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**CONFIDENTIALITY DECLARATION 1      NOTIFICATION OF DEATH FOR RESEARCH PROJECTS**  
**ONS reference: 107/0048/02**

**Research Project: Clinical Audit of Deaths in Gosport War Memorial Hospital  
 And a local General Practice**

**Head of Research Unit: Professor RH Baker**  
**Qualifications: MBBS MD FRCGP**

**Status: Director, Clinical Governance R&R Unit**

**Address: Department of General Practice & Primary Health Care**  
**University of Leicester, Leicester General Hospital**  
**Gwendolen Road, Leicester**  
**LE5 4PW.**

**Telephone number: 0116 258 4873**

I acknowledge the following conditions under which information is supplied by ONS:

1. the information released to me will be used for the purposes of the approved research project identified above;
2. no contact will be made with any individual(s) identified in the information supplied, except as agreed in the protocol and associated letters;
3. the information supplied by ONS will not be released to any other individual(s) or organisation(s) not directly connected with the project, except in the form of statistical tables or conclusions;
4. while in my keeping, the information supplied by ONS will be stored with proper safeguards to ensure confidentiality;
5. the prior agreement of ONS will be sought for any extension of this project beyond what was originally made known to ONS, if it involves the use of records supplied or derived from the records supplied by ONS;
6. any reports, papers etc published will not identify individuals or enable individuals to be identified;
7. all records supplied by ONS and any copies will be destroyed on completion of the project;
8. anyone replacing me and becoming responsible for this project will complete an ONS confidentiality declaration before receiving any further records from ONS.

**Name in capitals:**

*R H Baker*

**Signed:**

**Code A**

**Date:**

*26/11/02*

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Please send the completed form to: Mrs G Brackett  
Medical Research Unit, Room B6/08, ONS, 1 Drummond Gate, London SW1V 2QQ

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