Queensland Cancer Registry (QCR)

Research and Study Application Package
- Not Contacting Patients -

Queensland Cancer Registry
Cancer Council Queensland
553 Gregory Terrace
Fortitude Valley Q 4006

Locked Bag No 1450
Spring Hill Q 4004

PH (07) 3634 5333
FAX (07) 3259 8590

Version 6.0

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1. Introduction

This document is for researchers who wish to undertake a study using information collected by the Queensland Cancer Registry. It lists the procedures to follow plus any letters and consent form templates for the researcher to use.

Contact Details for further information:

Person: Carly Scott
Registrar

Address: Queensland Cancer Registry
Locked Bag No. 1450
Spring Hill Post Office
QLD 4004

Phone: 07 3634 5333
Fax: 07 3258 2345
Email: carly_scott@health.qld.gov.au

2. Procedure for access to Queensland Cancer Registry Information

Any researcher applying for access to identifiable data held by the Queensland Cancer Registry must make application under the Public Health Act 2005 and receive approval from the Director General of Queensland Health. Queensland Health are the data custodians for information held by the Queensland Cancer Registry.

The researcher needs to obtain HREC approval for their research proposal from a recognised HREC institution before sending their application to the Queensland Cancer Registry. The researcher should then liaise with the Registrar, Queensland Cancer Registry regarding their application to ensure the requested data can be provided.

The following needs to be sent to the Registrar, Queensland Cancer Registry in electronic form and 1 hard copy (including original confidentiality forms) –

- Covering letter addressed to the QH Data Custodian c/- Registrar, Queensland Cancer Registry
- Queensland Health PHA Application Template
- Research Application Checklist
- Research Proposal (sent to & approved by HREC)
- HREC approval/s
- Signed confidentiality forms for all research participants

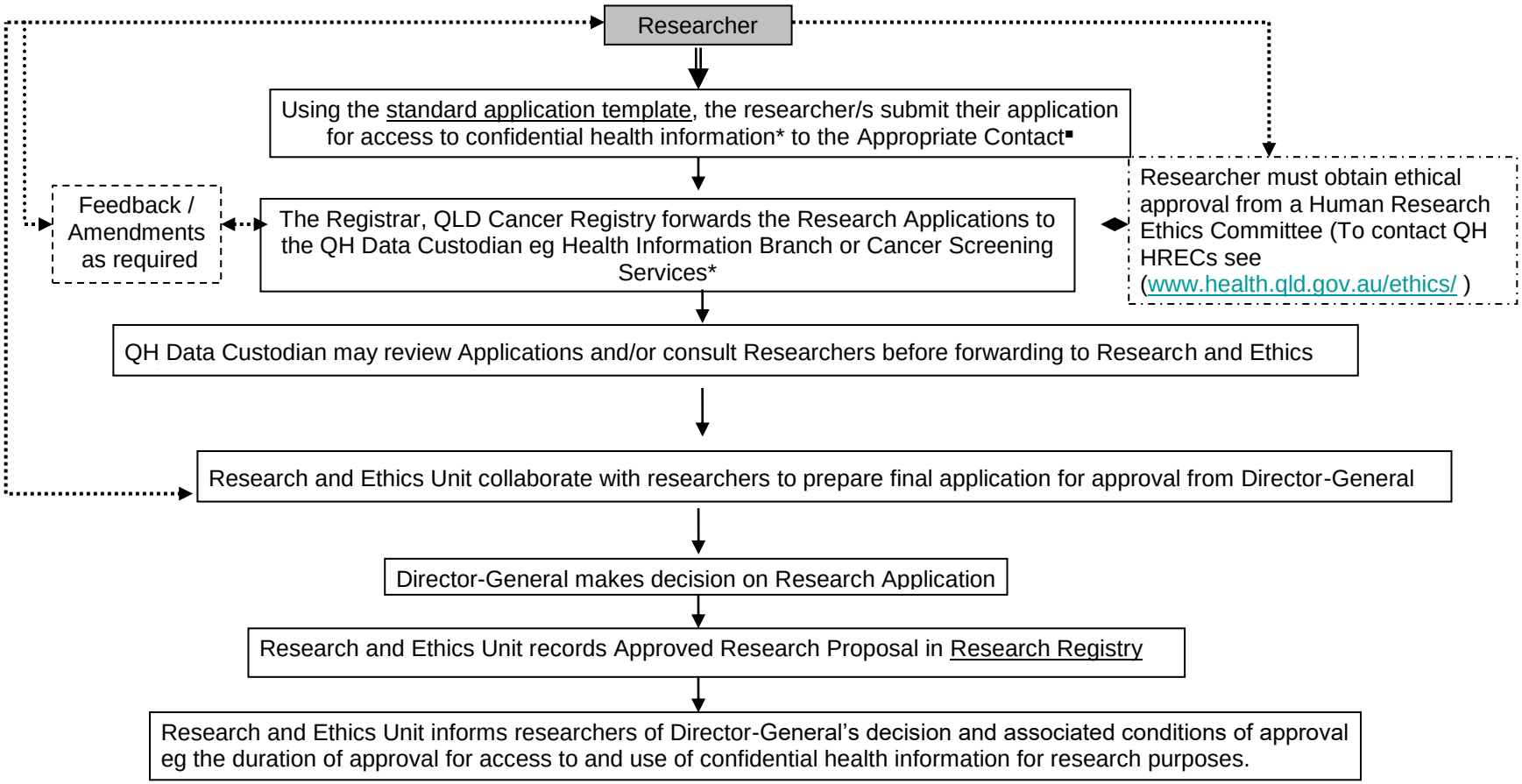
The Registrar will liaise with the researcher regarding the above documentation to ensure completeness, accuracy and availability of data. The Registrar will then forward the documentation to the Data Custodian within Queensland Health who will review the documentation and forward to the Research and Ethics Unit. The Research and Ethics Unit will prepare a brief of the research proposal and forward to the Director General of Queensland Health for approval.

Once approval is granted the Research and Ethics Unit will send a letter to the researcher advising of approval. The researcher then needs to provide a copy of this approval to the appropriate department who will be providing the information – ie. the Queensland Cancer Registry, or the Australian Institute of Health and Welfare depending on the research project requirements.

2.1. Flow chart of Access to Queensland Health Confidential Information Process

10/03/06

Overview of Application Process for Access to Confidential Health Information* held by QH for Research Purposes



3. Information and Instructions for Researchers

Applying for release of health information held by the department for the purposes of research under the provisions of the *Public Health Act 2005*

Relevant Section/s of the Public Health Act 2005

- Chapter 6: Health Information Management, Part 4: Research Division 1, S280-292.

Intended Application of this Process

- The following information and application processes apply when individuals wish to access **health information held by the department for the purposes of research**.
- Health information under the provisions are inclusive of identifiable, de-identifiable and re-identifiable data and is therefore not restricted simply to names and personal data but may also include other combinations of data which together may enable individuals to be identified.
- An application to access data is only required when access to health information is required for formal research. If an area in QH needs access to confidential health information for evaluating, managing, monitoring or planning health services, then the applicants should contact the relevant data custodian for advice.

Health information does include tissues, tissue blocks etc. Researchers interested in using tissues or blood should contact the Coordination Planning and Research Unit, Clinical and Statewide Services Block 7, Level 13 Royal Brisbane and Women's Hospital Queensland 4029, Ph 07 3636 9865, Fax 07 3636 9854 CaSS_Research@health.qld.gov.au or visit the Web address for more information:
http://qheps.health.qld.gov.au/qhcss/research/research_home.htm

Background

- The *Public Health Act 2005* establishes mechanisms for providing health information held by the department to approved research projects.
- This applies to all researchers seeking health information for which they are unable to obtain the participants' consent to use their personal or identifying information for clearly specified research purposes. This may also apply in circumstances in which it may be inappropriate to contact the participants / patients for consent to access their health information.
- Chapter 6 '*Health Information Management'* enables researchers to apply to the Chief Executive (Director-General) or delegate for access to the health information held by the department, providing certain criteria, processes and confidentiality requirements are adhered to by successful applicants.
- Access to and use of this information will only be approved for a specified time period, which must be clearly stated in the application.
- Researchers granted access under 63(2)(j) of the *Health Services Act 1991* and S154M of the *Health Act 1937* will only have access to the requested data for 2 years post-commencement of the *Public Health Act 2005*. (ie. until 16 January 2008) (Section 489) (Note: S63 is now S62F in amended *Health Services Act 1991)*
- Details of approved applications and their studies will be kept in a register, known as "*The Research Register*" (the register) held by Queensland Health.
- Access to the register must, by law, be made available to anyone who requests it (S283 (3)).

- Researchers must have approval from a Human Research Ethics Committee (HREC) of their research proposal before applying for access to health information. Evidence of this approval must be provided in the application.
- For administrative reasons researchers must consult the data custodians to determine:
    - whether the data fields being requested are available; and
    - whether the data being requested can be provided in the timeframe being requested.
- Evidence of this consultation should be included in the application. This may be in the form of a memo or copy of an email.

Associated Costs

Extraction of health information or data may incur a fee. The data custodian will indicate whether this will occur with your request.

Instructions

Before you preceding with your application for release of health information the following must be completed:

1. HREC approval of the research proposal
2. Evidence of support from the data custodians that the data required is available and can be provided in the timeframe requested.

An application for access to of health information held by Queensland Health (the department), for the purposes of research under the provisions of the *Public Health Act 2005* may be made using one of the following two options.

Option 1

Option 1 can only be used when preparing an ethics application form on the Queensland Health electronic NEAF application accessed at: http://www.ethicsform.org/au.
To access the Qld Health on-line forms you will first need to register online through the NEAF portal website. You only need to do this once and you can then fill in as many applications as you like.

- Complete your NEAF submission as normal
- At the end of the NEAF application a form will automatically be generated. Select Queensland in response to the question 'Where is this site located?' and PHA Form in response to 'Please select whether you want to raise an SSA or PHA form'.
- Systematically work through the pages of the PHA application form. Some sections of your PHA application form will have been automatically populated from your NEAF application.
- Any supporting documents to be submitted with your PHA application (e.g. authorisation from the Data Custodian / HREC approval letter / signed confidentiality agreement) should be submitted at this time. Click on *'Manage / lock the form'* , *'Supporting documents', 'Manage documents'* and then upload the files from your computer.
- Once you have completed your application form and uploaded all the relevant supporting documents 'Lock' the form by clicking on *'Manage / lock the form'*, '*Lock this PHA Form'.*
- Submit the PHA application to the Research Ethics and Governance Unit as per Option 2

Option 2

Use the application template from this site. Complete the application form and send your completed form and supporting documentation (hard copy or scanned/PDF) to:

- REGU@health.qld.gov.au

OR

- Research Ethics and Governance Unit
  Office of Health and Medical Research
  Floor 14 Forestry House
  160 Mary St
  GPO Box 48,
  Brisbane QLD 4001

Only the individuals listed in the application may access or use the approved information for the specific purposes described in the application and only for the designated time period.

Once you have completed either of these processes, the Research Ethics and Governance Unit prepares your application for consideration by the Chief Executive (Director-General) or delegate to grant access. The timeframe for approval or refusal is generally 5-10 working days. You will receive notification in the mail of the outcome of your application.

Post Approval

Once approved the research project will be entered into the Research Registry by staff of the Research Ethics and Governance Unit.

Researchers must subsequently provide the data custodians with evidence of this approval, a copy of the confidentiality agreement and their application whenever they are requesting access to the specifically approved health information from Queensland Health.

You are required under the provisions of the Act to provide the Chief Executive feedback on the progress and results of the research that has arisen from accessing the approved health information. Progress and final report templates may be access from the Research Ethics and Governance Unit Web page.

Final Checklist:

- Completed PHA application for the Release of Health Information for the Purposes of Research under provision of Section 281 of the Public Health Act 2005;
- Evidence of approval from a HREC
- Evidence of signed authorisation from QH Data Custodian
- Evidence of signed authorisation from Clinical & Statewide Services for access to Pathology samples
- One signed copy of Confidentiality Agreement with names and signatures of all Applicants

Documentation may be provided in hard copy or scanned pdf.

Basis of Approval Process

To approve the application, the Chief Executive or delegate must be satisfied that the giving of the health information held by the department is in the public interest, having regard to:

- the opportunities the research will provide for increased knowledge and improved health outcomes; and
- the privacy of individuals to whom the health information relates.

If the application requests information identifying a person, the Chief Executive must also be satisfied that the identification of the person is necessary for the relevant research.

Possible Application Outcomes (S283 and S284)

- Granted: Approval.
- Granted approval subject to conditions: The chief executive may grant approval subject to conditions:
  - that the researcher must pay QH the costs of extracting the information;
  - that the information provided must be kept confidential and secure (see Confidentiality Agreement);
  - that researchers are aware of and comply with ethical requirements relevant to the conduct of the research;
  - that feedback on the progress and results of the research be provided to the chief executive.
- Further information requested: The chief executive may request further relevant information or documents from the researcher within a specified time frame, in order to finalise his/her decision.
- Denied: Approval is denied. If this occurs the Chief Executive is required to provide reasons supporting this decision.

4. PHA Application Template

PUBLIC HEALTH ACT – APPLICATION

Instructions: The information required from the researcher is provided in italics. This information should be inserted into the corresponding boxes, which may be expanded as required. The data custodian/s must sign your application form before submission, or provide a letter/email of support. Completed applications are to be submitted to the Queensland Health Research Ethics & Governance Unit at email: regu@health.qld.gov.au with the relevant attachments.

1 Title of Research Project:

2 Research Category:

Tick the research category to which the research proposal most closely aligns

☐ Biomedical Study ☐ Evaluation and Planning Study; ☐ Epidemiological Study

☐ Clinical and applied Study; ☐ Monitoring & Surveillance Study

3 Principal Investigator / Co-Investigator / Additional Applicants:

This section should list:

- *The name/names of the person/s proposing to conduct the research and who will be given or have access to the identifiable information for this research.*

4 Address of the Principal Investigator / Co-Investigator

Street:

Postal:

Telephone:

Email**:**

5 Name of Supporting Institution

6 Location/s where project will be conducted

7 Description of the proposed research study

In this section please provide:

7.1 – Describe the research study including the research objectives, benefits and outcomes.

7.2 - Describe the methodology used in the research project.

7.3 – Describe the rationale for using identifiable confidential health information.

7.4 - Describe the benefits of this research study for the community.

7.5 - How do the benefits to the public outweigh the risks for the individuals' whose identifiable information will use?

7.6 - What is the estimated duration of the research project?

8 Name/Description of Database and Data Items required:

8.1. - What is the scope of the data that the applicant/s is requesting access to for the purposes of research?

- *Applicant/s **must list specific data items** required to undertake the research study. This may include but is not limited to – demographics (eg. date of birth, sex), hospital episode information, details of diagnostic data and/or details relating to health services accessed by individuals.*
- *It is important that all items of data are listed to ensure that data custodians can determine the availability of data requested and/or time and resources required in providing the data.*

8.2. - What specific time period/s will this requested covers (e.g Jan 2000 – 2004)?

8.3 - What are the requested data intervals (e.g once only, every 3 months etc)?

9 Privacy and Confidentiality

9.1 - Who is providing the confidential information and how will the disclosure take place?

9.2 - In what form will data be disclosed (electronic or paper)?

9.3 - How will the security associated with the transfer of data be maintained?

9.4 - How will data security be maintained?

10a Authorisation from Data Custodian:

I have considered this proposal and consulted the appropriate personnel and I confirm that I have seen all relevant documents that are required. The Department is: *(tick whichever applies):*

☐ able to confirm that the data services indicated will be provided, within the present resources;

☐ unable to provide data services indicated, on the following grounds:

The custodian has supplied these data for an approved research request, but makes no warranty as to the fitness of the data, nor of the proposed methods, for the purpose for which the data has been provided and do not necessarily represent those of Queensland Health.

Name Date

Position

Signature ……

Department:

(Repeat "Authorisation from Data Custodian" if more than one required).
(A letter of support or email may be used, instead)

10b Authorisation from Data Custodian:

I have considered this proposal and consulted the appropriate personnel and I confirm that I have seen all relevant documents that are required. The Department is: *(tick whichever applies):*

☐ able to confirm that the data services indicated will be provided, within the present resources;

☐ unable to provide data services indicated, on the following grounds:

The custodian has supplied these data for an approved research request, but makes no warranty as to the fitness of the data, nor of the proposed methods, for the purpose for which the data has been provided and do not necessarily represent those of Queensland Health.

Name Date

Position

Signature ……

Department:

(Repeat "Authorisation from Data Custodian" if more than one required).
(A letter of support or email may be used, instead)

11 Human Research Ethics Committee (HREC) Approval

11.1 - State the name of the Human Research Ethics Committee that approved this research proposal

Evidence should be provided as an attachment that the research proposal has been reviewed by a human research ethics committee, including the contact details for each committee this applies to.

12 Undertaking of Confidentiality

12.1 In the course of using confidential information for research purposes, I acknowledge that I will be exposed to information which if inappropriately used or disclosed may impact on individuals, public or private facilities or communities, such as discrete non urban indigenous communities.

12.2 I will not disclose confidential information in any released output (eg in reports, publications).

12.3 I will not use this confidential information for purposes other than for performing the specific activities detailed in my application as approved by the Chief Executive under the Act.

12.4 I will not use the confidential information except during the defined time period for which access to and use of this information was approved.

12.5 I agree to take all the reasonable steps necessary to ensure that the confidential information is kept confidential, including storing or disposing of all data, information, documents and associated correspondence in a secure manner.

12.6 **I agree to re-apply for approval from the Chief-Executive if:**

12.6.1 - I require additional confidential information, or if

12.6.2 - I want to extend the approved time period for access to or use of the confidential information,

12.7 The declaration of my interests in Research Proposals and associated documents shall be held in strict confidence by the relevant QH Human Research Ethics Committee and Queensland Health employees, and it shall not be used or disclosed to any other person without my prior consent or when it is legally required to be disclosed.

In signing this declaration, I declare that all researchers accessing identifiable data described in this application will adhere to the obligations specified above.

Signed by Principal Investigator

_____

Principal Investigators Name Date: / /

Attachments:

Please complete all the details required and attach the relevant documents.

1. Evidence of Approval from HREC , Dated: / /
2. Approval from the Data Custodian (see section 10)
3. Evidence of Approval from Clinical and State-wide Services (if Pathology samples is required)

5. After the study had been approved

All aspects of the study must be performed in the Queensland Cancer Registry (QCR) (usually by the visiting staff member) until the patient has given their consent for their details to be released.

All follow-up of doctors and patients must also be performed within the QCR. This includes all replies to doctor and patient enquires asking questions about the study.

Once the doctor and the patient has giving consent, then reports (both identifiable and non-identifiable), pathology reports etc can be taken out of the QCR.

The QCR will be reimbursed by the researcher for all costs associated with contacting doctors and patients.

5.1. Visiting staff of the Queensland Cancer Registry

5.1.1. Eligibility and conditions for appointment

Individuals must satisfy the following conditions in order to be appointed as Visiting Staff of the Queensland Cancer Registry.

- The Principal Investigator will not be eligible to be appointed as Visiting Staff of the QCR and can only see patient identifiable data once patient consent has been received.
- The Principal Investigator must write letter to Dr Jeff Dunn requesting appointment of Visiting Staff to the QCR *(refer appendix 7.4 and 7.5 for Letter Template)*

Visiting Staff of the QCR:

- Must be employed by a recognised organisation or institution (e.g. QIMR, University of Queensland, QUT, hospital staff) which requires access to Registry data for the purpose of conducting a research project.
- Must agree to be responsible to and under the supervision of the Registrar – Queensland Cancer Registry.
- Must undergo an induction and training process as appropriate for staff of the QCR.
- Must adhere to policies and procedures of the Queensland Cancer Registry and of The Cancer Council Queensland (TCCQ).
- Must sign a confidentiality agreement relating to information held within the Queensland Cancer Registry.
- Will be appointed as Visiting Staff of the Queensland Cancer Registry by TCCQ after considering a formal letter of request from Principal Investigator.

5.1.2. Appointment process

- A letter of agreement for each appointment will be required as to terms and conditions existing for the appointment between TCCQ and the other institution.
- A letter of appointment will be issued by TCCQ to the visiting staff member setting out conditions of appointment as visiting staff of QCR.
- Visiting staff will be required to complete:
  - TCCQ employment form providing personal details
  - Tax File Number declaration (for record purposes only and will not be submitted to ATO)
  - Time sheets for hours worked as visiting staff of the QCR.
- Visiting staff will be entered into a TCCQ Payroll system recording their personal details and the hours worked as visiting staff of the QCR with the remuneration rate set as zero.
- The institution who normally pays the visiting staff member will remain responsible for payment of remuneration and benefits. Additionally the institution will be responsible for workcover claims.
- Whilst at the TCCQ, visiting staff will not be covered by the TCCQ's insurance other than that which pertains to TCCQ's cover of public liability.

- Appointment as visiting staff of QCR will not attract remuneration for the time spent as visiting staff of QCR.

5.1.3. Policies and Procedures

As a QCR staff member you must be aware of The Cancer Council Queensland and Queensland Health policies and abide by them, especially in terms of privacy and confidentiality and code of conduct. Such documents are:

- Public Health Act 2005: Part 2 , Division 1 Cancer Notifications. This is the legislation that QCR abides by.
- Information Standard 42A: applies the National Privacy Principles to the collection and handling of all personal information within QH, including the Registry.
- QH Code of Conduct
- QH Usage of Internet and Email Usage
- TCCQ Sunsmart policy
- TCCQ Smoke-free policy
- TCCQ Health and Safety policy
- TCCQ Internet and E-Messaging policy
- TCCQ Workplace without harassment – Essential working conditions
- TCCQ Fire Procedure and Assembly Area

For the full list of policies and procedures for the Queensland Cancer Registry, please view the document: Policies and Procedures for the Queensland Cancer Registry (Includes Confidentiality and Privacy, Release of Information and Ethical Guidelines).

6. Other Information

- Monthly meetings with the Registrar at the beginning of each month as to the progress of the study and any difficulties or questions arising during that time.

- Assistant Registrar / QCR delegate checks all pathology reports to confirm the diagnosis before a letter is sent to the Doctor.

- All letters, follow-up and telephone calls to the Doctor and Patient must be performed and stored inside the Registry walls. No written information, copies of any notifications or pathology reports or lists of patients must leave the Registry.

- Any paper which has any patient/doctor details on that you do not need must be shredded.

- Keep a copy of the letter to the patient (signed by the doctor) before sending to the patient.

- Do not keep any original pathology reports in your possession unless agreed by the Registrar. Photocopy them and give them back to QCR.

- A confidentiality agreement must be signed and an access card signed for. The access card will give you access only to the QCR door in daylight hours; you must come through the front reception and walk through to the Registry. The front door is open from 8:15am during working days.

- For access to the computer network in the Registry you will need to fill out an Access form for a login name to the system. You will also need to enable a screen saver password to the computer at which you are using, which must be set at 10 mins. The network password is changed regularly and you will be prompted when this will happen.

- PC's and desk space are limited; you need to let the registrar know when you will be visiting the Registry. Noise is a concern for Registry staff; please keep noise to a minimum. If you will be making follow-up telephone calls, please discuss with the Registrar.

- A timesheet must be filled out on a monthly basis and given at the monthly meeting.

- A costing sheet for stationery, phone calls etc. to be reimbursed must be given on a monthly basis, at the meetings.

<u>Items to be invoiced are:</u>

- QCR Letterhead paper
- QCR Envelopes (Plain with QC Logo)
    - Sizes DL (small), DLX (slightly bigger than the DL), A5 (medium) and A4 (large)
    - QCR Reply – Paid Envelopes
      - Sizes DL, A5 and A4
        1. Number used of each
        2. Cost of postage for the amount of each size returned (ie. actually sent back via Aust. Post)
- Photocopying – number of photocopies done
- Telephone calls (Date and Time):
    1. Number of local calls
    2. Number of STD calls, locality and time spent
- Fax calls (Date and number of pages)

<u>Items to be supplied by the visiting staff member are:</u>

- A4 or A3 plain paper
- Postage stamps to put on every letter / package going to Dr and Patient
    - Stationery items eg pens, stapler etc…
    - Labels

7. APPENDIX

(Refer to following pages for appendix)

7.1. Application Checklist

RESEARCH APPLICATION CHECK LIST

Study Name	
Principal Investigator	

No	Requirement	Comment	Attached (Yes / No)
1.	Application Template		☐ Y ☐ N
2.	Ethics approval		☐ Y ☐ N
3.	Application proposal		☐ Y ☐ N
	• Aims of study described		☐ Y ☐ N
	• Method of data collection set out		☐ Y ☐ N
	• QCR data requirements specified		☐ Y ☐ N
	• An undertaking to comply with NHMRC guidelines		☐ Y ☐ N
	• Measures to ensure security and confidentiality of data sent out in study		☐ Y ☐ N
	• Date for de-identifying data or destruction of data supplied		☐ Y ☐ N
	• Method of how data will be destroyed		☐ Y ☐ N

7.2. QCR Data Items

Demographic Information

- Surname
- Given Name/s
- Date of Birth
- Address
- Suburb
- Postcode
- Statistical Locality Area (SLA)

→ This is the address the patient was at last notification received by QCR

- Occupation
- Sex
- Country of Birth
- Indigenous Status
- Marital Status
- Date of Death
- Cause of Death

For each Cancer the Person has:

- Site Code in ICDOv3
- Morphology in ICDOv3
- Differentiation
- Behaviour code (status)
- Date of Diagnosis
- Basis of Diagnosis
- Laterality
- Suburb (where patient was living at when diagnosed)
- SLA (where patient was when diagnosed)

→ This is the suburb the patient was at when initially diagnoses e.g. usual residence at diagnosis

<u>If Breast Tumour:</u>

- Tumour Size
- Number of Nodes
- Number of Positive Nodes

<u>If Melanoma Tumour:</u>

- Clark's Level
- Thickness
- Ulceration

For each hospital or pathology lab who has notified to QCR

- Institution
- Treating Doctor
- UR Number (pathology laboratory notifications won't have this completed)
- Admission Date
- Separation Date

7.3. Confidentiality Form

Queensland Government
Queensland Health

Undertaking of Confidentiality

BY THIS DECLARATION dated the _____ day of _____ 201_

I, _____ of _____
[Name of Appointee] [Address of Appointee]

recognise and accept as my responsibility the following obligations regarding the confidentiality of the information which has been provided to me under the provision of the *Public Health Act 2005.*

1. **Definitions and Abbreviations**

1.1. 'Act'

The *Public Health Act 2005*

1.2. 'Confidential information'

Information accessed under the Act and/or information of a sensitive or confidential nature and any extract, derivation, or aggregation of this information that may enable identification of individuals, doctors, public or private facilities, or communities. This includes information derived from data linking or matching with information from other sources.

1.3. 'NHMRC'

National Health and Medical Research Council

2. **Ethical Obligations**

2.1. I certify that in my capacity as the holder of this information, I will comply with the guidelines and legislation detailed in the

2.1.1. *Public Health Act 2005*

2.1.2. NHMRC's *National Statement on Ethical Conduct in Research Involving Humans (1999*) and

2.1.3. NHMRC's *Values and Ethics - Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research (2003)*

2.1.4. Queensland Health *Code of Conduct*

3. **Confidentiality Obligations**

3.1. In the course of using confidential information for research purposes, I acknowledge that I will be exposed to information which if inappropriately used or disclosed may impact on individuals, public or private facilities or communities, such as discrete non urban indigenous communities.

3.2. I will not disclose confidential information in any released output (eg in reports, publications).

3.3. I will not use this confidential information for purposes other than for performing the specific activities detailed in my application as approved by the Chief Executive under the Act.

3.4. I will not use the confidential information except during the defined time period for which access to and use of this information was approved.

3.5. I agree to take all the reasonable steps necessary to ensure that the confidential information is kept confidential, including storing or disposing of all data, information, documents and associated correspondence in a secure manner.

3.6. I agree to re-apply for approval from the Chief-Executive if:
  3.6.1. I require additional confidential information, or if
  3.6.2. I want to extend the approved time period for access to or use of the confidential information, or if
  3.6.3. Additional individuals require access to this information as part of the approved research study.
3.7. I acknowledge that unauthorised use or disclosure of confidential information by me may subject me to prosecution under the laws of the Queensland Government.
3.8. The declaration of my interests in Research Proposals and associated documents shall be held in strict confidence by the relevant QH Human Research Ethics Committee and Queensland Health employees, and it shall not be used or disclosed to any other person without my prior consent or when it is legally required to be disclosed.

In signing this declaration, I declare that I will adhere to the obligations specified in this document.

…….	……	…../…../…..
[Name of Applicant	[Signature of Applicant]	[Date]

7.4. Visiting Staff Member Letter Templates to Dr Jeff Dunn – not contacting patients

<< On your Letterhead >>

Dr Jeff Dunn
Executive Director
The Cancer Council Queensland
P.O. Box 201
SPRING HILL QLD 4004

Date

Re: Appointment of Visiting Staff of the Queensland Cancer Registry (QCR)

I would like to request the appointment of research staff involved in the approved study of *'Title of Study here ……'* as Visiting Staff of the Queensland Cancer Registry.

The following are the staff we would like appointed as Visiting Staff of the Registry:

Ms xxxxxxxxxx
Ms xxxxxxxxxx

The duties undertaken by these staff for the above study necessitate access to patient information listed in the Queensland Cancer Registry.

Thankyou for considering this request.

Yours sincerely

Principal Investigator Name
PI Position etc….