

DSC Notice: 19/2001(W)
English DSCN Equivalent 09/2001

Date of Issue: August 2001

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| IRSS Information Requirements and Standards Sub Committee | Subject: Capturing data for NHS patients treated in private hospitals. |
| | Implementation date: 01 April 2002 |

DATA SET CHANGE CONTROL PROCEDURE

This paper gives notification of changes to be included in the NHS Wales Data Dictionary.

Summary of change:

Inclusion of NHS patients treated by non-NHS providers under concordat arrangements in PEDW.

Summary of impact:

The collection of data using a dummy code default code.

Change Proposal
Reference No: 05/01

Please address enquiries about this DSCN to the Data Standards and Information Quality Team, HSW, Brunel House, 2 Fitzalan Road, Cardiff CF24 0HA Tel: 029 20502463 .

Data Set Change Notices are available at request from the above address. In the near future they will be available on the Intranet Service HOWIS.

DSCN numbering format = sequence number/year of issue, (W) for Welsh DSCN's.

DATA SET CHANGE NOTICE 19/2001(W)

- Reference:** CP 05/01 version 1.0
- Subject:** Capturing data for NHS patients treated in private hospitals
- Type of Change:** Introduction of default code 89999 where an organisation code has not yet been assigned to a Non-NHS Hospital. Also the DSCN reinforces the current requirement to collect data on NHS patients treated at Non-NHS Hospitals.
- Reason for Change:** To monitor the NHS Plan for Wales - concordat arrangements
- Effective Date:** 1 April 2002
- Effect on Central Returns:** Inclusion of NHS patients treated on behalf of NHS Trusts and LHGs under concordat arrangements in PEDW.

Introduction:

1. The NHS Plan for Wales addresses the relationship between the NHS and the private sector, which makes clear that the NHS can and should harness the capacity of private and voluntary healthcare providers to treat more NHS patients. The NHS Plan for Wales discusses the treatment of NHS patients in private hospitals, where the patient remains as an NHS patient regardless of whether they are treated in the private sector. No attempt is currently envisaged to collect information relating to the treatment of non-NHS patients in non-NHS providers.
2. As part of the NHS plan for Wales there is a need for a national framework for a partnership between the private and voluntary sector and the NHS. The new arrangements need be set out in a concordat, highlighting three particular areas.
 - Elective care – for example where NHS clinicians use the operating and other facilities in private hospitals or where the NHS buys the service from the private hospital.
 - Critical care – to enable the transfer of patients where clinically appropriate
 - Intermediate care.
3. The concordat will also need to acknowledge that there will have to be a greater exchange of information between sectors about clinical and workforce activity. As the activity taking place under the concordat arrangements will be provided to NHS patients and commissioned by the NHS it is important for planning and monitoring purposes to collect it and be able to differentiate it from other NHS activity. To date, no guidance has been issued to the NHS on how to capture and code this information. This change defines the route to be used.

Background:

4. Currently, information is collected on all NHS and private admitted patients treated in NHS hospitals and units and is held on the Patient Episode Database for Wales (PEDW). The data comprises records relating to an episode of care under a particular consultant. Each record carries both clinical and administrative data, including fields that identify the organisations providing the care and the location at which the care took place.
5. The codes that identify organisations are issued by Health Solutions Wales and are required for all NHS providers of healthcare. Nationally recognised identifying codes have been issued for a number of private and voluntary organisations. Private hospitals are issued with alphanumeric codes of 5 characters commencing with '8'
6. The location at which the treatment takes place is termed the 'site code of treatment' and identifies the site on which the patient was treated at the start of an episode, since facilities may vary on different hospital sites. The NHS Wales Data Dictionary states 'if the treatment is sub-commissioned to another provider, the site code used should be that of the provider actually carrying out the work. The site code of treatment is recorded by using the Organisation Code for the provider - the last two digits being the Organisation Site Code, identifying the site.'

New Arrangement:

7. It is very important in terms of monitoring service delivery and for purposes of clinical governance following the NHS Plan for Wales to be able to differentiate the care provided to NHS patients in non-NHS providers from that provided to NHS and private patients in NHS providers. In the long term the National Assembly for Wales would wish to be able to identify easily all non-NHS providers. However, since not all non-NHS providers currently have nationally recognised codes, the information requirement should be phased in. This will be undertaken by using a default code where a non-NHS provider does not have a code registered and issued by Health Solutions Wales.
8. It is mandated that the following should be implemented from 1 April 2002:
 - The site code of treatment field should contain the organisation code relevant to that site and issued by Health Solutions Wales where it is available regardless of whether the activity is taking place in NHS or non-NHS providers.
 - For sites within a NHS Trust this should be the organisation code of the provider with the last 2 characters identifying the site.
 - For non-NHS providers where no site code has been requested and issued the site code of treatment field should contain the default value of '89999'
 - It is the responsibility of the NHS Trust using the private facilities or commissioning the care taking place in those facilities to ensure that the information for such episodes of care are collected, recorded and included in submissions to PEDW.

Additional Information:

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