**Generic**

**Terms of Reference**

**– for adaption and adoption by each committee**

***NHS England Screening Research, Innovation and Development Advisory Committee (RIDAC)***

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| **Document name:** | | | **Generic Terms of Reference – NHSE Screening Research, Innovation and Development Advisory Committee (RIDAC)** | |
| **Programme Name** | |  | **NHS National Screening Programmes** | |
| **Senior Responsible Owner (SRO)** | | | **Deborah Tomalin** | |
| **Head of Public Health/Programme Manager** | |  | **Alex Woodroffe, Head of Public Health Commissioning and Operations** | |
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Document management

**Revision history**

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| **Version** | **Date** | **Summary of changes** |
| V 0.1 | 25/2/22 | First draft for review – Interim Generic NHS England and NHS Improvement Screening Research Advisory Committee (RAC) |
| V 0.2 | 06/05/22 | Amendment to title potentially for discussion, role RAC with screening programme board made clearer |
| V 0.3 | 22/05/22 | Amended to reflect feedback from RAC Chairs and task and finish group including change of name to reflect the critical innovation and development role – to RIDAC |
| V0.4 | 25/08/22 | Amended to reflect further feedback from RIDAC Chairs and T&F Group regarding RIDACs approving vs supporting research applications, |
| V1.0 | 22/01/23 | Final draft for RIDAC Chairs to agree and then revise into their own bespoke ToRs for their respective RIDACs. Added changes following feedback from NSAs and RIDAC Chairs, specifically to evaluation and priority setting. Added supporting docs and flowchart |
| V1.1 | 22/02/23 | Following RIDAC Chairs review meeting, minor amendments made to: data release process, quoracy, stronger reference to patient and charity involvement, updated Chair terms of office, ethics. RIDACs must review membership |

**Approved by**

This document must be approved by the following people:

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| **Name** | **Signature** | **Title** | **Date** | **Version** |
| Deborah Tomalin |  | NHSE SRO |  |  |

**Related documents**

|  |  |  |
| --- | --- | --- |
| **Title** | **Owner** | **Location** |
| Ways of Working | Screening Research Office Team Leader | [DRAFT RIDAC Ways of Working and process mappingv01.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/2022%20Draft%20RIDAC%20Documents/ODR%20Process/RIDAC%20DRA%20(ODR)%20Process/RIDAC%20workflow,%20application%20and%20assessment%20Templates/RIDAC%20WOW/DRAFT%20RIDAC%20Ways%20of%20Working%20and%20process%20mappingv01.docx?d=wd11e8fe85a9440c89d1e716588e11470&csf=1&web=1&e=sJOP5y)  [snapshot view of WOW process.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/2022%20Draft%20RIDAC%20Documents/ODR%20Process/RIDAC%20DRA%20(ODR)%20Process/RIDAC%20workflow,%20application%20and%20assessment%20Templates/RIDAC%20WOW/snapshot%20view%20of%20WOW%20process.docx?d=w88c4cb8b6b0342c19b0502f7816ceb28&csf=1&web=1&e=7GwGqV) |
| Process flow chart | Screening Research Office Team Leader | [Flow chart for research applications to RIDAC meeting with exceptional circumstances.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/RIDAC%20meetings/RIDAC%20Application%20Form/Flow%20chart%20for%20research%20applications%20to%20RIDAC%20meeting%20with%20exceptional%20circumstances.docx?d=we46b1b5464ac494e8d1ac844ddafcd1c&csf=1&web=1&e=04WtgJ) |
| RIDAC Communications Strategy 2022/23 | Head of PHCO, AW | [RIDAC Communications Strategy2022223.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/2022%20Draft%20RIDAC%20Documents/RIDAC%20Comms%20documents/RIDAC%20Communications%20Strategy2022223.docx?d=w73e952c2d5fb4d8e8cfc17b6d97bb95e&csf=1&web=1&e=do7VRf) |
| RIDAC application review checklist | Screening Research Office Team Leader | [RIDAC Application Review Checklist Template Final 2022.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/RIDAC%20meetings/Meeting%20document%20templates/RIDAC%20Application%20Checklist/RIDAC%20Application%20Review%20Checklist%20Template%20Final%202022.docx?d=w276fff9472e343008eea6411baea4ae9&csf=1&web=1&e=kBuFjw) |
| RIDAC Process presentation | Screening Research Office Team Leader | [RIDAC ODR Process .pptx](https://nhsengland.sharepoint.com/:p:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/2022%20Draft%20RIDAC%20Documents/ODR%20Process/RIDAC%20DRA%20(ODR)%20Process/RIDAC%20ODR%20Process%20.pptx?d=w71cfc9996172453f82e4ae8791702393&csf=1&web=1&e=gRKgBX) |
| RIDAC Screening Research Office Training and Induction | Screening Research Office Team Leader | [20221228 RIDAC Training and Induction Template .docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/RAC%20recruitment/RAC%20Support%20Team/Training%20and%20Induction/20221228%20RIDAC%20Training%20and%20Induction%20Template%20.docx?d=wf8c836e5a79f42659de2b970c3c7c3b3&csf=1&web=1&e=jKwzRH) |
| RIDAC application form – committee approval | Screening Research Office Team Leader | [Application form RIDAC202211.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/RIDAC%20meetings/RIDAC%20Application%20Form/Application%20form%20RIDAC202211.docx?d=wf848fe5ab5c54fafb1146c4575538fea&csf=1&web=1&e=Fp0pDb) |
| RIDAC application form - data release | Screening Research Office Team Leader | [NHSE RIDAC Data Application Form - Primary Applicant including appendix.docx](https://nhsengland.sharepoint.com/:w:/r/sites/COO/od/phco/ResLib/PROGRAMMES/Cross%20Cutting%20Programmes%20(ex%20PHE)/Research%20Innovation%20and%20Development%20Advisory%20Committees%20(RIDACs)/2022%20Draft%20RIDAC%20Documents/ODR%20Process/RIDAC%20DRA%20(ODR)%20Process/RIDAC%20workflow,%20application%20and%20assessment%20Templates/RIDAC%20Application%20forms/NHSE%20RIDAC%20Data%20Application%20Form%20-%20Primary%20Applicant%20including%20appendix.docx?d=wd76efe9a10a443a39385657b6bf5a325&csf=1&web=1&e=DfZsoV) |
| RIDAC Screening Research Office SOPs | Screening Research Office Team Leader | NHSE Sharepoint |

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**1. Purpose**

The (add screening programme) Screening Research, Innovation and Development Advisory Committee (RIDAC) will advise the NHSE Director of Public Health Commissioning and Operations via the NHSE (add screening programme) Screening Programme Board on issues related to research, innovation and development activities linked to the NHSE (add screening programme) screening programme.

The RIDAC will provide an oversight role, advising on the appropriateness and relevance of research, the corresponding data access requests, the research topic, the innovation required including its evaluation and to act as a conduit to provision of further practical advice on research proposals including the impact on current NHS services and live IT services for that screening programme. As such, the members will determine whether the RIDAC will **formally support** the research or evaluation in question by considering the impact on existing NHS pathways and any other requirements the NHS will need to undertake to support the research/evaluation. Should there be concerns, these should be escalated to the Programme Board for further discussion to inform the prioritisation process. For applications for data release, the RIDAC will consider whether the data is **necessary**, **proportionate** and whether it is in the **public interest**. If the RIDAC is able to approve the application on all three counts, it will be able to formally support the release of data. Support for access to data for research by a RIDAC is not an automatic endorsement of the project. Other approvals (see Section 4 Confidentiality and information sharing) may be needed. The RIDAC will only support a project when they have received evidence of adequate funding, including that required for the transfer of data.

The RIDAC will also seek to shape and prioritise research and innovation proposals with the necessary oversight of the NHSE (add screening programme ) board when appropriate/needed especially if prioritisation is required related to business service continuity within the NHS services and in the live IT services providing the data.

(Programmes should amend this part of the ToR to reflect the bespoke methodology for doing so in each programme). The RIDAC should, in collaboration with the National Screening Council (UKNSC), convene meetings and promote the list of priorities. There is an expectation that different stakeholders will provide different perspectives on priorities – the RIDAC from a research application/enquiry perspective, UKNSC from a review and new research perspective and Programme Managers from an operational perspective. Patient and Charity perspectives could also be valuable.

**2. Duties and Responsibilities**

**Oversight Role:**

• support and advise the programme on research requests to quantify the benefits to the relevant screening programme

• ensure, as far as possible, that research and innovation do not adversely affect the uptake, acceptability, quality, safety and operational delivery of the screening programme it relates to

• undertake, where possible, pre-application “in principle” advice to researchers prior to them seeking formal research funding and ethical approval for their proposed research

• determine which research applications should be supported (or not supported) to have access to screening data from individuals who have been invited to participate in the programme. The RIDAC will focus on whether the data is necessary, proportionate and in the public interest. If the RIDAC can approve all three points, it should be able to support the research proposal

• for applications where agreement of support cannot be reached or where there are exceptional circumstances, take the full application to the NHSE programme board meeting for discussion and agreement. NHSE will provide a checklist to support the RIDAC in its decision making on examples of what should be referred to the Programme Board e.g. to ensure that no impact on service restoration or agreed strategic development of the screening programme

• receive regular progress updates from trials/research/audits supported by the RIDAC to and receive final project reports and keep informed the relevant screening programme board of research outcomes

• produce an annual summary RIDAC report on business to be presented to the NHSE programme board.

**Priority-Setting Role:**

* produce a schedule for research priorities in collaboration with all key stakeholders (NHSE, DHSC, charities etc) covering at least 3 years, which is currently reviewed and amended as strategic direction for the programme. This will provide a guide for academics to understand research requirements
* Provide suggestions to the programme board on the research, innovation evaluations that should be encouraged within the screening programme to inform the strategic direction for that screening programme
* Whilst the RIDAC does not review evaluation or audit requests, there is an expectation the evaluation and audit outcome papers will be sent to the RIDAC for information and to aid priority-setting and the dissemination of best practice
* Utilise Priority Setting Partnership (PSP) workshops as suggested by the [James Lind Alliance](https://www.jla.nihr.ac.uk/top-10-priorities/) to enable production of a Top 10 priority list for future research.
* The RIDAC should consider how to receive service evaluations and audits and enable these to be reported nationally

**The RIDAC will not:**

* rewrite research protocols
* formally approve or reject the research proposal itself although it is noted that a lack of support by the RIDAC will lead to the applicant failing to gain access to screening data required
* be responsible for research delivery or accountable for unintended consequences.
* Review Evaluation and/or Audits as these do not sit within the remit of the RIDAC. However, the NHSE RIDAC Screening Research Office, which provides the administrative support to the RIDACs, will be asked to facilitate the data release for these evaluations and audits and will carry out an “Is It Research” Health Research Authority review when doing so. If there are concerns about the scope of the evaluation (i.e. that it might be research), it will be sent to the next RIDAC meeting for discussion. Do note that evaluation/audit outcomes are expected to be considered as part of the priority-setting.

**Screening Research Office Role:**

The RIDAC Screening Research Office will support the committee’s business. They can be contacted at [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net) and are the first point of contact for research applications and will work with the UKHSA DRA function to progress data releases. They will also handle data access requests for evaluation. Their role is to:

* identify potential data security issues for access to national databases, sourcing expert IG support where required
* provide advice on requests for access to databases that are managed by the NHSE screening programme teams with escalation to the appropriate prioritisation IT group for further advice/to ensure no unintended consequences to existing IT/data requirements to run the screening service real time
* seek advice on applications where required, for example from NHSE information governance experts
* provide advice on responsibility for excess treatment costs with support source from the NHSE life sciences team
* provide advice on how to address any issues around patient consent
* assess new applications for areas of duplication
* maintain a database of all applications and outcomes regardless of their scale
* direct applicants to the UKHSA Data Release & Acquistion (DRA) <https://www.gov.uk/government/publications/accessing-public-health-england-data/about-the-phe-odr-and-accessing-data> approvals process for requests to access personally identifiable or de-personalised data
* following an agreement or not of support from the RIDAC, notify the outcome to the applicant of the decision with a summary of support provided via a paper update to the programme board

**3. Membership**

**3.1 Chair**

There will be a co-chair arrangement between NHSE and external appointment:

* One Chair will be appointed via advertisement and interview and will have an understanding in research and evaluation processes.
* The other co-Chair will be the relevant NHSE National Speciality Advisor for the particular screening programme
* Chairs will have a 5 year appointment but the appointment may be renewed for additional terms with mutual agreement.
* The co-Chairs will:
* be able to demonstrate they are an independent expert in NHS screening programmes
* will be able to demonstrate that they are an expert in understanding research processes and requirements
* will support the progression and development of research, evaluation, and audit within the NHS screening programme
* will be responsive to the NHSE Screening Research Office.
* confirm they have accepted the 7 principles of public life (Nolan principles) and complete a declaration of interests form.

**3.2 Members**

Members will be sought through open competition and a widely distributed call for expressions of interest. The co-Chairs will have final sign-off of members.

Members will have a 5 year appointment but, with agreement from the co-Chairs and Screening Research Office, the appointment may be renewed for additional terms.

Core NHSE Public Health Commissioning & Operations team roles on the committee will be permanent, but they will be associate members.

Members are asked on appointment to confirm they have accepted the [7 principles of public life](https://www.gov.uk/government/publications/the-7-principles-of-public-life/the-7-principles-of-public-life--2) (Nolan principles) and to complete a declaration of interests form.

Unless specifically stated otherwise, members are appointed as an individual and not as representatives of their profession, employer, or interest group. In a committee member's absence, no deputy can be sent. This does not apply to associate members, who should endeavour to send a deputy if they are unable to attend.

Members should carry out the assessment of the research applications objectively and impartially.

Committee papers, discussions and any correspondence relating to applications are strictly confidential.

Members must declare any potential conflicts of interest or if their declaration of interests changes in accordance with NHSE policy and procedure.

Membership should include a lay person, patient and/or charity representative(s) to represent the service users

Membership will be terminated if a member fails to attend 3 consecutive meetings. Membership may be suspended for a period of up to 12 months for the reason of long-term absence from work.

The membership of the (add screening programme) RIDAC should include the following:

| **Name** | **Role** | **Organisation** |
| --- | --- | --- |
|  | Member of the NHSE Section 7A Data Analytical Team | NHSE |
|  | National Speciality Advisor for Screening or screening specific programme | NHSE |
|  | Member of NHSE PHCO programme team | NHSE |
|  | Representative of OHID screening team | OHID, DHSC |
|  | Representation with knowledge and experience in   * data governance * clinical and academic subjects * ethics/confidentiality matters * policy review * screener/programme management |  |
|  | [MEMBERSHIP REVIEWED AND DETERMINED BY EACH RIDAC |  |

**3.3 Screening Research Office**

The secretariat for meetings will be provided by the Screening Research Office. They should be contacted on [RIDAC.Screening.Research@nhs.net](mailto:RIDAC.Screening.Research@nhs.net), and will be comprised of the following members:

|  |  |  |
| --- | --- | --- |
| **Name** | **Role** | **Contact Details** |
| Carlene Parchment | RIDAC Screening Research Office Team Leader | [Carlene.parchment@nhs.net](mailto:Carlene.parchment@nhs.net) |
| Georgina Opoku | RIDAC Screening Research Office Coordinator | [g.opoku@nhs.net](mailto:g.opoku@nhs.net) |
| Siobhan Ryan | RIDAC Screening Research Office Coordinator | [siobhan.ryan@nhs.net](mailto:siobhan.ryan@nhs.net) |

**4. Confidentiality and information sharing**

The NHS screening programmes have legally binding NHS standard contracts with several organisations to ensure their delivery. The NHS screening programmes are also bound by:

* the Common Law Duty of Confidentiality
* the Data Protection Act 2018
* [the Caldicott Principles] [( https://www.gov.uk/government/publications/the-information-governance-review](file:///C:/Users/lnorris1/AppData/Local/Microsoft/Windows/INetCache/Content.Outlook/D8RYH4BT/(%20https:/www.gov.uk/government/publications/the-information-governance-review))
* the Information Commissioner’s statutory data sharing code of practice.

Any research activity, or release of data for research purposes, must comply with all relevant legal and regulatory requirements. Any uncertainty in relation to legal issues arising from applications will be clarified by the NHSE information governance team before any response to the applicant(s).

For some studies using identifiable data without consent, review by the NHS Health Research Authority (HRA) Confidentiality Advisory Group (CAG) will be required. See [Guidance for CAG applicants] (<https://www.hra.nhs.uk/about-us/committees-and-services/confidentiality-advisory-group/guidance-confidentiality-advisory-group-applicants/>) for more information.

Any research applications involving the use of human tissue or organs must comply with the Human Tissue Act 2004.

Requests to access controlled personally identifiable or depersonalised data from the screening programmes will require UKHSA DRA approval (<https://www.gov.uk/government/publications/accessing-public-health-england-data/about-the-phe-odr-and-accessing-data#odr-application-and-approval-process>).

The UKHSA DRA approvals process assures that:

* there is a justified purpose for the release of data
* the data specification is the minimum necessary to meet the specified aims of the project
* there is an appropriate legal basis for accessing the requested data
* the applicant has appropriate safeguards in place to ensure the data will be processed safely and securely.

It is a condition of acceptance of research applications that relevant (for example, local, national or international) ethics approvals have been sought.

In situations where applications raise additional ethical issues that have not been considered elsewhere, the RIDAC may decide not to support applications or ask for further ethics approval from the applicant(s).

Members will not disclose information or written material (such as agendas, action/decision logs, discussion papers or other documents) to other parties, unless otherwise directed by the co-Chairs.

NHS England will not charge for access to research data, but may pass on costs incurred from third party providers.

**5. Meetings**

The RIDAC will meet quarterly or as demand requires.

Minor amendments to proposals may be dealt with between meetings at the co-chair’s discretion. This may be done by email or telephone conference. Members may also be asked to comment by correspondence on ad hoc applications or proposals.

The NHSE PHCO RIDAC team will, as far as possible, assist investigators by expediting applications through the approvals process to avoid delays once the RIDAC has agreed to support their project.

Local screening providers wishing to undertake research must inform the RIDAC as soon as possible in order to avoid any adverse impact on the national screening programme. Small projects that do not require any data or resources other than that which may be sourced locally will require an annual outcome report from the centre at which they were conducted.

Three lead reviewers will be nominated for each application requiring RIDAC discussion by the Co-Chairs and NHSE PHCO RIDAC Secretariat. Paperwork will be sent out to the lead reviewers 3 weeks before the meeting, with a request that reviewer comments be return via the proforma 1 week before the meeting.

If the RIDAC needs support for discussion on prioritisation/co-dependencies by the Screening programme board and the timing of this request is out of sync with the programme board meeting rhythm, the programme board support can be sourced virtually.

Declarations of interest of committee members will be taken at each committee meeting.

The membership may call applicants to RIDAC meetings when their projects are discussed.

Where specific expertise is not available due to absence or a conflict of interest, the chair can request advice on a specific project from a known programme expert following consultation with other RIDAC members and the NHSE PHCO representative.

**6. Quorum**

Members of the RIDAC are encouraged to attend regularly in order to ensure adequate representation at all meetings. Meeting dates will be set well in advance.

Each RIDAC must include at least one of the co-chairs plus 5 other members. [Each RIDAC to agree their own rules on quoracy when adopting these ToRs]

**7. Agenda**

The agenda will be set by the co-Chairs with the Screening Research Office and papers will be distributed to members and those in attendance no less than 2 weeks in advance of the meeting. This allows time for review of the applications by all members. Standard agenda items are expected to include:

* Review and approve action/decision logs from the previous meeting
* Discussion and review of recent applications
* Update on ongoing projects / trials to determine if support can be given
* Receive and note outcome papers from evaluations
* Any other business
* Date of next meeting

In addition, one meeting annually will also be of longer duration to also discuss priority-setting, with the aim of guiding and assisting the co-Chairs and the Screening Research Office in the production of a schedule for research priorities. This will provide a guide for academics to understand research requirements

**8. Governance**



The RIDAC role is to lead the research, innovation and development advisory process for the NHSE screening (insert screening name) programme board. It will provide updates to the programme board to inform the strategic direction for the screening programme.

The RIDAC will also take responsibility for approving the necessity, proportionality and public interest of research proposals, which it will signify via its ability to issue official letters of support for the research. At the same time, the Screening Research Office will be assessing, alongside the UKHSA DRA, the legality of releasing the data. The Screening Research Office will then present the RIDAC letter of support and the confirmation of legality to the NHSE signatory, which will be the Director of Public Health Commissioning & Operations or one of her Senior Leadership Team.

Publications arising out of research conducted using data provided through support of RIDAC must acknowledge the source of data and the role of NHSE in the commissioning and operational delivery of screening programmes. The RIDAC will provide a disclaimer to be used on publications to indicate that the study may not represent the views of NHSE as an organisation. Applicants must not publish their outcomes until the RIDAC has been updated

The RIDAC will not be responsible for reviewing the ethics of a research proposal. However, it is vital that the Screening Research Office undertakes an algorithmic review of any service evaluation or audit requests for data or access to samples to ensure that the request should not fall under the category of Research and thus require ethics approval.

Research proposals, service evaluations and audits should have a mechanism for ascertaining costs and be able to demonstrate how those costs are funded. NHSE will not (currently) charge for giving access to screening data or samples; however, costs imposed by third parties are likely to be passed on to the applicant.

**Research Application Flowchart**

**It is recommended that contact is made for advice on feasibility as early as possible. preferably pre-funding or ethics approvals requests**

Contact via generic email: [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

Explain to RIDAC your reason for making contact. Tell us which Programme/data request

RIDAC team triage your request via phone call or to email to discuss your query

**Initial Contact:**

**Stage 1: ----------------------------------------------------------------------------------------------------------------------------------------------------------------------------Pre- submission to RIDAC meeting**

Email the RIDAC team with your queries regarding the application form.

**RIDAC team does not help applicants with writing protocol**

**\*RIDAC Team is not responsible for approving internal data release**

RIDAC team send you the application form to complete and link to the standards.

You will be assigned a RIDAC reference number

RIDAC team will wait for applicant to submit form 6 weeks prior to the RIDAC meeting

RIDAC team will review and assess application form, continuously offering advice and guidance (via email or meeting)

**Stage 2:-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------Submission to RIDAC (including Amendments)**

Applications will be reviewed at the RIDAC meetings which are held quarterly

Applications will receive a response within 4 weeks of the RIDAC meeting

Applications will receive Favourable or unfavourable outcome from the RIDAC, this may include action orientated conditions and next steps

If you receive an unfavourable outcome, you will need to resubmit to the RIDAC team for review and assessment

**Stage 3:-------------------------------------------------------------------------------------------------------------------------------------------------------------------------- Submission to the RIDAC team - Full application submission for data release after receiving a Favourable outcome with all conditions met**

Application pack is sent to applicant via [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

RIDAC team will offer ongoing advice and guidance during the application process. by emailing [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

**Time required to complete**

Contact letter sent to applicant via [england.screening.research@nhs.net](mailto:england.screening.research@nhs.net)

**the process is dependent on size**

**and complexity of the project.**

**Data release in exceptional circumstances:**

**Patient Identifiable Data,**

**Data releases for AI-based research, Data leaving the UK,**

**Data release requests for over 12 months**

**The request for data in these circumstances, will take longer in the data release process. Applicants must allow sufficient time if data is requested for any of the above circumstances**

RIDAC team will draw up Data Sharing agreement to request signatures and liaise with the Data manager to negotiate release date

RIDAC team will review and assess applications and notify applicant of the outcome or any further actions

Applicant to confirm receipt of data

**Stage 4:-------------------------------------------------------------------------------------------------------------------------------------------------**

**Project Completion**

**Applicants are expected to submit a written annual progress report to RIDAC and Data deletion certificate (if appropriate)**

**N.B: The RIDAC Team is not responsible for approving internal data release (i.e. screening or outcome data released within NHSE for analysis by NHSE)**