|  |  |
| --- | --- |
|  | Questions are followed by answer fields. Use the ‘Tab’ key to navigate through. Replace Y/N or Yes/No fields with your answer. |
| Northern Territory Cancer Registry (NTCR) |
| Purpose of this formThis form is required when you are requesting access to **aggregate** data (where the data are presented in summary or statistical format) from the Northern Territory Cancer Registry (NTCR). Under the [NT Cancer (Registration) Act](https://legislation.nt.gov.au/Legislation/CANCER-REGISTRATION-ACT-2009)[[1]](#footnote-1), the NTCR Registrar can release aggregate data without the approval of the NT Chief Health Officer (CHO). The data release and subsequent use are also governed by the [NT Information Act](https://infocomm.nt.gov.au/about-us/the-information-act)[[2]](#footnote-2), [Information Privacy Principles](https://infocomm.nt.gov.au/privacy/information-privacy-principles)[[3]](#footnote-3), [NT Public Service Code of Conduct](https://ocpe.nt.gov.au/working-in-the-public-sector/code-of-conduct)[[4]](#footnote-4) and [Department of Health Privacy Policy](https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/726)[[5]](#footnote-5).The NTCR Registrar will first assess the research project against the [Five Safes framework](https://www.aihw.gov.au/about-our-data/data-governance/the-five-safes-framework)[[6]](#footnote-6) to determine whether the data release should be approved or whether the data request should be modified: * Please note any cell containing counts less than five will be reported as “not published” to maintain confidentiality and the related row and column totals may also be omitted to prevent data identification.
* We may group certain categories where counts are too small.

Please contact us if you have questions or would like to discuss your data request.Please **complete** and email this form to NTCancerRegistry.DoH@nt.gov.au. |
| Section 1: Safe people |
| About the person making the request |
| Name |  | Position |  |
| Organisation |  |
| Address |  |
| Suburb |  | State |  | Post code |  |
| Phone |  | Email |  |
| Section 2: Safe projects and safe settings |
| Briefly describe the question you want to answer using NT Cancer Registry data |
|  |
| Section 3: Safe data and safe outputs |
| Details of the data that you are requesting – only complete applicable parts |
| Data types (select one or more) | Cancer incidence (new diagnosis) | Y/N | Cancer mortality (death) | Y/N |
| **Cancer type/site** (e.g. ICD-10 C34, liver, all sites combined - use with codes if possible) |
|  |
| Sex (select one or more) | Males | Y/N | Females | Y/N | All persons | Y/N |
| Age (in years) |
| All ages | Y/N | Range (from/to) |  | Break down by years (state year period) |  |
| **Geographical regions** (e.g. Total NT, Top End, Health District, very remote) |
|  |
| **Other criteria** (e.g. Indigenous status) |
|  |
| Date period (in years) |
| One year |  | Range (from/to) |  | Break down by years (state year period) |  |
| **Statistics required** (select one or more) | Counts | Y/N | Direct age-standardised rate | Y/N | Age-specific rate | Y/N |
| **Other statistics** (specify) |
|  |
| Section 4: Conditions of data release |
| The following conditions of data release apply:1. The data will only be used for the purpose specified in this data request form.
2. The data will be deleted at the end of the analysis period, in line with your institutional data retention policy.
3. The privacy of individual records included in the data file must be respected. No attempt will be made to re-identify any record.
4. The NTCR will be notified of any completed &/or published reports within 30 days.
5. An acknowledgement of NTCR will be included in any resulting publications including internal reports and student theses.

I am aware of, and agree to abide by the conditions of the data release as listed above: |
| Name |  |
| Signature |  | Date |  |
| Privacy statementThe Northern Territory Government values and is committed to protecting your privacy. We handle your personal information in accordance with the information privacy principles in the [*Information Act 2002*](https://legislation.nt.gov.au/en/Legislation/INFORMATION-ACT-2002)*[[7]](#footnote-7)*. We will only use personal information contained in the forms to provide you with a department service or program. We don't share information about you with other government agencies or other organisations without your permission unless:* it's necessary to provide you with a service that you have requested
* it's required or authorised by law
* it will prevent or lessen a serious and imminent threat to somebody's health.
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| End of form |

1. https://legislation.nt.gov.au/Legislation/CANCER-REGISTRATION-ACT-2009 [↑](#footnote-ref-1)
2. https://infocomm.nt.gov.au/about-us/the-information-act [↑](#footnote-ref-2)
3. https://infocomm.nt.gov.au/privacy/information-privacy-principles [↑](#footnote-ref-3)
4. <https://ocpe.nt.gov.au/working-in-the-public-sector/code-of-conduct> [↑](#footnote-ref-4)
5. https://digitallibrary.health.nt.gov.au/prodjspui/handle/10137/726 [↑](#footnote-ref-5)
6. https://www.aihw.gov.au/about-our-data/data-governance/the-five-safes-framework [↑](#footnote-ref-6)
7. https://legislation.nt.gov.au/en/Legislation/INFORMATION-ACT-2002 [↑](#footnote-ref-7)