form have read and approved its submission

Please note that submitted applications may be circulated to panel members, administrative colleagues, NHSScotland information governance and information security colleagues, Caldicott Guardians, the CHI Advisory Group and, where appropriate, non-NHS Scotland colleagues from a variety of participating partner bodies, in the course of processing. You must make your eDRIS application coordinator aware of any confidential or sensitive information contained in your application which you would consider inappropriate for circulation in such a manner. Your application could be subject to disclosure or partial disclosure under the Freedom of Information (Scotland) Act, and will be retained in line with NHSScotland information policy.

Section 1 – People

1.1	Applicant <i>Please read section 1.1 of the guidance</i>	
1.1.01	Full Name:	Sugarplum
1.1.02	Title:	Fairy
1.1.03	Position (if PhD researcher, please also complete section 1.2):	Lead Tooth Fairy
1.1.04	Professional Registration No.:	General Fairy Council (GFC) 84294521
1.1.05	Organisation Name:	Tooth Fairy Services
1.1.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.1.07	Email:	Sugarplum@toothfairy.service.uk
1.1.08	Do you have an NHS contract/honorary contract?	Yes
1.1.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and confidentiality course
	Date completed:	September 2018

1.2	PhD Supervisor <i>Please read section 1.2 of the guidance</i>	
1.2.01	Full Name:	N/A
1.2.02	Title:	
1.2.03	Position:	
1.2.04	Professional Registration No.:	
1.2.05	Organisation Name:	
1.2.06	Address (incl. postcode):	
1.2.07	Email:	
1.2.08	Does this person have an NHS contract/honorary contract?	Choose an item.
1.2.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	
	Date completed:	

1.3	Clinical Sponsor/Lead <i>Please read section 1.3 of the guidance</i>	
1.3.01	Full Name:	Godmother
1.3.02	Title:	Fairy
1.3.03	Position:	Clinical Lead for Child Happiness
1.3.04	Professional Registration No.:	GFC 39460167
1.3.05	Organisation Name:	Tooth Fairy Services
1.3.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.3.07	Email:	Fairy.godmother@toothfairy.service.uk
1.3.08	Does this person have an NHS contract/honorary contract?	Yes
1.3.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and Confidentiality course
	Date completed:	October 2018

1.4	Information/Data Custodian <i>Please read section 1.4 of the guidance</i>	
1.4.01	Full Name:	Tinker Bell
1.4.02	Title:	Fairy
1.4.03	Position:	Head of Numbers
1.4.04	Professional Registration No.:	GFC 83890273
1.4.05	Organisation Name:	Tooth Fairy Services
1.4.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.4.07	Email:	Tinkerbell@toothfairy.service.uk
1.4.08	Does this person have an NHS contract/honorary contract?	No
1.4.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and Confidentiality course
	Date completed:	November 2018

1.5 Others with access to identifiable or potentially identifiable data <i>Please read section 1.5 of the guidance</i>		
1.5.01	Full Name:	Moth
1.5.02	Title:	Fairy
1.5.03	Position:	Data Collector / Analyst
1.5.04	Professional Registration No.:	GFC 55293762
1.5.05	Organisation Name:	Tooth Fairy Services
1.5.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.5.07	Email:	Moth@toothfairy.service.uk
1.5.08	Does this person have an NHS contract/honorary contract?	Yes
1.5.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and Confidentiality course
	Date completed:	September 2018

1.5 Others with access to identifiable or potentially identifiable data <i>Please read section 1.5 of the guidance</i>		
1.5.01	Full Name:	Cobweb
1.5.02	Title:	Fairy
1.5.03	Position:	Data Collector / Analyst
1.5.04	Professional Registration No.:	GFC 00636515
1.5.05	Organisation Name:	Tooth Fairy Services
1.5.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.5.07	Email:	Cobweb@toothfairy.service.uk
1.5.08	Does this person have an NHS contract/honorary contract?	Yes
1.5.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and Confidentiality course
	Date completed:	October 2018

1.5 Others with access to identifiable or potentially identifiable data <i>Please read section 1.5 of the guidance</i>		
1.5.01	Full Name:	Mustardseed
1.5.02	Title:	Fairy
1.5.03	Position:	Data Collector / Analyst
1.5.04	Professional Registration No.:	GFC 27184594
1.5.05	Organisation Name:	Tooth Fairy Services
1.5.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.5.07	Email:	Mustardseed@toothfairy.service.uk
1.5.08	Does this person have an NHS contract/honorary contract?	Yes
1.5.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and Confidentiality course
	Date completed:	September 2018

1.5 Others with access to identifiable or potentially identifiable data <i>Please read section 1.5 of the guidance</i>		
1.5.01	Full Name:	Peaseblossom
1.5.02	Title:	Fairy
1.5.03	Position:	Data Collector / Analyst
1.5.04	Professional Registration No.:	GFC 02192964
1.5.05	Organisation Name:	Tooth Fairy Services
1.5.06	Address (incl. postcode):	Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
1.5.07	Email:	Peaseblossom@toothfairy.service.uk
1.5.08	Does this person have an NHS contract/honorary contract?	Yes
1.5.09	Provide details of the most recent information governance training undertaken - a list of training courses is included at Appendix A of guidance notes	
	Name and institution of course:	MRC Research GDPR and Confidentiality course
	Date completed:	October 2018

1.6 Others Please read section 1.6 of the guidance

Complete this section if applicable – for each additional person

Full Name:	Robin Goodfellow	Involvement in Proposal:	Designed and made the PilloWapp™ mechanism used for collecting administrative data from Tooth Fairy visits. Will be sent aggregated data regarding the performance of the PilloWapp™ but will not have access to the patient-level data.
Organisation:	Puck Enterprises	Position:	Designer and Engineer

Full Name:	Ariel	Involvement in Proposal:	Will be sent aggregated results and outcomes to identify areas for service improvement but will not see the patient-level data.
Organisation:	Tooth Fairy Services	Position:	Service Improvement Manager

Section 2 – Organisations & Bodies

2.1	Organisation or Body Leading Proposal <i>Please read section 2.1 of the guidance</i>	
2.1.01	<p>Organisation or Body Name:</p> <p><i>If the organisation here is an NHSScotland board, note this and go directly to question 2.1.03</i></p>	<p>Tooth Fairy Services is a specialist, NHS service, within Paediatric Happiness Services in the UK to collect Baby Teeth as they naturally fall out. Tooth Fairy Services safely destroys these Baby Teeth, so that children are guarded against any malign influences, as it is thought that if a third party obtains a child's baby teeth it can gain undue influence over the happiness of that child. The Tooth Fairy destroys the teeth soon after collection. Child-specific tooth data are anonymised and stored separately from the child identifiers, which are retained securely for 20 years, for collation of data for subsequent tooth collections.</p> <p>For further information regarding our service, please see our website: www.toothfairy.service.uk.</p>
2.1.02	Is this a commercial organisation or body?	No
2.1.02a	If 'Yes', please provide a full explanation of the organisation or body's activity and industry sector, including any previous experience of using NHSScotland data - append supporting documentation as appropriate	
2.1.03	Is this organisation or body wholly funding or paying for the costs of conducting the proposal?	No Joint funding with Puck Enterprises

2.2	Main Contact for Lead Organisation <i>Please read section 2.2 of the guidance</i>	
2.2.01	Full Name:	Nuff
2.2.02	Title:	Fairy
2.2.03	Position:	Data Protection Officer
2.2.04	Email:	Fairy.nuff@toothfairy.service.uk

2.3	Organisation or Body Funding Proposal <i>Please read section 2.3 of the guidance</i>	
<i>Complete the following section if you answered 'No' to question 2.1.03</i>		
2.3.01	<p>Organisation or Body Name:</p> <p><i>If the organisation here is an NHSScotland board note this and, go directly to section 2.4</i></p>	This proposal is jointly funded by Tooth Fairy Services and Puck Enterprises.
2.3.02	Is this organisation or body a commercial organisation?	No .Puck Enterprises is a not-for-profit charitable organisation that designs and tests interventions to improve the happiness of children. Puck Enterprises is registered with the ICO Z(F)945737
2.3.02a	If 'Yes', please provide a full explanation of the organisation or body's activity and industry sector, including any previous experience of using NHSScotland data - append supporting documentation as appropriate	

2.4 Other Relevant Organisations or Bodies <i>Please read section 2.3 of the guidance</i>		
<i>Complete this section if applicable</i>		
Organisation Name	Nature of Business/Sector	Nature of interest in proposal

Section 3 – Overview

3.1	Proposal Essentials <i>Please read section 3.1 of the guidance</i>											
3.1.01	Please specify the proposal end date	31st December 2022										
3.1.02	<p>Is this proposal:</p> <ul style="list-style-type: none"> • an extension • a renewal of an existing approval • related to a previous application (approved or not) <p>Please provide details, include the reference number of the original application, and summarise the changes requested</p>	No										
3.1.03	Does this proposal require updates of information or to be repeated at regular intervals? If yes please advise the frequency	No										
3.1.04	<p>What is the substantive purpose of the proposal? (please choose one option from below that best matches your proposal)</p> <table border="0" style="width: 100%;"> <tr> <td><input type="checkbox"/> Patient Care</td> <td><input type="checkbox"/> Research</td> </tr> <tr> <td><input checked="" type="checkbox"/> Audit</td> <td><input type="checkbox"/> Performance Monitoring/Management</td> </tr> <tr> <td><input type="checkbox"/> Service Planning/Improvement</td> <td><input type="checkbox"/> Health/Social Care Administration</td> </tr> <tr> <td><input type="checkbox"/> Systems Implementation/Testing</td> <td><input type="checkbox"/> Training/Education</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td></td> </tr> </table> <p>If other clearly defined purpose, please give details:</p>		<input type="checkbox"/> Patient Care	<input type="checkbox"/> Research	<input checked="" type="checkbox"/> Audit	<input type="checkbox"/> Performance Monitoring/Management	<input type="checkbox"/> Service Planning/Improvement	<input type="checkbox"/> Health/Social Care Administration	<input type="checkbox"/> Systems Implementation/Testing	<input type="checkbox"/> Training/Education	<input type="checkbox"/> Other	
<input type="checkbox"/> Patient Care	<input type="checkbox"/> Research											
<input checked="" type="checkbox"/> Audit	<input type="checkbox"/> Performance Monitoring/Management											
<input type="checkbox"/> Service Planning/Improvement	<input type="checkbox"/> Health/Social Care Administration											
<input type="checkbox"/> Systems Implementation/Testing	<input type="checkbox"/> Training/Education											
<input type="checkbox"/> Other												
3.1.05	<p>Access is being requested to data from which sources? (tick as many as are relevant)</p> <ul style="list-style-type: none"> <input type="checkbox"/> A single NHS Scotland Board (excluding NSS) including any system/database <input checked="" type="checkbox"/> NHS National Services Scotland <input type="checkbox"/> More than one NHS Scotland Board including any system/database <input type="checkbox"/> Community Health Index (CHI) database <input type="checkbox"/> NHS Central Registry <input type="checkbox"/> Other <p>If other, please give details:</p>											

<p>3.1.06</p>	<p>Provide a <u>clear and concise</u> lay outline of the proposal (max. 250 words). This may be published on the PBPP website.</p> <p>Tooth Fairy Services collects Baby Teeth from children, providing a small remuneration or gift in return, the value of which is determined by the child’s family. In January 2012, Tooth Fairy Services introduced the PilloWapp™ developed by Puck Enterprises, which detects when a child puts a tooth under a pillow for the Tooth Fairy, the location of the tooth to be collected and coded child identifiers (name, TFS number ID and CHI number). Prior to 2012, Tooth Fairy Services used household fairies to convey the information. The data retained by the PilloWapp™ includes coded child identifiers, location information and the current family level of remuneration; these data are used only for the collection of teeth. The PilloWapp™ does not collect data regarding dental health of any children. The PilloWapp™ data are protected by StrongMagic during the data-transfer and Tooth Fairy Service provision. Once the tooth has been collected, the PilloWapp™ data are transferred and stored in a child-specific datafile and held securely at Tooth Fairy Services HQ, located in central Nowhere.</p> <p>To determine the effectiveness of the PilloWapp™ and to identify any areas for improvement for Tooth Fairy Services, the PilloWapp™ needs to be audited with regard to the uptake of the service among children, the different factors that might affect service use or provision, and whether the introduction of the PilloWapp has affected these. Differences in remuneration will also be assessed with a view to consistency across the UK.</p>
<p>3.1.07</p>	<p>Provide a description of the aims and objectives of the proposal.</p> <p>This application is an audit/evaluation of the Tooth Fairy Service since 2007, comparing the 5 years before and after the introduction of the PilloWapp™. This will use data linkage to external Dental data to determine:</p> <ol style="list-style-type: none"> 1) The level of use of Tooth Fairy Services across Scotland, compared with the number of children registered with an NHS Dentist: <ol style="list-style-type: none"> a) whether introduction of the PilloWapp affected service uptake using a ‘before and after’ analysis; b) whether specific social and geographical factors, might affect service coverage or use of the PilloWapp™; 2) Whether the health of the teeth and/or any dental intervention in its extraction affect the ability of the PilloWapp™ to detect teeth that should (or not) have been collected: <ol style="list-style-type: none"> a) As above, whether this is affected by specific social or geographical factors; 3) The variations in monetary remuneration across the service:

	<p>a) whether this is affected by specific social or geographical factors</p> <p>b) whether this has changed significantly over time.</p> <p>Results from this audit will be used to identify areas where service improvement may be required and possible factors that might affect the uptake or efficiency of the services. Differences in levels of remuneration, and the influence of social or geographical factors, will inform the ease of standardisation and the possible remuneration level that could be used for this standardisation.</p>
3.1.08	<p>Provide a description of the envisaged benefits to the public and/or patients.</p> <p>Current thinking suggests that carelessly discarded Baby Teeth from humans can be obtained by third parties who can gain a disproportionate influence over the happiness of children. The Tooth Fairy service aims to guard children against the malign influence of such third parties by collecting, carefully storing and then destroying these Baby Teeth, to the benefit and happiness of children.</p> <p>To try to improve the Tooth Fairy service, the PilloWapp™ was introduced in 2012. To determine the effects of the introduction of the PilloWapp™ and to determine whether inequalities in Tooth Fairy Service use or level of remuneration have arisen over the 5 years before and after introduction of the PilloWapp™, in line with general changes in dental health, social or geographical factors, the Tooth Fairy Service needs to be audited. The results of the audit will be directly fed back to Service Planners at Tooth Fairy Services to identify possible service improvements.</p>
3.1.09	<p>Provide a concise description of: the research study design (sample size, inclusion/exclusion criteria, time period); data collection; data processing or other means required to achieve the aims of your proposal.</p> <p>The audit will compare linked Tooth Fairy Services data prior and subsequent to the introduction of the use of PilloWapp™. These data will be linked to the child dental data (held in MIDAS), by personal identifiers which will only be used for processing; child-level study data will be given a specific study ID for analysis. Dental data from MIDAS, for children who have not used the Tooth Fairy Services will also be obtained and given a different study ID by eDRIS. These children will be used in all analyses as a comparator group. Inequalities within the service will be analysed according to age and sex of the child, social deprivation (SIMD), ethnicity, geography (postcode sector) and dental health (MIDAS data) to identify whether these have arisen in a systematic manner.</p> <p><u>Population</u>: All children aged 5-15 years known to Dental Services in Scotland between 2007 and 2017, according to MIDAS data. This is between ~750,000 in 2007 and</p>

	<p>960,000 children in 2017. All those who have used Tooth Fairy Services will be linked with data from MIDAS. For those children who have not used Tooth Fairy Services, the same variables will be extracted and given new ID numbers. Data from all children will be anonymised / pseudonymised before returning to Tooth Fairy services.</p> <p><u>Intervention</u>: The audit will compare the use of Tooth Fairy Services before and after the introduction of the PilloWapp™. As the PilloWapp™ was introduced in January 2012, data from 2007–2011 and 2012–2017 will be compared, as ~5 years either side of an intervention. Variations in service use over time will also be analysed according to age and sex of the child, social deprivation (SIMD in Scotland), ethnicity, geography (postcode sector) and dental health (MIDAS data). Variations in remuneration over time will be analysed according to age of the child, social deprivation (SIMD in Scotland), ethnicity, geography (postcode sector) and dental health.</p> <p><u>Comparators</u>: Children who have not used Tooth Fairy Services will be the comparator group. These data will be anonymised as Tooth Fairy Services have no identifiers relating to these children, who will be identified by eDRIS. Differences between those who have and have not used Tooth Fairy Services will be compared over time and according to age and sex of the child, social deprivation (SIMD), ethnicity, geography (postcode sector) and dental health.</p> <p><u>Outcomes</u> will be population statistics between the groups.</p> <p>All data will be anonymised /pseudonymised for analysis. All data will be analysed on secure Tooth Fairy Services servers located in central Nowhere. These data will be compared with similar data to be obtained from other parts of the UK.</p>
<p>3.1.10</p>	<p>Provide a clear and concise outline of any statistical methods that will be used in the project (if applicable).</p> <p>This is a largely descriptive and comparative study, so only basic population statistics will be used to compare between groups. Multifactorial analysis will be used to determine whether any specific factors have more influence on the outcomes.</p>
<p>3.1.11</p>	<p>Provide a diagram/description to illustrate the data flow or data linkage process envisaged (if applicable).</p>

	<pre> graph TD A["Patient identifiers from TFS given new Study ID Nos. Identifiers and Study IDs"] --> EDRIS B["Patient identifiers from MIDAS Data from MIDAS"] --> EDRIS EDRIS["eDRIS •Data linkage for TFS children with MIDAS data under study ID Nos. •MIDAS data from non-TFS children extracted and given study ID Nos. Linked, anonymised data"] --> C["Tooth Fairy Services Secure servers for analysis"] D["Comparable Data from other parts of the UK"] --> C C --> E["Aggregated data to be used to identify possible service improvements"] C --> F["Aggregated data to be used to identify possible improvements to the PilloWapp™ Puck Enterprises"] </pre>
3.1.12	<p>Does the proposal have implications for, or target, vulnerable populations? Please give details. Definitions of vulnerable populations are given in section 5 of Appendix A of the guidance notes.</p>
	<p>All children who have been visited by the Tooth Fairy between 2007 and 2017 will be included. This may include vulnerable children but such information will not be identifiable in the analysis and are not the focus of this application.</p>
3.1.13	<p>Does the proposal seek access to highly sensitive data? Please give details. Definitions of sensitive data are given in section 6 of Appendix A of the guidance notes.</p>
	<p>Yes, ethnicity is requested.</p>
3.1.14	<p>Does the proposal seek to use information exclusively about deceased persons? Please give details.</p>
	<p>No.</p>
3.1.15	<p>Describe how you have included public input / lay representation in your proposal design.</p>
	<p>This is an internal audit for Tooth Fairy Services, comparing outcomes before and after an intervention in a service, and aims to improve service uptake and outcomes. We used a questionnaire at various UK urban/suburban shopping centres asking parents and children about their experience of Tooth Fairy Services. Feedback was that there was room for improvement (sometimes the Tooth Fairy forgot to come!) and that</p>

	the current remuneration rates should be standardised. The general feedback when we asked about use of their NHS data for analysis was that was acceptable if the data were not identifiable. Please see accompanying public engagement questionnaire questions and analysis.
3.1.16	Describe any peer review undertaken, with details (for example formal review by a peer organisation or funding body, informal internal review, and review by a third party).
	The audit proposal was reviewed by the Service Improvement Manager at Tooth Fairy Services and has been informally reviewed by the Scientific Officer at Puck Enterprises. Both suggested minor changes to the study design which have been incorporated. As this is an internal audit, it has not been reviewed by any external parties.
3.1.17	Describe how the proposal has been designed to demonstrate that privacy risk has been adequately assessed, is appropriately managed, and has been reduced to acceptably low levels (e.g. has a data protection impact assessment (DPIA) been carried out, if appropriate). Please provide any relevant supporting documentation.
	The ICO Screening questions have been done which suggested that a DPIA was needed and has been sent in (see accompanying documents).
3.1.18	Is there <i>any</i> commercial aspect or dimension to the proposal or its outcomes? If yes, please give details.
	No.

3.2	Statutory and Regulatory Context <i>Please read section 3.2 of the guidance</i>
3.2.01	Does your proposal have a statutory or regulatory justification - is the proposal responding to a statutory or regulatory instruction, duty or order? Please give details.
	No.
3.2.02	If your organisation will be processing personal and/or special category data as part of this proposal then please cite the lawful basis for processing under current data protection law.
	Legal basis for processing personal data: 6.1.e Public task: the processing is necessary for the data controller to perform a task in the public interest or for their official functions, and the task or function has a clear basis in law.
	Legal basis for processing special category data:

	9.2.g Processing is necessary for reasons of substantial public interest, on the basis of Union or Member State law which shall be proportionate to the aim pursued, respect the essence of the right to data protection and provide for suitable and specific measures to safeguard the fundamental rights and the interests of the data subject.
3.2.03	Are there any existing information sharing agreements or contracts in place which support your proposal? Please give details and attach as supporting documentation. Contract between Puck Enterprises and Tooth Fairy Services. (NB There is no “model” agreement between organisations, as it depends on their respective lawyers).
3.2.04	Are regulatory approvals from outside Scotland pending or received? Please give details. As this is a UK-wide study, we are applying for access to NHS Dental data for the matching and audit, to the NHS Digital for England, to the Secure Anonymised Information and Linkage (SAIL) service in Wales and to the Northern Ireland Statistics Research Authority (NISRA) for Northern Ireland. We are applying to the Confidentiality Advisory Group of the Health Research Authority for unconsented access to confidential data and exemption under section 251.

3.3	Research and Ethics Governance <i>Please read section 3.3 of the guidance</i>	
3.3.01	Has your proposal sought NHS or university research ethics approval?	No
3.3.01a	If yes, provide committee details, status of approval (i.e. pending, approved, etc) and reference number. Please attach as supporting documentation if available	
3.3.01b	If no, explain why NHS or university research/ethics approval is not sought: This is an audit/service evaluation and therefore NHS Research Ethics approval is not required.	

3.4	Safe Havens <i>Please read section 3.4 of the guidance</i>	
3.4.01	Do you intend to access the data requested exclusively through a safe haven listed at Appendix A of guidance notes? Please provide details of which safe haven/s. <i>If you have answered ‘Yes’ you do not need to complete sections 5.1 or 5.2</i>	
	No. Data will be kept in secure servers at Tooth Fairy Services HQ in central Nowhere.	
3.4.02	If you applying to use NHS NSS data and you do not intend to do this through the National Safe Haven, please explain why then proceed to Section 4.	

	We will be including data from the rest of the UK; therefore the data will be stored on a secure server at Tooth Fairy Services HQ in central Nowhere.	
3.4.03	Will you be accessing the safe haven remotely?	N/A
3.4.04	How and at what location will you be accessing the safe haven? E.g. on a university-provided laptop from a university office.	
	N/A	

Section 4 – Data & Data Subjects

4.1 New Data yet to be collected *Please read section 4.1 of the guidance*

Dataset/source Name	Collection by (whom)?
None	

4.2 All Other Existing Datasets / sources *Please read section 4.2 of the guidance*

Please note that contact should be established as early in the process as possible with NHS Scotland boards/Data providers to discuss data provisioning requirements for any of the applicable sources listed below.

Dataset/source Name	Data Controller (Organisation)
	For existing dataset/sources for which the data controller is not an NHSScotland board, please append evidence of the data controllers permission to use the data
Tooth Fairy Database	Tooth Fairy Services
MIDAS	NHS NSS

4.2.01 How were individuals originally informed of the use of their data? You should ensure that you include an appropriate explanation for each of the data sources which you have listed above.

Children show their awareness of Tooth Fairy visits by putting teeth under their pillow. This information was detected and passed on by household fairies prior to the introduction of the PilloWapp™, which is meant to detect this information using StrongMagic. Privacy Notices regarding the use of child data obtained by Tooth Fairy Services are available on our website: www.toothfairy.service.uk/privacy-notices.

For children who did not use the Tooth Fairy Services, only anonymised data will be used.

4.3 Data Variables <i>Please read section 4.3 of the guidance</i>			
Dataset/source Name	Variable	Time Period/Range	Please check to indicate if this item is used for processing only and will not be part of the output
Please see separate data variable sheet			
MIDAS	CHI	2007 – 2017	<input checked="" type="checkbox"/>
	Name	2007 – 2017	<input checked="" type="checkbox"/>
	Date of Birth	2007 – 2017	<input checked="" type="checkbox"/>
	Full Postcode	2007 – 2017	<input checked="" type="checkbox"/>
	Sex	2007 – 2017	<input type="checkbox"/>
	Postcode sector	2007 – 2017	<input type="checkbox"/>
	Ethnicity	2007 – 2017	<input type="checkbox"/>
	Date of treatment start	2007 – 2017	<input type="checkbox"/>
	Date of treatment stop	2007 – 2017	<input type="checkbox"/>
	Age at start of treatment	2007 – 2017	<input type="checkbox"/>
	Treatment ID	2007 – 2017	<input type="checkbox"/>
	Treatment Fee Code	2007 – 2017	<input type="checkbox"/>
	Statutory Fee Code	2007 – 2017	<input type="checkbox"/>
	Item Code	2007 – 2017	<input type="checkbox"/>
	Item Description	2007 – 2017	<input type="checkbox"/>
	Sex	2007 – 2017	<input type="checkbox"/>
	Date tooth collection	2007 – 2017	<input type="checkbox"/>
	Age at tooth collection	2007 – 2017	<input type="checkbox"/>
	No. Teeth collected overall	2007 – 2017	<input type="checkbox"/>
	Is this the full set of teeth?	2007 – 2017	<input type="checkbox"/>
	Price at tooth collection	2007 – 2017	<input type="checkbox"/>
	Average price per tooth	2007 – 2017	<input type="checkbox"/>

‘Data protection law requires that the use of either directly or indirectly identifiable data variables is minimised to those which are strictly necessary. This is known as the ‘data minimisation’ principle. In the table below please justify the need for all of the identifiable or potentially identifiable variables included in your proposal:	
Identifying or Potentially identifying Variable	Justification:
Full Dates of tooth collection and dental treatment.	Required as a child may lose more than one tooth in any month and to determine whether treatment overlaps with date of use of Tooth Fairy Services.
Postcode	Full postcode is required for obtaining SIMD but only SIMD will be given to applicant. Postcode sector will be used for geographical analysis.
Ethnicity	Ethnicity is required to determine if there are ethnic differences in use of Tooth Fairy Services. The categories may be further collapsed depending on numbers obtained.
CHI	Data linkage will be processed primarily on CHI number as this should be unique and consistent for each child, if they change address or change name. Name and DOB are there for further matching.

4.4	Methodology <i>Please read section 4.4 of the guidance</i>		
4.4.01	Does the proposal require any of the following:		
	<input checked="" type="checkbox"/> Data linking <input type="checkbox"/> Use of matched controls <input type="checkbox"/> Single anonymised data extract <input type="checkbox"/> Other (please specify):		
4.4.02	If the proposal requires data linkage, who is undertaking the linkage e.g. eDRIS team, local analysts etc..? eDRIS team		
4.4.03	What variables will be processed for linkage?		
	<input checked="" type="checkbox"/> CHI Number	<input checked="" type="checkbox"/> Forename	<input checked="" type="checkbox"/> Surname
	<input checked="" type="checkbox"/> Date of Birth	<input type="checkbox"/> Address	<input type="checkbox"/> NHS Number
	<input checked="" type="checkbox"/> Postcode	<input type="checkbox"/> Other Please Specify:	

4.5	NRS/NHSCR Data Sources <i>Please read section 4.5 of the guidance</i>	
<i>Complete this section if access to NHSCR is required, or if there is any National Records of Scotland involvement</i>		
4.5.01	Does the proposal require access to NHS Central Registry as a sampling frame for cohorts?	No
4.5.02	Does the proposal involve flagging of individuals on the NHSCR for long term follow up?	No
4.5.03	If yes, is flagging necessary: <input type="checkbox"/> To trace and contact individuals throughout the UK? <input type="checkbox"/> To be informed of fact and cause of death? <input type="checkbox"/> To be informed of the incidence of on-going anonymised cancers registrations? <input type="checkbox"/> To be informed of emigrations prospectively and retrospectively?	
4.5.04	Is any other NRS/NHSCR involvement required? Please provide details No.	

4.6	Making Contact with Individuals <i>Please read section 4.6 of the guidance</i>				
4.6.01	Is any direct contact with any group of individuals required? If Yes, please provide details below				No
Contact Group and Method of contact					Contact by (whom)
<input type="checkbox"/>	Hospital Consultants	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other (specify) :	
<input type="checkbox"/>	Other NHSS Staff	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other (specify) :	
<input type="checkbox"/>	General Practitioners	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other (specify) :	
<input type="checkbox"/>	Patients/Public	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other (specify) :	
<input type="checkbox"/>	Relatives of	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other	

	participants			(specify):	
	<input type="checkbox"/> Others (please specify):	<input type="checkbox"/> Letter	<input type="checkbox"/> Phone	<input type="checkbox"/> Other (specify) :	
4.6.02	Please explain why contact is being made – append copies of relevant correspondence as supporting evidence				

4.7	Community Health Index (CHI) Database <i>Please read section 4.7 of the guidance</i>
<i>Complete this section if access to CHI Database is required</i>	
4.7.01	What monitoring and audit of the use of CHI is planned? Please provide details
	None
4.7.02	What technical method will be used to access CHI (online read-only, download, other extract, anonymised extract, etc)? Please provide details
4.7.03	Have any risks been identified in the proposal which relate specifically to CHI?

Section 5 – Data Processing

5.1	Access Please read section 5.1 of the guidance
Complete the following section if you answered 'No' to question 3.4.1	
5.1.01	At what location is identifiable or potentially identifiable data being accessed? All data will be accessed via secure servers within Tooth Fairy Services, based in Titania Way, Oberon Town, Nowhere, UK. NO15 9WH
5.1.02	Please provide details of security policies/procedures governing access to this physical and technical environment. Please append supporting documentation referencing appropriate sections. All data processing procedures are governed by the Tooth Fairy Services Information Governance and IT Security policies (please see supporting documents NHS Tooth Fairy Information Governance Policy and Tooth Fairy Services IT Security Policy).
5.1.03	Does this policy/procedure cover password policy in detail? Please provide details/ append supporting documentation referencing appropriate sections. Yes. All passwords have to be changed at the full moon, the dates of which are set as reminders in the system's calendar. All passwords must be of at least 16 characters long and must contain at least one of each of the following: upper and lower case letters, numbers, runes and symbols. No password or one similar can be repeated within a year of use. The system records previous passwords for one year for each user for compliance.
5.1.04	Does this policy/procedure cover user account management, including review or removal of access to sensitive/personal data, in detail? Please provide details/ append supporting documentation referencing appropriate sections. The policy states: Access to all information systems will be controlled to ensure that only authorised users have access to the system and the information they are authorised to access. Tooth Fairy Services data systems have an audit functionality which records user access to confidential data items and keystroke use. Audit data will be used for review of actual or potential IG breaches/incidents. Routine audit of access will also be carried out. Where more than one user accesses an information system, each user of that system will have a unique and verifiable identity. All transactions on shared information systems will be attributed to the individual who initiated them.
5.1.05	Will individuals with access to data have individual or shared accounts? All individuals will have password-protected individual accounts, each of with a unique and verifiable identity.

5.1.06	Will the data be accessed by staff working off site e.g. staff working from home at any time during the duration of the proposal?	Yes Only in exceptional circumstances.
5.1.06a	If yes, are policies/procedures in place to facilitate, monitor and audit this access? Please provide details/ append supporting documentation.	
	While not encouraged, specific members of staff have the facility to login to the servers using a virtual fairy network (VFN) and a WisH key. The WisH key is only given to authorised users and only allows access to folders for which the user has authorised access for an approved purpose. Access is granted on a time limited basis. This process is monitored and audited as above. Permissions for remote access are renewed on the first day of each season.	
5.1.07	Provide any additional detail of how data is protected from unauthorised access	
	Line Managers ensure fairies cannot gain unauthorised access to any Tooth Fairy Services systems or manual data which would compromise data integrity and confidentiality by only authorising access to data systems as is commensurate with the individual's job function.	

5.2	Storage & Use <i>Please read section 5.2 of the guidance</i>	
<i>Complete the following section if you answered 'No' to question 3.4.1</i>		
5.2.01	Where is data being stored and used? (location, organisation, address – refer to addresses in previous sections if appropriate)	
	All data will be stored on secure servers based at Tooth Fairy Services, based in Titania Way, Oberon Town, Nowhere, UK. NO15 9WH. Access to these buildings is by ID card only and with biometric confirmation.	
5.2.02	ISO 27001 Cert. No.	Currently Tooth Fairy Services servers do not comply with ISO 27001, but comply with NHS Happiness Services IG policies, best practices and guidelines.
5.2.03	Please provide details of security policy/procedure governing storage and use of data within this physical and technical environment – append supporting documentation referencing appropriate sections	
	The servers are hosted in air-conditioned, locked rooms with access granted only to authorised IT staff. Access to the building is via ID card and is constantly monitored by Closed Circuit FairyVision (CCFV), intruder alarms and fire detection systems. Separate backup servers are situated in a separate building on the other side of the Tooth Fairy Services campus, a distance of about half a league.	

5.2.04	Does this policy/procedure cover the implementation of up-to-date controls for the detection and prevention of malware? Please provide details/ append supporting documentation
	Tooth Fairy Services servers undergo daily updates of software to guard against known and newly released viruses and malware; this also includes a Spell Check function.
5.2.05	Does this policy/procedure cover access control and auditing of system administrator activity? Please provide details/ append supporting documentation referencing appropriate sections
	The servers record all access to the systems for all personnel, including system administrators. Audit logs are configured to record any actions undertaken using administrator or elevated privileges. All audit logs are secured to protect from unauthorised modification. Any unauthorised access to servers at this level can be detected and the account and user are automatically frozen.
5.2.06	Does this policy/procedure cover the production of backups and the controls in place around these? Please provide details/ append supporting documentation
	Servers are backed up daily and the back-ups retained for one month, after which they are routinely and securely written over.
5.2.07	Does this policy/procedure describe the controls in place to prohibit unauthorised copying of data? Please provide details/ append supporting documentation referencing appropriate sections.
	The Tooth Fairy Services servers can be set to prevent unauthorised electronic copying of data. If this is attempted access accounts and user are automatically frozen. All users sign a confidentiality user agreement which prohibits copying of data using any other means without authorisation.
5.2.08	Does this policy/procedure describe physical and site controls? Please provide details/ append supporting documentation referencing appropriate sections.
	The servers are hosted in air-conditioned, locked rooms with access granted only to authorised IT staff. Access to the building is via ID card and is constantly monitored by Closed Circuit FairyVision (CCFV), intruder alarms and fire detection systems. Separate backup servers are situated in a separate building on the other side of the Tooth Fairy Services campus, a distance of about half a league.
5.2.09	Does this policy/procedure cover hardware repair, replacement or disposal and protection of data from inappropriate access during such procedures? Please provide details/ append supporting documentation

	Disposal of hardware that is no longer in use is carried out under contract by an approved external contractor. All electronic information is securely erased or rendered inaccessible prior to leaving the Tooth Fairy Services site.
5.2.10	Describe the systems, software and security used to store and use data - please provide details/ append supporting documentation
	All data stored and analysed on the Tooth Fairy Services servers are encrypted. All files are required to be password-protected and, as described above, all access to the servers is monitored.
5.2.11	Is outsourced IT in use? If yes, please give details
	Outsourcing is only used for disposal of hardware no longer in use by Tooth Fairy Services servers.
Please repeat section 5.2 above for each relevant location in the proposal – see guidance	

5.3	Transfer Please read section 5.3 of the guidance	
5.3.01	Please provide details of security policy/procedure to ensure that data will be transferred in such a way that it is protected from inappropriate or unauthorised access (mention email encryption, secure file transfer protocols SFTP, device encryption, physical controls, etc, as appropriate) - append supporting documentation	
	Patient data will be transferred to eDRIS for linkage and the linked data transferred back to Tooth Fairy Services servers using Secure File Transfer Protocols.	
5.3.02	At what intervals/ trigger points will data transfer take place? E.g. one off transfer, monthly intervals	
	One off transfer.	
5.3.03	Will any identifiable or potentially identifiable data be transferred outside of the UK?	No
5.3.03a	If yes, please provide details of the country of destination, the method of transfer, the proposed location and method of storage outside of the UK, and details of any further onward transfer	
	N/A	
5.3.04	Other than initial transfers from source systems, is there any copying of data required within the proposal? If yes, please give details	
	No.	

5.4	Dissemination <i>Please read section 5.4 of the guidance</i>	
5.4.01	Will proposal findings be published or disseminated beyond those listed in Section 1? (<i>If you have answered 'No', go directly to section 5.5</i>)	Yes
5.4.01a	If yes, how will proposal findings be published or disseminated, to what audience and in what format? Please give details	
	Aggregated results will be sent to those mentioned in section 1.6 for service improvement. Aggregated results will also be shared with NHS Paediatric Happiness Services for performance indicators and will be posted on the Tooth Fairy Services website for the public information. In all outputs no identifiable information or groups of less than 10 will be made available to anyone outwith Tooth Fairy Services.	
5.4.01b	If yes, what steps will be taken to ensure that persons cannot be identified in published? Please give details and confirm what disclosure control policy will be applied.	
	No identifiable information or outputs from groups of less than 10 will be made available to anyone outwith Tooth Fairy Services.	
5.4.01c	If yes, are there any circumstances where a living or dead individual would be cited? (E.g. where a person consented to their data being used as a case study)? Please give details	
	No.	
5.4.01d	If yes, were any permissions to publish data required or sought (for example from data controllers)? Please provide details	
	N/A.	

5.5	Retain/Dispose <i>Please read section 5.5 of the guidance</i>	
5.5.01	Which information/data/records retention policy will you be applying to the proposal data (details of the policy and the organisation to which it belongs)?	
	Tooth Fairy Services will retain the pseudonymised and anonymised data for this audit for 20 years according to its retention policy for routine data. No identifiers will be retained for any of the audit dataset, which will itself be stored entirely separate from any data used for the ongoing Tooth Fairy services.	
5.5.02	How long do you intend to retain identifiable or potentially identifiable data after the conclusion of the proposal (including archive/backup copies)?	
	Identifiers for the audit will only be used for the purposes of linkage and will not be retained.	

5.5.03	Who will retain the data and where?
	Data will be retained on stored on secure servers based at Tooth Fairy Services, based in Titania Way, Oberon Town, Nowhere, UK. NO15 9WH.
5.5.04	What is the purpose for retaining the data for the specified time?
	The linked anonymised dataset will be retained for any further analysis and follow-up work associated with the audit.
5.5.05	What method of disposal or destruction will be used when this period has expired (including archive/backup copies)?
	All files will be destroyed according to the Tooth Fairy Services data erasure policies, as used for deletion of routine data from the Tooth Fairy Services servers.
5.5.06	What evidence will be obtained that destruction has occurred (eg IT supplier certificate of destruction, etc)?
	Data erasure will be confirmed according to Tooth Fairy Services data erasure policies as used for deletion of routine data from its servers.

5.6	Review <i>Please read section 5.6 of the guidance</i>
5.6.01	Describe how the mechanisms which safeguard data security will be audited and reviewed at regular intervals to ensure their continued efficacy
	Audit logs of system use are checked by senior managers every full moon to assess the security of the data held on Tooth Fairy Services servers.
5.6.02	Describe any resource implications to any of the proposed measures for the protection of physical or technical security of information which are unresolved at the time of this application? (for example encryption of devices is an intention not yet fulfilled, training is not yet undertaken, etc)
	None.
5.6.03	Describe the breach reporting mechanisms to be invoked in the event of any inappropriate access to data or other information security incident
	Within Tooth Fairy Services there are clear processes for reporting actual or potential breaches of confidential data. Access to all data is audited and unauthorised access can be identified.

Section 6 – Declaration

- I DECLARE THAT this application is accurate, and that, should it be successful, any health data made accessible will be used for no other purpose, and in no other way, than as described above.
- I UNDERTAKE TO notify the Public Benefit and Privacy Panel (PBPP) of any future changes to the purpose or manner in which data is processed in accordance with this application.
- I UNDERSTAND THAT any future applications by me, or my employing or sponsoring organisation, may be refused should any health data made accessible be used for any other purpose or in any other way than that described above.
- I AGREE TO abide by any conditions attached to the application by the PBPP during the approval process. I understand that failure to comply with these conditions may result in any future applications by me, or my employing or sponsoring organisation, may be refused.
- I CERTIFY THAT all those who have access to health data in this proposal are aware of the requirements of confidentiality and understand that any breach (eg disclosure of confidential information to a person not authorised to receive it) will be reported to the data controller, and in the case of NHS Scotland originated data to Scottish Government eHealth division.
- I CERTIFY THAT that only the persons named in the PBPP form (1.1-1.6) as requiring access to the data will be given access and that the data will not be transferred to anyone else.
- I GUARANTEE THAT no publication will appear in any form in which an individual may be identified without the written permission of that individual, and that I will apply appropriate disclosure control when planning publications involving the data requested.
- I UNDERSTAND THAT the Data Controller, and agents acting on its behalf, reserves the right to inspect the data on the sites where it is being processed.

To be signified by the APPLICANT

Name (in Capitals): SUGARPLUM FAIRY	Date: 10/12/18
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To be signified by the PhD SUPERVISOR (if applicable)

Name (in Capitals):	Date:
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- I DECLARE THAT (the applicant named above) is a *bona fide* worker engaged in a reputable project and that the data he/she asks for can be entrusted to him/her in the knowledge that he/she will conscientiously discharge his/her obligations, including in regard to confidentiality of the data, as stated in the declaration above.

To be signified by the INFORMATION CUSTODIAN named in Section 1.4 above (where the Information Custodian is not the applicant).

Name (in Capitals):	Date:
TINKER BELL	11/12/18

I ACCEPT the organisation's obligations and roles with respect to the processing of data for the purposes outlined in this application.

To be signified by the Main Contact for the Lead Organisation named in Section 2.2 above

Name (in Capitals):	Date:
FAIRY NUFF	12/12/18