

NHS Digital

Agenda: Part 1 (Public Session)

Wednesday 31 May 2017, 12:30 to 14:30

Venue: Diggory, Hill and Bevan, First Floor, 1 Trevelyan Square, Leeds, LS1 6AE

Apologies:

- Rachael Allsop, Director of Workforce
- Prof. David Hughes, Director of Information and Analytics
- Tamara Finkelstein, Director General for Community Care (Department of Health representative)

| Ref No | <u>Agenda Item</u> | <u>Time</u> | Presented By |
|---------------|---|---------------|--|
| NHSD 17 02 01 | Chair's Introduction and Apologies (oral) | 12:30 – 12:45 | Chair |
| NHSD 17 02 02 | Declaration of Interests and Minutes (a) Register of Interests (paper) – for information (b) Minutes of the Statutory Board Meeting on 03 May 2017 (paper) – to ratify (c) Matters Arising (oral) – for comment (d) Progress on Action Points (paper) – for information | | Chair |
| NHSD 17 02 03 | Strategic Delivery and Operational Performance (a) Update on Cyber Attack (oral) | 12:45 – 13:15 | Interim CEO |
| NHSD 17 02 04 | Governance and Assurance (a) 2016-17 Annual Report and Accounts (paper) - for approval | 13:15 – 14:00 | Director of Finance and Corporate Services |
| | (b) Directions (endorsed at EMT 11 May 2017): i. Establishment of Information Systems for NHS Services: Emergency Care Data Set Collection Directions 2017 (paper) – for acceptance ii. Community Services Dataset Direction (paper) – for acceptance | 14:00 – 14:10 | Medical Director and Caldicott Guardian |
| | (c) Committee Reports: i. Investment Committee (IC) Report: 09 May 2017 (oral) - for information ii. Assurance and Risk Committee (ARC) Report: 10 May 2017 (oral) - for information | 14:10 – 14:20 | Committee Chair |
| NHSD 17 02 05 | Any other Business (subject to prior agreement with Chair) | 14:20 – 14:30 | Chair |
| | Close | 14:30 | |
| NHSD 17 02 06 | Background Paper(s) (for information only) (a) Board Forward Business Schedule 2017-18 (paper) – for information (b) Forthcoming Statistical Publications (paper) – for | | |

(b) Forthcoming Statistical Publications (paper) – **for information**

Date of next meeting: 06 September 2017, Rooms 102A and 124A, Skipton House, 80 London Road, London SE1 6LH



Board meeting – Public Session

| Title of paper: | Register of Interests |
|---------------------------------------|---|
| Board meeting date: | 31 May 2017 |
| Agenda item no: | NHSD 17 02 02 a |
| Paper presented by: | Chair |
| Paper prepared by: | Executive Office Secretariat |
| Paper approved by: (Sponsor Director) | Each Director is accountable for their declaration of interest |
| Purpose of the paper: | NHS Digital is required by its Standing Orders to maintain a publically available Register of Members' Interests. |
| | The Register contains, as they become available, the Declarations of Interest made by Board Members. |
| Key risks and issues: | N/A |
| Patient/public interest: | Corporate Governance |
| | Transparency and Openness |
| Actions required by the board: | For information |

NHS Digital Board Register of Interests 2017-18

| Name | Declared Interest | | | |
|---|--|--|--|--|
| Non-Executive Directors | | | | |
| Noel Gordon: Chair | Directorships: Chairman, Healthcare UK Non-Executive Director, NHS England Non-Executive Director, DSD (Dayments Services Deculetes) | | | |
| | Non-Executive Director, PSR (Payments Services Regulator) Chairman of Board of Trustees, Uservoice.org Other Offices held: Member, Life Sciences Industrial Strategy Advisory Board | | | |
| | Member, Audit and Risk Committee, University of Warwick Member, Development Board, Age UK Shareholdings as defined in the NHS Digital Corporate Governance Manual: | | | |
| | Accenture Other relevant interests: Senior Advisor, Aleron | | | |
| Dr Sarah Blackburn: Non-Executive Director Vice Chair | Directorships: Director - The Wayside Network Limited Board Director and Audit Committee member, RAC Pension Fund Trustee | | | |
| | Employment (other than with the NHS Digital): The Wayside Network Limited Other Offices held: None Contracts held in last 2 years: The Wayside Network Limited has: a contract to supply GP and primary care nursing services to Avon and Wiltshire NHS Partnership a zero hours contract with the Chartered Institute of Internal Auditors to provide an External Quality Assessment Reviewer and a viva voce examiner | | | |
| | Shareholdings as defined in the NHS Digital Corporate Governance Manual: 50% of The Wayside Network Limited | | | |

| Name | Declared Interest |
|--|---|
| | Other relevant interests: |
| | Husband has the other 50% of The Wayside Network Limited shares |
| | Daughter is a trainee orthopaedic surgeon in Bristol |
| Sir Ian Andrews: | Employment (other than NHS Digital): |
| Non-Executive Director Senior Independent Director | Partner in IMA Partners (formerly trading as IMA Partners Ltd until February 2016) providing legal and management consultancy services to government, academia (KCL¹) and Transparency International UK. Other Offices held: |
| | Conservator of Wimbledon and Putney Commons Trustee Chatham Historic Dockyard Member of UK Defence Academy Academic Advisory Board |
| Dr Marko Balabanovic: | Employment (other than with NHS Digital): |
| Non-Executive Director | Chief Technology Officer, Digital Catapult |
| | Shareholdings as defined in the NHS Digital Corporate Governance Manual: |
| | Equal Media Ltd |
| Daniel Benton: | Directorships: |
| Non-Executive Director | Trustee, The Grange Festival |
| | Other Offices held: |
| | Fundraising and Finance Committees , NSPCC |
| | Shareholdings as defined in the NHS Digital Corporate Governance Manual: |
| | AccentureSupercarers |
| Professor Soraya Dhillon | Directorships: |
| MBE: Non-Executive Director | Non-Executive Director, The Hillingdon Hospital NHS Foundation Trust |
| | Employment (other than with NHS Digital): |
| | Academic Manager, University of Hertfordshire |
| | Other offices held: |
| | Senior Independent Sponsor Improvement Steering Group, Eastern Academic Health Science Network |

¹ King's College London

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| Name | Declared Interest | | |
|---|---|--|--|
| | Contracts held in last 2 years: | | |
| | Former Dean School of Life and Medical Sciences, University of Hertfordshire until 31 October 2016 | | |
| Professor Sudhesh | Directorships: | | |
| Kumar: | Institute of Digital Healthcare, Warwick Manufacturing Group | | |
| Non-Executive Director | Employment (other than with NHS Digital): | | |
| | Dean, Warwick Medical School | | |
| | Other offices held: | | |
| | Non-Executive Director, University Hospital of Coventry and Warwickshire (UHCW) NHS Trust Honorary NHS Consultation Physician, (UHCW), Heart of England Foundation Trust and George Elliot Hospitals | | |
| | Shareholdings: | | |
| | Medinova Research Limited | | |
| | Other relevant interests: | | |
| | Member, Medical School Council | | |
| Rob Tinlin: | Directorships: | | |
| Non-Executive Director | Director, Towler Tinlin Associates Ltd | | |
| | Other Offices held: | | |
| | Member, Advisory Board, Queen Mary University of London Business School | | |
| Executive Members of th | e Board | | |
| Rob Shaw: Interim Chief Executive Officer | • None | | |
| Rachael Allsop: Director of Workforce | • None | | |
| Beverley Bryant: | Contracts held in last two years: | | |
| Director of Digital | Director of Digital Technology, NHS England (until 31 May 2015) | | |
| Transformation | Other relevant interests: | | |
| | Other relevant interests. | | |

| Name | Declared Interest |
|--|--|
| Carl Vincent: Executive Director of Finance and Corporate Services | • None |
| Ex Officio Board Member | S |
| Professor Martin Severs: | Trustee of Dunhill Medical Trust, a research charity |
| Medical Director and Caldicott Guardian | Professor of Health Care for Older People with University of Portsmouth (Honorary) |
| | Other Offices: |
| | Member of National Data Guardian's Panel |
| | Other relevant interests: |
| | Member of Royal College of Physicians, British Geriatrics Society, the Faculty of Public Health Medicine and British Medical Association (BMA) |
| Tamara Finkelstein: | Department of Health, Director General for Community Care |
| Director General for | Directorships: |
| Community Care, Department of Health | New North London Synagogue (as Tamara Isaacs) |
| Department of Ficality | The Jewish Community Secondary School (as Tamara Isaacs) |
| Professor Keith McNeil: | Chief Clinical Information Officer, Health and Social Care Directorships: |
| Chief Clinical Information Officer, NHS England | Carers Queensland |
| a massi, i mass a mgiama | Other Offices: |
| | Non-Executive Director Eastern Academic Health Science Network |
| | Contracts held in last two years: |
| | Chief Executive, Addenbrookes Hospital Cambridge |
| Executive Management T | eam Directors |
| Tom Denwood: Director of Provider Support and | British Computer Society (BCS) Health, Vice Chair Policy and Strategy (a voluntary role at this registered charity) |
| Integration | Senior Responsible Owner (SRO) for Local Service Provider (LSP) Programmes on behalf of Department of Health |
| | Senior Responsible Owner (SRO) for the Health and Social Care Network (HSCN) Programme on behalf of Department of Health (DH) |

| Name | Declared Interest |
|---------------------------------------|---|
| James Hawkins: Director of Programmes | Parent Governor at St Peters Church of England Primary School, Harrogate |
| Professor David Hughes: | • None |
| Director of Information and Analytics | |



NHS Digital

Minutes of Board Meeting Held at Olympia London (Apex Room), Hammersmith Rd, London W14 8UX

03 May 2017

Part 1 - Public Session

Present:

Noel Gordon Non-Executive Director (Chair)

Sir Ian Andrews Non-Executive Director (Senior Independent Director)

Dr Marko Balabanovic

Daniel Benton

Prof. Soraya Dhillon, MBE

Prof. Sudhesh Kumar

Rob Tinlin

Non-Executive Director

Non-Executive Director

Non-Executive Director

Non-Executive Director

Rob Shaw Interim Chief Executive Officer

Rachael Allsop Director of Workforce

Beverley Bryant Director of Digital Transformation
Prof. David Hughes Director of Information & Analytics

Carl Vincent Director of Finance and Corporate Services

Prof. Keith McNeil NHS Chief Clinical Information Officer (CCIO), (NHS

England representative)

Prof. Martin Severs Medical Director and Caldicott Guardian

In attendance:

Tom Denwood Director of Provider Support and Integration from 10:00 –

11:45 am

Chris Jarvis Secretary to the Board

Dean White Head of Business & Operational Delivery attended as an

observer

For Item NHSD 17 01 04 a

James Palmer Programme Head

Apologies

Dr Sarah Blackburn Non-Executive Director (Vice Chair)

1. Chair's Introduction and Apologies

NHSD 17 01 01 (P1)

- 1.1 The Chair convened a meeting of the NHSD Digital Board.
- 1.2 The Chair reported that he had received apologies from Dr Sarah Blackburn, Non-Executive Director,

The Chair confirmed that the meeting was quorate. He also made reference to the period of Purdah that was in place during the election period, noting the Cabinet Office guidance in place in this respect.

2. Declaration of Interests and Minutes

NHSD 17 01 02 (P1)

2.1 (a) Register of Interest (paper)

NHSD 17 01 02 (a) (P1)

The Board agreed that the register of interests was correct.

The Chair asked Board members to make declarations of interest for the Agenda items listed.

2.2 (b) Minutes of Board Meeting on 28 March 2017 (paper) NHSD 17 01 02 (b) (P1)

The Board ratified the minutes of the meeting Part 1 held on 28 March 2017.

2.3 (c) Matters Arising (oral)

NHSD 17 01 02 (c) (P1)

There were no matters arising not covered on the agenda.

2.4 (d) Progress on Action Points (paper)

NHSD 17 01 02 (d) (P1)

The Board noted the progress on action points resulting from the previous meetings.

3. Strategic Delivery and Operational Performance

NHSD 17 01 03 (P1)

3.1 (a) Board Performance Pack (paper)

NHSD 17 01 03 (a) (P1)

The Interim CEO presented this item the purpose being to provide the Board with a summary of NHS Digital's performance for March 2017. He noted that a comprehensive review of KPIs was due to be carried out at the end of June.

General issues were noted as follows;

- The importance of the NHS England document; Next Steps on the NHS
 Five Year Forward View, in shaping and providing context to the future
 environment.
- Identifying the commitments that NHS Digital has made to NHS England.
 The Director of Finance and Corporate Affairs noted that this could be
 included in the progress tool through the quarterly Business Plan review
 and this principle was agreed.
- Determining the Digital Delivery Board (DDB) view of progress within NHS Digital

Performance during March was noted, with particular reference to;

- 1. **Programme Achievement**; reported as amber green with overall delivery confidence across all programmes as 64.3%, with a recent go live noted as Widening Digital Participation
- 2. **IT Service Performance**; reported as green with 98.1% of services (53 out of 54) achieved their availability target. It was recognised that this is a significant

step forward

- 3. **Organisational Health**; reported as amber, noting that the "path to green" is dependent on workforce planning actions including alternative sourcing models. Areas of particular discussion were as follows;
 - I. Graduate recruitment and the step improvement that is being achieved
 - II. The important role of apprenticeships
 - III. The relevance of Masters' Programmes in creating an awareness of the environment
 - IV. How the recruitment value proposition is developed
 - V. The Interim Chief Executive confirmed that these issues are being addressed and developed
- 4. Financial Management; reported as red. It was noted that the budget for the year was materially restated at M9 to recognise funding realignment from DH and NHS England into NHS Digital. Areas of particular discussion were as follows;
 - I. The reasons for the projected underspend for the year, noting that the delivery timescale of some programmes has slipped
 - II. The challenge on programme delivery undertaken taken through Business Plan reviews
 - III. The extent to which the forecast underspend constitutes a material issue, in the particular context of acceptable tolerance levels
 - IV. The importance of being advised of projected underspends as soon as possible, together with the ability to have a prioritised pressures list
 - V. It was noted that further detail would be provided in the next report.

Having regard to the points discussed, the Board noted the report.

4 Strategy and Capability

NHSD 17 01 04 (P1)

4.1 (a) Child Protection Information Sharing (CP-IS) (paper)

NHSD 17 01 04 (a) (P1)

Beverley Bryant, Director of Digital Transformation presented this item. The purpose was to brief the board on recent progress on the Child Protection – Information Sharing project.

By way of background, it was noted that the Child Protection – Information Sharing (CP-IS) project links information about vulnerable children between social care and unscheduled NHS care settings via the NHS Spine.

A review of the programme by NHS Digital and NHS England, recognised that new milestones should be set for the project and the approach to delivery reconsidered.

Accordingly, improvements and changes to the approach to implementation have been introduced to improve implementation uptake namely, (i) stakeholder management (ii) co-ordinated deployment across Health and Social Care and Health (iii) Local Authority Funding (iv) Engaging with suppliers (v) communications and (vi) support from other NHS Digital Teams.

Key issues raised through wide ranging discussion were as follows;

- The publicity associated with the programme
- The importance of providing a visual trajectory
- In answer to a question from the Chair, the Director of Digital Transformation confirmed that there was a high level of confidence for delivery of the new schedule

- It was noted that there is a comprehensive Child Protection training System in place
- A comment was made that it would be helpful to get a sense of the incidence of children at risk, although it was noted that it was early in the process to establish that information.
- In response to a question concerning delivery milestones, the Director of Digital Transformation said that the figures identified represented significant levels of ambition
- The importance of ensuring effective mobilisation on the ground and recognising the impact of human factors
- In terms of keeping pace with the programme, the Interim Chief Executive made reference to the high priority being accorded to the programme
- Possible impediments to implementation were noted with particular reference to software suppliers prioritising making the required changes to their systems.

Following discussion, the Board;

- I. Noted the progress and actions in hand outlined in the paper to accelerate progress in CP-IS deployment
- II. Noted the revised delivery milestones, reflecting a more realistic deployment
- III. Noted there would be more frequent and detailed reporting within the Performance Dashboard.

4.3 (b) NHS Digital Social Care – update briefing (paper) NHSD 17 01 04 (b) (P1)

Tom Denwood, Director of Provider Support and Integration introduced this item. James Palmer, Programme Head, attended the meeting to present. The purpose was to brief the Board on the ongoing work of NHS Digital and the National Social Care Advisory Group to support social care priorities across the Paperless 2020 portfolio.

Through the report presented, it was noted that this initial work and investment includes specific project delivery for a clearly defined set of projects, including;

- I. A structured messaging exchange service to streamline discharge from acute settings to local authority social care
- II. An innovation investment fund for Local Authorities
- III. Support for Care Homes to improve Information Governance to access NHS Mail.

Discussion took place on a number of issues;

- The significance of Integrated Care, and the importance of including children's services in this work
- The importance of maintaining public trust
- Working in conjunction with Social Care in considering Dame Fiona Caldicott's report
- The significant piece of work to be carried out in relation to Child Health
- Cyber Security guidance for Care Homes, including Penetration Testing
- The Interim Chief Executive emphasised the importance attached to the continued development of social care priorities
- The Chair made reference to ensuring that this was placed in the bigger context of Integrated Care, within a holistic approach.

Having been advised that this issue would be brought back to the September Board Meeting, the Board noted the report.

5 Governance and Assurance

5.1 (a) Directions for Acceptance:

NHSD 17 01 05 (a) (P1)

(i) Personal Health Budget Data Set (paper)

NHSD 17 01 05 (a)(i) (P1)

The Director of Information & Analytics presented this item.

The Board, being satisfied with the information and assurances provided, accepted the Direction.

5.2 (b) Board assurance of Investment Decisions. Proposal to establish an Investment Committee

Carl Vincent, Director of Finance and Corporate Services presented this item. The purpose was to secure approval for the Board to establish a sub-Committee to oversee the assurance of investment decisions.

The Board noted the expectation that the volume and value of investment proposals arising from the P2020 portfolio would increase over the coming months, making difficult the provision of timely approvals within the scheduling of Board Meetings.

Having noted that (i) the Digital Delivery Board (DDB) was comfortable with the proposal and (ii) the Investment Committee (IC) would report to each statutory meeting of the NHS Digital Board, the Board approved the establishment of an Investment Committee as a sub-committee of the NHS Digital Board, to be chaired by Noel Gordon, Chair of NHS Digital, and also approved the Terms of Reference as presented.

5.3 (c) Modern Slavery Act 2015 – Implications for NHS Digital (paper)

NHSD 17 01 05 (c) (P1)

Carl Vincent, Director of Finance and Corporate Services presented this item. The purpose was to provide the Board with a summary of changes in UK law relating to supply chain transparency brought about by the Modern Slavery Act 2015 (Act) and the need for NHS Digital to take appropriate and proportionate action to ensure slavery and human trafficking is not taking place in its business or its supply chains.

Mr Vincent reported that NHS Digital commits to ensuring that the necessary measures are in place to complete and enact the required Statutory Statement, which will then be published on the NHS Digital web site. It was further noted that compliance to the Act will be reporting annually in the Annual Report and Accounts, commencing in 2017/18.

The Board noted the current position and supported the proposed actions going forward.

5.4 (d) National Back Office (NBO) Review Position (oral)

NHSD 17 01 05 (d) (P1)

Sir Ian Andrews, Senior Independent Director reported that no further action would be taken on this issue until the period of Purdah had concluded.

Any Other Business (subject to prior agreement with NHSD 17 01 06 (P1) chair)

6.1 There was no other business.

7 Background Papers (for information) NHSD 17 01 07 (P1)

7.1 (a) Board Forward Business Schedule (paper) NHSD 17 01 07 (a) (P1)

The Board noted this paper for information.

7.2 (b) Forthcoming statistical Publications (paper) NHSD 17 01 07 (b) (P1)

The Board received this paper for information, having noted the Chair's comment that the publications listed were not impacted by the Purdah arrangements in place.

8 Date of Next Meeting

8.1 The next statutory Board meeting will take place on 31 May 2017.

The Board resolved that pursuant to the Public Bodies (Admission to Meetings) Act 1960 that representatives of the press and other members of the public be excluded from the remainder of this meeting having regard to the confidential nature of the business to be transacted, publicity on which would be prejudicial to the public interest' (Section 1 (2) Public Bodies (Admission to Meetings) Act 1960).

Table of Actions:

| Paper Ref | Action Reference | Action Owner |
|-------------------------|---|---|
| NHSD 17 01 03 | Board Performance Pack; comprehensive review of KPIs due to be carried out at the end of June | Carl Vincent; Director of Finance and Corporate Services |
| NHSD 17 01 04 (a) P1 | CP-IS paper; implementation of actions identified to ensure that milestones are met | Beverley Bryant, Director of Digital Transformation |
| NHSD 01 04 (b) (P1) | NHS Digital Social Care – update briefing | Tom Denwood, Director of Provider Support and Integration |

| Agreed as an accurate record of the meeting | | | | |
|---|-------------------|--|--|--|
| Date: | | | | |
| Signature: | | | | |
| Name: | Noel Gordon | | | |
| Title: | NHS Digital Chair | | | |



Board meeting – Public Session

| Title of paper: | Progress on Action Points |
|---------------------------------------|--|
| Board meeting date: | 31 May 2017 |
| Agenda item no: | NHSD 17 02 02 d |
| Paper presented by: | Chair |
| Paper prepared by: | Executive Office Secretariat |
| Paper approved by: (Sponsor Director) | Each action update is submitted and approved by the relevant Executive Director |
| Purpose of the paper: | To share an update on open action points from previous meetings for information. |
| | To ensure the completion of Board business. |
| Key risks and issues: | As stated in the action and commentary |
| Patient/public interest: | Corporate Governance best practice |
| Actions required by the board: | To note for information |

Progress against Board meeting actions

Green = completed Amber = on-going Red = overdue

| Meeting Date | Status | Summary of Action | Responsible Director | Commentary | Next Steps | Target Completion Date |
|-----------------|--------|--|----------------------------|---|---|------------------------------|
| 07/09/2016 | Amber | Information Assurance and Cyber Security Committee: The COO said that there was recognition that the Information Assurance and Cyber Security Committee terms of reference would need to evolve to reflect changes in the informatics governance landscape and across Whitehall, including the formation of the National Cyber Security Centre (NCSC). The Chair asked that the Board have sight of any proposed change to the Committee and its terms of reference prior to implementation. | Chief Operating Officer | Update 28 March 2017: Work with NCSC has begun to identify linkages and requirements on the IACSC Terms of Reference. However, the work is also looking to bring input from the recommendations within the NHS Digital Capability review which has not yet been approved. Update 03 May 2017: Work is progressing but we have yet to fully define the impact and impact as a consequence of the Capability Review. | Update 28 March 2017: Capability review to be approved within NHS Digital to be approved and released in March 2017. Once released, ToR to be update accordingly and circulated to the Board. Update 03 May 2017: Work is in progress to determine the impact of the Capability Review aspects. This will be completed by end May 2017 | May 2017 |

| Meeting Date | Status | Summary of Action | Responsible Director | Commentary | Next Steps | Target Completion Date |
|-----------------|--------|---|---------------------------|---|--|------------------------------|
| | | | | Update 31 May 2017: IACSC TOR to be retrospectively updated to include NCSC as committee member, no further changes are required at this time. Progression of the Capability Review recommendations may result in the need to further review the groups Terms Of Reference (ToR), should this requirement be identified a further paper will be submitted. | Update 31 May 2017: Paper highlighting the inclusion of NCSC within the TOR to be submitted to September board. Should progression of Capability Review requirements results in the need for further changes an additional paper can be submitted to the board. | |
| 28/03/2017 | Amber | Progress Towards a Patient Centric Digital Health and Care System: It was agreed that further updates on progress towards a Patient –Centric Digital Health and Care System detailing successes and challenges, be brought to a future Board meeting. | Director of Programmes | Update 03 May 2017: Further update on the 30 May Development Board Agenda. Update 31 May 2017: Further update will be bought to the 04 July Board Timeout meeting. | Update 03 May 2017: To present a further update to the Board at the 30 May 2017 meeting. Update 31 May 2017: To present a further update to the Board at the 04 July Timeout meeting. It was subsequently agreed to defer this item to the September meeting | May 2017 |

| us Summary of Action | Responsible Director | Commentary | Next Steps | Target Completion Date |
|--|--|--|--|---|
| Stop Smoking Service Data Collection: A note will be sent to the Board on the validity of the process of collecting data | Director of Programmes | Update 03 May 2017: Action being progressed with a completion date target by 5th May. | Update 03 May 2017: Action in progress. | May 2017 |
| | | Update 31 May 2017: A note was circulated to the Board on 23 May 2017 as follows: | Update 31 May 2017: Action Closed | |
| | | "Systems are used for the collection of this data by recording patient details and interaction with them. At the end of the quarter, the user runs a report that allows the user to manually validate breaches, eg. quit rates outside our expected limits, before submitting the collection. NHS Digital also compares returns to those submitted in previous quarters and flags any unexpectedly high or low values with the | | |
| | en Stop Smoking Service Data Collection: A note will be sent to the Board on the validity of the | en Stop Smoking Service Data Collection: A note will be sent to the Board on the validity of the Director Director | Stop Smoking Service Data Collection: A note will be sent to the Board on the validity of the process of collecting data Director of Programmes Director of Programmes Update 03 May 2017: Action being progressed with a completion date target by 5th May. Update 31 May 2017: A note was circulated to the Board on 23 May 2017 as follows: "Systems are used for the collection of this data by recording patient details and interaction with them. At the end of the quarter, the user runs a report that allows the user to manually validate breaches, eg. quit rates outside our expected limits, before submitting the collection. NHS Digital also compares returns to those submitted in previous quarters and flags any unexpectedly | Stop Smoking Service Data Collection: A note will be sent to the Board on the validity of the process of collecting data Director Programmes Director of Programmes Director of Programmes Director of Programmes Action being progressed with a completion date target by 5th May. Update 31 May 2017: Anote was circulated to the Board on 23 May 2017 as follows: "Systems are used for the collection of this data by recording patient details and interaction with them. At the end of the quarter, the user runs a report that allows the user to manually validate breaches, eg. quit rates outside our expected limits, before submitting the collection. NHS Digital also compares returns to those submitted in previous quarters and flags any unexpectedly |

| Meeting Date | Status | Summary of Action | Responsible Director | Commentary | Next Steps | Target Completion Date |
|-----------------|--------|--|--|---|--|------------------------------|
| 03/05/2017 | Amber | Board Performance Pack: comprehensive review of KPIs due to be carried out at the end of June | Director of Finance and Corporate Services | Update 31 May 2017: Work is underway to review the corporate KPIs reported to EMT and the Board. The main focus is the Programmes Achievement KPI and the Workforce/Organisational Health KPI. In addition the Financial information reported in the pack is being reviewed, and other elements of the pack will be freshened up. | Update 31 May 2017: Proposals for the main KPI developments will be considered by EMT in June/July and the changes incorporated into the Performance Pack for the next statutory Board meeting | June 2017 |
| 03/05/2017 | Amber | Child Protection Information Sharing (CP-IS) paper: implementation of actions identified to ensure that milestones are met. ie. I. Noted the progress and actions in hand outlined in the paper to accelerate progress in CP-IS deployment II. Noted the revised delivery milestones, reflecting a more realistic deployment Noted there would be more frequent and detailed reporting within the Performance Dashboard. | Director of Digital Transformation | Update 31 May 2017: CP-IS will be added to the quarterly performance dashboard from September | Update 31 May 2017: CP-IS will be added to the quarterly performance dashboard from September | September |

| Meeting Date | Status | Summary of Action | Responsible Director | Commentary | Next Steps | Target Completion Date |
|-----------------|--------|---|--|---|---|------------------------------|
| 03/05/2017 | Amber | NHS Digital Social Care – update briefing: to be bought back to the September Board meeting for a further update, with particular reference to the broader context of Integrated Care, within an holistic approach. | Director of Provider Support and Integration | Update 31 May 2017: Guidance sought from relevant Non-Executive Director on framing. Discussion with NHS England National Director: Operations and Information on link to Accountable Care Systems. | Update 31 May 2017: Board development day agenda item scheduled for further discussion. Work with NHS England and other partners to understand full remit of Integrated Care requirements. Opportunity for testing at National Social Care Advisory Group. | September 2017 |

Official



Board Meeting – Private Session

| Title of paper: | Cyber Attack Briefing | |
|---|---|--|
| Board meeting date: | 31 May 2017 | |
| Agenda item no: | NHSD 17 02 04 (P2) a | |
| Paper presented by: | Rob Shaw, Interim CEO | |
| Paper prepared by: | Sean Walsh, Director, Operations and Assurance Services & Systems & Service Delivery | |
| Paper approved by: (Sponsor Director) | Rob Shaw, Interim CEO | |
| Purpose of the item: | Verbal update to brief the Board on the NHS Digital response to the May Cyber Attack. | |
| Additional Documents and or Supporting Information: | N/A | |
| Please specify the key risks and issues: | Briefing only | |
| Patient/public interest: | N/A | |
| Supplementary papers: | N/A | |
| Actions required by the Board: | To note the briefing and planned next steps. | |



Board Meeting – Public Session

| Title of paper: | 2016-17 Annual Report and Accounts |
|--|---|
| | |
| Board meeting date: | 31 May 2017 |
| | |
| Agenda item no: | NHSD 17 02 04 a |
| | |
| Paper presented by: | Carl Vincent, Director of Finance and Corporate Service |
| Daner propored by | Stanban Loothlay Danuty Director of Finance |
| Paper prepared by: | Stephen Leathley, Deputy Director of Finance – Financial Accounts |
| Paper approved by: (Sponsor Director) | Carl Vincent, Director of Finance and Corporate Service |
| · apor approved by: (eponeon birector) | can vincerit, birector of r maries and corporate corvice |
| Purpose of the paper: | To approve the 2016-17 Annual Report and Accounts |
| | |
| Additional Documents and or Supporting | 2016-17 Annual Report and Accounts |
| Information: | |
| Please specify the key risks and issues: | Satisfactory completion of the National Audit Office |
| | review |
| Patient/public interest: | Statutory document – may be some press and public interest. |
| | |
| Supplementary papers: | None |
| Actions required by the Doord | To approve the 2016 17 approal Papert and Associate |
| Actions required by the Board: | To approve the 2016-17 annual Report and Accounts and provide the Accounting Officer (Interim CEO) with |
| | approval to make minor changes and sign on behalf of |
| | NHS Digital |

Official



2016-17 Annual Report and Accounts

Published 26 May 2017

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Executive Summary

The purpose of this briefing paper is to:

- Enable the Board to approve the 2016-17 Annual Report and Accounts
- To recommend delegation of further minor changes to Accounting Officer

Background

The Annual Report and Accounts presented reflect the latest known position including the NAO observations made to date. We still need to undertake a final thorough drafting review to ensure grammatical presentation and numerical accuracy, although we do not expect there to be significant redrafting. We are also aware that the NAO have not completed all their internal reviews. We are aware of a number of minor changes to be made to structure including:

- Page number references to be checked
- The numbers in the accounts have negatives in red, need to be changed to black
- The para called "Preparation of the Accounts" needs to be relocated as part of the Finance section.
- Photos for directors

The content of the Annual Report and Accounts is largely governed by various guidance including HM Treasury's Financial Reporting Manual, the Department of Health Group Accounting Manual, the "Green Book" and various other guidance and statutory notices. This sets the basic content framework against which we are able to tailor to our specific organisation and reader.

We have made significant progress from last year in terms of the year end accounts process having arrived at this stage a full week ahead of last years' equivalent Board (6th June 2016). We believe the audit has been undertaken relatively smoothly compared to previous years, although some work is still to be completed.

The principle areas affecting the audit included:

- The transfer of the former Department of Health (DH) programmes and assets on the 1st December 2016, in particular
 - evidencing the existence of the asset transfers, justifying their cost and incorporating into the NHS Digital accounting policies. A number of adjustments have been made, including a reassessment of the revaluation value. The NAO audit ultimately supported the due diligence work undertaken
 - agreeing with the Department of Health the accounting entries in respect of inter group transactions. Some of these were agreed late, and there is still a further entry to put through once the NAO have also confirmed their agreement, which will not materially change the substance of the Accounts presented
 - that appropriate disclosures have been made within the accounts to reflect the in-year transactions
- Our provider of transactional services, SBS, had a "limited" rating for their ISAE3402 report of payroll services undertaken by PwC. We were able to mitigate this by

demonstrating that we had sufficient alternative internal controls on the key areas. The equivalent report on financial services was satisfactory.

- Despite our efforts to avoid this, there were a large number of transactions close to the year end - both invoices to customers, and receipt of goods and suppliers from suppliers, which inevitable created some cut off challenges. Several errors were identified as part of the audit.
- Final decision as to whether prior year comparatives in the Statement of Financial Position are restated for prepayments over one year, materiality being considered with the National Audit Office.

Subject to the NAO final review, we believe the Report and Accounts represent a fair reflection of the position.

Recommendation

To approve the Annual Report and Accounts with a caveat that the Accounting Officer is mandated to undertake minor amendments as required.

Implications

Strategy Implications

There are no strategy implications. The Annual Report and Accounts is a statutory requirement.

Financial Implications

There are no financial implications.

Stakeholder Implications

All content has been drafted in consideration of the likely readers of the report. We have shared an earlier draft with the Department of Health.

Handling

The production of the content has been a joint effort from various teams, primarily Finance and the Communications team.

The approximate timetable to complete the remaining process is as follows:

- ARC approve the Accounts to the Board subject to any particular caveats (31st May)
- Board approve and direct the Accounting Officer to make minor changes to content (31st May)
- Draft accounts to DH (6th June)
- We have made considerable strides on the recording of fixed assets, and believe the
 controls are substantially robust and the risk of material misstatement is low. However
 we all acknowledge that the processes are inefficient and disproportionately complex.
 This remains a challenging area for ourselves and the NAO, both to manage and to

- ensure that a full and complete audit trail exists. We have further work planned to address this area.
- NAO complete their review process and we finalise any adjustments (by last week of June – to be confirmed)
- Agree a date for NAO signature (probably last week of June/first week of July)
- Produce a final version for Accounting Officer signature with the letter of representation. Submit to NAO (last week of June)
- Signed by NAO enter final dates / auto signatures and lay to Parliament, print put on website etc. (mid-July latest).

Risks and Issues

The National Audit Office audit is not yet complete and they have not yet had the opportunity to undertake a full review of the whole document. There may thus be some amendments to make.

Corporate Governance and Compliance

It is best practice that the NHS Digital Board approve the Annual Report to provide assurance to the Accounting Officer that he is able to sign them on NHS Digital's behalf.

Management Responsibility

Carl Vincent, Director of Finance and Corporate Services. Rob Shaw, Interim Chief Executive (and Accounting Officer).

Actions Required of the Board

To approve the 2016-17 annual Report and Accounts and provide the Accounting Officer (Interim CEO) with approval to make minor changes and sign on behalf of NHS Digital.



Board Meeting – Public Session

| Title of paper: | Establishment of Information Systems for NHS Services: Emergency Care Data Set Collection Directions 2017 | | |
|---|--|--|--|
| Board meeting date: | 31 May 2017 | | |
| Agenda item no: | NHSD 17 02 04 b i | | |
| Paper presented by: | Prof. Martin Severs Medical Director and Caldicott Guardian | | |
| Paper prepared by: | Sam Sibeko, Lead Business Analyst, Domain H Data Content | | |
| Paper approved by: (Sponsor Director) | David Hughes, Director of Information and Analytics | | |
| Purpose of the paper: | Acceptance of NHS England ECDS Directions | | |
| Additional Documents and or Supporting Information: | ECDS Directions HSCIC Issue 1 Draft v0.2 Annex A – Specification Annex B – Technical Output Specification | | |
| Please specify the key risks and issues: | The ECDS standard was published on the 19 th April 2017, with an outstanding Condition raised by SCCI that Directions were required to provide the legal basis for NHS Digital to collect and process the data. | | |
| Patient/public interest: | Indirect public interest supporting improved quality and accuracy of emergency care data | | |
| Supplementary papers: | No supplementary Papers | | |
| Actions required by the Board: | Acceptance of Directions | | |

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Establishment of Informatics Systems for NHS Services: Emergency Care Data Set Collection Directions 2017

Published 31 May 2017

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Executive Summary

Direction has been received from NHS England to support the Emergency Care Data Set. Implementing ECDS will facilitate better and timelier access to data on Emergency Department activity. The Direction covers the transmission of ECDS data to NHS Digital and the subsequent dissemination of the data.

Initially the sponsor for the ECDS Impact Assessment was DH. As the project has moved forward into the delivery phase for ECDS, sponsorship of the Direction has transferred to NHS England.

The Board is asked to consider and accept the Direction.

Background

Commissioning Data Set (CDS) Type 010 was developed in the late 1970s. At that time the work of A&E was largely minor injuries and occasional major trauma and CDS Type 010 was appropriate for measuring this work at that time. In the last 40 years there has been a sustained increase in the volume, scope and complexity of Emergency Care. The main factors driving the change in provision and delivery of Emergency Care include:

- The changing health needs of the population such as an ageing population and multiple comorbidities;
- Changes in access to alternative healthcare services;
- Changes in the way that the population choose to access services and their expectations of the care that they receive.

CDS 010 has not evolved to keep pace with these changes and this has resulted in an 'information gap' in the data collected from A&E. The information gap has reached such an extent that in 2013, the Commons Health Select Committee, when reviewing Urgent and Emergency Care, commented that the system was 'Flying Blind'.

NHS Digital has been commissioned to deliver the capability to collect and disseminate the Emergency Care Data Set (ECDS) by the ECDS project board, chaired by Professor Jonathan Benger, National Clinical Director for Urgent Care at NHS England.

The ECDS work, to date:

- facilitated the widespread agreement of the data set changes required, defining the data items to be collected, in partnership with the Royal College of Emergency Medicine (RCEM) and other bodies;
- proposed updating the currently mandated Accident and Emergency data flow within CDS 010, introducing a new CDS Type 011 ECDS which will eventually replace CDS 010:
- has received SCCI assurance with Conditions (dependent on acceptance of the Direction) of the ECDS Standard (SCCI0092-2062, CDS6.2.1, Amendment (Amd) 17/2015) to support the collection of patient emergency care data.

A meeting with key stakeholders chaired by DH (David Williams) on 21 October 2016 confirmed support for the implementation of ECDS and asked that NHS Digital begin implementation. This approach has the support of NHS Digital Information and Analytics senior management, Domain H SRO Tim Donohoe, NHS England CCIO Prof. Keith McNeil and NHS England CIO Will Smart.

Recommendation

Accept the Directions in order to facilitate the legal basis for collecting ECDS from relevant providers.

The data will flow into The Secondary Uses Service (SUS), with the very first "early adopter" sites coming on-line from early August 2017.

Implications

Strategy Implications

The ECDS aligns most closely with Paperless 2020 domain H: 'Data Outcomes for Research and Oversight' and also the work of the Urgent and Emergency Care Review within NHS England.

Unplanned care is one of the top priorities for the health and care system. The scope of unplanned care includes all unplanned care across the NHS including Ambulance, NHS111 and type 1,2,3,4 emergency care settings.

Financial Implications

Funding for the ECDS has been aligned with Paperless 2020 – Strategic Data Content (Domain H) and specifically Programme 26: Data Content and New Data Collections. ECDS is part of the Investment Justification for Programme 26 with approval anticipated during Q1 17/18.

Stakeholder Implications

Key stakeholders include NHS England, the Department of Health and the Royal College of Emergency Medicine as initiators of the project. NHS Digital is acting in the capacity of a delivery partner.

There is strong support for the new data set from Emergency Care clinicians across the service, and care has been taken to ensure good engagement at trust level. The Royal College of Emergency Medicine has played a major part in this.

If the Direction is delayed then there will be an impact on the ability for ECDS to collect live data as this is a key Condition stipulated by SCCI as part of standard assurance.

Handling

The potential changes to CDS 010 have been and continue to be communicated through stakeholder engagement by the Royal College of Emergency Medicine, NHS Digital, NHS England and SCCI. Previous versions of the ECDS have been widely consulted on, and the ECDS team is proactively engaging with internal and external parties that may be affected by this change. There is no anticipated media or public engagement beyond normal legal obligations.

Risks and Issues

There are no anticipated risks associated with doing this work appropriately and within the legal and governance frameworks within NHS Digital. There are potential risks associated with delay:

- If the Direction is not accepted then NHS Digital cannot legally collect the data;
- The key project deliverable will not be met, causing damage to the reputation of NHS Digital amongst key stakeholders;
- Data Co-ordination Board will have to retract the Information Standard Notice (ISN) and collection of A&E data will continue under CDS 010 (A&E).

Corporate Governance and Compliance

This project follows the usual corporate governance protocols as part of Programme 26 (Data Content and New Data Collections). Programme 26 highlight reporting contains all KPIs for this data set implementation and this is available to the Board in the usual manner.

Management Responsibility

Peter Sherratt is the Programme Manager with day to day responsibility for the ECDS work package. Jago Taylor is the Programme Head responsible for ECDS, with Jackie Shears providing director level oversight. Prof. David Hughes is the EMT Director with accountability for this work.

Actions Required of the Board

Accept the Directions.

DIRECTIONS

NATIONAL HEALTH SERVICE, ENGLAND

The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Emergency Care Data Set Collection) Directions 2017

The National Health Service Commissioning Board gives the following Directions to the Health and Social Care Information Centre in exercise of the powers conferred by sections 254(1), (3) and (6) of the Health and Social Care Act 2012.

In accordance with section 254(5) of the Health and Social Care Act 2012, the National Health Service Commissioning Board has consulted the Health and Social Care Information Centre before giving these Directions¹.

Citation, commencement and interpretation

1. These Directions may be cited as The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Emergency Care Data Set Collection) Directions 2017 and shall come into force on [date].

2. In these Directions-

"The 2012 Act" means the Health and Social Care Act 2012²;

"The Board" means the National Health Service Commissioning Board³;

"HSCIC" means the Health and Social Care Information Centre⁴;

¹ S.I. 2013/259

 $^{^{2}}$ 2012 c7

³ The National Health Service Commissioning Board was established by section 1H of the National Health Service Act 2006 (2006 c 41.), and operates as NHS England.

⁴ The Health and Social Care Information Centre is a body corporate established under section 252(1) of the Health and Social Care Act 2012

"Relevant means Accident and Emergency Department; Organisation"

"Specification" means the Commissioning Data Set v6.2.1

Introduction of CDS Type 011 Emergency Care Data Set

version 1.0 (Document Reference: SCCI0092-2062,

CDS6.2.1, Amd 17/2015) issued on 19/04/2017 and annexed to these Directions at Annex A or any subsequent amended version of the same document approved by the Board which

supersedes version 1.0;

"Technical Output Specification" means the CDS Type 011 - ECDS v1.0 Technical

Specification version 1.0 dated 19/04/2017 and annexed to these Directions at Annex B or any subsequent amended version of the same document approved by the Board which

supersedes version 1.0

Establishing and Operating the Emergency Care Data Set Collection Information System

- 3. -(1) Pursuant to its powers under sections 254(1) and 254(6) of the 2012 Act, the Board directs the HSCIC to establish and operate a system for the collection of the information described in sub-paragraph (2) from Relevant Organisations, such system to be known as "the Emergency Care Data Set Collection Information System".
 - (2) The information referred to in sub-paragraph (1) is set out in the Technical Output Specification.
 - (3) The Board directs HSCIC to carry out the activities described in sub-paragraph (1) in accordance with the Specification and generally in such a way as to enable and facilitate the purposes that are described in the Specification.

S254(3) - Requirement for these Directions

4. In accordance with section 254(3) of the 2012 Act, the Board confirms that it is necessary or expedient for it to have the information which will be obtained through the HSCIC complying with these Directions in relation to the Board's functions in connection with the provision of NHS Services.

Fees and Accounts

5. Pursuant to sub-section 254(7) of the 2012 Act, HSCIC is entitled to charge a reasonable fee in respect of the cost of HSCIC complying with these Directions.

6. The HSCIC must keep proper accounts, and proper records in relation to the accounts, in connection with the Emergency Care Data Set Collection Information System.

Review of these Directions

7. These Directions will be reviewed by the Board when the Specification or Technical Output Specification are amended. This review will include consultation with the HSCIC as required by sub-section 254(5) of the 2012 Act.

Signed by authority of the NHS Commissioning Board

Sir Bruce Keogh Caldicott Guardian

[INSERT DATE]

Annex A – Specification

Annex A – Technical Output Specification

ECDS Technical
Output Spec v6.2.xls



| Document filename: | Introduction of CDS Type 011 – Emergency Care Data Set - Requirements Specification | | | |
|---------------------|---|--------------------------------------|------------|--|
| Project / Programme | ECDS Impact Assessment Team | Project | ECDS | |
| Document Reference | SCCI0092-2062, CDS6.2.1, Amd 17/2 | SCCI0092-2062, CDS6.2.1, Amd 17/2015 | | |
| Project Manager | Aaron Haile | Status | Final | |
| Owner | Aaron Haile | Version | 1.0 | |
| Author | Sam Sibeko | Version issue date | 19/04/2017 | |

Commissioning Data Set v6.2.1

Introduction of CDS Type 011 Emergency Care Data Set

Requirements Specification

Document management Revision History

| Version | Date | Summary of Changes |
|---------|------------|---|
| 0.1 | 28/09/2016 | First draft for comment to include ECDS |
| 0.2 | 04/10/2016 | SCCI and NHS Digital Rebranding |
| 0.3 | 10/10/2016 | Confirmation of new CDS Type 011 Emergency Care Dataset |
| 0.4 | 01/11/2016 | ECDS requirements included |
| 0.5 | 04/11/2016 | Additional review |
| 0.6 | 09/11/2016 | Further review |
| 0.7 | 09/11/2016 | Further review |
| 0.8 | 17/11/2016 | Comments addressed following SCCI Review |
| 0.9 | 09/12/2016 | Comments addressed following 6/12/2016 ISAS Review |
| 0.10 | 13/12/2016 | Additional comments following ISAS Review |
| 0.11 | 16/01/2017 | Further comments addressed following ISAS Review |
| 0.12 | 19/01/2017 | Developer review and comment prior to Advanced Notification publication |
| 0.13 | 23/01/2017 | Final review prior to Advance Notification |
| 0.14 | 13/02/2017 | Additional review |
| 0.15 | 14/02/2017 | Final review |
| 0.16 | 23/02/2017 | Update following comments from SCCI Development (AH) |
| 0.17 | 23/02/2017 | Final update following comments from SCCI Development (SS) |
| 0.18 | 30/03/2017 | Final SCCI comments |
| 0.19 | 04/05/2017 | Development team review |
| 0.20 | 06/04/2017 | Inclusion of data flow |
| 0.21 | 12/04/2017 | Updated following SCCI final review feedback |
| 1.0 | 19/04/2017 | Publication copy |

Reviewers

This document must be reviewed by the following people:

| Reviewer name | Title / Responsibility | Date | Version |
|-----------------|---|------------|---------|
| Aaron Haile | RCEM ECDS Project Manager | 06/05/2017 | 0.20 |
| Tom Hughes | ECDS Clinical Lead | 06/05/2017 | 0.20 |
| Jonathan Benger | National Clinical Lead Urgent Care, NHS England/ SRO ECDS Project | 19/01/2016 | 0.12 |
| Peter Sherratt | NHS Digital Programme Manager | 06/05/2017 | 0.20 |

Approved by

This document must be approved by the following people:

| Reviewer name | Title / Responsibility | Date | Version |
|----------------|-------------------------------|------------|---------|
| Aaron Haile | RCEM ECDS Project Manager | 04/05/2017 | 0.20 |
| Peter Sherratt | NHS Digital Programme Manager | 04/05/2017 | 0.20 |



NHS England has approved this information standard (SCCI0092-2062) for publication under section 250 of the Health and Social Care Act 2012.

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Standardisation Committee for Care Information (SCCI), a sub-group of the National Information Board.

This information standard comprises the following documents:

- Requirements Specification
- Change Specification
- Implementation Guidance
- Technical Output Specification.

An Information Standards Notice (SCCI0092-2062 Amd 17/2015) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled copies of these documents can be found on the NHS Digital website. Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of publication: 19 April 2017



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Glossary of Terms

| Term | Abbreviation | Description |
|---|--------------|---|
| Accident and Emergency | A&E | Also referred to as Accident and Emergency Departments. These may be either major units, providing a 24 hour service seven days a week to which the great majority of emergency ambulance cases are taken, or small units commonly called casualty departments, in which services are often only available for limited hours and which may not deal with emergency ambulance cases |
| Accident and Emergency Department Type | | Type 1: Emergency departments are a consultant led 24 hour service with full resuscitation facilities and designated accommodation for the reception of accident and emergency patients Type 2: Consultant led mono specialty accident and emergency service (e.g. ophthalmology, dental) with designated accommodation for the reception of patients Type 3: Other type of A&E/minor injury activity with designated accommodation for the reception of accident and emergency patients. The department may be doctor led or nurse led and treats at least minor injuries and illnesses and can be routinely accessed without appointment. A service mainly or entirely appointment based (for example a GP Practice or Out-Patient Clinic) is excluded even though it may treat a number of patients with minor illness or injury. Excludes NHS Walk-In Centre's, but will include Urgent Care Centre's Type 4: NHS Walk In Centre's http://www.datadictionary.nhs.uk/data_dictionary/attributes/a/acc/acci |
| Commissioning Data Sets | CDS | The Commissioning Data Set is the basic structure used for the submission of commissioning data to the Secondary Uses Service. It is currently designed to be capable of individually conveying many different Commissioning Data Set structures encompassing Accident and Emergency Attendances, Outpatient Attendances, Future Attendances, Admitted Patient Care and Elective Admission List data etc. CDS v6.2 includes CDS Type 010 A&E CDS v6.2.1 supports the introduction of CDS Type 011 - ECDS, which will ultimately replace CDS Type 010 |
| Electronic Data Transfer | EDT | The electronic transfer method (EDT) which is currently used to transfer batch data securely to Secondary Uses Service (SUS). |
| Emergency Department Information System | EDIS | An electronic health record system used to manage data in support of Emergency Department patient care and operations. |
| Hospital Episode Statistics | HES | National statistical data warehouse for England of the care provided by NHS hospitals and for NHS hospital patients treated elsewhere. HES is the data source for a wide range of healthcare analysis for the NHS, Government and many other organisations and individuals |
| Messaging Exchange for Social Care and Health | MESH | An upgraded message exchange service to transfer batch data securely to Secondary Uses Service (SUS) which will replace EDT. |
| National Tariff | | A set of prices and rules to help providers of NHS care and |

| | T | |
|--|---|---|
| | | commissioners provide best value to their patients. https://www.gov.uk/government/publications/nhs-national-tariff-payment-system-201617 |
| Public Health England | I PHE I protect and improve the nation's health and wellbeing and redu | |
| Role Based Access Control | RBAC is the process through which a national set of job roles, activities and workgroups can be applied to grant users access to functionality and indirectly to data within NHS national (Spine) services. https://digital.nhs.uk/article/311/Registration-Authorities-and-Smartcards | |
| Referral to Treatment | RTT | Waiting Times measurement policy for consultant led and Allied Health Professional activity, which monitors the waiting time between the referral of a patient to a service, to the time they receive first definitive treatment for their condition |
| Standardisation Committee for Care Information | SCCI | The Committee that oversees the development, assurance and approval of information standards, data collections and data extractions |
| Secondary Uses Service | sus | Single source of comprehensive data to enable a range of reporting and analysis managed by NHS Digital. SUS supports the NHS and its partners in the areas of planning, commissioning, management, research, audit, public health and a number of national initiatives, such as National Tariff and the reimbursement mechanism for acute care. |
| Treatment Function Code | TFC | A division of clinical work based on Main Specialty, but incorporating approved sub-specialties and treatment interests used by lead care professionals including but not limited to Consultants |
| Extensible Markup Language | XML | XML is a markup language designed to carry data, not to display data. It is the CDS XML schemas which carry data in the Commissioning Data Set format between health care providers and the Secondary Uses Services (SUS) |

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1 Purpose

The purpose of this document is to precisely define the introduction of Commissioning Data Set (CDS) Type 011 – Emergency Care Data Set (ECDS) which will replace the current CDS Type 010 A&E within the existing Commissioning Data Set v6.2, outlining what it is and how it should be implemented.

CDS is an existing, approved information standard with version CDS 6.2 currently operational across the health service, and will continue to be in use. This specification will focus upon the inclusion of the new CDS Type 011 within the existing CDS 6.2.

This specification and other supporting documentation such as the Change Specification and Implementation Guidance is intended to provide necessary information to support the following uses for different types of user:

- Existing users of CDS 6.2 and submitting CDS Type 010 A&E
- New users who will be specifically submitting CDS Type 011 ECDS

It is not the intention of this document to detail the existing requirements for CDS v6.2, but only those pertinent to the introduction of the new CDS Type 011 and associated CDS Type 011 XML schema.

1.1 Background

The Commissioning Data Sets (CDS v6.2) is the primary mechanism for the national reporting of secondary care activity which is either NHS funded, and/or provided by NHS Organisations.

Commissioning Data Sets are patient level data sets intended to deliver robust, comprehensive, nationally consistent and comparable person-based information on activity to support a variety of secondary use purposes (i.e. not for the direct care of the patient).

These include:

- Monitor and manage NHS service agreements
- Develop commissioning plans
- Support the Payment by Results processes
- Support NHS Comparators
- Monitor Health Improvement Programmes
- Underpin clinical governance
- Understand the health needs of the population

The Department of Health requires accurate data for the following types of patient activity:

- Accident and Emergency attendances (within CDS Type 010 A&E)
- Outpatient Appointments (including Did Not Attends)
- Admitted Patient Care (Hospital Admissions)
- Elective Admission Lists

This includes all secondary care activity of this nature undertaken by NHS Hospital Providers, including patients receiving private treatment, and NHS patients treated electively in the independent sector (including Any Qualified Provider) and overseas.

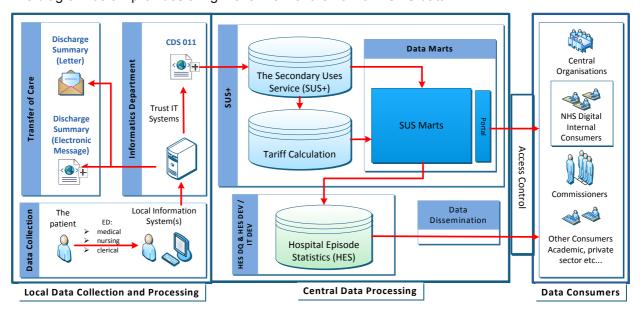
Commissioning Data Sets are securely submitted to the Secondary Uses Service (SUS) in XML format, and form the basis of the Hospital Episode Statistics (HES) data set.

The primary aim of CDS Type 010 was to support a variety of secondary use purposes. The Emergency Care Data Set (CDS v.6.2.1), which will replace the existing CDS Type 010 A&E, is closely aligned with the care and management of the patient, and the information collected will be dual-purpose, including; for the existing range of secondary uses and in some instances for the direct care of the individual (primary uses).

In ECDS (CDS v6.2.1) the developers have sought to align data collection for primary and secondary uses wherever possible as this ensures data quality that benefits patients, staff, commissioners, researchers and the wider NHS.

The ECDS does not intend to alter clinical practice, rather to streamline already existing practices and to introduce consistency.

The diagram below provides a high level view of the flow of ECDS data:



The relative costs and complexity of delivering emergency care have changed over recent years, due to:

- External factors including: increasing demand; access to alternative sources of care; patient preferences; perceived value and consistency of service.
- Internal factors including: pressure to avoid admitting patients unnecessarily; the front-loading
 of testing and decision making, which is now performed in Accident and Emergency
 Departments; increased subspecialisation of hospital practice with a reduced number of
 'generalist' hospital doctors.

The current CDS Data Set Type 010 - Accident and Emergency Commissioning Data Set has not evolved to keep pace with the changes described above, resulting in an 'information gap' in the data collected from Accident and Emergency Departments.

The Emergency Care Data Set project team, which consists of representatives from the Royal College of Emergency Medicine NHS England and NHS Digital have identified the following issues in the current data:

- A need for accurate and relevant information regarding patients presenting to Accident and Emergency Departments in England, and the quality of care delivered. The current CDS Data Set Type 010 A&E does not capture all the information relating to a patient's attendance at an Accident and Emergency Department, resulting in gaps in the record of the patient journey such as:
 - There is no accurate record of the source of the patient's referral to the Accident and Emergency Department.
 - The patient's chief complaint (the primary clinical reason for the attendance) is not captured consistently or submitted centrally.
 - There is no detailed information capturing what happens to patients during their Accident and Emergency attendance, e.g. when patients are referred to inpatient services for assessment or admission.

- Where patients go after their treatment in the Accident and Emergency Department is complete.
- The complexity and acuity of Accident and Emergency department patients, and the
 value added by Accident and Emergency departments, are not consistently described or
 understood through the data currently collected. The current Accident and Emergency
 Department data provides a simplistic view of the attendance focused on treatment and
 investigations, and what time patients arrive and leave. To understand each attendance in
 greater detail additional information is required, particularly regarding the acuity and
 complexity of the patient.
- There is a need for better diagnostic data to ensure an enhanced understanding of patient need, activity and outcomes. Nationally, more than half of all Accident and Emergency Department attendances have no meaningful diagnosis, so there is no demonstrable value to the attendance.
- There is a need for consistent data that facilitate an understanding of how patients use
 Accident and Emergency Departments, other urgent care services, and overall patient flow
 in the urgent care system. Currently it is not possible to understand at what point in the
 patient journey contact has been made with different service types, which would help:
 - understand how patients access care
 - o support effective service planning and organisation.
- Greater information is required to **understand who is doing what and when within** Accident and Emergency Departments. This will help ensure that patients receive safe and effective care when they need it.
- There is a need to bring together disparate local and national initiatives aimed at improving urgent care services to encourage consistency, and also to describe the work done across a range of providers in a common language.
- There is a need to understand Accident and Emergency Department attendances relating to injury and other modifiable factors to identify patterns that may be amenable to targeted interventions that will improve public health. Currently the data collected regarding injury related attendances are insufficient, which means we have no real understanding of the number of people attending Accident and Emergency Departments as a result of injury. The result is a lack of targeted prevention strategies that could reduce the number of Accident and Emergency Department attendances and improve the lives of patients.
- There is a need to ensure that data on patient illnesses presenting to Accident and
 Emergency Departments is consistently monitored to provide public health awareness of
 the current situation, as well as early warning of emerging population health threats. Public
 Health England (PHE) has an Emergency Department Syndromic Surveillance System
 (EDSSS). Currently this system only has access to data from 30 Accident and Emergency
 Departments in England, and thus does not represent the whole picture. The introduction of
 ECDS will support the capability to improve the information available to EDSSS.

Commissioning Data Set Data Flow Definitions

The Commissioning Data Set is the basic structure used for the submission of commissioning data to the Secondary Uses Service (SUS) and is designed to be capable of individually conveying many different Commissioning Data Set structures encompassing Accident and Emergency Attendances, Outpatient Attendances, Future Attendances, Admitted Patient Care and Elective Admission List data

Commissioning Data Set Messages have been defined in specific components known as a CDS type. Each Commissioning Data Set Type as configured into the Commissioning Data Set Message carries only one specific Commissioning Data Set Type, an example being the Finished Consultant Episode Commissioning Data Set Type.

CDS v6.2.1 Type 011 - ECDS will eventually replace the current CDS Type 010 A&E. CDS Type 010 A&E will cease to be supported from April 2019.

Full details of the current baseline Commissioning Data Sets (CDS) including the specification for the CDS types outlined above, definitions and supporting guidance, XML schemas and submission rules are available from

http://www.datadictionary.nhs.uk/web_site_content/navigation/commissioning_data_sets_menu.asp

A provider will be required to continue submitting CDS Type 010 A&E, until they start submitting CDS Type 011 ECDS, please see the tables below.

Providers will not be expected to submit both CDS types simultaneously unless they implement across different department types in a phased approach e.g. Type 1 or 2 Departments from October 2017 and Type 3 or 4 Departments from October 2018. CDS Type 010 A&E will be withdrawn in April 2019

| CDS Type | CDS Title | CDS Description | Status | Minimum Frequency for Submission |
|---|----------------------------|---|-----------|--|
| Accident and Emergency Commissioning Data Set Type 010 A&E: | | | | |
| 010 | Accident and Emergency CDS | Contains details of all Accident and Emergency Attendances. | Mandatory | Monthly |

Or;

| CDS Type | CDS Title | CDS Description | Status | Minimum Frequency for Submission | |
|---|----------------------------|--|-----------|--|--|
| Accident and Emergency Commissioning Data Set Type 011 - ECDS | | | | | |
| 011 | Emergency Care Data Set | Contains details of all Accident and Emergency Attendances | Mandatory | Weekly/ Daily | |

Supporting CDS Types

The table below lists the Commissioning Data Set Interchange and Message Controls to support the national flow of CDS information. These headers and trailers help to specify the data items used for data handling and management within the Secondary Uses Service.

| CDS Type | CDS Title | CDS Description | Status | | | |
|------------|---|---|-----------|--|--|--|
| Commission | Commissioning Data Set Interchange and Message Controls | | | | | |
| 001 | CDS Interchange Header | Contains the metadata that describes the identity and addressing information for the Commissioning Data Set submission and signals the start of a CDS submission. | Mandatory | Must be submitted for every CDS Interchange | | |
| 002 | CDS Interchange Trailer | Contains the metadata that describes the identity and addressing information for the Commissioning Data Set submission and signals the end of a CDS submission. | Mandatory | Must be submitted for every CDS Interchange | | |
| 003 | CDS Message Header | Contains the metadata that describes the content of the message and signals the start of CDS message. | Mandatory | Must be submitted for every CDS Message | | |

| 004 | CDS Message Trailer | Contains the metadata that describes the content of the message and signals the end of CDS message. | Mandatory | Must be submitted for every CDS Message | | |
|------------|---|---|-----------|--|--|--|
| Commission | Commissioning Data Set Transaction Header Group | | | | | |
| 005B | CDS Transaction Header Group - Bulk Update Protocol | Contains the metadata that describe the controls for a bulk submission. | Mandatory | Must be submitted for every bulk CDS submission | | |

Or;

| 005N | CDS Transaction Header Group - Net Change Protocol | Contains the metadata that describe the controls for a net submission. | Mandatory | Must be submitted for every net CDS submission |
|------|--|--|-----------|---|
|------|--|--|-----------|---|

For further details on the mandated CDS data sets, please visit: http://www.datadictionary.nhs.uk/web_site_content/cds_supporting_information/commissioning_data_sets_overview.asp?shownav=1?query=%22Commissioning+Data+Sets%22&rank=62.5&shownav=1

The current CDS v6.2 uses the Electronic Data Transfer (EDT) mechanism to transport and submit XML files to the Secondary Uses Service. EDT will continue to be used for CDS Types including CDS Type 010, but for CDS v6.2.1 Type 011 - ECDS, the Messaging Exchange for Social Care and Health (MESH) will be used as the mechanism to transport and submit files to the Secondary Uses Service.

Further details about MESH is available from: https://digital.nhs.uk/messaging-exchange-social-care-health, and is detailed further within this document.

2 Overview

2.1 Summary

| Standard | | |
|-----------------|--|--|
| Standard Number | SCCI0092-2062 | |
| Standard Title | Commissioning Data Sets (CDS) | |
| Release | | |
| Release Number | Amd 17/2015 | |
| Release Title | Version 6.2.1: Addition of CDS Type 011 - ECDS | |
| | This change outlines the introduction of CDS v6.2.1 Data Set Type 011 Emergency Care Data Set, within the existing CDS v6.2. The submission of CDS v6.2.1 Type 011 - ECDS will apply to all Accident and Emergency Department Types, explicitly, Types 1, 2, 3 and 4. Providers must continue to submit all other CDS Types within the current | |
| | CDS v6.2, using the existing mechanisms to do so, but replace the current submission of CDS Type 010 A&E, with the new CDS v6.2.1 Type 011 - ECDS. | |
| | Once CDS v6.2.1 Type 011 - ECDS has been implemented by a particular site, CDS Type 010 A&E will no longer be accepted by SUS for that site. CDS v6.2 will continue to be supported via the Secondary Uses Service (SUS), and any changes to SUS will also be applicable for CDS v6.2.1 Type 011 - ECDS, as and when this occurs. | |
| Description | CDS v6.2.1 Type 011 - ECDS will initially be a weekly feed at least, from October 2017, moving ultimately to a daily feed from April 2018. When submitting CDS v6.2.1 Type 011 - ECDS on a daily basis, this should be automated from the Emergency Department Information System. | |
| Description | CDS v6.2.1 Type 011 - ECDS data set includes code sets represented as NHS Data Dictionary-defined National Codes or SNOMED CT concepts. | |
| | The changes outlined following this introduction will support the following areas: | |
| | Continued support for National Tariff | |
| | Accident and Emergency Clinical Quality Indicators (CQIs) | |
| | Mental Health | |
| | Improving Quality and Value of Hospital Data | |
| | Injury Surveillance | |
| | Changes to support local analysis by providers and commissioners | |
| | Maintenance updates to ensure alignment with NHS Data Dictionary editorial policy and to address known issues | |
| | The current CDS Type 010 A&E data will be withdrawn from 1 st April 2019. | |
| Implementation | ED Types 1, 2, 3 and 4 MAY flow CDS Type 011 ECDS from 1 st August 2017 | |
| Completion Date | ED Types 1 and 2 MUST flow CDS Type 011 ECDS from 1 st October 2017 ED Types 3 and 4 MUST flow CDS Type 011 ECDS from 1 st October 2018 | |

2.2 Supporting Products

| Reference | Title |
|---------------|--------------------------------|
| SCCI0092-2062 | Change Specification |
| SCCI0092-2062 | Implementation Guidance |
| SCCI0092-2062 | Technical Output Specification |

2.3 Related Standards

| Ref# | Reference | Title |
|------|----------------------|--|
| 1 | ISB 0092 Amd 16/2010 | CDS Type 6.2 Information Standard |
| 2 | SCCI0034 Amd 35/2016 | SNOMED CT Information Standard |
| 3 | SCCI1605 Amd 8/2013 | Accessible Information Standard |
| 4 | ISB0149 | NHS Number |
| 5 | ISB0149-02 | NHS Number Standard for Secondary Care (England) |
| 6 | ISB 1588 Amd 11/2012 | A&E Clinical Quality Indicators (in development) |
| 7 | ISB 1596 Amd 31/2012 | Information Sharing to Tackle Violence (ISTV) |

2.4 Contacts

| Sponsor | | | |
|---------------------|-------------------------------------|--|--|
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| Maintenance Manager | Maintenance Manager | | |
| Name | ECDS Team | | |
| Organisation | NHS Digital | | |
| Email Address | ECDS@nhs.net | | |

3 Requirements

3.1 Overview

The 'CDS v6.2 Addition of CDS Type 011 – ECDS Change Specification', outlines the changes from the existing baseline CDS 6.2 Information Standard.

Providers which currently submit CDS v6.2 must continue to do so, but will need to discontinue submission of CDS Type 010 A&E and replace this with CDS v6.2.1 Type 011 - ECDS.

Therefore all current providers submitting CDS v6.2 will submit either:

- CDS v6.2 including CDS Type 010 A&E as they do currently, until their implementation of this standard, when they will then submit;
- CDS v6.2 excluding CDS Type 010 A&E, but in addition, the new CDS v6.2.1 Type 011 -ECDS

Providers who deliver urgent and emergency care services, but do not currently submit CDS v6.2 will need to ensure they submit:

CDS v6.2.1 Type 011 - ECDS

The table below outlines the expected changes for providers, based on their current CDS 6.2 submission status:

| Providers current CDS 6.2 Submission Status | Expected Change for Providers |
|---|--|
| Providers submitting CDS 6.2, within one file, including CDS Type 010, via EDT | Separate the CDS Type 010 elements from current CDS 6.2 file pack where submissions are made including all CDS Types within one file Continue to submit remaining CDS Types within CDS 6.2 via Electronic Data Transfer (EDT) Submit CDS Type 011, instead of CDS Type 010, via Message Exchange for Social Care and Health (MESH) |
| Providers submitting CDS 6.2, within separate files or independently of each other, including CDS Type 010, via EDT | Stop submitting CDS Type 010 as a separate file Continue to submit remaining CDS Types within CDS 6.2 via EDT Submit CDS Type 011, instead of CDS Type 010, via MESH |
| Providers only submitting CDS Type 010 via EDT | Stop submitting CDS Type 010 via EDT Submit CDS Type 011, instead of CDS Type 010, via MESH |
| Providers not required to submit CDS Type 010, but submit other CDS Types within CDS 6.2 | No change, continue to submit CDS Types (all others excluding CDS Type 010) via EDT |
| Accident and Emergency Departments that currently do not submit any CDS Types within CDS 6.2 | Submit CDS Type 011 via MESH |

Corresponding NHS Data Dictionary changes from CDS Type 010 A&E to CDS Type 011 will be available from:

http://www.datadictionary.nhs.uk/web_site_content/cds_supporting_information/commissioning_data _set_version_6-2_type_list.asp?shownav=1

3.2 Information Specification

All requirements in relation to the CDS Types within the CDS 6.2 Requirement Specification will remain as is, with the exception of CDS Type 010 A&E which will be replaced by the new requirements specific to the submission of CDS Type 011 ECDS.

| # | Requirement [1] | | |
|---|--|--|--|
| | Healthcare Providers | | |
| 1 | All providers of emergency care including Type 1, 2, 3 and 4 Accident and Emergency Department Types MAY submit the new CDS v6.2.1 Type 011 - ECDS to the Secondary Uses Service (SUS) from 1 st August 2017 on a weekly or daily basis. This will require all providers to ensure their suppliers of relevant clinical systems, patient administration systems and/or XML Middleware suppliers can incorporate the required changes in order to meet this capability. | | |
| 2 | Providers of emergency care specifically Types 1 and 2 Accident and Emergency Department Types MUST submit the new CDS v6.2.1 Type 011 - ECDS to the Secondary Uses Service (SUS) from 1 st October 2017 on a weekly basis at least. This will require all providers to ensure their suppliers of relevant clinical systems, patient administration systems and/ or XML Middleware suppliers can incorporate the required changes in order to meet this capability. | | |
| 3 | Providers of emergency care specifically Types 1 and 2 Accident and Emergency Department Types MUST submit the new CDS Type 011- ECDS to the Secondary Uses Service (SUS) from 1 st April 2018 on a daily basis. This will require all providers to ensure their suppliers of relevant clinical systems, patient administration systems and/ or XML Middleware suppliers can incorporate the required changes in order to meet this capability. | | |
| 4 | Providers of emergency care specifically Types 3 and 4 Accident and Emergency Department Types MUST submit the new CDS v6.2.1 Type 011 - ECDS to the Secondary Uses Service (SUS) from 1 st October 2018 on a daily basis. This will require all providers to ensure their suppliers of relevant clinical systems, patient administration systems and/ or XML Middleware suppliers can incorporate the required changes in order to meet this capability. | | |
| 5 | All providers of CDS v6.2.1 Type 011 - ECDS SHOULD automate their data submission processes to provide weekly and then daily data. This will require all providers to ensure their suppliers of relevant clinical systems, patient administration systems and/ or XML Middleware suppliers can incorporate the required changes in order to meet this capability. | | |
| 6 | All providers of CDS v6.2.1 Type 011 - ECDS SHOULD submit changes using the Data Set Net Change Protocol. This will require all providers to ensure their suppliers of relevant clinical systems, patient administration systems and/ or XML Middleware suppliers can incorporate the required changes in order to meet this capability. | | |

3.3 Conformance Criteria

This section describes the tests that can be measured to indicate that the information standard is being used correctly by an organisation (conformance criteria). These may be different depending upon the Emergency Care type.

^[1]https://www.ietf.org/rfc/rfc2119.txt

The conformance criteria outlined below are directly linked to the CQUIN Indicator Specification Information on CQUIN 2017/18 - 2018/19¹, Supporting Proactive and Safe Discharge.

Healthcare Providers

| # | Conformance Criteria | | | |
|---|---|--|--|--|
| 1 | By 30th June 2017 Accident and Emergency Department Type 1 and 2 providers to: have demonstrable and credible planning in place to make the required preparations (e.g. by upgrading IT systems and training staff) so that ECDS can be collected and returned from 1st October 2017. | | | |
| 2 | By 31st December 2017 Accident and Emergency Department Type 1 and 2 providers to: return data at least weekly AND; 95% of patients have both a valid Chief Complaint and a Diagnosis (unless that patient is streamed to another service) so that 95% of patients have a diagnosis. Chief Complaint shall be any value from the ECDS Chief Complaint code set (SNOMED CT). Diagnosis shall be any value from the ECDS Diagnosis code set (SNOMED CT). | | | |
| 3 | By 30th June 2018 Accident and Emergency Department Types 1 and 2 providers to: return data daily AND; 99% of patients have both a valid Chief Complaint and a Diagnosis (unless that patient is streamed to another service) so that 99% of patients have a diagnosis Chief complaint shall be any value from the ECDS Chief Complaint code set (SNOMED CT) Diagnosis shall be any value from the ECDS diagnosis code set (SNOMED CT), AND; 99% of patients have a measure of acuity recorded Acuity shall be any value from the ECDS acuity set. | | | |
| 4 | By 30 th September 2018 Accident and Emergency Department Types 1 and 2 providers to: • return data daily AND ; • 100% of patients have both a valid Chief Complaint and a Diagnosis (unless that patient is streamed to another service) so that 100% of patients have a diagnosis, AND ; • 100% of patients have a measure of acuity recorded, AND • 100% of patients record the discharging clinician (using the GMC/NMC/HCPC number). | | | |
| 5 | By 31 st December 2018 Accident and Emergency Department Types 1 and 2 providers to: Return data daily AND ; 100% of patients have both a valid Chief Complaint and a Diagnosis (unless that patient is streamed to another service) so that 100% of patients have a diagnosis, AND 100% of patients have a measure of acuity recorded, AND ; 100% of patients record the discharging clinician (using the GMC/NMC/HCPC number), AND | | | |

¹ https://www.england.nhs.uk/wp-content/uploads/2016/11/cquin-indicator-spec-04-11-16.docx

| | 100% of patients have the referral source recorded. (Referral source should be any value from the EDCS referral source set). |
|---|--|
| 6 | By 31st March 2019 Accident and Emergency Department Types 1 and 2 providers to: return data daily, AND; 100% of patients have both a valid Chief Complaint and a Diagnosis (unless that patient is streamed to another service) so that 100% of patients have a diagnosis, AND; 100% of patients have a measure of acuity recorded, AND; 100% of patients record the discharging clinician (using the GMC/NMC/HCPC |
| | number), AND; • 100% of patients have the referral source recorded, AND • 100% of patients have discharge status recorded. (Discharge status should be any value from the EDCS Discharge Status set). |
| 7 | By 1 st October 2018 all Type 3 and Type 4 Emergency Departments (including Urgent Care Centres) MUST be submitting CDS v6.2.1 Type 011 – ECDS. |

Conformance with the CDS Type 011 XML schema will be enforced through the CDS 6.2.1 schema and validation upon landing within Secondary Uses Service (SUS) of correct use of associated SNOMED CT code sets and other necessary validation rules including correct format/ length, enumerated national codes where applicable, and mandation of the fields (Mandatory, Required or Optional), all of which are published from: https://isd.hscic.gov.uk/trud3/user/guest/group/0/home.

All CDS v6.2.1 Type 011 - ECDS submissions will need to adhere to the restrictions enforced by the XML schema.

Upon translation any interchanges containing records that do not conform to the XML schema or other necessary validation rules, i.e. field length and format, will be rejected. In these cases a validation report will be provided to assist the sender in the identification and resolution of issues.

4 Concept of Operation

4.1 Data Users

4.1.1 Data Collectors and Providers

- Healthcare Professionals: will be responsible for capturing information as part of the ongoing care of the patient, i.e. for primary use purposes as they do currently.
- Administrative Staff: will be responsible for capturing clerical information such as demographics.
- If the trust use clinical coders to support the recording of clinical information from Emergency
 Departments coders must ensure that they collect information which is either specified in the
 CDS v6.2.1 Type 011 ECDS Technical Output Specification or that arrangements are put in
 place to map what they collect to the required CDS v6.2.1 Type 011 ECDS SNOMED CT
 subsets.
- XML/Middleware Suppliers: will continue to support CDS v6.2 and will develop tools and/or services to process submissions in conformant XML for submission to SUS, specifically for CDS v6.2.1 Type 011 - ECDS and other CDS types as necessary.
- Suppliers of Patient Administration (PAS) and Emergency Department Information Systems:
 will develop systems ensuring that ECDS data items can be captured electronically and output the required CDS 6.2 Type 011 ECDS submission.
- Trust informatics staff: will be responsible for the collation of ECDS information and the submission of this via MESH (to submit CDS v6.2.1 Type 011 - ECDS) to SUS via XML Middleware Suppliers or in-house products licensed from XML/Middleware Suppliers. This will include ensuring completeness and addressing any data quality issues identified with the information within the data set.

4.1.2 Secondary Users

Information generated through implementation of this standard will continue to be analysed and used by the existing users of CDS v6.2 data.

The data collected via CDS Type 011 – ECDS will enable users to analyse and compare more granular, higher quality data for reporting, audit, research and for service delivery. It will provide vital information which will support the following:

- The provision of an accurate and relevant record of why patients attend emergency departments in England, the quality of care that they receive and what happens to them after the attendance. This in turn will enable a greater understanding of patient outcomes and the value added by emergency care services.
- A greater understanding of the complexity of patients who attend emergency departments and the services required to treat them appropriately.
- A better understanding of how people access urgent and emergency care services
 particularly in relation to overall patient flow in the urgent care system.
- More information to help understand who is doing what and where, with the aim of achieving more effective and efficient resource deployment across urgent and emergency care services.
- A national picture of the number of patients attending emergency departments as a result of injury which will support the development of targeted prevention strategies which would in turn reduce the number of emergency department attendances and improve the lives of patients.
- Public Health syndromic surveillance via the Emergency Department Syndromic Surveillance System (EDSSS) which collects information on patient illnesses presenting to Emergency Departments and is consistently monitored to provide public health situational awareness, as well as early warning of emerging population health threats.

Use of SNOMED CT 4.2

4.2.1 What is SNOMED CT

SNOMED CT is an international clinical terminology that provides the vocabulary for systems to support the direct management of the health and care of an individual. The vocabulary consists of machine readable codes for clinical concepts along with human readable descriptions. It is provided via a set of data files that need to be incorporated in electronic applications.

SNOMED CT provides the content for health and care related data items in software applications to enable representation of clinically relevant information consistently and reliably in a way that is processable by the computer system. This enables applications to exchange processable data across the health and care environment; provide clinical decision support tools and undertake enhanced analytics to support effective delivery of high quality healthcare to individual people and populations.

SNOMED CT is managed and maintained internationally by SNOMED International² and in the UK by the UK Terminology Centre (UKTC)³.

SNOMED CT is specified as the single terminology to be used across the health system in 'Personalised Health and Care 2020: A Framework for Action'.

4.2.2 SNOMED CT and Paperless 2020

As the NHS moves towards being paperless by 2020 it is critical that all systems share the same clinical vocabulary.

Providers of health and care are required to be paperless at the point of care before 2020: such systems must incorporate SNOMED CT as the clinical terminology to provide the content for structured data within scope of the terminology. The SNOMED CT standard was approved by the Information Standards Board in 2011; providers implementing electronic health and care related systems must ensure those systems are SNOMED CT enabled at the point of implementation. The following is a summary of conformance dates for appropriate implementation of SNOMED CT that all providers and standards developers must be aware of when planning new, or making changes to existing IT systems or relevant operational information standards:

- Systems used by, or communicating coded clinical data to, General Practice service providers must use SNOMED CT as the clinical terminology within the system before 1 April 2018. SNOMED CT must be utilised in place of the Read codes before 1 April 2018.
- Systems used within Secondary Care, Acute Care, Mental Health Services, Community Services, Dentistry and Optometry - for the direct management of care of an individual - must use SNOMED CT as the clinical terminology standard within all electronic patient level recording and communications before 1 April 2020.
- Systems used by all other providers of health related services where the flow of information for the direct management of patient care comes into the NHS must use SNOMED CT by 1 April 2020.

Further details in relation to the SNOMED CT Standard is available from: http://content.digital.nhs.uk/media/22807/0034352016reg-spec/pdf/0034352016reg-spec.pdf

In support of the use of SNOMED CT as outlined above, ECDS mandates the use of SNOMED CT. This will support adoption of SNOMED CT in line with Paperless 2020 and will help to properly capture and represent the full extent and granularity of Emergency Department activity, and therefore:

enable an accurate understanding of the cost and value of emergency care

² http://www.snomed.org/

³https://isd.hscic.gov.uk/trud3/user/guest/group/2/home

- facilitate improved healthcare commissioning
- improve the quality of patient care in England's Emergency Departments
- provide more effective delivery of healthcare strategy and policy

Further details of how SNOMED CT should be implemented to support ECDS are available from the ECDS User Guidance, available from: http://content.digital.nhs.uk/ECDS

4.3 Working Practices

Full guidance, including changes to working practices, is available in the CDS 6.2 Implementation Guidance available from: http://content.digital.nhs.uk/isce/publication/SCCI0092-2062

4.4 Information Governance

4.4.1 Background

The Chief Medical Officer of England commissioned the 'Department of Health - The Caldicott Committee Report on the Review of Patient-Identifiable Information' (Dec 1997)⁴ report, to review the transfer of patient-identifiable information from NHS organisations to other NHS and non-NHS organisations. The report included 16 recommendations and suggested six principles be applied to current flows and any flows proposed in the future. 'Information: To share or not to share? The Information Governance Review' (March 2013)⁵ followed. Known as Caldicott2, it was an independent review of information sharing by Dame Fiona Caldicott at the request of the Secretary of State for Health (March 2013). This review was to ensure an appropriate balance between protection of patient information, and its use and sharing. The Government subsequently accepted the recommendations from this report (September 2013), and the 'National Data Guardian for Health and Care Review of Data Security, Consent and Opt-Outs' (June 2016)⁶ outlines the recommendations of the new data security standards.

4.4.2 Overview

Commissioning Data Sets 6.2 currently has section 251⁷ approval from the Confidentiality Advisory Group to allow the flow and storage of patient identifiable data without patient consent within the national, strategic data warehouse as part of the SUS application.

As a result of the introduction of CDS 6.2.1 Type 011 - ECDS, a Direction will support the legal flow of the data. The Direction will not cover the entire CDS v6.2 as this will remain subject to the section 251 approval.

NHS Digital (the operating name for the Health and Social Care Information Centre) is exempt from having to apply for section 251 support from the Confidentiality Advisory Group (CAG) when mandated to collect data via directions from NHS England or the Department of Health and when acting as data controller. This is set out in sections 254 and 255 of the Health and Social Care Act 2012.

As a result explicit consent is not required; however, providers are required to inform patients that their information will be used to support secondary uses, and to act on any objections raised in line with their local policy.

If consent is sought and not given, then this information must not be shared and other legal routes for sharing are not available.

⁴ http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationspolicyandGuidance/DH_4068403

⁵https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/192572/2900774_InfoGovernance_accv2.pdf

⁶ https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/535024/data-security-review.PDF

⁷ http://www.legislation.gov.uk/ukpga/2006/41/section/251

Where a patient explicitly objects to their data being used for secondary purposes, the provider has the option of not flowing the records for this patient, as directed by their local Caldicott Guardian.

Further information on a patient's personal information choices can be found at NHS Digital's, "How we look after information"

A Data Provision Notice (DPN), produced by NHS Digital will be prepared confirming the structure and content of the collection and will be used to confirm NHS Digital's legal requirement to collect the data.

4.4.3 Type 1

If a patient does not want information that identifies them to be shared outside their GP practice, for purposes beyond their direct care then the patient can register a type 1 opt-out with their GP practice. This prevents their personal confidential information from being used other than in particular circumstances required by law, such as a public health emergency like an outbreak of a pandemic disease.

4.4.4 Type 2

NHS Digital collects information from a range of places where people receive care, such as hospitals and community services. If a patient does not want their personal confidential information to be shared outside of NHS Digital, for purposes other than direct care then the patient can register a type 2 opt-out with their GP practice.

A direction from the Secretary of State sets out the Department of Health policy as to how type 2 optouts must be applied and instructs NHS Digital to apply type 2 opt-outs.

However, Type 2 opt-outs do **not** apply in the following circumstance, where information is made available in anonymised form (so that individuals are not identified in the data). For example the data are either aggregate such as counts of information or it complies with the ICO's Anonymisation: managing data protection risk code of practice

Where a patient objects, the NHS has the option to flow the data without patient identifiers such as the NHS Number or not flow the data at all, as directed by the local Caldicott Guardian. This remains the same as currently applies to CDS Type 010 A&E.

4.4.5 Patient Identifiable Data Items

Commissioning Data Sets (CDS) include several patient identifiable items, e.g.

- NHS Number
- Local Patient Identifier
- Name
- Address
- Date of Birth
- Postcode of Usual Address.

CDS necessarily includes patient identifiers to support the linkage of activity to create a complete picture of the patient pathway, for example across A&E, Admitted Patient Care and Outpatient Appointments, and also to support commissioning of health services and remuneration for activity undertaken by providers.

4.4.6 Secondary Care Use

Any secondary care uses of data must be subject to compliance with the appropriate legal basis, and service providers should review their own information governance standards to ensure they are complying accordingly.

4.4.7 Direct Care

ECDS can be used for direct care, but the information for direct care would be shared before the data has become the ECDS.

4.5 Ethics

There are not considered to be any ethical issues associated with the move to CDS v6.2.1 Type 011 - ECDS. The Ethics and Confidentiality Committee (ECC) have not raised any concerns about the changes to CDS 6.2.

4.6 Clinical Safety

Commissioning Data Sets (CDS) utilise information already routinely collected in a variety of Trust systems and collated in a non-clinical setting for secondary uses. There are minimal patient safety or clinical risk implications or potential adverse effects for patients in the application of these changes to implement CDS v6.2.1 Type 011 - ECDS within this existing standard. Any risks identified have been mitigated.

A clinical safety report was produced following a hazard assessment workshop and the consensus was that there were minimal clinical safety risks associated with the implementation of the ECDS as the data set is not primarily used as a tool to support clinical decision making but rather to record information about specific episodes of care. In support of this standard the ECDS Clinical Safety Report has been approved by the NHS Digital Clinical Safety Group.

4.7 Clinical Governance

Commissioning Data Sets support clinical governance by maintaining and improving the quality of patient care within the health system through the national reporting of comparable primary use data for secondary use purposes to standardised definitions to support transparency. This supports (a) the audit of providers by organisations such as Care Quality Commission, Public Health Observatories (PHOs) and other research and commercial organisations and (b) the identification of outliers to indicate areas to focus limited resources for investigation purposes.

4.8 Data Quality

The ECDS does not mandate design of local systems or specific local data quality measures. However, highlighted below, are areas the data set developers recommend should be considered by data providers within their local governance arrangements to ensure good data quality in respect of the extracted submission.

4.8.1 Corporate Data Quality Framework

Each organisation will have its own corporate framework for managing data quality in respect to data collection, submission and publication. Such a framework is likely to involve a number of components such as leadership and direction from a senior officer, organisational and departmental data quality objectives, data quality audits and a performance management framework. It is recommended that appropriate components of the corporate data quality framework include the ECDS, so that data quality relating to the data set is at the heart of the organisation's data quality framework.

4.8.2 Data Quality Risks

At organisational, departmental and individual levels, risks related to data quality should be identified and mitigated. Examples of risks which could be considered, are:

• Organisational - does the organisation have corporate policy and objectives for managing data? Is there a senior officer with overall responsibility for data quality?

- Team are all relevant staff aware of the purpose and importance of collecting data for the national data set? Are there sufficient resources available to continue data collection during staff absences?
- Individuals do staff have sufficient time within their work routine to collect the data? Is there
 a need for additional training so staff can possess appropriate skills to collect the data
 (especially where systems are upgraded)?

4.8.3 Organisational and Departmental Objectives

In any organisation, resources will be deployed towards organisational and departmental objectives. The organisation's performance management framework will identify the extent to which objectives are met, and, where necessary, revised.

Where the data set is used to monitor progress towards objectives, there will be greater emphasis on collecting good quality data. It may be necessary to embed the data set subject area into the organisation's performance management framework (and therefore set local objectives) to ensure data is collected in a reliable and timely manner.

The structure and internal processes of each data provider will vary and, to a certain extent, depend on the priority given to IT and informatics. Some organisations will have well developed processes and systems that, with minimum effort, will accommodate ECDS. Other organisations, for who processes and systems are underdeveloped, or who will be new to the submission of ECDS may require significant changes. In such instances, organisations may choose to plan the implementation of this Information Standard as a priority to ensure sufficient resources are deployed for conformance.

The implementation of a new or re-engineered process may be more successful where organisations use peer organisations to identify and replicate areas of good practice.

4.8.4 Timeliness

The data should be entered in local systems and submitted in a timely manner, so that the data set can deliver meaningful, relevant and timely reports for stakeholders. This should be followed by a review of data quality to implement improvement actions.

4.8.5 National Data Quality

The submission of CDS Type 011 – ECDS encourages a move towards an automated daily submission.

In all cases a submission will be expected to meet the necessary CDS 6.2.1 XML schema validation, which will go some way to ensure that only valid formats and codes are submitted. The validations, which are described in the ECDS Technical Output, only relate to the structure and validity of the submitted data.

Further validation will involve the continued analysis of submitted CDS Type 011 – ECDS, to identify potential data quality issues for an individual provider or nationally. This will result in NHS Digital working with the provider to ensure that they are aware of potential data quality issues and identifying appropriate resolutions. It will also result in the publication of improved guidance or consideration of future changes to CDS.

VODIMN (Valid, Other, Default, Invalid, Missing, Not Applicable) Reports will be made available to providers to flag potential data quality issues with submitted data.

5 Implementation and Use

5.1 Guidance

Full guidance is available in the CDS 6.2 Addition of CDS Type 011 ECDS Implementation Guidance, which will specifically reference the continued use of CDS 6.2 in conjunction with the introduction of the new CDS v6.2.1 Type 011 - ECDS, which is available from: http://content.digital.nhs.uk/isce/publication/SCCI0092-2062

5.2 Governance

NHS Digital will have overall executive responsibility for implementation of changes to CDS. Implementation of changes to SUS will be managed through the SUS Programme. This will be overseen by the SUS Programme Board.

Ongoing maintenance of CDS will be undertaken by NHS Digital. Users and stakeholders can submit requests for change to: ecds@nhs.net.

Change requests will be prioritised by the sponsor, in conjunction with the SUS User Group (SUG), and will only be progressed where a sponsor and funding can be identified and where a suitable implementation mechanism is available e.g. a SUS release.

The SUS User Group (SUG), comprising key stakeholders representing providers, system suppliers and commissioners, fulfils the role as CDS Expert Working Group.

5.3 Technical Architecture

5.3.1 Providers who currently submit CDS 6.2

Providers currently submitting CDS 6.2 must continue to submit CDS 6.2 for all CDS Types, **except CDS Type 010 – A&E**, using current mechanisms (EDT, at time of writing).

A new schema is available for CDS v6.2.1 Type 011 - ECDS (CDS 6.2.1.), which must be used to submit the new Emergency Care Data Set.

When an Emergency Department implements the ECDS it will no longer submit a CDS Type 010 – A&E, it will submit CDS v6.2.1 Type 011 - ECDS, instead.

CDS Type 011 will be submitted via the Messaging Exchange for Social Care and Health (MESH) service – see Using the MESH Service. This is the primary messaging service used across the NHS. MESH is used to transfer electronic messages, directly and securely from one application to another.

Note that if a Healthcare Provider has more than one Emergency Department then it will be allowable to upgrade units at different times, and send CDS 011 to SUS for one unit and CDS 010 to SUS for the other(s) if necessary for local deployment reasons. If this is the case, remember that CDS 011 must be sent via MESH and CDS 010 must be sent via EDT.

5.3.2 Data Validation CDS v6.2.1 Type 011 - ECDS

The EDT service carries out a range of XML data validation processes on files, giving automated feedback to the submitter on the quality of data before it is transmitted onwards to SUS.

The MESH service does not carry out this sophisticated range of data validation processes, but a validation client that can be used locally, before submission to MESH, is possible.

Full data validation is carried out on receipt of the XML file at NHS Digital. Automated feedback is generated, in a similar way as with the EDT service, and made available to the user.

In this way, the migration from using EDT to using MESH closely replicates the services familiar to the historic CDS 6.2 submitter whilst adding additional features useful to the submitter that are built into the MESH service.

5.4 Providers who currently do not submit CDS 6.2

Providers who do not currently flow CDS 6.2 will need to ensure they can submit the CDS Type 011 xml schema to the Messaging Exchange for Social Care and Health (MESH) service – see below.

5.5 Using the MESH service

There are three main steps required by providers to install the MESH client:

- 1. Setting up a MESH account by completing the MESH application form: https://digital.nhs.uk/article/912/MESH-application-form
- 2. Setting up a MESH end point certificate
- 3. Installing MESH as a service.

For installation guidance of MESH, please visit: https://digital.nhs.uk/messaging-exchange-social-care-health/technical-information.

This information will then be available to the Secondary Uses Services (SUS).

SUS to reduce the use of person identifiable information for purposes other than that of direct patient care. SUS has significantly improved the security and confidentiality of data managed through a combination of:

- Comprehensive and rigorous access controls (Role Based Access Control).
- Anonymisation of data and the use of encrypted pseudonyms to replace information that could be used to identify individuals, which is accessed or transferred from the SUS environment.
- Enabling the linkage of data from different sources relating to the same care pathway.

Full details and guidance relating to submission of CDS to SUS is available from: http://content.digital.nhs.uk/sus

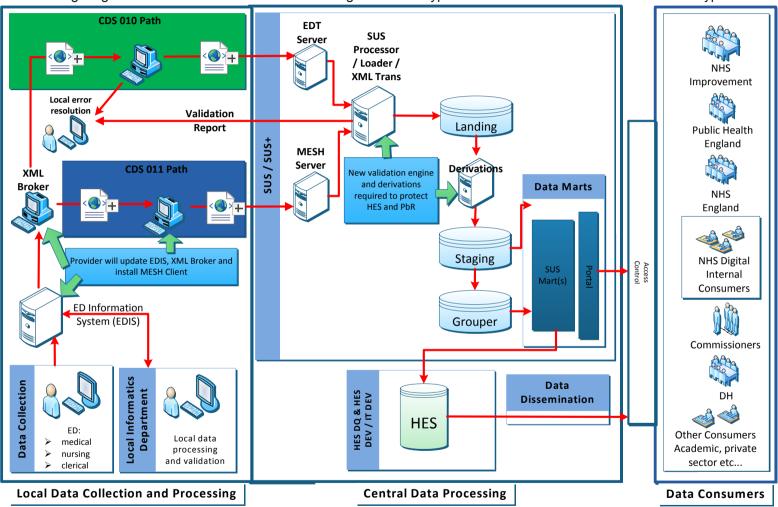
SUS has a robust Information Governance process to ensure that the data is protected from unauthorised access. Approval to access SUS and view patient data is required from the Ethics and Confidentiality Committee (ECC).

Users of SUS are issued with an NHS Care Records Service Smartcard, a pass code and Unique User Identification (UUID) to ensure data is kept secure. SUS will provide access and outputs in clear or pseudonymised form dependent upon each user's access rights. Where access to pseudonymised data is appropriate, elements which could identify a patient are encoded in order to provide greater protection of privacy.

Access to the Spine and SUS is via a connection to Health and Social Care Network (HSCN), the secure private national network for the NHS.

5.5.1 CDS 6.2 and CDS 6.2.1 XML schema flow

The following diagram outlines the data flow for submitting both CDS Type 010 A&E in addition to the CDS v6.2.1 Type 011 - ECDS flows:



5.5.2 CDS 6.2.1 XML Schema

The CDS 6.2.1 XML schema will be published to coincide with the publication of the standard via the Terminology Reference Data Update Distribution (TRUD) Service: https://isd.hscic.gov.uk/trud3/user/guest/group/0/home.

TRUD provides a mechanism for the UK Terminology Centre to license and distribute reference data to interested parties.

5.5.3 CDS 6.2 and CDS 6.2.1 XML Schema support

Upon implementation of CDS 6.2.1 support will continue to be provided by the SUS support teams via enquiries@nhsdigital.nhs.uk.

5.5.4 CDS Type 010 A&E Withdrawal

SUS will continue to support CDS Type 010 A&E submissions from those providers currently doing so until its withdrawal on 31st March 2019.

The current CDS Type 010 A&E will cease to be supported from 1st April 2019, so all providers will need to pay due regard to the standard and transition to using the new CDS v6.2.1 Type 011 - ECDS before this time.

5.5.5 XML/ Middleware Suppliers

All XML / Middleware suppliers will be required to complete appropriate assurance for submission of CDS 6.2.1 xml schema. Information on this assurance approach will be provided by NHS Digital.

All XML / Middleware suppliers will be required to submit the CDS Type 011 ECDS XML schema including the ECDS data to the Messaging Exchange for Social Care and Health (MESH) service (which will transmit the ECDS data to SUS).

For general guidance about MESH, please visit: https://digital.nhs.uk/messaging-exchange-social-care-health

CDS 6.2 will continue to use the EDT client for transmission of data to SUS.

Where changes take place to upgrade the existing SUS version, it is anticipated that the new CDS Type 011 ECDS will also be included within any future delivery and transition road map.

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CDS Type 011 - Emergency Care Data Set (ECDS) Technical Output Specification v1.0



Technical Output Specification

Purpose of this document

The CDS Type 011 - ECDS v1.0 Technical Output Specification (TOS) is intended to provide a comprehensive technical view of the provider submission (18 data set tables and 39 code sets). It has been accepted by SCCI for publication vsection 250 of the Health and Social Care Act 2012. It should be used alongside the requirements specification and implementation guidance, available on the NHS Digital website: www.content.digital.nhs.uk/isce/publication/scci0092-2062.

This technical specification presents the ECDS data item groups and their constituent data items as 'final'.

The 18 data set tables include data item level detail necessary to construct an output data set suitable for submission. The data set tables also include additional information explaining:
- which records should be included in a submission
- the justification for inclusion of new items in the data set
- validation rules

- format provenance

ECDS Data Groups

- Patient Pathway
- Patient Identity
- Patient Characteristics
- Mental Health Act Legal Status
- GP Registration
- · Emergency Care Attendance Location
- Ambulance Details
- Emergency Care Attendance Characteristics
- Injury Characteristics
- Patient Clinical History
- Service Agreement Details
- Care Professionals (Emergency Care)
- . Emergency Care Diagnosis (SNOMED CT)
- Emergency Care Investigations (SNOMED CT)
- Emergency Care Treatments (SNOMED CT)
- Referral to Other Services
- Discharge from Emergency Care
- Research and Outbreak Notification

Background

The Emergency Care Data Set (ECDS) is a new national data set for urgent and emergency care which will be implemented across all Emergency Departments Types (1-4). The ECDS will replace CDS Type 010 A&E with a data set which can properly capture and represent the full extent and granularity of emergency care activity across England.

A comprehensive set of documentation is being developed by the project team which will be published with the ECDS Information Standard Notice in Spring 2017.

This draft document should be read in conjunction with the following documents:

- CDS Type 011 - ECDS Information Standards Notice

- CDS Type 011 - ECDS Requirements Specification

- CDS Type 011 - ECDS Change Request

- CDS Type 011 ECDS Implementation Guidance
 CDS Type 011 ECDS User Guidance CDS Type 011 - ECDS Technical Guidance

Document Version History

| Version | Status | Date Published | Brief Summary of Change |
|---------|--------|-------------------|---|
| 1.0 | Draft | May-15 | Published in support of the first ECDS development consultation |
| 2.0 | Draft | Oct-15 | Published following feedback from ECDS May 2015 consultation |
| 3.0 | Draft | Apr-16 | Published in support of ECDS Impact Assessment and ECDS pilots |
| 4.0 | Draft | Oct-16 | Published following feedback from Impact Assessment and ECDS pilots |
| 5.0 | Draft | Dec-16 | Published to provide early view of changes to structure in order to replace the current CDS Type 010 - A&E CDS. |
| 6.0 | Draft | Jan-17 | Published in support of the ECDS ISN Advanced Notification |
| 6.1 | Draft | Feb-17 | Submitted as part of ECDS SCCI documentation |
| 6.2 | Draft | Feb-17 | Updated following schema development |
| 6.3 | Draft | Mar-17 | Updated following schema testing, inclusion of change log and presentation of amended SNOMED CT ECDS subsets |
| 1.0 | Final | Apr-17 | ECDS v6.3 updated to 'CDS Type 011 - ECDS v1.0' following approval by SCCI. |

| For more information on the status of | ECDS Implementation Team |
|---------------------------------------|------------------------------|
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CDS Type 011 - Emergency Care Data Set (ECDS) Technical Output Specification v1.0



Technical Output Specification

How to read the ECDS Technical Output Specification

Output Data Set

The table below describes the fields included in the ECDS Output Data Set which follows.

N.B. Blue tabs represent individual ECDS Data Groups

| Column Name | Definition |
|---|--|
| Data Group | The Data Group name is highlighted in the yellow box at the top. This name (or a truncated version of it) will be used to name the corresponding element structure in the Data Dictionary. |
| Group Status | The group status describes whether or not this group (as a whole) is mandatory or optional and how this group may relate to other groups in the transmission. Link to CDS Notation |
| | |
| Group repeats | The group repeat describes how the group may repeat in the transmission. |
| | |
| | 01 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 0 to a maximum of 1. |
| | 0.9 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 0 to a maximum of 9. |
| | 0* This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 0 to an unlimited maximum. |
| | 11 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 1 to a maximum of 1. |
| | 1.97 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 1 to a maximum of 97. |
| | |
| | 1.* This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 1 to an unlimited maximum. |
| DATA GROUP | The Data Group name (see above) |
| DATA ITEM NAME DATA ITEM DEFINITION | The unique title or name of the data item. A. link to the NHS Data Model & Dictionary data item page will be added when svaliable. Provides a description and exclusion in deal what information the data line in securiting the user to cacture. |
| | Provides a description and explains in detail what information the data item is requiring the user to capture. Whether individual data items are Mandatory, Required or Optional. |
| DATA ITEM STATUS | THERE INVALUE USES BETTE BY MAINTAININ, REQUIRED UN OPHIONE. |
| | Mandatory: These data items MUST be reported. Failure to submit these items will result in the rejection of the record. |
| | Required: These data items SHOULD be recorded where they apply. Failure to submit these items will not result in the rejection of the record but may affect the derivation of national indicators or national analysis. (Please note that the purpose of the data set is not to chance |
| | required. These data items should be reported where they apply. Pallure to submit these items will not result in the rejection of the record but may affect the derivation of hadronis indicators or national analysis. (Please note that the purpose of the data set is not to change clinical practice.) |
| | MINEST PERMISSA |
| | Optional: These data items MAY be submitted on an optional basis at the submitters discretion. |
| CQUIN DATA ITEM REQUIRED (Y/N) | Describes whether the data item is required in the 2017/2019 COUIN - Indicator 8a |
| DATA ITEM REPEATS Describes how the many times this data item may repeat in the transmission. | |
| | 0.1 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 0 to a maximum of 1. |
| | |
| | 0.9 This signifies that the permitted occurrences of the Data Group, Sub-Group or individual Data Element are from a minimum of 0 to a maximum of 9. |
| | 0.* This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 0 to an unlimited maximum. |
| | 11 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 1 to a maximum of 1. |
| | 1.97 This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 1 to a maximum of 97. |
| | 1* This signifies that the permitted occurrences of the Data Group, Sub Group or individual Data Element are from a minimum of 1 to an unlimited maximum. |
| FORMAT | The format of the data item expressed in data type and length. For dates and times it specifically refers to the exact formatting. For other fields it describes the data type required and the max/min field lengths. |
| SNOMED GT/DM&D/ODS | Whether the data item should be captured in SNOMED CT, as per the Data Model and Dictionary or via the Organisation Data Service (ODS) service. |
| JUSTIFICATION | Why the data item has been included. |
| ECDS CODE SET | A link to the proposed code set. |
| | |
| | N.B. When available these links will be replaced with internet links for live hosting of sub sets |
| | |
| | |
| | |
| | |
| | |
| LINK TO CURRENT CDS Type 010 | For information only. Provides a link to the CDS Type 010 which this data item originates from. |
| VALIDATION RULES: POPULATION VALIDATION | Where the data item format will validated in the schema or where the data item will be validated against an explicit list of permitted values as defined in the NHS Data Dictionary. |
| VALIDATION VALIDATION RULES: POST SCHEMA | Where the data item will be validated further following submission to the Secondary Uses Service (SUS) |
| VALIDATION ROLES: POST SCHEMA VALIDATION | The second secon |
| DATA ITEM PROVENANCE | Indicates whether the data item originates from CDS Type 010 or is a new data item. |
| NOTES | ADDITIONAL INFORMATION |
| | |

Code Sets

Some of the information provided in the code set tabs is specifically intended for system suppliers to maximise usability and will help minimise time spent searching for codes. User guidance will make specific reference to ECDS Unique ID, flags, grouping and the sort codes.

N.B. Providers and Suppliers should be aware that the CDS Type 011 - ECDS SNOMED CT subsets will be under constant review and some changes may be required following the initial release of these subsets in April 2017. If any amendments/changes to the CDS Type 011 - ECDS SNOMED CT subsets are required they will be available in the October 2017 SNOMED CT release.

SNOMED CT ECCS subsets for human reading.

- https://dichards.gov.uk/mud3/use/nadhenfcated/groupUplandk40/autoauk/296/releases
the ENR is published. Please note that these have
not yet been updated.

System supplies are advised to use ECDS SNONED CT subsets from the UK Edition of SNOMED CT when this has been updated in line with publication of the ECDS ISN.

SNOMED additional information

For more information on the SNOMED CT standard and format information please look at the NHS Digital SNOMED CT Change Specification

N.B. Yellow Tabs represent accompanying code sets for each ECDS data group.

| Column Name | Definition |
|-----------------------|--|
| ECDS_UniqueID | A unique number for that data item that incorporates the sort codes, and allows this single number to be used |
| | to identify that code |
| | as a single number to allow those data items to be ordered (e.g. if returning items in a search box) |
| | |
| Sort1/Sort2/Sort3 | Together with the ECDS 'Group code', the ECDS 'Sort Codes' enable sequential sorting e.g. to support the use of linked dropdown boxes. |
| ECDS_Group | Can be used to support implementation of sequential sorting of longer code sets to improve usability. |
| ECDS_Description | The ECDS description of the DM&D or SNOMED CT term. |
| ECDS_Code (SNOMED CT) | The ECDS code, this will either be SNOMED CT or NHS Data Dictionary |
| SNOMED CT TERM | The full SNOMED CT term where relevant |
| ECDS_Notes | Supporting information |

| Flags | The flags appear both in the Diagnosis and Chief Complaint code sets and specifically for injury are intended to identify which Chief Complaints and Diagnoses should indicate that the injury data items should be completed. |
|-------|--|
| | The flags in the Chief Complaint and Diagnosis code sets are meant as guidance for suppliers and providers during implementation. |
| | Injury flag (Chief Complaint and Diagnosis)- Helps to identify whether an attendance is likely to be the result of an injury and could be used to trigger the injury data group. |
| | AEC – This could indicate that this is an Ambulatory Emergency Care condition |
| | Notifiable Disease – Indicates that this is a Notifiable disease and should be restrained |
| | Allergy – Identifies that the chief complaint and/or diagnosis are allergy related and that this information should flow as part of the ED Discharge summary |
| | Male - Indicates when a chief complaint and/or diagnosis is specifically a male condition (should mean that you get fewer pregnant males recorded) and that you would not expect to see this in a female record. |
| | Female — Indicates when a chief complaint and/or diagnosis is specifically a female condition and that you would not expect to see this in a male record. |

Investigations and Treatments

The Investigation and Treatment code sets are listed here specifically because there are extra columns which relate to the mapping which will be used for Tariff calculation (HRG) purposes. Please see the Technical User Guidance document for further detail.

| Column Name | Definition |
|---|---|
| ECDS_UniqueID | A unique number for that data item that incorporates the sort codes, and allows this single number to be used |
| | to identify that code |
| | - as a single number to allow those data items to be ordered (e.g. if returning items in a search box) |
| | |
| Sort1/Sort2 | Together with the ECDS 'Group code', the ECDS 'Sort Codes' enable sequential sorting e.g. to support the use of linked dropdown boxes. |
| ECDS_Group | Can be used to support implementation of sequential sorting of longer code sets to improve usability. |
| ECDS_Description | The ECDS description of the SNOMED CT term |
| SNOMED_Code | The ECDS code, in SNOMED CT |
| SNOMED_Description | The full SNOMED CT term where relevant |
| CDS code mapping used for HRG Grouping | This is the Data Dictionary code that will be used for HRG Grouping when the associated SNOMED code is submitted. This is also the value which should be used for local grouping. |
| PbR category | This is the PbR category of the Data Dictionary code used for HRG Grouping |
| CDS Investigation/Treatment mapping that is | This is the name of the investigation or treatment associated with the Data Dictionary code to be used for HRG Grouping |
| used for HRG Grouping | |
| Notes | Supporting information |

NHS Digital

CDS Type 011 - Emergency Care Data Set (ECDS) Technical Output Specification v1.0

Technical Output Specification - Change Control

This tab includes changes from ECDS v6.0 to CDS Type 011 - ECDS Technical Output Specification.

| _ | 1- | | | | I | | I | I | | I |
|-----------|---------------------|---|---|--|---|-----------|-------------------------------|--|--|---|
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Document Version Number Emergency Care Data Set (ECDS) Technical Output | | UNIQUE BOOKING REFERENCE NUMBER (CONVERTED) | Data item | Item Amend Type Format change | an20 | n12 | Change Reason(s) Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY GROUP | ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER) | Data item | Definition change | A unique identifier for an ORGANISATION. | ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER) is the ORGANISATION IDENTIFIER of the Organisation issuing the PATIENT PATHWAY IDENTIFIER. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY GROUP | ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER ISSUER) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY GROUP | NHS NUMBER STATUS INDICATOR CODE | Data item | Definition change | The status of the NHS number. | The trace status of the NHS number. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification we Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification (NE.) Technical Output Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY GROUP | ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY) | Data item | Definition change | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | OBGANSATION DENTRIER BESIDENCE RESPONSIBILITY) is the OBGANSATION DENTRIER denied from the PARIENT'S POSTOCIO OF USUAL ADDRESS, where they reade within the boundary of a: *Clinical Commissioning Group *Cure Trust *Cucil Health Board (Wole) *Cucil Health Board (Wole) *Worthern relamal Local Commissioning Group *Primary Healthcare D'ectorate (sile of Man) *Local Authority, | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | PATIENT PATHWAY IDENTITY GROUP | ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY - WITHHELD IDENTITY STRUCTURE | WITHHELD IDENTITY REASON | Data item | Definition change | WITHHELD IDENTITY REASON is used in Data Group "Withheld Identity Structure" in the Commissioning Data Sets (version 6-2 onwards). It allows suppliers of Commissioning Data Set records to indicate to recipients of the record fior example, the Commissioner of the activity) that the record flor example, the Commissioner of the activity) that the record flor example. | indicate to recipients of the record (for example, the Commissioner of the | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY - VERIFIED IDENTITY STRUCTURE | LOCAL PATIENT IDENTIFIER (EXTENDED) | Data item | Name change | LOCAL PATIENT IDENTIFIER | LOCAL PATIENT IDENTIFIER (EXTENDED) | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output | PATIENT PATHWAY IDENTITY - VERIFIED IDENTITY STRUCTURE | LOCAL PATIENT IDENTIFIER (EXTENDED) | Data item | Definition change | A number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's case note number and may be assigned automatically by the computer system. | A number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's case note number and may be assigned automatically by the computer system. | Update required following schema development |
| | | | | | | | | Where care for NHS patients is sub-commissioned in the independent sector or overseas, the NHS commissioner PAS Number should be used. If no NHS PAS Number has been assigned the independent sector or overseas PAS Number should be used. | | |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY - VERIFIED IDENTITY STRUCTURE | LOCAL PATIENT IDENTIFIER (EXTENDED) | Data item | Format change | an10 | max an20 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 | Specification v6.1 | STRUCTURE | ORGANISATION IDENTIFIER (LOCAL PATIENT IDENTIFIER) | Data item | Definition change | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | ORGANISATION IDENTIFIER (LOCAL PATIENT IDENTIFIER) is the ORGANISATION IDENTIFIER of the Organisation that assigned the LOCAL PATIENT IDENTIFIER. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 | STRUCTURE | ORGANISATION IDENTIFIER (LOCAL PATIENT IDENTIFIER) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | STRUCTURE | | Data item | Definition change | The status of the NHS number. | The trace status of the NHS number. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 | STRUCTURE | ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | | IDENTITY STRUCTURE | LOCAL PATIENT IDENTIFIER | Data item | Format change | an10 | max an20 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | IDENTITY STRUCTURE | ORGANISATION IDENTIFIER (LOCAL PATIENT IDENTIFIER) | Data item | Format change | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | IDENTITY STRUCTURE | NHS NUMBER STATUS INDICATOR CODE | Data item | Definition change | The status of the NHS number. | The trace status of the NHS number | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITIY - UNVERIFIED IDENTITY STRUCTURE | PATIENT NAME - PERSON NAME STRUCTURED OR | Data item | Format change | an70 | max an70 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY IDENTITY - UNVERIFIED IDENTITY STRUCTURE | PATIENT NAME - PERSON NAME UNSTRUCTURED PATIENT USUAL ADDRESS - ADDRESS STRUCTURED (Label format Postal Address) OR PATIENT USUAL ADDRESS - ADDRESS UNSTRUCTURED (Character | Data item | Format change | an175 (5 lines each an35) | max an175 (5 lines each an35) | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification vi6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT PATHWAY DENTITY - UNVERIFIED IDENTITY STRUCTURE | string) ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY) | Data item | Definition change | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | ORGANSATION IDENTIFIER (RESDENCE RESPONSIBILITY) is the ORGANSATION DENTIFIER deviced from the PATIENT'S POSTCODE OF USUAL ADDRESS, when they reside within the boundary of a: **CATE TIME** **CATE | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | UNVERIFIED IDENTITY STRUCTURE | ORGANISATION IDENTIFIER (RESIDENCE RESPONSIBILITY) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | PATIENT CHARACTERISTICS (EMERGENCY CARE) | PERSON STATED GENDER CODE | Data item | Definition change | The classification is phenotypical rather than genotypical, i.e. it does not provide codes for medical or scientific purposes. | The gender of a PERSON. PERSON STATED GENDER CODE is self-declared or inferred by observation for those unable to declare their PERSON STATED GENDER. | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ETHNIC CATEGORY | Data item | Format change | an2 | max an2 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ACCOMMODATION STATUS (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | | PATIENT CHARACTERISTICS (EMERGENCY CARE) | PREFERRED SPOKEN LANGUAGE (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ACCESSIBLE INFORMATION PROFESSIONAL REQUIRED CODE | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | (SNOMED CT) INTERPRETER LANGUAGE (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | OVERSEAS VISITOR CHARGING CATEGORY AT CDS ACTIVITY DATE | Data item | Definition change | A classification of OVERSEAS VISITOR STATUS. | The charging category relating to an OVERSEAS VISITOR STATUS. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | MENTAL HEALTH ACT LEGAL STATUS | MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION CODE | Data item | Definition change | have a Hospital Provider Spell which includes the care of a CONSULTANT in the psychiatric | A code which identifies the MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION. Note that the National Code Informal is used for those PATIENTS who are neither formally detained nor receiving supervised aftercare. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | GP REGISTRATION | GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) | Data item | Format change | min an5 max an9 | an6 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 | | EMERGENCY CARE DEPARTMENT TYPE | Data item | Definition change | An Emergency Care Department is a Department. An Emergency Care Department may be either: • an Accident and Emergency Department or • an Ambulston's Emergency Care Service. | The type of Emergency Care Department | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | AMBULANCE DETAILS | ORGANISATION CODE (CONVEYING AMBULANCE TRUST) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |

| 1/31/2017 | Requirement to Full | Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | CHARACTERISTICS | EMERGENCY CARE ATTENDANCE IDENTIFIER | Data item | Format change | an12 | max an12 | Update required following schema development |
|-----------|---------------------|---|---|--|---|-----------|-------------------|--|--|--|
| 1/31/2017 | Requirement to Full | Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | CHARACTERISTICS | EMERGENCY CARE ARRIVAL MODE (SNOMED CT) | Data item | Format change | n18 | | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 | | CHARACTERISTICS | EMERGENCY CARE ATTENDANCE SOURCE (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | ORGANISATION SITE IDENTIFIER (EMERGENCY CARE ATTENDANCE SOURCE) | Data item | Definition change | An ORGANISATION SITE CODE is a code which identifies an Organisation Site uniquely. | ORGANISATION SITE IDENTIFIER (EMERGENCY CARE ATTENDANCE SOURCE) is the ORGANISATION IDENTIFIER of the Organisation Site from which a PATIENT arrived at an Emergency Care Department. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ARRIVAL DATE | Data item | Definition change | An Emergency Care Arrival Date is an ACTIVITY DATE TIME. An Emergency Care Arrival Date may be either: the Arrival Date Art Accident and Emergency Department or the Arrival Date Art Accident and Emergency Department or the Ambulatory Emergency Care Arrival Date. | An Emergency Care Arrival Date may be either: • the Arrival Date At Accident and Emergency Department or • the Ambial Date Pempercy Care Arrival Date. An Arrival Date At Accident and Emergency Department is the date the PATIENT self presented at the Accident and Emergency Department or arrived in an Ambialone at the Accident and Emergency Department. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ARRIVAL TIME | Data item | Definition change | An Anviso Dise At Accident and Emergency Oppartment is the date the ATRENT std presented at the Accident and Emergency Oppartment or arrived in an Ambasica et the Accident and Emergency Oppartment or arrived in an Ambasica et the Accident and Emergency Oppartment is an ACTIVITY DATE TIME. Page 21 of 973 Page 21 of 973 An Anviso Time At Accident and Emergency Oppartment is an ACTIVITY DATE TIME. The Arrival Time Attacked in different propertment or a the Arrival Time Attacked in different propertment or the Arrival Time Attacked in Accident and Emergency Confortant Time. | arrived in an Ambulance at the Accident and Emergency Department. The Emergency Care Arrival Time may be either: * the Arrival Time Accident and Emergency Department or An Arrival Time Accident and Emergency Department is the date the PATENT and presented at the Accident and Emergency Department arrived in an Ambulance at the Accident and Emergency Department arrived in an Ambulance at the Accident and Emergency Department | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE INITIAL ASSESSMENT DATE | Data item | Definition change | An Arrival Time. An Accident and Emergency Department is the date the PATIEST affection and in Accident and Emergency Department or arrived in an Ambiance at the Accident and Emergency Department. An Emergency Capital Emergency Department of the Emergency Capital Assessment Date is an ACTIVIT CAPIT TIME. **The Accident and Emergency Patient Assessment Date is an ACTIVIT CAPIT TIME. **The Accident and Emergency Capital Assessment Date is the Accident and Emergency Capital A | d | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE INITIAL ASSESSMENT TIME | Data item | Definition change | An Emergency Care Initial Assessment Time is an ACTIVITY DATE TIME. The Emergency Care Initial Assessment Time may be either: - the Accident and Emergency Initial Assessment Time. - the Anniabative Intergency Care Initial Assessment Time. - An Accident and Emergency Initial Assessment Time is the time, recorded using the 24 hour door, that the PACIFIC In 61st assessed in the Accident and Emergency Department for first. | The finergroxy care initial Assessment Time may be either: • the Accident and finergroxy initial Assessment Time or • the Arcident and finergroxy care initial Assessment Time or • the Arcident and Energroxy Unital Assessment Time in the time, recorded An Accident and Energroxy Initial Assessment Time, the time, recorded and Energroxy Code, the Arcident Code of the Arcident sand Energroxy Code of the Arcident Code of the Arcident and Energroxy Code of the Arcident Code of the Arcident and Energroxy Code of the Arcident Co | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE ACUITY (SNOMED CT) | Data item | Format change | attendances and unplanned follow-up attendances. n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | CHARACTERISTICS ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE CHIEF COMPLAINT (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | | EMERGENCY CARE DATE SEEN FOR TREATMENT | Data item | Definition change | Accident and Emergency Date Seen For Treatment is the date, that the PATIENT is seen by a clinical decision maker (pomenous who can define the management plan and discharge the PATIENT) to diagnose the problem and arrange or start definite treatment as necessary. | The Emergency Care Date Seen For Treatment may be either: • the Accident and Emergency Date Seen For Treatment or • the Anabadory Integrency Care Date Seen For Treatment • the Anabadory Integrency Care Date Seen For Treatment • Accident and Emergency Date Seen For Treatment is the date, that the PATRIATI seen by a chiral accidencime make (genomore with or can define the management plan and doubtage for PATRIATY to diagnose the problem and arrange or start definite treatment an exercise. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE TIME SEEN FOR TREATMENT | Data item | Definition change | An Accident and Emergency Time Seen For Treatment is the time, recorded using the 24 hour clock, that the PATENT is seen by a clinical decision maker (comerce who can define the management plan and discharge the PATENT) to diagnoss the problem and arrange or start definite treatment as necessary. | The Emergency Care Time Seen For Treatment may be either: • the Accident and Emergency Time Seen For Treatment or • the Anabulatory Emergency Care Time Seen For Treatment or • the Anabulatory Emergency Care Time Seen For Treatment is • the Anabulatory Emergency Care Time Seen For Treatment is the time, recorded • An Accident and Emergency Time Seen For Treatment is the time, recorded • and seen by a clinical decision maker (parents with a seen by a clinical decision maker (parents with a seen and discharge the PAIRSTI) to disaggesor the problem and arrange or start definite treatment as necessary. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | EMERGENCY CARE PLACE OF INJURY (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY INTENT (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY ACTIVITY STATUS (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY ACTIVITY TYPE (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY MECHANISM (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY ALCOHOL OR DRUG INVOLVEMENT | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | PATIENT CLINICAL HSITORY | (SNOMED CT) COMORBIDITY (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | SERVICE AGREEMENT DETAILS | COMMISSIONING SERIAL NUMBER | Data item | Format change | an6 | max an6 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | SERVICE AGREEMENT DETAILS | NHS SERVICE AGREEMENT LINE NUMBER | Data item | Format change | an10 | max an10 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | | PROVIDER REFERENCE NUMBER | Data item | Format change | an17 | max an17 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | SERVICE AGREEMENT DETAILS | COMMISSIONER REFERENCE NUMBER | Data item | Format change | an17 | max an17 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Specification v6.1 | | ORGANISATION IDENTIFIER (CODE OF PROVIDER) | Data item | Definition change | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | ORGANISATION IDENTIFIER (CODE OF PROVIDER) is the ORGANISATION IDENTIFIER of the Organisation acting as a Health Care Provider. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | SERVICE AGREEMENT DETAILS | ORGANISATION IDENTIFIER (CODE OF PROVIDER) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | | ORGANISATION IDENTIFIER (CODE OF COMMISSIONER) | Data item | Definition change | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | ORGANISATION IDENTIFIER of the Organisation commissioning health care. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 | | ORGANISATION IDENTIFIER (CODE OF COMMISSIONER) | Data item | Format change | min an5 max an9 | min an3 max an5 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Specification v6.1 | | PROFESSIONAL REGISTRATION ENTRY IDENTIFIER | Data item | Format change | an12 | max an32 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | | CODED CLINICAL ENTRY SEQUENCE NUMBER | Data item | Format change | an2 | max nS | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | | EMERGENCY CARE DIAGNOSIS QUALIFIER (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output | EMERGENCY CARE CLINICAL INVESTIGATION (SNOMED CT) | EMERGENCY CARE CLINICAL INVESTIGATION (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | | | EMERGENCY CARE PROCEDURE (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | REFERRALS TO OTHER SERVICES | REFERRED TO SERVICE (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | | ACTIVITY SERVICE REQUEST DATE (EMERGENCY CARE) | Data item | Definition change | The DATE that a SERVICE REQUEST for an ACTIVITY was made. | Emergency Care Attendance | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | REFERRALS TO OTHER SERVICES | ACTIVITY SERVICE REQUEST TIME (EMERGENCY CARE) | Data item | Definition change | The TIME that a SERVICE REQUEST for an ACTIVITY was made. | The TIME that a PATIENT was referred to another SERVICE during an Emergency Care Attendance. | Update required following schema development |
| 1/31/2017 | Requirement to Full | | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | REFERRALS TO OTHER SERVICES | REFERRED TO SERVICE ASSESSMENT DATE | Data item | Definition change | A Referred To Service Assessment Date is an ACTIVITY DATE TIME. A Referred To Service Assessment Date is the date that a CARE PROFESSIONAL from a SERVICE | A Referred To Service Assessment Date is the date that a CARF | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | | REFERRALS TO OTHER SERVICES | REFERRED TO SERVICE ASSESSMENT TIME | Data item | Definition change | A Referred To Service Assessment Date is the date that a CARE PROFESSIONAL from a SERVICE which a PARIENT has been referred to assess the PARIENT. A Referred To Service Assessment Time is an ACTIVIT DATE TIME. A Referred To Service Assessment Date is the time that a CARE PROFESSIONAL from a SERVICE which a PATIENT has been referred to, assesses the PATIENT. | A Referred To Service Assessment Date is the time that a CARE | Update required following schema development |

| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | F Core Date Cat (FCDC) Tballed Outs at A | DUCCHARCE FROM PAPERCENCY CARE | DECIDED TO ADMIT DATE | Data item | Definition change | The date at which the decision is made to admit the person. | The date a DECISION TO ADMIT was made. | Update required following schema development |
|-----------|--|---|--|--|--|---------------------------------|-------------------|--|--|--|
| 1/31/2017 | Requirement to Full | Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | | DECIDED TO ADMIT TIME | Data item | Definition change | The time at which the decision is made to admit the person. | The time a DECISION TO ADMIT was made. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output | | ACTIVITY TREATMENT FUNCTION CODE (DECISION TO ADMIT) | Data item | Definition change | ACTIVITY TREATMENT FUNCTION CODE (DECISION TO ADMIT) is the same as attribute | | Update required following schema development |
| 1/31/2017 | Requirement to Fun | Specification v6 | Specification v6.1 | DISCHARGE PROW EMERGENCY CARE | ACTIVITY TREATMENT FONCTION CODE (DECISION TO ADMIT) | Data item | Definition Change | TREATMENT FUNCTION CODE. ACTIVITY TREATMENT FUNCTION CODE. ACTIVITY TREATMENT FUNCTION CODE (DECISION TO ADMIT) is the TREATMENT FUNCTION. | TREATMENT FUNCTION CODE of the SERVICE to which a PATIENT is to be | Opoate required following scrienta development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | | | EMERGENCY CARE DISCHARGE STATUS (SNOMED CT) | Data item | Format change | CODE of the SERVICE to which a PATIENT is to be admitted. | min n6 max n18 | Update required following schema development |
| -,, | | Specification v6 | Specification v6.1 | | | | - | | | |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CASE | EMERGENCY CARE ATTENDANCE CONCLUSION DATE | Dataitem | Definition change | An Emergency Care Attendance Conclusion but is an ACTIVITY DATE TIME. The Emergency Care Matendance Conclusion but emuly be either: * the Accident and Emergency Attendance Conclusion Date or * the Anniablatory Intergency Care Attendance Conclusion Date. * the Anniablatory Intergency Care Attendance Conclusion Date. Where the PATIBIT dies in the Emergency Care Department, the Emergency Care Attendance Conclusion Date is the same as the PRECON DEATE DATE. | The Emergency Care Attendance Conclusion Date may be either: - the Accident and Emergency Attendance Conclusion Date or - the Ambulstory Emergency Care Attendance Conclusion Date Where the PATISTA is the 1 the Emergency Care Department, the - Emergency Care Attendance Conclusion Date is the same as the PERSON - An Accident and Emergency Attendance conclusion Date is the same as the PERSON - Accident and Emergency Attendance conclusion Date is the date that a PATISTA'N Accident and Emergency Attendance conclusion of the Section of the Section Office of the Conclusion Date is the date that a PATISTA'N Accident and Emergency Attendance conclusion of the Section Office of the Section of the Section and Emergency Department is completed (whichever is the later) The Tobic PATISTA'N Admitted into hospital, the ACCIDENT AND - BAREGREY ATTENDANCE CONCLUSION DATE is recorded as the date when the DECSON'D TO ADMIT was made. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emegency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE ATTENDANCE CONCLUSION TIME | Data item | Definition change | As Emergency Care Attendance Conclusion Time is an ACTIVITY DATE TIME. The Emergency Care Attendance Conclusion Time may be either: * **De Accider and Emergency Attendance Conclusion Time or **De Anticider and Emergency Care Attendance Conclusion Time or **De Anticiderary Emergency Care Attendance Conclusion Time **De Anticiderary Emergency Care Attendance Conclusion **Conclusion Time is the same as the PESCON DEATH TIME. **Time In the Care Attendance Conclusion Time is the same as the PESCON DEATH TIME. **Time In the Care Attendance Conclusion Time is the same as the PESCON DEATH TIME. **Time In the Care Attendance Conclusion Time is the same as the PESCON DEATH TIME. **Time In the Care Attendance Conclusion Time is the same as the PESCON DEATH TIME. **Time In the Care Attendance Conclusion Time is the same as the PESCON DEATH TIME. **Time In the Care Attendance Conclusion Time In the Care | The Emergency Care Altendance Conclusion Time may be either: - the Accident and Emergency Attendance Conclusion Time or - the Analystory Emergency Care Attendance Conclusion Time. Where the PATIEST dates as the Emergency Care Exportances. It was the Emergency Care Exportances from the Care Employment of the Care as the FESDON DEATH TIME. An Accident and Emergency Attendance Conclusion Time is the time, recorded using a 31 hour close. An Accident and Emergency Attendance concludes or exceeding a 32 hour close. - when treatment in an Accident and Emergency Department is completed (whichever is the laters). - when treatment in an Accident and Emergency Department is completed (whichever is the laters). - The Time SATERISTS admitted into hospital, the A and E ATTENDANCE for those PATIESTS admitted into hospital, the A and E ATTENDANCE for those PATIESTS (ATTENDANCE). | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE DEPARTURE DATE | Data item | Definition change | An Accident and Emergency Operations Date is the date that a PATEENT leaves an Accident and Emergency Department after an Accident and Emergency Attendance has concluded. The Emergency Carlo Department Date may be either Timble. The Emergency Carlo Department Date on the Ambiditory Carlo Department Date or the Accident and Emergency Carlo Department Date or the Ambiditory Demography Carlo Department Date or the Ambiditory Demography Carlo Department Date or | The Emergency Care Departure Date may be either: • the Accident and Emergency Departure Date or • the Ambulation, Emergency Care Departure Date • the Ambulation, Emergency Care Departure Date An Accident and Emergency Departure Date is the date that a PATIENT leaves an Accident and Emergency Department after an Accident and Emergency Attendance has concluded. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE DEPARTURE TIME | Data item | Definition change | An Accident and Emergency Departure Time is the time recorded using a 24 hour clock that a PATRIST leaves an Accident and Emergency Department alter an Accident and Emergency Attendance has concluded. An Emergency Care Department Time is an ACTIVITY DATE TIME. The Emergency Care Department Time may be either: **The Emergency Care Department Time may be either: **The Accident and Emergency Department Time.** **The Accident and Emergency Department Time.** | The Emergency Care Departure Time may be either: • the Accident and Emergency Departure Time or • the Ambulatory Demacruse Time or • the Ambulatory Demacruse Time in the time recorded using a 24 An Accident and Emergency Departure Time is the time recorded using a 24 And the Cock that a 75 EMITIVE Times an Accident and Emergency Department after an Accident and Emergency Attendance has concluded. | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | DISCHARGE FROM EMERGENCY CARE | SAFEGUARDING CONCERN (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE DISCHARGE DESTINATION (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6 | Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE DISCHARGE FOLLOW UP (SNOMED CT) | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE DISCHARGE INFORMATION GIVEN (SNOMED | Data item | Format change | n18 | min n6 max n18 | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output Specification v6.1 | DISCHARGE FROM EMERGENCY CARE | CT) CLINICAL TRIAL IDENTIFIER | Group/Data item | 1 Deletion | CLINICAL TRIAL IDENTIFIER | Deleted | Update required following schema development |
| 1/31/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | DISCHARGE FROM EMERGENCY CARE | DISEASE OUTBREAK NOTIFICATION | Group/Data item | n Deletion | DISEASE OUTBREAK NOTIFICATION | Deleted | Update required following schema development |
| 2/28/2017 | Requirement to Full | Specification v6 Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Specification v6.1 Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | Headers | Inclusion of Headers | n/a | Addition | n/a | Indusion of: CDS Interchange Header CDS Metrochange Trailer CDS Metrage Header CDS Metrage Trailer CDS Metrage Trailer CDS Metrage Trailer CDS Train Header BULK CDS Train Header BULK | Update required following schema development |
| 3/3/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | | INJURY CHARACTERISTICS | EMERGENCY CARE PLACE OF INJURY (LATTITUDE AND | Data item | Deletion | EMERGENCY CARE PLACE OF INJURY (LATTITUDE AND LONGITUDE) | Deleted | Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | LONGITUDE) EMERGENCY CARE PLACE OF INJURY (LATTITUDE) | Data item | Addition | EMERGENCY CARE PLACE OF INJURY (LATTITUDE AND LONGITUDE) | EMERGENCY CARE PLACE OF INJURY (LATTITUDE) | Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | INILIRY CHARACTERISTICS | EMERGENCY CARE PLACE OF INJURY (LONGITUDE) | Data item | Addition | EMERGENCY CARE PLACE OF INJURY (LATTITUDE AND LONGITUDE) | EMERGENCY CARE PLACE OF INJURY (LONGITUDE) | Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | | EMERGENCY CARE PLACE OF INJURY (LATTITUDE) | Data item | Format change | an50 | max n2 n6 | Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 | | EMERGENCY CARE PLACE OF INJURY (LONGITUDE) | Data item | Format change | 3050 | max n3 n6 | Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | DESCRIPCION ON DISTRIBUTION | CLINICAL TRIAL IDENTIFIER | Group/Data item | - | DISCHARGE FROM EMERGENCY CARE | RESEARCH AND OUTBREAK NOTIFICATION | Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | | DISEASE OUTBREAK NOTIFICATION | Group/Data item | | DISCHARGE FROM EMERGENCY CARE | RESEARCH AND OUTBREAK NOTIFICATION | Update required following schema testing |
| | | Specification v6.2 | Specification v6.3 | | CLINICAL TRIAL IDENTIFIER | | | and the state of t | | |
| 3/3/2017 | Requirement to Full | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | | CLINICAL TRIAL IDENTIFIER DISEASE OF ITEREAK NOTIFICATION | Group/Data item Group/Data item | Format change | an20 | max an20 max an20 | Update required following schema testing Update required following schema testing |
| 3/3/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 | | | | | | | |
| 3/3/2017 | Requirement to Full Requirement to Full | | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | | n/a | n/a n/a | Addition | n/a n/a | Inclusion of 'flag' information Inclusion of group and data item repeat information. | Update required following feedback from SUS users Update required following feedback from SUS users |
| | | Specification v6.2 | Specification v6.3 | | | | Addition | | | |
| 3/20/2017 | Requirement to Full | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | | | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | | ETHNIC CATEGORY | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | | | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | PATIENT CHARACTERISTICS (EMERGENCY CARE) | PREFERRED SPOKEN LANGUAGE (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ACCESSIBLE INFORMATION PROFESSIONAL REQUIRED CODE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | (SNOMED CT) INTERPRETER LANGUAGE (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | OVERSEAS VISITOR CHARGING CATEGORY AT CDS ACTIVITY DATE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | | GENERAL MEDICAL PRACTITIONER (SPECIFIED) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | | GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | EMERGENCY CARE ATTENDANCE LOCATION | ORGANISATION SITE IDENTIFIER (OF TREATMENT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | EMERGENCY CARE ATTENDANCE LOCATION | EMERGENCY CARE DEPARTMENT TYPE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE ATTENDANCE IDENTIFIER | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | CHARACTERISTICS ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE ARRIVAL MODE (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/201/ | | Specification v6.2 | Specification v6.3 | CHARACTERISTICS | | | | | | |

| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ATTENDANCE CATEGORY | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
|-----------|---------------------|---|---|---|--|-----------|------------------------------|---|--|--|
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ATTENDANCE SOURCE (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | ATTENDANCE OCCURRENCE ACTIVITY | ORGANISATION SITE IDENTIFIER (EMERGENCY CARE ATTENDANCE SOLIBOR) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | | ATTENDANCE OCCURRENCE ACTIVITY | SOURCE) EMERGENCY CARE ARRIVAL DATE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | CHARACTERISTICS ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE ARRIVAL TIME | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | CHARACTERISTICS ATTENDANCE OCCURRENCE ACTIVITY | AGE AT CDS ACTIVITY DATE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 | CHARACTERISTICS | EMERGENCY CARE INITIAL ASSESSMENT DATE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | ., |
| | | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | CHARACTERISTICS | | | | | ,,,, | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Specification v6.3 | CHARACTERISTICS | EMERGENCY CARE INITIAL ASSESSMENT TIME | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ACUITY (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed justification and notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE CHIEF COMPLAINT (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE DATE SEEN FOR TREATMENT | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE TIME SEEN FOR TREATMENT | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | CHARACTERISTICS INJURY CHARACTERISTICS | INJURY DATE | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | INJURY CHARACTERISTICS | INJURY TIME | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | INILIRY CHARACTERISTICS | EMERGENCY CARE PLACE OF INJURY (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 | | EMERGENCY CARE PLACE OF INJURY (LATITUDE) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| | | Specification v6.2 | Specification v6.3 | | | | | | ,,,, | ., |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Specification v6.3 | | EMERGENCY CARE PLACE OF INJURY (LONGITUDE) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY INTENT (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY ACTIVITY STATUS (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY ACTIVITY TYPE (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY MECHANISM (SNOMED CT) | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/20/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | | INJURY CHARACTERISTICS | EMERGENCY CARE INJURY ALCOHOL OR DRUG INVOLVEMENT | Data item | Addition | n/a | Addition of more detailed notes to support collection of data. | Update required following feedback |
| 3/23/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ACCOMMODATION STATUS (SNOMED CT) | Code set | Code change | 414418009 - Housed (finding) | 242711000000100 - Lives in house (finding) | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ACCOMMODATION STATUS (SNOMED CT) | Code set | Addition | n/a | 1066881000000100 - Residence and accommodation circumstances | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | ACCESSIBLE INFORMATION PROFESSIONAL REQUIRED CODE | Code set | Tab name change | LANGUAGE PROFESSIONAL REQUIRED | unknown (finding) ACCESSIBLE INFO PROF REQ | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | PATIENT CHARACTERISTICS (EMERGENCY CARE) | (SNOMED CT) INTERPRETER LANGUAGE (SNOMED CT) | Code set | Addition | n/a | 343671000000102 - English | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE CHIEF COMPLAINT (SNOMED CT) | Code set | Code change | 309774006 - weakness of limb (finding) | 713514005 - Muscle weakness of limb (finding) | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 | CHARACTERISTICS | EMERGENCY CARE CHIEF COMPLAINT (SNOMED CT) | Code set | Code change | 81102000 - Injury of back (disorder) | 450724008 - Injury of cervical region of back (disorder) | Updated following terminology review |
| 3,23,232 | , | Specification v6.2 | Specification v6.3 | CHARACTERISTICS | | | | .,_,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | 282765009 - Upper back injury (disorder) 282766005 - Lower back injury (disorder) | |
| 3/23/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | Code set | Code change | 312403005 - legionella pneumonia (disorder) | 195889001- legionella pneumonia (disorder) | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | Code set | Code change | 371332008 - abortion with complication (disorder) | 609446006 - induced termination of pregnancy with complication | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | Code set | Addition | n/a | (disorder) 274204004 - Corneal burn (disorder) | Updated following terminology review |
| 3/23/2017 | Requirement to Full | Specification v6.2 Emergency Care Data Set (ECDS) Technical Output | Specification v6.3 Emergency Care Data Set (ECDS) Technical Output | ATTENDANCE OCCURRENCE ACTIVITY | EMERGENCY CARE ACTURY (SNOMED CT) | Data item | Change to notes | This data item will required providers to map current triage scores or allocation of a patients | This data item will required providers to man current triage scores or | Updated following publication review. |
| | | Specification v6.2 | Specification v6.3 | CHARACTERISTICS | | | | intended treatment area to a three point acuity score. Please refer to ECDS FAO's. | allocation of a patients intended treatment area to a five point acuity | |
| 3/23/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | | | CARE PROFESSIONAL TIER (EMERGENCY CARE) | Data item | Deletion from notes | This data item will required providers to map Electronic Staff Record (ESR) data relating to | Please refer to ECDS User Guidance . | To be updated following User Guidance development. |
| 3/23/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 | CARE PROFESSIONALS (EMERGENCY CARE) | CARE PROFESSIONAL TIER (EMERGENCY CARE) | Data item | Deletion from notes | employment grade to the appropriate tier as per the Royal College of Medicine Guidance. | n/a | to be updated following user Guidance development. |
| | | | | | | | | Please refer to ECDS FAQ's. | | |
| 3/23/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output | Emergency Care Data Set (ECDS) Technical Output | DISCHARGE FROM EMERGENCY CARE | DECIDED TO ADMIT DATE | Data item | Change to notes | This data item should be recorded when a patient is referred to a service. | This data item should be recorded in the ED record on the occasion | To be updated following User Guidance development. |
| | | Specification v6.2 | Specification v6.3 | | | | - | | whereby a decision is made to refer a patient to a service. | |
| 3/23/2017 | Requirement to Full | Emergency Care Data Set (ECDS) Technical Output Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | DISCHARGE FROM EMERGENCY CARE | DECIDED TO ADMIT TIME | Data item | Change to notes | This data item should be recorded when a patient is referred to a service. | This data item should be recorded in the ED record on the occasion whereby a decision is made to refer a patient to a service. | To be updated following User Guidance development. |
| | | | Emergency Care Data Set (ECDS) Technical Output | | , | | Addition | | | |
| 3/24/2017 | Requirement to Full | Specification v6.2 | Specification v6.3 | | n/a | Guidance | | n/a | Inclusion of explanation of additional columns in Investigations and Treatments code set tabs. | Updated following publication review. |
| 3/8/2017 | Requirement to Full | Specification v6.2 | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | CHARACTERISTICS | EMERGENCY CARE ATTENDANCE CATEGORY | Code set | Change to DM&D Definition | , | | Updated following publication review. |
| 4/5/2017 | Full Approval | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | CDS Type 011 - ECDS Technical Output Specification v1.0 | Document Guidance | Output data set | Guidance | Addition | n/a | Addition of definition of new data item column heading "CQUIN DATA ITEM REQUIRED (Y/N)". | Missing from previous version. |
| 4/5/2017 | Full Approval | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | CDS Type 011 - ECDS Technical Output Specification v1.0 | EMERGENCY CARE TREATMENTS (SNOMED CT) | EMERGENCY CARE PROCEDURE | Data item | Addition | EMERGENCY CARE PROCEDURE | Addition of (SNOMED CT) to date item group name. | Missing from previous version. |
| 4/5/2017 | Full Approval | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | CDS Type 011 - Emergency Care Data Set (ECDS) Technical Output Specification v1.0 | Guidance | Change to specification name | Emergency Care Data Set (ECDS) Technical Output Specification v6.3 | CDS Type 011 - Emergency Care Data Set (ECDS) Technical Output Specification v1.0 | Change of name for ISN publication. |
| 4/18/2017 | Full Approval | Emergency Care Data Set (ECDS) Technical Output | | | EMERGENCY CARE DIAGNOSIS (SNOMED CT) | Code set | Spelling corrections | Multiple code set spelling errors corrected. | | Following publication review |
| | | | | | | | | | | |

CDS V6-2-1 Type 001 - CDS Interchange Header DD Allowed Values / Allowed Repeats Notes/Queries Name Format **Additional Validation Applied** (Mandation) CDS INTERCHANGE SENDER IDENTITY min an1 max an15 None 1..1 CDS INTERCHANGE RECEIVER IDENTITY min an1 max an15 1..1 None CDS INTERCHANGE CONTROL REFERENCE min an1 max an14 None 1..1 1..1 CDS INTERCHANGE DATE OF PREPARATION Date None CDS INTERCHANGE TIME OF PREPARATION Time None 1..1 CDS INTERCHANGE APPLICATION REFERENCE min an1 max an14 NHSCDS 1..1 CDS INTERCHANGE TEST INDICATOR 1, 0 0..1 an1

| CDS V6-2-1 Type 002 - CDS Interchange Trailer | | | | | | | | | | | |
|---|------------------|--|--------------------------------|---------------|--|--|--|--|--|--|--|
| Name | Format | DD Allowed Values / Additional Validation Applied | Allowed Repeats (Mandation) | Notes/Queries | | | | | | | |
| CDS INTERCHANGE CONTROL REFERENCE | min an1 max an14 | None | 11 | | | | | | | | |
| CDS INTERCHANGE CONTROL COUNT | max n7 | None | 11 | | | | | | | | |
| CDS INTERCHANGE SENDER IDENTITY | min an1 max an15 | None | 01 | | | | | | | | |
| CDS INTERCHANGE RECEIVER IDENTITY | min an1 max an15 | None | 01 | | | | | | | | |

CDS V6-2-1 Type 003 - CDS Message Header CDS

| Name | Format | DD Allowed Values / Additional Validation Applied | Allowed Repeats (Mandation) | Notes/Queries |
|----------------------------|------------------|---|--------------------------------|----------------------------------|
| CDS MESSAGE TYPE | an6 | NHSCDS | 11 | |
| CDS MESSAGE VERSION NUMBER | max an6 | CDS062 | 11 | Hard coded in schema - no change |
| CDS MESSAGE REFERENCE | max an14 | None | 11 | |
| CDS RECORD IDENTIFIER | min an1 max an35 | None | 01 | |

CDS V6-2-1 Type 004 - CDS Message Trailer CDS

| Name | Format | DD Allowed Values / Additional Validation Applied | Allowed Repeats (Mandation) | Notes/Queries |
|-----------------------|----------|--|--------------------------------|---------------|
| CDS MESSAGE REFERENCE | max an14 | None | 11 | |

CDS V6-2-1 Type 005B - CDS Transaction Header Group - Bulk Update Protocol

| Name | Format | DD Allowed Values / | Allowed Repeats | Notes/Queries |
|---------------------------------|------------------|--|-----------------|--------------------------|
| Name | Format | Additional Validation Applied | | Notes/Queries |
| CDS TYPE CODE | an3 | 010, 011, 020, 021, 030, 040, 050, 060, 070, 080, 090, 100, 110, 120, 130, 140, 150, 160, 170, 180, 190, 200 | 11 | 011 added to enumeration |
| CDS PROTOCOL IDENTIFIER CODE | an3 | 010, 020 | 11 | |
| CDS UNIQUE IDENTIFIER | min an1 max an35 | None | 01 | |
| CDS BULK REPLACEMENT GROUP CODE | an3 | 010, 020, 030, 040, 050, 060, 070, 080, 090, 100, 110, 120, 130, 140, 150, 160 | 11 | 160 added to enumeration |
| CDS EXTRACT DATE | Date | None | 11 | |
| CDS EXTRACT TIME | Time | None | 11 | |
| CDS REPORT PERIOD START DATE | Date | None | 11 | |
| CDS REPORT PERIOD END DATE | Date | None | 11 | |
| CDS ACTIVITY DATE | Date | None | 11 | |
| CDS SENDER IDENTITY | min an3 max an12 | None | 11 | |
| CDS PRIME RECIPIENT IDENTITY | min an3 max an12 | None | 11 | |
| CDS COPY RECIPIENT IDENTITY | min an3 max an12 | None | 07 | |

CDS V6-2-1 Type 005N - CDS Transaction Header Group - Net Change Protocol

| Name | Format | DD Allowed Values / | Allowed Repeats | Notes/Queries |
|------------------------------|------------------|--|-----------------|--------------------------|
| Name | Format | Additional Validation Applied | (Mandation) | Notes/Queries |
| CDS TYPE CODE | an3 | 010, 011, 020, 021, 030, 040, 050, 060, 070, 080, 090, 100, 110, 120, 130, 140, 150, 160, 170, 180, 190, 200 | 11 | 011 added to enumeration |
| CDS PROTOCOL IDENTIFIER CODE | an3 | 010, 020 | 11 | |
| CDS UNIQUE IDENTIFIER | min an1 max an35 | None | 11 | |
| CDS UPDATE TYPE | an1 | 1, 9 | 11 | |
| CDS APPLICABLE DATE | Date | None | 11 | |
| CDS APPLICABLE TIME | Time | None | 11 | |
| CDS ACTIVITY DATE | Date | None | 11 | |
| CDS SENDER IDENTITY | min an3 max an12 | None | 11 | |
| CDS PRIME RECIPIENT IDENTITY | min an3 max an12 | None | 11 | |
| CDS COPY RECIPIENT IDENTITY | min an3 max an12 | None | 07 | |

DATA GROUP: PATIENT PATHWAY

| aata gelopulin | DATA (SEM NAME | DATA ITEM DEFECTION | SCHEMA COUR DATA (TEM III STATUS REO (MIRIO) | EM REPEATS | EM FORMAT | SNOMED CT / DMLD/DDG | australication | ECCG CODE SET | LINK TO CURRENT COS Type 610 NFORMATION ONLY | | | DATA ITEM PROVENANCE | NOTES |
|---|--|--|---|------------|-----------------|----------------------|---------------------------|------------------|---|--|--------|----------------------------------|--|
| | | | | | | | | | | POPILATION VALIDATION POST SCHEMA VAL F - Formar ix validated V - Validated against an explicit list of permitted values as defined in the NNS Data Disciousy. | CARICM | | |
| Patient Pathway - Patient Pathway Identity Darks group Status: M Darks group Repeals: 1.1 | | | | | | | | | | | | | |
| IOTES: Submit wither UNIQUE BOOKING REFERENCE NUMBER (CONVERTED) or PAT | IENT PATHWAY IDENTIFIER: | | | | | | | | | | | | |
| PATHERY PATHERY - PATERY PATHERY EXTERY | UMOUR BOOKHS REPERENCE NUMBER (CONVERTED) | The arrange besiding difference native assignation for Concess and Board systems when a PATEST receipt on APPOPRING PROTECT and have been free under the desire distribution of the Concess and Board APPOPRING PROTECT (AND the Patient Systems and APPOPRING PROTECT (AND THE APPOPRING PROTECT (| M N | 5.3 | ri2 | DMAD | As per CCG 6.2 Type 010 | folia | Introduce destablishmen vite skiller, g. detectablishe field redestablish State bodden reference number Concernate de associationale. | E No | | Originates from A&E CDS Type 610 | ERFORMANCE MODERNO BEFERENCE NUMBER (CONVERTED) OR PATIENT PATHWAY YEARTIFEE |
| PATEOT PARMIAY-PATEOT PARMIAY CONTTY | PATEST PATURAY CENTESS | Assembles and Supplies and the GROSHATISTIC COSE, G | | 5.4 | arab) | DMAD | Augur CDG 4.2 Tigger 0/10 | nis | ton Veges destrictioners vieta sidera disconsentation field medicine disconsentation (identifier de asso? siderations). | E min | | Originates from A&E CDS Type 610 | CONTRACTOR AND |
| PATIENT PATHWAY - PATIENT PATHWAY IDENTITY | ORGANISATION IDENTIFIER (PATIENT PATHWAY IDENTIFIER (\$SUER) | ORGANISATION DENTIFIER (PATIENT PATHWAY DENTIFIER ISSUER) is the ORGANISATION DENTIFIER of the Organisation issuing the PATIENT PATHWAY DENTIFIER. | M N | 1.1 | min and max and | oos | As per COS 6.2 Type 610 | nh | tetr i lesse destadricioners inha skider g. dictioners intributes in beginnersie gifcon code de asso i showness di | F nia | | Originates from A&E CDS Type 610 | |
| PATIENT PATHWAY - REFERRAL TO TISEATMENT PERIOD CHARACTERISTICS MAIN GROUP STATUS: M GROUP REPEATS: 1.1 | | | | | | | | | | | | | |
| PATIENT PATHWAY - REFERRAL TO TREATMENT PERIOD CHARACTERISTICS | REFERRAL TO TREATMENT PERIOD STATUS | The status of an ACTIVITY (or anticipated ACTIVITY) for the REFERRAL TO TREATMENT PERIOD decided by the lead CARE PROFESSIONAL. | M N | 1.1 | ar2 | DMAD | As per COG 6.2 Type 010 | Link to code set | tito l'esse datadicionen rhe skider a dictionary/data l'eld notestrivelli plarral so treatment period atasse de asp [®] shouras-0 | V mis | | Originates from AME CDS Type 660 | |
| PATIENT PATHWAY - REFERRAL TO TREATMENT PERIOD CHARACTERISTICS | | The type of eating time reasonement methodology within map in applied during a PATENT PRIMERY TRANSPORT from embodology applied may be for one period a PATENT PATENTAL ACCORDING TO THE PATENT PATENTAL ACCORDING TO THE PATENT PATENTAL ACCORDING TO Department of Health policy. | M N | 5.4 | ar2 | DMAD | As per COS 6.2 Type 610 | Link to code set | to Vese detectionary ris wider a determinate field rotes while to the measurement type do as of shoemand | V nis | | Originates from A&E CDS Type 610 | |
| PATIENT PATHWAY-REFERRAL TO TREATMENT PERIOD CHARACTERISTICS | | The start date of a REFERRAL TO TREATMENT PERIOD. | O N | 0.1 | auto CCYY-MM-OD | DMED | As per CDS 4.2 Type 010 | nis | to l'esse datadictioners rhs. détar a dictionarsidata field roteativels efernal lo treatment period start date de asp?shownes=0 | F | | Originates from A&E CDS Type 610 | |
| PATIENT PATHWAY - REFERRAL TO TREATMENT PERIOD CHARACTERISTICS | referral to treatment period end date | The end date of a REPERRAL TO TREATMENT PERIOD. | O N | 0.1 | auto CCYY-MM-DD | DMAD | As per COS 6.2 Type 010 | nis | http://www.datadictionary.nhr.uk/dat a_dictionary/data_field_notes/triel/t alleral_to_treatment_period_end_di bts_de_ass/biography.di | F min | | Originates from AME CDS Type 610 | |

| ECDS_UniqueID | Sort1 ECDS_Grou | p ECDS_Description | DM&D_Code (DM&D) | DM&D Description | Notes |
|---------------|-----------------|---|------------------|--|-------|
| n/a | n/a n/a | First activity - first activity in a referral to treatment period | 10 | First activity - first activity in a referral to treatment period | |
| n/a | n/a n/a | Active Monitoring end - first activity at the start of a new referral to treatment period | 11 | Active Monitoring end - first activity at the start of a new referral to | |
| | | following active monitoring. | | treatment period following active monitoring. | |
| n/a | n/a n/a | CONSULTANT or NHS Allied Health Professional Service (Referral to Treatment | 12 | CONSULTANT or NHS Allied Health Professional Service (Referral to | |
| | | Measurement) referral - the first activity at the start of a new referral to treatment period | | Treatment Measurement) referral - the first activity at the start of a | |
| | | following a decision to refer directly to the consultant or NHS Allied Health Professional | | new referral to treatment period following a decision to refer directly to | |
| | | Service (Referral to Treatment Measurement) for a separate condition. | | the consultant or NHS Allied Health Professional Service (Referral to | |
| | | | | Treatment Measurement) for a separate condition. | |
| n/a | n/a n/a | Subsequent activity during a referral to treatment period - further activities anticipated. | 20 | Subsequent activity during a referral to treatment period - further activities | |
| | | | | anticipated. | |
| n/a | n/a n/a | Transfer to another heath care provider - subsequent activity by another Health Care | 21 | Transfer to another heath care provider - subsequent activity by | |
| | | Provider during a referral to treatment period anticipated. | | another Health Care Provider during a referral to treatment period | |
| | | | | anticipated. | |
| n/a | n/a n/a | Start of First Definitive Treatment | 30 | Start of First Definitive Treatment | |
| n/a | n/a n/a | Start of active monitoring initiated by the patient | 31 | Start of active monitoring initiated by the patient | |
| n/a | n/a n/a | Start of active monitoring initiated by the care professional | 32 | Start of active monitoring initiated by the care professional | |
| n/a | n/a n/a | Did not attend - the patient did not attend the first care activity after the referral | 33 | Did not attend - the patient did not attend the first care activity after the | |
| | | | | referral | |
| n/a | n/a n/a | Decision not to treat - decision not to treat made or no further contact required | 34 | Decision not to treat - decision not to treat made or no further contact | |
| | | | | required | |
| n/a | n/a n/a | Patient declined offered treatment | 35 | Patient declined offered treatment | |
| n/a | n/a n/a | Patient died before treatment | 36 | Patient died before treatment | |
| n/a | n/a n/a | After treatment - First Definitive Treatment occurred previously (e.g. admitted as an | 90 | After treatment - First Definitive Treatment occurred previously (e.g. | |
| | | emergency from A&E or the ACTIVITY is after the start of treatment) | | admitted as an emergency from A&E or the ACTIVITY is after the start of | |
| | | | | treatment) | |
| n/a | n/a n/a | Active Monitoring - CARE ACTIVITY during Active Monitoring | 91 | Active Monitoring - CARE ACTIVITY during Active Monitoring | |
| n/a | n/a n/a | Not yet referred - not yet referred for treatment, undergoing diagnostic tests by GENERAL | 92 | Not yet referred - not yet referred for treatment, undergoing diagnostic tests | |
| | | PRACTITIONER before referral | | by GENERAL PRACTITIONER before referral | |
| n/a | n/a n/a | Not applicable - ACTIVITY not applicable to referral to treatment periods | 98 | Not applicable - ACTIVITY not applicable to referral to treatment periods | |
| | | | | | |
| n/a | n/a n/a | Not yet known | 99 | Not yet known | |
| | | | | | |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description |
|---------------|-------|------------|---|
| n/a | n/a | n/a | Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement |
| | | | |
| n/a | n/a | n/a | Allied Health Professional Referral To Treatment Measurement |
| n/a | n/a | n/a | Other Referral To Treatment Measurement Type |

| DM&D_Code | DM&D Description | Notes |
|-----------|--|-------|
| 01 | Referral To Treatment Period Included In Referral To Treatment | |
| 01 | Consultant-Led Waiting Times Measurement | |
| 02 | Allied Health Professional Referral To Treatment Measurement | |
| 09 | Other Referral To Treatment Measurement Type | |

DATA GROUP: PATIENT IDENTITY

FUNCTION: To carry the identity of the patient Group Status: M Group Repeats: 1..1

NOTES: ONE OF THE FOLLOWING DATA GROUPS MUST BE USED

| NOTES: ONE OF THE FOLLOWING DATA GROUPS M | UST BE USED | | | | | | | | | | | | |
|---|--|--|-------------------------------------|---|-----------------------------|----------------------|--|------------------|--|---|----------------------|--|-------|
| saaa watoor | data fine state | BAS FIRE CONTROL | DATA ITEM CO STATUS S (MIRIO) | DUN DATA DATA ITEM ITEM REPEATS EQUIPED (YIN) | w FORMAT | SNOWED CT / DMAD HOS | JUSTIFICATION | ECOS CODE SET | LINK TO CUSPIENT COS Type 918 NFORMATION ONLY | VALIDATION RULES POPULATION VALIDATION F-Former is validated V-Validated value as defined in the NHS Date Diclinary | ST SCHEMA VALIDATION | DATA ITEM PROVENANCE | Norsa |
| PATENT PATHRAY - WITHHELD EENTITY STRUCTURE | | | | | | | | التسب | | | | | |
| OATA GROUP STATUS: OATA GROUP SEPEATE: 1.1 NOTES: Must be used where the Correlationing Data Set record has been anonymized | | | | | | | | | | | | | |
| PATIENT IDENTITY - WITHHELD IDENTITY STRUCTURE | NIG NUMBER STATUS INDICATOR CODE | The trace status of the NHS number. | M N | 1.1 | an2 | DMED | As per CDS 6.2 Type 010 | Link to code set | http://www.datadictionary.nhs.uk/da ta.dictionary/data-field-notes/n/nhs. Inhs. number status indicator code de.asp?shownam0 | L W IN/A | | Originates from A&E COS Type 050 | |
| ANTERY GENTITY WITHHELD GENTITY STRUCTURE | ownership contrat present appreauty | Concentration Control (INCENTRATION CONTROL CO | R N | 0.5 | min an3 max an5 | oos | Updated to new Organisation code guidelines | n/a | Control from Artifectioners who added to distinct from the Artifection of Control Computation on the International Con- ception of the International Con- trol Control of Control Control of Con- trol Control of Control of Control of Con- trol Control of Control of Control of Con- trol Control of Control of Control of Con- trol of Control of Control of Control of Control of Con- trol of Control of Control of Control of Control of Control of Con- trol of Control of Contro | n/s | | Originates from A&E COS Type 010 | |
| PATIENT IDENTITY - WITHHELD IDENTITY STRUCTURE | WITHHELD IDENTIFY REASON | WITHHELD IDENTITY REAGON allows suppliers of data set records to indicate to recipients of the record (for example, the Commissioner of the activity) that the record has been purposely anonymised for a valid reason. | R N | 0.1 | an2 | DM&D | As per CDS 6.2 Type 010 | Link to code set | http://www.datadictionary.nhs.uk/da ta.dictionaru/data-field_notes/w/we- /withheld_identity_reason_de.aso?uh. | S W m/a | | Originates from A&E COS Type 010 | |
| PATENT PATHWAY - VERIFED DENTITY STRUCTURE | | | | | 1 | | | | parameter . | | | | |
| DATA GROUP STATUS: OATA GROUP REPEATS: 1.1 NOTES: Must be used where the NMS MUNRER STATUS ROCATOR CODE NATional Co- PATENT DESTRIPT - LOCAL PATENT DESTRIPTS STRUCTURE | So - 61 (Number present and melfod) | | | | lar-v | loves | As per COS 6.2 Type COS | To to | here the | | | Originates from A&E COS Type 030 | |
| | | A number used to identify a PATEINT uniquely within a Health Care Provider. It may be different from the PATEINT's case note number and may be assigned automatically by the computer system. | | | cas an 20 | | | nja | http://www.datadictionary.nhs.uk/da ta_dictionary/data_field_notesAff/lip cal_gatient_identifier_de.asp?showns un0 | n/a | | | |
| PATIENT IDENTITY - LOCAL PATIENT IDENTIFIER STRUCTURE DATENT DENTITY - MERISHIN INSTITY STRUCTURE | ORGANISATION (CONTINUES (LOCAL PATIENT (CONTINUES) | ORGANISATION DONTRICE, DOCAL PATIENT DONTRICES in the ORGANISATION DONTRICE of the Organisation that integred the LOCAL ARTIBAT DONTRICE. THE MAKE WINDLESS THE MITTERS OF A RESOURCE A unique independent for a BETTINT within the MAKE in Control of the Control | M N | 1.1 | min an3 max an5 | 005 | Updated to new Organisation code guidelines ## new COS 6-2 Turn 000 | n/s | http://www.datadctionary.nhs.uk/da ta-dictionars/fata field notes/colors forestriation code flocal patient id- entified de-sap?shownarn0 | n/s | | Originates from A&C CDS Type 010 Originates from A&C CDS Type 010 | |
| PATIENT IDENTITY - VERIFIED IDENTITY STRUCTURE | NVG KUMMER | The NMS NUMBER, the primary identifier of a PERSON, is a unique identifier for a PATIENT within the NMS in England and Wales. | M N | 1.1 | n20 | UMBD | As per COS 6.2 Type 010 | 0/2 | http://www.datadictionary.nhs.uk/da ta_dictionary/data_field_notes/n/shs_ /nhs_number_de.asp?nhownavn0_ | n/a | | Originates from A&C COS Type 050 | |
| PATIENT IDENTITY - VERIFIED IDENTITY STRUCTURE | INIS NUMBER STATUS INDICATOR CODE | The trace status of the NHS number. | M N | 1.1 | an2 | DMED | As per COS 6.2 Type 030 | Link to code set | http://www.datadictionary.nhs.uk/da ta_dictionary/flata_field_notes/n/nhs /nhs_number_status_indicator_code de_sez*th.ownsm0 | l V n/a | | Originates from A&E CDS Type 050 | |
| PATIENT IDENTITY - VERIFIED IDENTITY STRUCTURE | POSTCODE OF USUAL ADDRESS | The code assigned by Royal Mail to identify postal delivery areas across the United Kingdom. | M N | 1.1 | max and | DMED | As per COS 6.2 Type O10 | n/a | http://www.datadictionary.nhs.uk/da ta_dictionary/data_field_notes/p/po/ postcode_of_sessi_address_da.ssplt | i F | | Originates from A&C COS Type 050 | |
| PATIENT IDENTITY - VERIFIED IDENTITY STRUCTURE | ORGANISATION (IONTHUR (#SSIONICE #SSPONSIBLITY) | An ORGANISATION CODE is a code which identifies an Organisation uniquely. | R N | 0.1 | min an3 max an5 | oos | Updated to new Organisation code guidelines | n/s | ter l'avec d'atalictioner, els sélés ta dictionary/fata field notes/olors (organisation code (residence respo rebilité) de assistances (espo rebilité) de assistances (espo | L F n/a | | Originates from A&E CDS Type 050 | |
| PATIENT IDENTITY - VERIFIED IDENTITY STRUCTURE | PERSON BIRTH DATE | The date on which a PERSON was born or is officially deemed to have been born. | R N | 0.1 | anto CCYY-MW-DD | DMED | As per COS 6.2 Type O10 | n/a | http://www.datadictionary.nhs.uk/da ta.dictionary/fata.field.notes/p/per s/senso.birth.date_de.ass?showna | n/a | | Originates from A&C CDS Type 0:00 | |
| PATENT PATHWAY - UNIVERFED IDENTITY STRUCTURE DATA GROUP STATUS: DATA GROUP REPEATS: 1.1 NOTES: Submit either - UNDUE BOOKING REFERENCE MUNISER (CONVERTED) or | | | | | | | | | | | | | |
| NOTES Senie einer WINDUE BORNING BEFBENCE NUMBER (CONVERTED) or PATENT PATENTAL EKOTTER? ATTENT CENTITY - UNVERBED DERNITY STRUCTURE | SOCIA PATENT (SENTRER (INTEROLIS) | A number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's cases it is exclude and only be assigned abstraction by the company repens. When care for NOR patient is also cerestrosists be the independent extent or coverant, the NOS commissioner PAS finanche robust be used. If no NOS PAS it washer has been assigned the independent south or coverant PAS finanche robust be used. If no NOS PAS it washer has been assigned the independent south or coverant PAS finanche robust be used. | M N | 1.1 | mas an 20 | OMEO | As per COS 6.2 Type 030 | n/s | http://www.datadictionary.ohs.uk/da ts.dictionary/data.field_notes/Africa cal_nationt_ident/for_do_sss?showns yd0 | F n/s | | Originates from A&E COS Type 010 | |
| PATIENT ISENTITY - UNAVERHED ISENTITY STRUCTURE | ORGANISATION CONTINUES (LOCAL PATIENT CONTINUES) | An OBGANIGATION CODE is a code which identifies an Organization uniquely. | M N | 1.1 | min an3 max an5 | oos | Updated to new Organisation code guidelines | m/s | http://www.datafictionary.nhs.uk/da ta_dictionary/data field_noteu/o/org onzarisation_code_flocal_patient_id_ entitler1_de_sap?shownavr0_ | į F n/s | | Originates from A&E CDS Type 010 | |
| PATIENT IDENTITY - UNIVERFIED IDENTITY STRUCTURE | NVG NUMBER | The NVS NUMBER, the primary identifier of a PERSON, is a unique identifier for a PATIENT within the NVS in England and Wales. | R N | 0.1 | mbo | DMED | As per COS 6.2 Type 010 | n/a | http://www.datadictionary.nhs.uk/da ta-dictionary/data-field_notes/n/nhs inhs_number_de.asp?shownavn0 | s f | | Originates from A&E CDS Type 000 | |
| NATION TOWNSHEED IDENTITY STRUCTURE | INIS NUMBER STATUS INDICATOR CODE | The trace status of the NHS number | sa N | 1.1 | an2 | DM&D | As per CDS 6.2 Type 010 | Link to code set | http://www.datadictionary.nhs.uk/da ta.dictionary/data.field_notes/n/ohs /nhs.number.status_indicator_code de.aug?db.cumar=0 | L V n/a | | Originates from A&E CDS Type 010 | |
| PATIENT IDENTITY - UNIVERSIFIED IDENTITY STRUCTURE | PATRENT NAME - PERSON NAME STRUCTURED OF PATRENT NAME - PERSON NAME UNSTRUCTURED | PATIENT NAME is the PERSON NAME where the PERSON NAME CLASSIFICATION is 'Preferred Name' of the PATENT. | O N | 0.1 | max an 70 | DMED | As per CDS 6.2 Type 010 | n/a | http://www.datadictionary.nhs.uk/da ta.dictionary/data-field_notes/p/gat (natient_name_de.asp?shownav=0) | L F n/a | | Originates from A&E CDS Type 010 | |
| PATIENT IDENTITY - UNIVERSIFIED IDENTITY STRUCTURE | PATTENT USLIAL ACCRESS - ACCRESS STRUCTURED (Label format Postal Address) OR PATTENT USLIAL ACCRESS - ACCRESS UNSTRUCTURED (Character string) | PATIENT USUAL ACORESS is the usual ACORESS nominated by the PATIENT, where the ACORESS ASSOCIATION TYPE is "Main Permanent Residence" or "Other Permanent Residence". | R N | 0.1 | max an 175 (5 lines each an | n35) DM&D | As per CDS 6.2 Type 010 | n/a | http://www.datadctionary.nhs.uk/da ta_dictionary/data_field_notes/o/pat /patient_usual_address_de_asp?show | j 6 n/a | | Originates from ASE CDS Type 010 | |
| WITHOUT IDENTITY - UNIVERSIFIED IDENTITY STRUCTURE | POSTCODE OF USUAL ADDRESS | The code assigned by Royal Mail to identify postal delivery areas across the United Kingdom. | R | 0.1 | max anii | DMED | As per CDS 6.2 Type 030 | n/a | naviū http://www.datadictionary.nhs.uk/da ta dictionary/data field notes/o/po/ postcode of usual address de.aup?s | , F n/a | | Originates from A&E CDS Type 050 | † |
| MARKET GEATITY - UNIVERSED ISSENTITY STRUCTURE | GRAMMATON CONTINUE (RESIDENCE RESPONSEUTY) | Observation Control REGIONAL SPONSONT'S on DisplayCost Control Annal from the MEET's characteristics where the most within the baselup of a characteristic control and the control and the control and characteristics and control and control and control and careful tests that which the control and control and control and characteristics and control and characteristics and characteri | R N | 0.1 | min and mac and | oos | Updated to new Organisation code guidelines | n ja | hommen detaditionen, ohs sählä bitto liberan detaditionen, ohs sählä ta dicionen fidat field noteslulon boresinellan onde freidenen resen militri da senlahoumenik | 1 N/a | | Deginates from A&A CSS Type 010 | |
| ATIENT IDENTITY - UNVERIFIED IDENTITY STRUCTURE | PERSON BIRTH DATE | The date on which a PERSON was born or is officially deemed to have been born. | ID N | 0.1 | an10 CCYY-MW-DD | DMED | As per CDS 6.2 Type 010 | 10/0 | http://www.datadictionary.nhs.uk/da ta-dictionary/data-field_notes/p/per- y/person_birth_date_de.sup?showna | 1)- 0/a | 1 | Originates from A&E CDS Type 010 | 1 |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description |
|---------------|-------|------------|--|
| n/a | n/a | n/a | Number present and verified |
| n/a | n/a | n/a | Number present but not traced |
| n/a | n/a | n/a | Trace required |
| n/a | n/a | n/a | Trace attempted - No match or multiple match found |
| n/a | n/a | n/a | Trace needs to be resolved - (NHS Number or PATIENT detail conflict) |
| n/a | n/a | n/a | Trace in progress |
| n/a | n/a | n/a | Number not present and trace not required |
| n/a | n/a | n/a | Trace postponed (baby under six weeks old) |

Note:

In the WITHHELD IDENTITY STRUCTURE, all the above NHS NUMBER STATUS INDICATOR values are accepted In the VERIFIED IDENTITY STRUCTURE, only value 01 is accepted

In the UNVERIFIED IDENTITY STRUCTURE, all values EXCEPT value 01 are accepted

| DM&D_Code | DM&D Description | Notes |
|-----------|--|-------|
| 01 | Number present and verified | |
| 02 | Number present but not traced | |
| 03 | Trace required | |
| 04 | Trace attempted - No match or multiple match found | |
| 05 | Trace needs to be resolved - (NHS Number or PATIENT detail conflict) | |
| 06 | Trace in progress | |
| 07 | Number not present and trace not required | |
| 80 | Trace postponed (baby under six weeks old) | |

| ECDS_UniqueID | Sort1 ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|------------------|--|-----------|--|-------|
| n/a | n/a n/a | Record anonymised for legal/ statutory reasons | 01 | Record anonymised for legal/ statutory reasons | |
| n/a | n/a n/a | Record anonymised at request of Caldicott Guardian | 02 | Record anonymised at request of Caldicott Guardian | |
| n/a | n/a n/a | Record anonymised at request of patient | 03 | Record anonymised at request of patient | |
| n/a | n/a n/a | Record anonymised for other reason | 97 | Record anonymised for other reason | |
| n/a | n/a n/a | Identity withheld but reason not known | 99 | Identity withheld but reason not known | |

DATA GROUP: PATIENT CHARACTERISTICS

FUNCTION: To carry the characteristics of the Patient for an Emergency Care Attendance. Group Status: R Group Repeats: 0.1

| encur | DATA ITEM NAME | CATA ITEM SEPINITON | DATA ITEM STATUS (MINIO) | COUNTRAL D. ITEM RI REQUIRED (YIN) | TAITEM FORMAT PEATE | SNOWED CT / DNED/O | SE JETPEMEN | SCOS CODE SET | LINK TO CUMMENT COS Type one RECOMMENTION COLY | VALEATION MALES | POST SCHEMA VALENTON | DATA ITEM PROVENANCE | NOTES |
|---------------------------------------|---|--|--------------------------------|---|------------------------|--------------------|--|-------------------|--|--|---|------------------------------------|--|
| | | | | | | | | | | F - Formal is validated V - Validated against an explicit tell of permitted values as defined in the NAS De Distributor | | | |
| T CHARACTERISTICS (EMERGENCY CARR) | PERSON STATES GENERAL COOR | The gender of a PRECOS. PRESCR. EXTENDED CODE is self-declared as solvened by observation for those avoide to declare their PRECOS EXAMID MAKER. | • | N 0. | in a | DMED | As per CDS 6.2 Type 23.3. Updated to alignois most recent information standard to desirate gender, changed from Person Sender Code. | Lank to code and | the frame distriction as the old file of the constitute field constitutions; seems sender code current de auch limitard. | v | N/a | Driginates from ABE CDS Type 050 | |
| NT CHARACTERISTICS (SMERGENCY CARE) | STHAIC CETTIONY | the ethnicity of a PERSON, is specified by the PERSON. | | N 0. | s man and | DAVED | 84 per CDS 6.3 Type-033 | Lank to coolerant | http://www.databition.or.chi.uk/dat a.dictionary/data-field-extended- tess-categoin-de-assi/doloniary/d | v | n/a | Degrades from A&E CDS Type 000 | |
| NT CHARACTERISTICS (IMERGENCY CAME) | ACCOMMICDIANCE SESTIA (WOMED CT) | ACCOMPACENTS VISTOR (MODIFIE CT) is the DROMED CT cancept to which is used bandwidy the details of the ACCOMPOSITION of the PRINCIP. | | N 0. | S MAN NE NEW N. 28 | INDMIS CT | This liters is executing to identify rate, of ED treatment, advantates and distribute of quantity populations of planted. This will subcreately and planning and definitely of later for specific populations groups at let his hand and created where a by historifying parties can be more planted where come come later is about con- ent and the assessment of the parties of the contract to be managed and any taleff arising mean. | | -0 | | For any data from which contains a value other than specified is relevant code or, alongs the value that supposes it out it cannot have take it will be volide to those with this close and therefore a validate for deposits and localizationizing it only engineering for regions is user such as "Value for received,", field it is not in the assimptible range? | | |
| от Онластиватся умеворост скор | METEROD PRODUCTIONAL (INCOME) CT | METPHORE SPORES AND ADMINISTRATION C.C. is the SECOND C.C conveyed G which is word to copylare the perferred qualities. AND CLOSE of the PRINCIPS. | | N 0. | man nãi mau n.SE | SNOMED CT | Necessary is a control and this loss for promote for patient renest, showing insequent answers that any prevent applicant in believes and multi-projecting of these three many is a simulationised. This data is exemisary is secure if the deliter renounces make, patient arend. | | 4/6 | | he lay data from which instance a value offer than yearfield in retrieut case, and, asking the window that opposes it to Channel how IEEE III will be couldn't in- thour with IEE askins and therefore parallels for disapposits and toucherhoristics; you approprietable receiped has one cauch as "Other for receipt. If field I' is not in the asseptible range". | | |
| NT CHARACTERISTICS (IMERGENCY CIRE) | ACCESSES INFORMATION PROPESSIONAL REQUIRED CICCH (INCINED CT) | ACCESSES PROFIBERORS PROFESSORS REQUIRED CODE (WE CASTO CT) is the SECNED CT coverage of which is used to shortify that the PACEST requires support from a summinusation professoral. | i. | N 0. | t max nd max n38 | INDMID CT | Roundary is underdand how led to private for patient needs, sheally language larenes that may prevent optimal healthcare and enable planning for how these may be annehoosed. This olds is executary to recurs it to indication resources make patient need. | | 4/6 | • | for any data term which contains a value other than specified in relevant code only accept the value but suppress it so it cancel leave \$100 pt will be unblied to those with \$100 access and therefore authorise for diagnosts and broad-belowings (see Experimental for response to see such as "Value for records X, field Y X out in the acceptable range". | | |
| AT COMMICTIONATICS (IMMERICACY CARRY) | извентильными ресииз СТ | extrements utilizating problem (C.S.) in 200000 CF covery CP which is worth upgreen that private grains. MISSORI CF for continuous problems (C.S.) in 200000 CF covery CP which is worth upgreen that private grains. | | N E. | s win oil max n38 | INOMIS CT | Necessary to understand his feel in promote for patient rends, mentify inquign before that may present special feel feel and on the disciplinating of the feel free may be ameliorated. This dide is executarly be resure the based dates resources make pulpert used. | | 4/4 | , | For any data from within contract, a water after than quantity of the critical con- cept and property of the contract than 100 for 100 | | The olds have must be unlessed if Australian Information Professional Register Code is "Supporter revolution." |
| от олластивалісь (імевсенсу сине) | OVERSIAS VISTOR CHARGING CATROOMS AS CES SCRIVITY DATE | The changing company reliating to an OVERDADA VIDTOR SEXTUR. | | N 0. | a and | DAMED | as per CDS 6.3 Type 03.0. Code on amended to align to new Enry guillance on reclaiming overview shallows contributions to NMS care. | tion to make set | http://www.databationary.nhc.ut/dat t distribution/data finit national/an/or maner visitor status classification at the activity data de acathologous | v | n/a | Origination, from A&E CDS Type CSO | |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|-------|------------|------------------|-----------|------------------|-------|
| 2018110000 | 11 | n/a | Male | 1 | Male | |
| 2018220000 | 22 | n/a | Female | 2 | Female | |
| 2018330000 | 33 | n/a | Indeterminate | 9 | Indeterminate | |
| 2018440000 | 44 | n/a | Unknown | Χ | Unknown | |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | DM&DS_Code | DM&D Description | Notes |
|---------------|-------|-------|------------------------|------------------------------------|------------|------------------------------------|-------|
| 2018111100 | 11 | 11 | White | White: British, mixed British | Α | White: British, mixed British | |
| 2018111400 | 11 | 14 | White | White: Irish | В | White: Irish | |
| 2018111700 | 11 | 17 | White | Any other White background | С | Any other White background | |
| 2018511100 | 51 | 11 | Mixed | White and Back Caribbean | D | White and Back Caribbean | |
| 2018511500 | 51 | 15 | Mixed | White and Black African | E | White and Black African | |
| 2018511900 | 51 | 19 | Mixed | White and Asian | F | White and Asian | |
| 2018512300 | 51 | 23 | Mixed | Any other mixed background | G | Any other mixed background | |
| 2018611100 | 61 | 11 | Asian or Asian British | Indian | Н | Indian | |
| 2018611500 | 61 | 15 | Asian or Asian British | Pakistani | J | Pakistani | |
| 2018611900 | 61 | 19 | Asian or Asian British | Bangladeshi | K | Bangladeshi | |
| 2018612300 | 61 | 23 | Asian or Asian British | Any other Asian background | L | Any other Asian background | |
| 2018711100 | 71 | 11 | Black or Black British | Caribbean | M | Caribbean | |
| 2018711600 | 71 | 16 | Black or Black British | African | N | African | |
| 2018712100 | 71 | 21 | Black or Black British | Any other Black background | Р | Any other Black background | |
| 2018811100 | 81 | 11 | Other ethnic | Chinese | R | Chinese | |
| 2018811600 | 81 | 16 | Other ethnic | Any other ethnic group | S | Any other ethnic group | |
| 2018912100 | 91 | 21 | Unknown | Not stated e.g. unwilling to state | Z | Not stated e.g. unwilling to state | |
| 2018991100 | 99 | 11 | Unknown | Not known e.g. unconscious | 99 | Not known e.g. unconscious | |

| ECDS_UniqueID 2018110000 | Sort1 | ECDS_Group n/a | ECDS_Description Patient has own stable accommodation e.g. home / flat | SNOMED_Code 242711000000100 | SNOMED_Description Lives in house (finding) |
|-----------------------------|-------|-------------------|--|--------------------------------|---|
| 2018210000 | 21 | n/a | Warden controlled accommodation | 224221006 | Lives in warden controlled accommodation (finding) |
| 2018310000 | 31 | n/a | Residential institution WITHOUT routine nursing care | 394923006 | Lives in a residential home (finding) |
| 2018410000 | 41 | n/a | Residential institution WITH routine nursing care | 160734000 | Lives in a nursing home (finding) |
| 2018510000 | 51 | n/a | Medical area | 224225002 | Lives in hospital (finding) |
| 2018610000 | 61 | n/a | Homeless in night shelter | 224231004 | Sleeping in night shelter (finding) |
| 2018710000 | 71 | n/a | Homeless without accommodation | 32911000 | Homeless (finding) |
| 2018910000 | 91 | n/a | Usual accommodation not given : patient refused | 1064831000000106 | Declines to provide accommodation details (finding) |
| 2018920000 | 92 | n/a | Usual accommodation not given : patient physically unable | 1064841000000102 | Unable to provide accommodation details (finding) |
| 2018930000 | 93 | n/a | Usual accommodation not known | 1066881000000100 | Residence and accommodation circumstances unknown (finding) |

ECDS_Notes

Includes: house, farm house, non-institutional place of residence, apartment/ flat, boarding house, hotel, caravan park, refuge, long-term squat with utilities

Excludes : Institutional long-term place of residence, Abandoned or derelict house

Includes : home with intermittent welfare checksExcludes : residential / nursing home with continuous dedicated staffing

Includes : Children's home, residential home, old people's home, military camp, prison, monastery Excludes : Hospital, nursing home, hospice, psychiatric hospital

Includes: nursing home, hospiceExcludes: hospital, residential home, psychiatric hospital Includes: hospital, clinic, psychiatric hospital (long term)Excludes: hospice, nursing home

Includes : night shelter, homeless shelter, emergency housingExcludes : sleeping rough

Includes: homeless, sleeping rough, abandoned or derelict housing, squatting without utilitiesExcludes: night shelter, homeless shelter

Includes: any situation where the patient can physically answer questions but refuses to answer this question.

Includes : only situation when patient physically unable to respond e.g. unconscious and not able to establish by other means

Do not use unless all no other code applicable

| ECDS_UniqueID | Sort1 | Sort2 ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_TERM |
|---------------|-------|------------------|------------------|------------------|---|
| 1111110000 | 11 | 111 Most common | English | 315570003 | Main spoken language English (finding) |
| 1112110000 | 11 | 211 Most common | French | 315571004 | Main spoken language French (finding) |
| 1112260000 | 11 | 226 Most common | German | 407643006 | Main spoken language German (finding) |
| 1113310000 | 11 | 331 Most common | Polish | 315579002 | Main spoken language Polish (finding) |
| 1115990000 | 11 | 599 Most common | Spanish | 315584008 | Main spoken language Spanish (finding) |
| 1116110000 | 11 | 611 Most common | Chinese | 970501000000106 | Main spoken language Chinese (finding) |
| 1117010000 | 11 | 701 Most common | Welsh | 408532009 | Main spoken language Welsh (finding) |
| 1117110000 | 11 | 711 Most common | Irish | 698667006 | Main spoken language Irish (finding) |
| 1117220000 | 11 | 722 Most common | Gaelic | 408522002 | Main spoken language Gaelic (finding) |
| 1117870000 | 11 | 787 Most common | Cornish | 970531000000100 | Main spoken language Cornish (finding) |
| 1117990000 | 11 | 799 Most common | Romany | 1036381000000101 | Main spoken language Romany (finding) |
| 1311110000 | 31 | 111 Common A-E | Albanian | 407648002 | Main spoken language Albanian (finding) |
| 1311160000 | 31 | 116 Common A-E | Arabic | 315566006 | Main spoken language Arabic (finding) |
| 1311210000 | 31 | 121 Common A-E | Belarusian | 698655009 | Main spoken language Belarusian (finding) |
| 1311260000 | 31 | 126 Common A-E | Bengali | 315567002 | Main spoken language Bengali (finding) |
| 1311310000 | 31 | 131 Common A-E | Bosnian | 970471000000104 | Main spoken language Bosnian (finding) |
| 1311360000 | 31 | 136 Common A-E | Bulgarian | 699945003 | Main spoken language Bulgarian (finding) |
| 1311410000 | 31 | 141 Common A-E | Burmese | 698891000 | Main spoken language Burmese (finding) |
| 1311460000 | 31 | 146 Common A-E | Cantonese | 315568007 | Main spoken language Cantonese (finding) |
| 1311510000 | 31 | 151 Common A-E | Catalan | 698892007 | Main spoken language Catalan (finding) |
| 1311560000 | 31 | 156 Common A-E | Chechen | 970491000000100 | Main spoken language Chechen (finding) |
| 1311660000 | 31 | 166 Common A-E | Croatian | 407650005 | Main spoken language Croatian (finding) |
| 1311710000 | 31 | 171 Common A-E | Czech | 315569004 | Main spoken language Czech (finding) |
| 1311760000 | 31 | 176 Common A-E | Danish | 698894008 | Main spoken language Danish (finding) |
| 1311810000 | 31 | 181 Common A-E | Dutch | 408528003 | Main spoken language Dutch (finding) |
| 1311860000 | 31 | 186 Common A-E | Estonian | 698659003 | Main spoken language Estonian (finding) |
| 1311910000 | 31 | 191 Common A-E | Ethiopian | 408515005 | Main spoken language Ethiopian (finding) |
| 1331960000 | 33 | 196 Common F-J | Filipino | 503511000000100 | Main spoken language Filipino (finding) |
| 1332010000 | 33 | 201 Common F-J | Finnish | 414640006 | Main spoken language Finnish (finding) |
| 1332060000 | 33 | 206 Common F-J | Flemish | 408520005 | Main spoken language Flemish (finding) |
| 1332210000 | 33 | 221 Common F-J | Georgian | 698898006 | Main spoken language Georgian (finding) |
| 1332310000 | 33 | 231 Common F-J | Greek | 407652002 | Main spoken language Greek (finding) |
| 1332360000 | 33 | 236 Common F-J | Gujerati | 315572006 | Main spoken language Gujerati (finding) |
| 1332410000 | 33 | 241 Common F-J | Hebrew | 408524001 | Main spoken language Hebrew (finding) |
| 1332460000 | 33 | 246 Common F-J | Hindi | 315575008 | Main spoken language Hindi (finding) |
| 1332510000 | 33 | 251 Common F-J | Hungarian | 698900008 | Main spoken language Hungarian (finding) |
| 1332560000 | 33 | 256 Common F-J | Icelandic | 698663005 | Main spoken language Icelandic (finding) |
| 1332610000 | 33 | 261 Common F-J | Indonesian | 698901007 | Main spoken language Indonesian (finding) |
| 1332710000 | 33 | 271 Common F-J | Italian | 407642001 | Main spoken language Italian (finding) |
| 1332760000 | 33 | 276 Common F-J | Japanese | 407654001 | Main spoken language Japanese (finding) |
| 1372810000 | 37 | 281 Common K-R | Kashmiri | 698906002 | Main spoken language Kashmiri (finding) |
| 1372910000 | 37 | 291 Common K-R | Kurdish | 395109004 | Main spoken language Kurdish (finding) |
| 1372960000 | 37 | 296 Common K-R | Latvian | 698909009 | Main spoken language Latvian (finding) |
| 1373010000 | 37 | 301 Common K-R | Lithuanian | 407656004 | Main spoken language Lithuanian (finding) |
| 1373060000 | 37 | 306 Common K-R | Macedonian | 698670005 | Main spoken language Macedonian (finding) |
| 1373110000 | 37 | 311 Common K-R | Malay | 698672002 | Main spoken language Malay (finding) |
| 1373160000 | 37 | 316 Common K-R | Mandarin | 315578005 | Main spoken language Mandarin (finding) |
| 1373210000 | 37 | 321 Common K-R | Nepali | 698676004 | Main spoken language Nepali (finding) |
| 1373260000 | 37 | 326 Common K-R | Norwegian | 408530001 | Main spoken language Norwegian (finding) |

| 1373360000 | 37 | 336 Common K-R | Portuguese | 315580004 | Main spoken language Portuguese (finding) |
|------------|----|-------------------|---------------|-----------------|--|
| 1373410000 | 37 | 341 Common K-R | Punjabi | 315581000 | Main spoken language Punjabi (finding) |
| 1373460000 | 37 | 346 Common K-R | Romanian | 698678003 | Main spoken language Romanian (finding) |
| 1373510000 | 37 | 351 Common K-R | Russian | 315582007 | Main spoken language Russian (finding) |
| 1392860000 | 39 | 286 Common K-R | Kazakh | 698668001 | Main spoken language Kazakh (finding) |
| 1393560000 | 39 | 356 Common S-Z | Serbian | 408535006 | Main spoken language Serbian (finding) |
| 1393610000 | 39 | 361 Common S-Z | Slovak | 698920009 | Main spoken language Slovak (finding) |
| 1393660000 | 39 | 366 Common S-Z | Slovenian | 698921008 | Main spoken language Slovenian (finding) |
| 1393710000 | 39 | 371 Common S-Z | Somali | 315583002 | Main spoken language Somali (finding) |
| 1393810000 | 39 | 381 Common S-Z | Sundanese | 698681008 | Main spoken language Sundanese (finding) |
| 1393860000 | 39 | 386 Common S-Z | Swahili | 315585009 | Main spoken language Swahili (finding) |
| 1393910000 | 39 | 391 Common S-Z | Swedish | 408516006 | Main spoken language Swedish (finding) |
| 1393960000 | 39 | 396 Common S-Z | Tamil | 315587001 | Main spoken language Tamil (finding) |
| 1394010000 | 39 | 401 Common S-Z | Thai | 408519004 | Main spoken language Thai (finding) |
| 1394060000 | 39 | 406 Common S-Z | Turkish | 407657008 | Main spoken language Turkish (finding) |
| 1394110000 | 39 | 411 Common S-Z | Turkmen | 698928002 | Main spoken language Turkmen (finding) |
| 1394160000 | 39 | 416 Common S-Z | Ukrainian | 407659006 | Main spoken language Ukrainian (finding) |
| 1394210000 | 39 | 421 Common S-Z | Urdu | 315588006 | Main spoken language Urdu (finding) |
| 1394260000 | 39 | 426 Common S-Z | Uzbek | 698930000 | Main spoken language Uzbek (finding) |
| 1394310000 | 39 | 431 Common S-Z | Vietnamese | 407661002 | Main spoken language Vietnamese (finding) |
| 1511110000 | 51 | 111 Uncommon A-E | Abkhazian | 698651000 | Main spoken language Abkhazian (finding) |
| 1511160000 | 51 | 116 Uncommon A-E | Afar | 698652007 | Main spoken language Afar (finding) |
| 1511210000 | 51 | 121 Uncommon A-E | Afrikaans | 698653002 | Main spoken language Afrikaans (finding) |
| 1511260000 | 51 | 126 Uncommon A-E | Akan | 408525000 | Main spoken language Akan (finding) |
| 1511310000 | 51 | 131 Uncommon A-E | Amharic | 408507007 | Main spoken language Amharic (finding) |
| 1511360000 | 51 | 136 Uncommon A-E | Aragonese | 809341000000106 | Main spoken language Aragonese (finding) |
| 1511410000 | 51 | 141 Uncommon A-E | Armenian | 698885002 | Main spoken language Armenian (finding) |
| 1511460000 | 51 | 146 Uncommon A-E | Assamese | 698886001 | Main spoken language Assamese (finding) |
| 1511510000 | 51 | 151 Uncommon A-E | Avaric | 970441000000105 | Main spoken language Avaric (finding) |
| 1511560000 | 51 | 156 Uncommon A-E | Avestan | 970451000000108 | Main spoken language Avestan (finding) |
| 1511610000 | 51 | 161 Uncommon A-E | Aymara | 698887005 | Main spoken language Aymara (finding) |
| 1511660000 | 51 | 166 Uncommon A-E | Azerbaijani | 698888000 | Main spoken language Azerbaijani (finding) |
| 1511710000 | 51 | 171 Uncommon A-E | Bambara | 970461000000106 | Main spoken language Bambara (finding) |
| 1511760000 | 51 | 176 Uncommon A-E | Bamun | 609092003 | Main spoken language Bamun (finding) |
| 1511810000 | 51 | 181 Uncommon A-E | Bashkir | 698889008 | Main spoken language Bashkir (finding) |
| 1511860000 | 51 | 186 Uncommon A-E | Basque | 698654008 | Main spoken language Basque (finding) |
| 1511910000 | 51 | 191 Uncommon A-E | Bihari | 698656005 | Main spoken language Bihari (finding) |
| 1511960000 | 51 | 196 Uncommon A-E | Bislama | 698890004 | Main spoken language Bislama (finding) |
| 1512010000 | 51 | 201 Uncommon A-E | Brawa | 408513003 | Main spoken language Brawa (finding) |
| 1512060000 | 51 | 206 Uncommon A-E | Breton | 698657001 | Main spoken language Breton (finding) |
| 1512110000 | 51 | 211 Uncommon A-E | Central Khmer | 698893002 | Main spoken language Central Khmer (finding) |
| 1512160000 | 51 | 216 Uncommon A-E | Chamorro | 970481000000102 | Main spoken language Chamorro (finding) |
| 1512210000 | 51 | 221 Uncommon A-E | Chuang | 698935005 | Main spoken language Chuang (finding) |
| 1512260000 | 51 | 226 Uncommon A-E | Church Slavic | 970511000000108 | Main spoken language Church Slavic (finding) |
| 1512310000 | 51 | 231 Uncommon A-E | Chuvash | 970521000000102 | Main spoken language Chuvash (finding) |
| 1512410000 | 51 | 241 Uncommon A-E | Corsican | 698658006 | Main spoken language Corsican (finding) |
| 1512460000 | 51 | 246 Uncommon A-E | Cree | 970541000000109 | Main spoken language Cree (finding) |
| 1512510000 | 51 | 251 Uncommon A-E | Dari | 609093008 | Main spoken language Cree (initing) |
| 1512510000 | 51 | 256 Uncommon A-E | Dhivehi | 970551000000107 | Main spoken language Dhivehi (finding) |
| 1512610000 | 51 | 261 Uncommon A-E | Esperanto | 698896005 | Main spoken language Esperanto (finding) |
| 1312010000 | 31 | 201 OHCOHIHOH A-E | Laperanto | 030030003 | main spoken language Esperanto (illiumg) |

| 1512660000 | 51 | 266 Uncommon A-E | Ewe | 970561000000105 | Main spoken language Ewe (finding) |
|------------|----------|------------------|---------------|-----------------|--|
| 1552760000 | 55 | 276 Uncommon F-J | Faroese | 698660008 | Main spoken language Ewe (finding) |
| 1552810000 | 55 | 281 Uncommon F-J | Farsi | 395108007 | Main spoken language Faroese (Illiuling) |
| 1552860000 | 55 | 286 Uncommon F-J | Fijian | 698897001 | Main spoken language Fijian (finding) |
| 1552910000 | 55 | 291 Uncommon F-J | French Creole | 408521009 | Main spoken language French Créole (finding) |
| 1552960000 | 55 55 | 296 Uncommon F-J | Frisian | 698661007 | Main spoken language Frisian (finding) |
| 1553010000 | 55 | 301 Uncommon F-J | Fulani | 729051000000103 | Main spoken language Fulani (finding) |
| 1553060000 | 55 55 | 306 Uncommon F-J | Galician | 698662000 | Main spoken language Falam (muling) Main spoken language Galician (finding) |
| 1553110000 | 55 55 | 311 Uncommon F-J | Gancian | 698899003 | Main spoken language Guarani (finding) |
| 1553160000 | 55 55 | 316 Uncommon F-J | Haitian | 97060100000105 | Main spoken language Guarani (iniding) |
| | 55 55 | 321 Uncommon F-J | Hakka | | |
| 1553210000 | 55 55 | | | 408523007 | Main spoken language Hakka (finding) |
| 1553260000 | | 326 Uncommon F-J | Hausa | 315574007 | Main spoken language Hausa (finding) |
| 1553310000 | 55 | 331 Uncommon F-J | Herero | 970611000000107 | Main spoken language Herero (finding) |
| 1553360000 | 55 | 336 Uncommon F-J | Hindko | 511841000000102 | Main spoken language Hindko (finding) |
| 1553410000 | 55 | 341 Uncommon F-J | Hiri Motu | 970621000000101 | Main spoken language Hiri Motu (finding) |
| 1553460000 | 55 | 346 Uncommon F-J | Iba | 315576009 | Main spoken language Iba (finding) |
| 1553510000 | 55 | 351 Uncommon F-J | Ido | 970631000000104 | Main spoken language Ido (finding) |
| 1553560000 | 55 | 356 Uncommon F-J | Igbo | 408514009 | Main spoken language Igbo (finding) |
| 1553610000 | 55 | 361 Uncommon F-J | Interlingua | 698664004 | Main spoken language Interlingua (finding) |
| 1553660000 | 55 | 366 Uncommon F-J | Inuktitut | 698665003 | Main spoken language Inuktitut (finding) |
| 1553710000 | 55 | 371 Uncommon F-J | Inupiaq | 698666002 | Main spoken language Inupiaq (finding) |
| 1553760000 | 55 | 376 Uncommon F-J | Javanese | 698903005 | Main spoken language Javanese (finding) |
| 1553810000 | 55 | 381 Uncommon F-J | Jonkha | 698895009 | Main spoken language Jonkha (finding) |
| 1573860000 | 57 | 386 Uncommon K-R | Kalaallisut | 698904004 | Main spoken language Kalaallisut (finding) |
| 1573910000 | 57 | 391 Uncommon K-R | Kanarese | 698905003 | Main spoken language Kanarese (finding) |
| 1573960000 | 57 | 396 Uncommon K-R | Kanuri | 970641000000108 | Main spoken language Kanuri (finding) |
| 1574010000 | 57 | 401 Uncommon K-R | Kikuyu | 729061000000100 | Main spoken language Kikuyu (finding) |
| 1574060000 | 57 | 406 Uncommon K-R | Kirgiz | 698908001 | Main spoken language Kirgiz (finding) |
| 1574110000 | 57 | 411 Uncommon K-R | Komi | 970651000000106 | Main spoken language Komi (finding) |
| 1574160000 | 57 | 416 Uncommon K-R | Kongo | 970661000000109 | Main spoken language Kongo (finding) |
| 1574210000 | 57 | 421 Uncommon K-R | Konkani | 609094002 | Main spoken language Konkani (finding) |
| 1574260000 | 57 | 426 Uncommon K-R | Korean | 407655000 | Main spoken language Korean (finding) |
| 1574310000 | 57 | 431 Uncommon K-R | Kuanyama | 970681000000100 | Main spoken language Kuanyama (finding) |
| 1574360000 | 57 | 436 Uncommon K-R | Kutchi | 315577000 | Main spoken language Kutchi (finding) |
| 1574410000 | 57 | 441 Uncommon K-R | Lao | 698669009 | Main spoken language Lao (finding) |
| 1574460000 | 57 | 446 Uncommon K-R | Latin | 97069100000103 | Main spoken language Latin (finding) |
| 1574510000 | 57 | 451 Uncommon K-R | Limburgan | 970701000000103 | Main spoken language Limburgan (finding) |
| 1574560000 | 57 | 456 Uncommon K-R | Lingala | 408526004 | Main spoken language Lingala (finding) |
| 1574610000 | 57 | 461 Uncommon K-R | Luba-Katanga | 970711000000101 | Main spoken language Luba-Katanga (finding) |
| 1574660000 | 57 | 466 Uncommon K-R | Luganda | 408527008 | Main spoken language Luganda (finding) |
| 1574710000 | 57 | 471 Uncommon K-R | Luxembourgish | 970721000000107 | Main spoken language Luxembourgish (finding) |
| 1574760000 | 57 | 476 Uncommon K-R | Malagasy | 698671009 | Main spoken language Malagasy (finding) |
| 1574810000 | 57 | 481 Uncommon K-R | Malayalam | 408529006 | Main spoken language Malayalam (finding) |
| 1574860000 | 57 | 486 Uncommon K-R | Maltese | 698910004 | Main spoken language Maltese (finding) |
| 1574910000 | 57 | 491 Uncommon K-R | Manx | 970741000000100 | Main spoken language Manx (finding) |
| 1574960000 | 57 | 496 Uncommon K-R | Maori | 698673007 | Main spoken language Maori (finding) |
| 1575010000 | 57 | 501 Uncommon K-R | Marathi | 698674001 | Main spoken language Marathi (finding) |
| 1575060000 | 57 | 506 Uncommon K-R | Marshallese | 970751000000102 | Main spoken language Marshallese (finding) |
| 1575110000 | 57 | 511 Uncommon K-R | Moldavian | 698911000 | Main spoken language Moldavian (finding) |
| 1575160000 | 57 | 516 Uncommon K-R | Mongolian | 698675000 | Main spoken language Mongolian (finding) |

| 1575210000 | 57 | 521 Uncommon K-R | Nauruan | 698912007 | Main spoken language Nauruan (finding) |
|------------|----|------------------|-------------------|-----------------|--|
| 1575260000 | 57 | 526 Uncommon K-R | Navajo | 970771000000106 | Main spoken language Navajo (finding) |
| 1575310000 | 57 | 531 Uncommon K-R | Ndebele | 698913002 | Main spoken language Ndebele (finding) |
| 1575360000 | 57 | 536 Uncommon K-R | Ndonga | 970781000000108 | Main spoken language Ndonga (finding) |
| 1575410000 | 57 | 541 Uncommon K-R | Northern Ndebele | 970801000000109 | Main spoken language Northern Ndebele (finding) |
| 1575460000 | 57 | 546 Uncommon K-R | Northern Sami | 970811000000106 | Main spoken language Northern Sami (finding) |
| 1575510000 | 57 | 551 Uncommon K-R | Norwegian Bokmal | 970821000000100 | Main spoken language Norwegian Bokmål (finding) |
| 1575560000 | 57 | 556 Uncommon K-R | Norwegian Nynorsk | 970831000000103 | Main spoken language Norwegian Nynorsk (finding) |
| 1575610000 | 57 | 561 Uncommon K-R | Nuosu | 970961000000102 | Main spoken language Nuosu (finding) |
| 1575660000 | 57 | 566 Uncommon K-R | Nyanja | 729041000000101 | Main spoken language Nyanja (finding) |
| 1575710000 | 57 | 571 Uncommon K-R | Occidental | 698902000 | Main spoken language Occidental (finding) |
| 1575760000 | 57 | 576 Uncommon K-R | Occitan | 698914008 | Main spoken language Occitan (finding) |
| 1575810000 | 57 | 581 Uncommon K-R | Ojibwa | 970851000000105 | Main spoken language Ojibwa (finding) |
| 1575860000 | 57 | 586 Uncommon K-R | Oriya | 698915009 | Main spoken language Oriya (finding) |
| 1575910000 | 57 | 591 Uncommon K-R | Oromo | 698916005 | Main spoken language Oromo (finding) |
| 1575960000 | 57 | 596 Uncommon K-R | Ossetian | 970871000000101 | Main spoken language Ossetian (finding) |
| 1576010000 | 57 | 601 Uncommon K-R | Pali | 970881000000104 | Main spoken language Pali (finding) |
| 1576060000 | 57 | 606 Uncommon K-R | Pashto | 408531002 | Main spoken language Pashto (finding) |
| 1576110000 | 57 | 611 Uncommon K-R | Patois | 408534005 | Main spoken language Patois (finding) |
| 1576160000 | 57 | 616 Uncommon K-R | Pushto | 970911000000104 | Main spoken language Pushto (finding) |
| 1576210000 | 57 | 621 Uncommon K-R | Quechua | 698677008 | Main spoken language Quechua (finding) |
| 1576260000 | 57 | 626 Uncommon K-R | Romansh | 698917001 | Main spoken language Romansh (finding) |
| 1576310000 | 57 | 631 Uncommon K-R | Ruanda | 698907006 | Main spoken language Ruanda (finding) |
| 1576360000 | 57 | 636 Uncommon K-R | Rundi | 698679006 | Main spoken language Rundi (finding) |
| 1596410000 | 59 | 641 Uncommon S-Z | Samoan | 698680009 | Main spoken language Samoan (finding) |
| 1596460000 | 59 | 646 Uncommon S-Z | Sango | 698918006 | Main spoken language Sango (finding) |
| 1596510000 | 59 | 651 Uncommon S-Z | Sanskrit | 970921000000105 | Main spoken language Sanskrit (finding) |
| 1596560000 | 59 | 656 Uncommon S-Z | Sardinian | 970931000000107 | Main spoken language Sardinian (finding) |
| 1596610000 | 59 | 661 Uncommon S-Z | Scottish Gaelic | 970941000000103 | Main spoken language Scottish Gaelic (finding) |
| 1596660000 | 59 | 666 Uncommon S-Z | Shona | 395110009 | Main spoken language Shona (finding) |
| 1596710000 | 59 | 671 Uncommon S-Z | Sindhi | 698919003 | Main spoken language Sindhi (finding) |
| 1596760000 | 59 | 676 Uncommon S-Z | Sinhala | 408518007 | Main spoken language Sinhala (finding) |
| 1596810000 | 59 | 681 Uncommon S-Z | South Ndebele | 970971000000109 | Main spoken language South Ndebele (finding) |
| 1596860000 | 59 | 686 Uncommon S-Z | Southern Sotho | 698922001 | Main spoken language Southern Sotho (finding) |
| 1596910000 | 59 | 691 Uncommon S-Z | Swazi | 698923006 | Main spoken language Swazi (finding) |
| 1596960000 | 59 | 696 Uncommon S-Z | Sylheti | 315586005 | Main spoken language Sylheti (finding) |
| 1597010000 | 59 | 701 Uncommon S-Z | Tagalog | 408517002 | Main spoken language Tagalog (finding) |
| 1597060000 | 59 | 706 Uncommon S-Z | Tahitian | 970991000000108 | Main spoken language Tahitian (finding) |
| 1597110000 | 59 | 711 Uncommon S-Z | Tajik | 698682001 | Main spoken language Tajik (finding) |
| 1597160000 | 59 | 716 Uncommon S-Z | Tatar | 698924000 | Main spoken language Tatar (finding) |
| 1597210000 | 59 | 721 Uncommon S-Z | Telugu | 698925004 | Main spoken language Telugu (finding) |
| 1597260000 | 59 | 726 Uncommon S-Z | Tetum | 609095001 | Main spoken language Tetum (finding) |
| 1597310000 | 59 | 731 Uncommon S-Z | Tibetan | 698926003 | Main spoken language Tibetan (finding) |
| 1597360000 | 59 | 736 Uncommon S-Z | Tigrinya | 408533004 | Main spoken language Tigrinya (finding) |
| 1597410000 | 59 | 741 Uncommon S-Z | Tongan | 698927007 | Main spoken language Tongan (finding) |
| 1597460000 | 59 | 746 Uncommon S-Z | Tsonga | 698683006 | Main spoken language Tsonga (finding) |
| 1597510000 | 59 | 751 Uncommon S-Z | Tswana | 698684000 | Main spoken language Tswana (finding) |
| 1597560000 | 59 | 756 Uncommon S-Z | Twi | 698685004 | Main spoken language Twi (finding) |
| 1597610000 | 59 | 761 Uncommon S-Z | Uigur | 698929005 | Main spoken language Uigur (finding) |
| 1597660000 | 59 | 766 Uncommon S-Z | Venda | 971011000000109 | Main spoken language Venda (finding) |
| | 33 | | | | |

| 1597710000 | 59 | 771 Uncommon S-Z | Volapuk | 971021000000103 | Main spoken language Volapük (finding) |
|------------|----|------------------|-----------------|-----------------|--|
| 1597760000 | 59 | 776 Uncommon S-Z | Walloon | 971031000000101 | Main spoken language Walloon (finding) |
| 1597810000 | 59 | 781 Uncommon S-Z | Western Frisian | 97104100000105 | Main spoken language Western Frisian (finding) |
| 1597860000 | 59 | 786 Uncommon S-Z | Wolof | 698932008 | Main spoken language Wolof (finding) |
| 1597910000 | 59 | 791 Uncommon S-Z | Xhosa | 698933003 | Main spoken language Xhosa (finding) |
| 1597960000 | 59 | 796 Uncommon S-Z | Yiddish | 698934009 | Main spoken language Yiddish (finding) |
| 1598010000 | 59 | 801 Uncommon S-Z | Yoruba | 315589003 | Main spoken language Yoruba (finding) |
| 1598060000 | 59 | 806 Uncommon S-Z | Zulu | 698936006 | Main spoken language Zulu (finding) |
| 1599990000 | 59 | 999 Uncommon S-Z | Unknown | 312954003 | Language not recorded (finding) |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|------------|------------------------|-------------|----------------------------------|-------|
| 2018111100 | 11 | n/a | Interpreter not needed | 315595002 | Interpreter not needed (finding) | |
| 2018221100 | 22 | n/a | Interpreter needed | 315594003 | Interpreter needed (finding) | |

| ECDS_UniqueID | Sort1 | Sort2 ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_TERM |
|---------------|-------|------------------|----------------------------|-----------------|---|
| 2018111110 | 11 | 111 Most common | French | 203441000000106 | French language interpreter needed (finding) |
| 2018112160 | 11 | 216 Most common | German | 203581000000102 | German language interpreter needed (finding) |
| 2018112260 | 11 | 226 Most common | Polish | 203901000000102 | Polish language interpreter needed (finding) |
| 2018112560 | 11 | 256 Most common | Italian | 203371000000106 | Italian language interpreter needed (finding) |
| 2018113710 | 11 | 371 Most common | Spanish | 204031000000105 | Spanish language interpreter needed (finding) |
| 2018116460 | 11 | 646 Most common | Chinese | 972591000000100 | Chinese interpreter needed (finding) |
| 2018116600 | 11 | 660 Most common | Hindi | 203651000000107 | Hindi language interpreter needed (finding) |
| 2018116650 | 11 | 665 Most common | Urdu | 204211000000109 | Urdu language interpreter needed (finding) |
| 2018117770 | 11 | 777 Most common | Irish | 972731000000105 | Irish interpreter needed (finding) |
| 2018117880 | 11 | 788 Most common | Gaelic | 343721000000107 | Gaelic language interpreter needed (finding) |
| 2018117990 | 11 | 799 Most common | Welsh | 204231000000101 | Welsh language interpreter needed (finding) |
| 2018211110 | 21 | 111 Signing | British sign language | 204331000000107 | British Sign Language interpreter needed (finding) |
| 2018212220 | 21 | 222 Signing | Hands-on signing | 945731000000104 | Hands-on signing interpreter needed (finding) |
| 2018213330 | 21 | 333 Signing | Makaton sign language | 204341000000103 | Makaton Sign Language interpreter needed (finding) |
| 2018214440 | 21 | 444 Signing | Sign supported english | 936761000000104 | Sign Supported English interpreter needed (finding) |
| 2018215550 | 21 | 555 Signing | Visual frame sign language | 945711000000107 | Visual frame sign language interpreter needed (finding) |
| 2018511110 | 51 | 111 Common A-E | Albanian | 203291000000102 | Albanian language interpreter needed (finding) |
| 2018511160 | 51 | 116 Common A-E | Arabic | 203311000000101 | Arabic language interpreter needed (finding) |
| 2018511210 | 51 | 121 Common A-E | Armenian | 362261000000106 | Armenian language interpreter needed (finding) |
| 2018511260 | 51 | 126 Common A-E | Bengali | 203321000000107 | Bengali language interpreter needed (finding) |
| 2018511310 | 51 | 131 Common A-E | Bosnian | 972561000000106 | Bosnian interpreter needed (finding) |
| 2018511360 | 51 | 136 Common A-E | Bulgarian | 353921000000107 | Bulgarian language interpreter needed (finding) |
| 2018511410 | 51 | 141 Common A-E | Burmese | 362371000000109 | Burmese language interpreter needed (finding) |
| 2018511460 | 51 | 146 Common A-E | Cantonese | 203381000000108 | Cantonese language interpreter needed (finding) |
| 2018511510 | 51 | 151 Common A-E | Chechen | 972581000000102 | Chechen interpreter needed (finding) |
| 2018511610 | 51 | 161 Common A-E | Croatian | 203391000000105 | Croatian language interpreter needed (finding) |
| 2018511660 | 51 | 166 Common A-E | Czech | 203401000000108 | Czech language interpreter needed (finding) |
| 2018511710 | 51 | 171 Common A-E | Danish | 361971000000101 | Danish language interpreter needed (finding) |
| 2018511760 | 51 | 176 Common A-E | Dutch | 203411000000105 | Dutch language interpreter needed (finding) |
| 2018511810 | 51 | 181 Common A-E | Estonian | 361911000000106 | Estonian language interpreter needed (finding) |
| 2018511860 | 51 | 186 Common A-E | Ethiopian | 359791000000109 | Ethiopian language interpreter needed (finding) |
| 2018551910 | 55 | 191 Common F-J | Finnish | 343701000000103 | Finnish language interpreter needed (finding) |
| 2018551960 | 55 | 196 Common F-J | Flemish | 343711000000101 | Flemish language interpreter needed (finding) |
| 2018552110 | 55 | 211 Common F-J | Georgian | 361471000000106 | Georgian language interpreter needed (finding) |
| 2018552210 | 55 | 221 Common F-J | Greek | 203591000000100 | Greek language interpreter needed (finding) |
| 2018552260 | 55 | 226 Common F-J | Gujarati | 203601000000106 | Gujarati language interpreter needed (finding) |
| 2018552310 | 55 | 231 Common F-J | Hebrew | 203641000000109 | Hebrew language interpreter needed (finding) |
| 2018552410 | 55 | 241 Common F-J | Hungarian | 360431000000104 | Hungarian language interpreter needed (finding) |
| 2018552460 | 55 | 246 Common F-J | Icelandic | 360401000000105 | Icelandic language interpreter needed (finding) |
| 2018552510 | 55 | 251 Common F-J | Indonesian | 362111000000101 | Indonesian language interpreter needed (finding) |
| 2018552610 | 55 | 261 Common F-J | Japanese | 203681000000101 | Japanese language interpreter needed (finding) |
| 2018552660 | 55 | 266 Common F-J | Javanese | 360281000000101 | Javanese language interpreter needed (finding) |
| 2018572710 | 57 | 271 Common K-R | Kashmiri | 360191000000109 | Kashmiri language interpreter needed (finding) |
| 2018572760 | 57 | 276 Common K-R | Kazakh | 360221000000102 | Kazakh language interpreter needed (finding) |
| 2018572810 | 57 | 281 Common K-R | Korean | 203691000000104 | Korean language interpreter needed (finding) |
| 2018572860 | 57 | 286 Common K-R | Kurdish | 203701000000104 | Kurdish language interpreter needed (finding) |
| 2018572910 | 57 | 291 Common K-R | Latvian | 360071000000106 | Latvian language interpreter needed (finding) |
| 2018572960 | 57 | 296 Common K-R | Lithuanian | 203721000000108 | Lithuanian language interpreter needed (finding) |
| 2018573010 | 57 | 301 Common K-R | Macedonian | 359971000000108 | Macedonian language interpreter needed (finding) |

| 2018573060 | 57 | 306 Common K-R | Malay | 360161000000103 | Malay language interpreter needed (finding) |
|------------|----|------------------|----------------|-----------------|---|
| 2018573110 | 57 | 311 Common K-R | Mandarin | 203821000000101 | Mandarin language interpreter needed (finding) |
| 2018573160 | 57 | 316 Common K-R | Nepali | 364251000000104 | Nepali language interpreter needed (finding) |
| 2018573210 | 57 | 321 Common K-R | Norwegian | 203831000000104 | Norwegian language interpreter needed (finding) |
| 2018573310 | 57 | 331 Common K-R | Portuguese | 203911000000100 | Portuguese language interpreter needed (finding) |
| 2018573330 | 57 | 333 Common K-R | Panjabi | 203961000000103 | Panjabi language interpreter needed (finding) |
| 2018573360 | 57 | 336 Common K-R | Romanian | 353881000000101 | Romanian language interpreter needed (finding) |
| 2018573410 | 57 | 341 Common K-R | Russian | 203971000000105 | Russian language interpreter needed (finding) |
| 2018593460 | 59 | 346 Common S-Z | Serbian | 203981000000107 | Serbian language interpreter needed (finding) |
| 2018593510 | 59 | 351 Common S-Z | Serbo-Croatian | 973061000000107 | Serbo-Croatian interpreter needed (finding) |
| 2018593560 | 59 | 356 Common S-Z | Slovak | 352901000000108 | Slovak language interpreter needed (finding) |
| 2018593610 | 59 | 361 Common S-Z | Slovenian | 363591000000107 | Slovenian language interpreter needed (finding) |
| 2018593660 | 59 | 366 Common S-Z | Somali | 204021000000108 | Somali language interpreter needed (finding) |
| 2018593760 | 59 | 376 Common S-Z | Sundanese | 363781000000103 | Sundanese language interpreter needed (finding) |
| 2018593810 | 59 | 381 Common S-Z | Swahili | 204041000000101 | Swahili language interpreter needed (finding) |
| 2018593860 | 59 | 386 Common S-Z | Swedish | 204051000000103 | Swedish language interpreter needed (finding) |
| 2018593910 | 59 | 391 Common S-Z | Tamil | 204131000000109 | Tamil language interpreter needed (finding) |
| 2018593960 | 59 | 396 Common S-Z | Thai | 204151000000102 | Thai language interpreter needed (finding) |
| 2018594010 | 59 | 401 Common S-Z | Tibetan | 363141000000105 | Tibetan language interpreter needed (finding) |
| 2018594060 | 59 | 406 Common S-Z | Turkish | 204191000000105 | Turkish language interpreter needed (finding) |
| 2018594110 | 59 | 411 Common S-Z | Ukrainian | 204201000000107 | Ukrainian language interpreter needed (finding) |
| 2018594210 | 59 | 421 Common S-Z | Vietnamese | 204221000000103 | Vietnamese language interpreter needed (finding) |
| 2018711110 | 71 | 111 Uncommon A-E | Abkhazian | 362721000000106 | Abkhazian language interpreter needed (finding) |
| 2018711160 | 71 | 116 Uncommon A-E | Afar | 362691000000102 | Afar language interpreter needed (finding) |
| 2018711210 | 71 | 121 Uncommon A-E | Afrikaans | 362571000000102 | Afrikaans language interpreter needed (finding) |
| 2018711260 | 71 | 126 Uncommon A-E | Akan | 203281000000104 | Akan language interpreter needed (finding) |
| 2018711310 | 71 | 131 Uncommon A-E | Amharic | 203301000000103 | Amharic language interpreter needed (finding) |
| 2018711360 | 71 | 136 Uncommon A-E | Aragonese | 972511000000109 | Aragonese interpreter needed (finding) |
| 2018711410 | 71 | 141 Uncommon A-E | Assamese | 362231000000101 | Assamese language interpreter needed (finding) |
| 2018711460 | 71 | 146 Uncommon A-E | Avaric | 972521000000103 | Avaric interpreter needed (finding) |
| 2018711510 | 71 | 151 Uncommon A-E | Avestan | 972531000000101 | Avestan interpreter needed (finding) |
| 2018711560 | 71 | 156 Uncommon A-E | Aymara | 362541000000108 | Aymara language interpreter needed (finding) |
| 2018711610 | 71 | 161 Uncommon A-E | Azerbaijani | 362611000000106 | Azerbaijani language interpreter needed (finding) |
| 2018711660 | 71 | 166 Uncommon A-E | Bambara | 972541000000105 | Bambara interpreter needed (finding) |
| 2018711710 | 71 | 171 Uncommon A-E | Bashkir | 972551000000108 | Bashkir interpreter needed (finding) |
| 2018711760 | 71 | 176 Uncommon A-E | Basque | 362641000000107 | Basque language interpreter needed (finding) |
| 2018711810 | 71 | 181 Uncommon A-E | Belarusian | 362071000000107 | Belarusian language interpreter needed (finding) |
| 2018711860 | 71 | 186 Uncommon A-E | Bihari | 362201000000107 | Bihari language interpreter needed (finding) |
| 2018711910 | 71 | 191 Uncommon A-E | Bislama | 362171000000106 | Bislama language interpreter needed (finding) |
| 2018711960 | 71 | 196 Uncommon A-E | Brawa | 359821000000104 | Brawa language interpreter needed (finding) |
| 2018712010 | 71 | 201 Uncommon A-E | Breton | 362141000000100 | Breton language interpreter needed (finding) |
| 2018712060 | 71 | 206 Uncommon A-E | Catalan | 362041000000101 | Catalan language interpreter needed (finding) |
| 2018712110 | 71 | 211 Uncommon A-E | Central Khmer | 362331000000107 | Central Khmer language interpreter needed (finding) |
| 2018712160 | 71 | 216 Uncommon A-E | Chamorro | 972571000000104 | Chamorro interpreter needed (finding) |
| 2018712210 | 71 | 221 Uncommon A-E | Church Slavic | 972601000000106 | Church Slavic interpreter needed (finding) |
| 2018712260 | 71 | 226 Uncommon A-E | Chuvash | 972611000000108 | Chuvash interpreter needed (finding) |
| 2018712310 | 71 | 231 Uncommon A-E | Cornish | 972621000000102 | Cornish interpreter needed (finding) |
| 2018712360 | 71 | 236 Uncommon A-E | Corsican | 361941000000107 | Corsican language interpreter needed (finding) |
| 2018712410 | 71 | 241 Uncommon A-E | Cree | 972631000000100 | Cree interpreter needed (finding) |
| 2018712460 | 71 | 246 Uncommon A-E | Dhivehi | 972641000000109 | Dhivehi interpreter needed (finding) |
| | | | | | |

| 2018712510 | 71 | 251 Uncommon A-E | Dzongkha | 362781000000107 | Dzongkha language interpreter needed (finding) |
|------------|----|------------------|---------------|-----------------|---|
| 2018712520 | 71 | 252 Uncommon A-E | English | 343671000000102 | English language interpreter needed (finding) |
| 2018712560 | 71 | 256 Uncommon A-E | Esperanto | 361881000000106 | Esperanto language interpreter needed (finding) |
| 2018712610 | 71 | 261 Uncommon A-E | Ewe | 972651000000107 | Ewe interpreter needed (finding) |
| 2018752660 | 75 | 266 Uncommon F-J | Faeroese | 361791000000100 | Faroese language interpreter needed (finding) |
| 2018752710 | 75 | 271 Uncommon F-J | Fijian | 361821000000105 | Fijian language interpreter needed (finding) |
| 2018752760 | 75 | 276 Uncommon F-J | French Creole | 203521000000103 | French Creole language interpreter needed (finding) |
| 2018752810 | 75 | 281 Uncommon F-J | Frisian | 361501000000104 | Frisian language interpreter needed (finding) |
| 2018752860 | 75 | 286 Uncommon F-J | Fulah | 972671000000103 | Fulah interpreter needed (finding) |
| 2018752910 | 75 | 291 Uncommon F-J | Galician | 361851000000100 | Galician language interpreter needed (finding) |
| 2018752960 | 75 | 296 Uncommon F-J | Ganda | 203801000000105 | Ganda language interpreter needed (finding) |
| 2018753010 | 75 | 301 Uncommon F-J | Guarani | 361441000000100 | Guarani language interpreter needed (finding) |
| 2018753060 | 75 | 306 Uncommon F-J | Haitian | 972681000000101 | Haitian interpreter needed (finding) |
| 2018753110 | 75 | 311 Uncommon F-J | Hakka | 203611000000108 | Hakka language interpreter needed (finding) |
| 2018753160 | 75 | 316 Uncommon F-J | Hausa | 203631000000100 | Hausa language interpreter needed (finding) |
| 2018753210 | 75 | 321 Uncommon F-J | Herero | 972691000000104 | Herero interpreter needed (finding) |
| 2018753260 | 75 | 326 Uncommon F-J | Hiri Motu | 972701000000104 | Hiri Motu interpreter needed (finding) |
| 2018753310 | 75 | 331 Uncommon F-J | Iban | 359881000000103 | Iban language interpreter needed (finding) |
| 2018753360 | 75 | 336 Uncommon F-J | Ido | 972711000000102 | Ido interpreter needed (finding) |
| 2018753410 | 75 | 341 Uncommon F-J | Igbo | 203531000000101 | Igbo language interpreter needed (finding) |
| 2018753460 | 75 | 346 Uncommon F-J | Interlingua | 972721000000108 | Interlingua interpreter needed (finding) |
| 2018753510 | 75 | 351 Uncommon F-J | Interlingue | 360341000000102 | Interlingue language interpreter needed (finding) |
| 2018753560 | 75 | 356 Uncommon F-J | Inuktitut | 360311000000103 | Inuktitut language interpreter needed (finding) |
| 2018753610 | 75 | 361 Uncommon F-J | Inupiaq | 360251000000107 | Inupiaq language interpreter needed (finding) |
| 2018773660 | 77 | 366 Uncommon K-R | Kalaallisut | 362011000000102 | Kalaallisut language interpreter needed (finding) |
| 2018773710 | 77 | 371 Uncommon K-R | Kannada | 360101000000102 | Kannada language interpreter needed (finding) |
| 2018773760 | 77 | 376 Uncommon K-R | Kanuri | 972741000000101 | Kanuri interpreter needed (finding) |
| 2018773810 | 77 | 381 Uncommon K-R | Kikuyu | 972751000000103 | Kikuyu interpreter needed (finding) |
| 2018773860 | 77 | 386 Uncommon K-R | Kinyarwanda | 360131000000108 | Kinyarwanda language interpreter needed (finding) |
| 2018773910 | 77 | 391 Uncommon K-R | Kirghiz | 359851000000109 | Kirghiz language interpreter needed (finding) |
| 2018773960 | 77 | 396 Uncommon K-R | Komi | 972771000000107 | Komi interpreter needed (finding) |
| 2018774010 | 77 | 401 Uncommon K-R | Kongo | 972781000000109 | Kongo interpreter needed (finding) |
| 2018774060 | 77 | 406 Uncommon K-R | Kuanyama | 972791000000106 | Kuanyama interpreter needed (finding) |
| 2018774110 | 77 | 411 Uncommon K-R | Kutchi | 343771000000106 | Kutchi language interpreter needed (finding) |
| 2018774160 | 77 | 416 Uncommon K-R | Lao | 360371000000108 | Lao language interpreter needed (finding) |
| 2018774210 | 77 | 421 Uncommon K-R | Latin | 972801000000105 | Latin interpreter needed (finding) |
| 2018774260 | 77 | 426 Uncommon K-R | Limburgan | 972811000000107 | Limburgan interpreter needed (finding) |
| 2018774310 | 77 | 431 Uncommon K-R | Lingala | 203711000000102 | Lingala language interpreter needed (finding) |
| 2018774360 | 77 | 436 Uncommon K-R | Luba-Katanga | 972821000000101 | Luba-Katanga interpreter needed (finding) |
| 2018774410 | 77 | 441 Uncommon K-R | Luganda | 359761000000103 | Luganda language interpreter needed (finding) |
| 2018774460 | 77 | 446 Uncommon K-R | Luxembourgish | 972831000000104 | Luxembourgish interpreter needed (finding) |
| 2018774510 | 77 | 451 Uncommon K-R | Malagasy | 360011000000101 | Malagasy language interpreter needed (finding) |
| 2018774560 | 77 | 456 Uncommon K-R | Malayalam | 203811000000107 | Malayalam language interpreter needed (finding) |
| 2018774610 | 77 | 461 Uncommon K-R | Maltese | 359731000000108 | Maltese language interpreter needed (finding) |
| 2018774660 | 77 | 466 Uncommon K-R | Manx | 972851000000106 | Manx interpreter needed (finding) |
| 2018774710 | 77 | 471 Uncommon K-R | Maori | 359911000000103 | Maori language interpreter needed (finding) |
| 2018774760 | 77 | 476 Uncommon K-R | Marathi | 359701000000102 | Marathi language interpreter needed (finding) |
| 2018774810 | 77 | 481 Uncommon K-R | Marshallese | 972861000000109 | Marshallese interpreter needed (finding) |
| 2018774860 | 77 | 486 Uncommon K-R | Moldavian | 359671000000101 | Moldavian language interpreter needed (finding) |
| 2018774910 | 77 | 491 Uncommon K-R | Mongolian | 359641000000107 | Mongolian language interpreter needed (finding) |
| | | | - 0 | | 5 · 0 · · 0 · · · · · · · · · · · · · · |

| 2018774960 | 77 | 496 Uncommon K-R | Nauru | 364351000000107 | Nauru language interpreter needed (finding) |
|------------|----------|------------------|-------------------|------------------|--|
| 2018775010 | 77 | 501 Uncommon K-R | Navajo | 972881000000100 | Navajo interpreter needed (finding) |
| 2018775060 | 77 | 506 Uncommon K-R | Ndebele | 352931000000102 | Ndebele language interpreter needed (finding) |
| 2018775110 | 77 | 511 Uncommon K-R | Ndonga | 972891000000103 | Ndonga interpreter needed (finding) |
| 2018775160 | 77 | 516 Uncommon K-R | North Ndebele | 972911000000100 | North Ndebele interpreter needed (finding) |
| 2018775210 | 77 | 521 Uncommon K-R | Northern Sami | 972921000000106 | Northern Sami interpreter needed (finding) |
| 2018775260 | 77 | 526 Uncommon K-R | Norwegian Bokmal | 972931000000108 | Norwegian Bokmål interpreter needed (finding) |
| 2018775310 | 77 | 531 Uncommon K-R | Norwegian Nynorsk | 972941000000104 | Norwegian Nynorsk interpreter needed (finding) |
| 2018775360 | 77 | 536 Uncommon K-R | Nuosu | 973071000000100 | Nuosu interpreter needed (finding) |
| 2018775410 | 77 | 541 Uncommon K-R | Nyanja | 972951000000101 | Nyanja interpreter needed (finding) |
| 2018775460 | 77 | 546 Uncommon K-R | Occitan | 364311000000108 | Occitan language interpreter needed (finding) |
| 2018775510 | 77 | 551 Uncommon K-R | Ojibwa | 972981000000107 | Ojibwa interpreter needed (finding) |
| 2018775560 | 77 | 556 Uncommon K-R | Oriya | 364211000000103 | Oriya language interpreter needed (finding) |
| 2018775610 | 77 | 561 Uncommon K-R | Oromo | 362991000000107 | Oromo language interpreter needed (finding) |
| 2018775660 | 77 | 566 Uncommon K-R | Ossetian | 973001000000108 | Ossetian interpreter needed (finding) |
| 2018775710 | 77 | 571 Uncommon K-R | Pali | 973011000000105 | Pali interpreter needed (finding) |
| 2018775810 | 77 | 581 Uncommon K-R | Pashto | 203841000000108 | Pashto language interpreter needed (finding) |
| 2018775860 | 77 | 586 Uncommon K-R | Persian | 203421000000104 | Persian language interpreter needed (finding) |
| 2018775910 | 77 | 591 Uncommon K-R | Quechua | 364011000000105 | Quechua language interpreter needed (finding) |
| 2018775960 | 77 | 596 Uncommon K-R | Romansh | 364481000000106 | Romansh language interpreter needed (finding) |
| 2018775990 | 77 | 599 Uncommon K-R | Romany | 1047321000000104 | Romany language interpreter needed (finding) |
| 2018776010 | 77 | 601 Uncommon K-R | Rundi | 363061000000105 | Rundi language interpreter needed (finding) |
| 2018796060 | 79 | 606 Uncommon S-Z | Samoan | 363841000000104 | Samoan language interpreter needed (finding) |
| 2018796110 | 79 | 611 Uncommon S-Z | Sango | 364051000000109 | Sango language interpreter needed (finding) |
| 2018796160 | 79 | 616 Uncommon S-Z | Sanskrit | 973031000000102 | Sanskrit interpreter needed (finding) |
| 2018796210 | 79 | 621 Uncommon S-Z | Sardinian | 973041000000102 | Sardinian interpreter needed (finding) |
| 2018796260 | 79 79 | 626 Uncommon S-Z | Scottish Gaelic | 973051000000109 | Scottish Gaelic interpreter needed (finding) |
| 2018796310 | 79 | 631 Uncommon S-Z | Shona | 203991000000109 | Shona language interpreter needed (finding) |
| 2018796360 | 79 | 636 Uncommon S-Z | Sindhi | 363711000000105 | Sindhi language interpreter needed (finding) |
| 2018796410 | 79 79 | 641 Uncommon S-Z | Sinhala | 204011000000103 | Sinhala language interpreter needed (finding) |
| 2018796460 | 79 79 | 646 Uncommon S-Z | South Ndebele | 973081000000103 | South Ndebele interpreter needed (finding) |
| 2018796510 | 79 79 | 651 Uncommon S-Z | Southern Sotho | 363651000000100 | Southern Sotho language interpreter needed (finding) |
| 2018796560 | 79 79 | 656 Uncommon S-Z | Swati | 363621000000105 | Swati language interpreter needed (finding) |
| 2018796610 | 79 79 | 661 Uncommon S-Z | Sylheti | 204081000000109 | Sylheti language interpreter needed (finding) |
| 2018796660 | 79 | 666 Uncommon S-Z | Tagalog | 204111000000101 | Tagalog language interpreter needed (finding) |
| 2018796710 | 79 | 671 Uncommon S-Z | Tahitian | 973101000000101 | Tahitian interpreter needed (finding) |
| 2018796760 | 79 79 | 676 Uncommon S-Z | Tajik | 363681000000109 | Tajik language interpreter needed (finding) |
| 2018796810 | 79 79 | 681 Uncommon S-Z | Tatar | 363221000000107 | Tatar language interpreter needed (finding) |
| 2018796860 | 79 79 | 686 Uncommon S-Z | Telugu | 363341000000107 | Telugu language interpreter needed (finding) |
| 2018796910 | 79 79 | 691 Uncommon S-Z | • | 204171000000107 | |
| | 79 79 | | Tigrinya | | Tigrinya language interpreter needed (finding) |
| 2018796960 | | 696 Uncommon S-Z | Tongan | 363461000000100 | Tongan language interpreter needed (finding) |
| 2018797010 | 79 70 | 701 Uncommon S-Z | Tsonga | 363181000000102 | Tsonga language interpreter needed (finding) |
| 2018797060 | 79 | 706 Uncommon S-Z | Tswana | 363941000000108 | Tswana language interpreter needed (finding) |
| 2018797110 | 79 | 711 Uncommon S-Z | Turkmen | 363551000000104 | Turkmen language interpreter needed (finding) |
| 2018797160 | 79 | 716 Uncommon S-Z | Twi | 363301000000109 | Twi language interpreter needed (finding) |
| 2018797210 | 79 | 721 Uncommon S-Z | Uighur | 364141000000107 | Uighur language interpreter needed (finding) |
| 2018797260 | 79 | 726 Uncommon S-Z | Uzbek | 362961000000101 | Uzbek language interpreter needed (finding) |
| 2018797310 | 79 | 731 Uncommon S-Z | Venda | 973121000000100 | Venda interpreter needed (finding) |
| 2018797360 | 79 | 736 Uncommon S-Z | Volapuk | 973131000000103 | Volapük interpreter needed (finding) |
| 2018797410 | 79 | 741 Uncommon S-Z | Walloon | 973141000000107 | Walloon interpreter needed (finding) |

| 2018797460 | 79 | 746 Uncommon S-Z | Western Frisian | 973151000000105 | Western Frisian interpreter needed (finding) |
|------------|----|------------------|-----------------|-----------------|---|
| 2018797510 | 79 | 751 Uncommon S-Z | Wolof | 973161000000108 | Wolof interpreter needed (finding) |
| 2018797560 | 79 | 756 Uncommon S-Z | Xhosa | 364511000000100 | Xhosa language interpreter needed (finding) |
| 2018797610 | 79 | 761 Uncommon S-Z | Yiddish | 363021000000102 | Yiddish language interpreter needed (finding) |
| 2018797660 | 79 | 766 Uncommon S-Z | Yoruba | 204241000000105 | Yoruba language interpreter needed (finding) |
| 2018797710 | 79 | 771 Uncommon S-Z | Zhuang | 362911000000103 | Zhuang language interpreter needed (finding) |
| 2018797760 | 79 | 776 Uncommon S-Z | Zulu | 362821000000104 | Zulu language interpreter needed (finding) |

| ECDS_UniqueID | Sort1 ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|------------------|--|-----------|--|-------|
| n/a | n/a n/a | Charging category A: Standard NHS -funded PATIENT | Α | Charging category A: Standard NHS -funded PATIENT | |
| n/a | n/a n/a | Charging category B: Immigration Health Surcharge payee | В | Charging category B: Immigration Health Surcharge payee | |
| n/a | n/a n/a | Charging category C: Charge-exempt Overseas Visitor (European Economic Area) | С | Charging category C: Charge-exempt Overseas Visitor (European Economic Area) | |
| n/a | n/a n/a | Charging category D: Chargeable European Economic Area PATIENT | D | Charging category D: Chargeable European Economic Area PATIENT | |
| n/a | n/a n/a | Charging category E: Charge-exempt Overseas Visitor (non-European Economic Area) | E | Charging category E: Charge-exempt Overseas Visitor (non-European Economic Area) | |
| n/a | n/a n/a | Charging category F: Chargeable non-European Economic Area PATIENT | F | Charging category F: Chargeable non-European Economic Area PATIENT | |
| n/a | n/a n/a | Not known | Х | Not known | |

DATA GROUP: MENTAL HEALTH ACT LEGAL STATUS

FUNCTION: To carry the patients Mental Health Act Legal Status. Group Status: R Group Repeats: 0..*

| NTA GROUP | DATA ITEM NAME | | DATA ITEM STATUS (MIRIO) | | DATA ITEM REPEATS | FORMAT | SNOWED CT / DMAD /COS | JUSTIFICATION CODE | SET LINK TO CURRENT CDS Typ INFORMATION ONLY | HO- VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|--------------------------------|---|---|--------------------------------|---|----------------------|-----------------|-----------------------|--|---|--|------------------------|----------------------|-------|
| | | | | | | | | | | POPULATION VALIDATION F - Format is validated V - Validated popings an explicit list | POST SCHEMA VALIDATION | | |
| | | | | | | | | | | of permitted values as defined in the Mis Data Dictionary | | | |
| INITAL HEALTH ACT LEGAL STATUS | | The MENTAL HEALTH ACT LIGAL STATUS CLASSIFICATION ASSISTMENT PERIOD START DATE records the stant date of the Mercal Health Act Legal Status Classification Assignment Period. | M. | N | 1.1 | an10 CDYY-MM-DD | DMED | To support a better understanding of the use of the Mental Health Act in acute trusts, specifically Emergency Departments. | n/a | £ | e/a | NEW ARE data item | |
| NTAL HEALTH ACT LEGAL STATUS | | The MINITAL HEALTH ACT LIGAL STATUS CLASSIFICATION ASSIGNMENT PERIOD START TIME records the start time of the Mercial Health Act Legal Status Classification Assignment Period. | м | N | 11 | and HHEMMESS | DMED | To support a better understanding of the use of the Mental Health Act in acute trusts, specifically Emergency is/a Departments. | o,la | į. | e/a | NEW AEE data item | |
| INTAL HEALTH ACT LEGAL STATUS | EXPRY DATE (MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION) | The DATE when a MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION for a PATIENT expines. | R | N | 0.1 | an10 CCYY-MM-DD | DMED | To support a better understanding of the use of the Mental Health Act in acute trusts, specifically Emergency In/a Departments | n/a | F | n/a | NEW A&E data item | |
| INTAL HEALTH ACT LEGAL STATUS | EXPIRY TIME (MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION) | The TIME when a MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION for a PATIENT expires. | R | N | 0.1 | and HH-MMHSS | DMED | To support a better understanding of the use of the Mental Health Act in acute trusts, specifically Emergency of a Departments. | n/a | F | 1/4 | NEW A&E data item | |
| KENTAL HEALTH ACT LOGAL STATUS | MENTAL REALTH ACT LEGAL STATUS CLASSIFICATION CODE | A code which interesting the MINTRA INSTRUMENT ACT SEAL STATUS CANSISTATION. Note that the National Code "Informal" is used for those PATIENTS who are neither formally detained nor receiving supervised affectors. | M | N | 1.1 | ard: | DMED | To support a before understanding of the use of the Mental Health Act in accide touch, specifically fineegoncy List touche Organization. | r _i (a | V | t/a | NEW ARE data item | |

| ECDS_UniqueID | Sort | ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|------|------------|--|-----------|--|-------|
| n/a | n/a | n/a | Informal | 01 | Informal | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 2 | 02 | Formally detained under Mental Health Act Section 2 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 3 | 03 | Formally detained under Mental Health Act Section 3 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 4 | 04 | Formally detained under Mental Health Act Section 4 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 5(2) | 05 | Formally detained under Mental Health Act Section 5(2) | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 5(4) | 06 | Formally detained under Mental Health Act Section 5(4) | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 35 | 07 | Formally detained under Mental Health Act Section 35 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 36 | 08 | Formally detained under Mental Health Act Section 36 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 37 with section 41 restrictions | 09 | Formally detained under Mental Health Act Section 37 with section 41 restrictions | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 37 | 10 | Formally detained under Mental Health Act Section 37 | |
| n/a | | n/a | Formally detained under Mental Health Act Section 38 | 12 | Formally detained under Mental Health Act Section 38 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 44 | 13 | Formally detained under Mental Health Act Section 44 | |
| n/a | | n/a | Formally detained under Mental Health Act Section 46 | 14 | Formally detained under Mental Health Act Section 46 | |
| n/a | | n/a | Formally detained under Mental Health Act Section 47 with section 49 restrictions | 15 | Formally detained under Mental Health Act Section 47 with section 49 restrictions | |
| n/a | | n/a | Formally detained under Mental Health Act Section 47 | 16 | Formally detained under Mental Health Act Section 47 | |
| n/a | | n/a | Formally detained under Mental Health Act Section 48 with section 49 restrictions | 17 | Formally detained under Mental Health Act Section 48 with section 49 restrictions | |
| n/a | | n/a | Formally detained under Mental Health Act Section 48 | 18 | Formally detained under Mental Health Act Section 48 | |
| n/a | | n/a | Formally detained under Mental Health Act Section 135 | 19 | Formally detained under Mental Health Act Section 135 | |
| n/a | n/a | n/a | Formally detained under Mental Health Act Section 136 | 20 | Formally detained under Mental Health Act Section 136 | |
| n/a | | n/a | Formally detained under Criminal Procedure(Insanity) Act 1964 as amended by the Criminal Procedures (Insanity and Unfitness to Plead) Act 1991 | 31 | Formally detained under Criminal Procedure(Insanity) Act 1964 as amended by the Criminal Procedures (Insanity and Unfitness to Plead) Act 1991 | |
| n/a | | n/a | Formally detained under other acts | 32 | Formally detained under other acts | |
| n/a | | n/a | Subject to guardianship under Mental Health Act Section 7 | 35 | Subject to guardianship under Mental Health Act Section 7 | |
| n/a | , , | n/a | Subject to guardianship under Mental Health Act Section 37 | 36 | Subject to guardianship under Mental Health Act Section 37 | |
| n/a | | n/a | Formally detained under Mental Health Act Section 45A (Limited direction in force) | 37 | Formally detained under Mental Health Act Section 45A (Limited direction in force) | |
| n/a | | n/a | Formally detained under Mental Health Act Section 45A (Limitation direction ended) | 38 | Formally detained under Mental Health Act Section 45A (Limitation direction ended) | |
| n/a | n/a | n/a | Not Applicable | 98 | Not Applicable | |
| n/a | n/a | n/a | Not Known | 99 | Not Known | |
| | | | | | | |

DATA GROUP: GP REGISTRATION

FUNCTION: To carry the Patient's General Medical Practitioner and the General Practice details.

Group Status: R

Group Repeats: 0,1

| DATA GROUP | DATA ITEM NAME | DATA ITEM DEFINITION | DATA ITEM STATUS (MRXO) | COUNDATA ITEM REQUIRED (Y.N) | DATA ITEM REPEATS | FORMAT | SNOWED CT / DMLD /COS | JUSTFCATION | ECOS CODE SET | LINK TO CURRENT CDG Type 619 INFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|-----------------|---|--|-------------------------------|---------------------------------------|----------------------|--------|-----------------------|-------------------------|---------------|--|---|------------------------|----------------------------------|-------|
| | | | | | | | | | | | POPULATION VALIDATION F - Forms is validated | POST SCHEMA VALIDATION | | |
| | | | | | | | | | | | V - Validated against an explicit list of permitted values as defined in the NHS Data Dictionary | | | |
| GP REGISTRATION | GENERAL MEDICAL PRACTITIONER (SPECIFICS) | GENERAL MIDICAL PRACTITIONER SPECIFICS) in the GENERAL MEDICAL PRACTITIONER PRO CODE of the GENERAL MEDICAL PRACTITIONER specified by the PATENT. | 0 | N | 0.1 | ank | DMNEO | As per CDS 6.2 Type 010 | n/a | htts://www.datadictionary.nhs.ukidar a dictionary/data field notes/gigene oil medical practitioner (specified) de ass?hbowsan/0 | ē. | a/a | Originates from A&E CDS Type 010 | |
| GP REGISTRATION | GENERAL MEDICAL PRACTICE CODE PATIENT REGISTRATION) | An CREANISATION STIS CODE is a code which identifies an Organization Site uniquely. | R | N | 0.1 | ant | cos | As per COG 6.2 Type 030 | n/a | htts://www.datadictionary.nhc.uk/dat a dictionary/data field notes/alpane rst medical practice code (patient a egistration) de aug 7thownay+0 | i . | n/a | Deginates from A&C CDC Type 010 | |

DATA GROUP: EMERGENCY CARE ATTENDANCE LOCATION

FUNCTION: To carry the details of the Emergency Care Attendance los Group Status: M

Group Status: N

| DATA G ROUP | DATATIEM NAME | DATA ITEM DEPOSTOR | DATAITEM STATUS (MRCO) | COUNDATA DA ITEM RE REQUIRED (YIN) | tatiem fo Péats | SHIBAT | SHOOMED CT / CMMLD (CDB | ASSESSMENT | SCDS CODE SET | LINK TO CLERENT COS Type 810 INFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|------------------------------------|--------------------------------------|---|------------------------------|---|--------------------|----------------|---|--------------------------|-----------------|---|---|------------------------|----------------------------------|--|
| | | | | | | | | | | | POPULATION VALIDATION F - Format is validated V - Validated against an explicit first of permitted values as defined in the NHS Data Distributy | POST SCHEMA VALIDATION | | |
| EMERGENCY CARE ATTENDANCE LOCATION | DRIANGE FOO STEELERS FOR THE ATMENT) | An ORGANISATION ISTECCOOK is a code which identifies an Organisation bits uniquely. | м | N 1- | | ii 245 m2k 249 | Opdated to new Organization code guidelines | AL Ser CDS 6.3 Type 000 | a/a | http://www.datadationary.ehr.uk/data_di tocam/data_feld_cotec/ultra-liste_code of_tectomenti_de_ass*shownavid | | n/u | Originates from A&E CDS Type 000 | |
| EMERGENCY CARE ATTENDANCE LOCATION | IMPRESINCY CARE DEPARTMENT TYPE | The type of Energency Cara Department | ů. | h 1. | ¥. | | As per CDS 6.2 Type 033. Updated to include new code for Ambulstory Emergency Care Unit in anticipation of this data set being used to support the collection of ABC data in the future. | ns. per COS 6.2 Type OSD | Sen to code set | Miss Flewer databilitionary and subdate di Schary Mats field instellarly and in deep Scient Type de applishowedy-di | | n/a | Originates from A&E CDS Type CSD | Us great Care Centries should be recorded as a Type II Department. |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|-------|------------|---|-----------|---|-------|
| n/a | n/a | n/a | Type 1 : General Emergency Department (24 hour) | 01 | Type 1 : General Emergency Department (24 hour) | |
| n/a | n/a | n/a | Type 2 : Specialist Emergency Department (e.g. paediatric, ophthalmology) | 02 | Type 2 : Specialist Emergency Department (e.g. paediatric, ophthalmology) | |
| n/a | n/a | n/a | Type 3 : Minor Injury Unit | 03 | Type 3 : Minor Injury Unit | |
| n/a | n/a | n/a | Type 4 : Walk in Centre | 04 | Type 4: Walk in Centre | |
| n/a | n/a | n/a | Ambulatory Emergency Care Service* | 05 | Ambulatory Emergency Care Service* | |
| | | | | | | |

^{*}Note that National Code 05 is only valid for piloting purposes in the CDS V6-2-1 Type 011 - Emergency Care Commissioning Data Set and must not be submitted in the CDS V6-2 Type 010 - Accident and Emergency Commissioning Data Set.

DATA GROUP: AMBULANCE DETAILS

FUNCTION: To carry ambulance details relating to the patients arrival at Emergency Care. Group Status: R Group Repeats: 0..1

| DATA GROUP | DATA ITEM NAME | DATA ITEM DEFINITION | DATA ITEM COUN DI STATUS ITEM REQUIR (MIRIO) (Y/N) | REPEATS | FORWAT | SNOWED CT / DMAD /ODS | JUSTECATION | ECDS CODE SET | LINK TO CURRENT COS Type 610 INFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|--------------------|---|---|---|---------|-----------------|-----------------------|--|---------------|--|--|------------------------|----------------------------------|---|
| | | | | | | | | | | POPULATION VALIDATION F-Format is validated V-Validated against an explicit list of permitted values as defined in the NHS Data Dictionary | POST SCHEMA VALIDATION | | |
| AMBURANCE DETAILS | AMBILLANCE SICCEST NUMBER | As deleter for each PATENT TRANSPORT JOURNAY. | R N | 0.3 | max an20 | | As per CDS-2 Type GSD Anneaded from "Quinted" at request of DH. Making these data beams experient will allow liaking of antibulance and emergency department data, they provided primarisate such as partners than the repetition of the content of th | | State Universe detardictioners she skilders i de Econocylders fall noteschingsambilance i grideret number de aus Princesured. | ş. | eja | Originates from A&E CDS Type 010 | This information should be recorded when EMPIGENET CHAIR WRITEM MOVEMENT in recorded and profest activities (Executive Chair |
| AMBILIANCE DETAILS | GEARGATON COST ECONOMINO ANNUARICE TRUET) | or ORGANISATION (2006 is a scale which destifies an Organisation evoquely | ik N | 0.1 | min anž max anS | | Optional to more Organization case guidelines. Annoted from Organization to Required of request of DSI. Making these data beam expained will allow liaking of antibilance and emergency department start, thus provided primarsalon about a patient from the moment ambiblance in Called until they leave hospital. This will provide learning appopurabilete that can benefit a trabulance services, emergency department, and pastients. | n/a | http://www.datadictionary.nhn.uh/data-dic issancidata-fieldi interhilirentinessiciatio a. code intermine ambulance tourit da.a. sphitowanari g | s | e/a | Originates from A&C CDS Type 010 | This information should be recorded when EMERICANC CASE 488981, MISCS is recorded a partiest refrink by Emergency and architects, Comparity and architects with medical essent, flow-emergency roads ancholance, Helicopter, or Fland wing / medical reportation by air. |

DATA GROUP: EMERGENCY CARE ATTENDANCE ACTIVITY CHARACTERISTICS

FUNCTION: To carry the characteristics of the Patient for an Emergency Care Attendance.
Group Status: M
Group Repeats: 1..1

| Group Repeats: 11 | | | | | | | | | | | | | | |
|--|---|--|-------------------------------|---------------------------------------|---------------------|------------------|------------------------|---|------------------------|--|--|--|-----------------------------------|--|
| TA GROCEP | DATA PERMANE | DATA STAN DEFINITION | DATA ITEM STATUS (MRJO) | COUNDATA ITEM REQUIRED (EIN) | DATA MEM REPEATS | FORMAT | SNOWED CT / DMILD (DDS | JUSTFCATON | ECDS CODE SET | LINK TO CURRENT COS Type \$10 RECOMMETCH ONLY | VALIDATION RULES POPULATION VALIDATION F - Formet is validated permitted validated against an explicit list permitted values as defined in the | POST SCHEMA VALENTION | DATA ITEM PROVENANCE | NOTES |
| NUMBER OCCURRENCS ACTIVITY CHARACTERISTICS | EMERICANCY CARE ATTENDANCE IDENTIFIER | A unique number or set of characters that is applicable to only one ACTIVITY for a PATISIST within an Organisation. | м | N | 1.1 | maxant2 | DMED | As per CDS 6.2 Type OSD | n/a | time (Fanar detadictionare nhe skildeta di tionary/data field notec/afa and a atten- dance number de asp?showraenib | NHS Data Dictionary | n/a | Originates from A&E CDS Type-010 | |
| AGAMENT OCCURRENCES ACTIVITY CAMPACTERISTICS | INITIALIZATO CASS ARRONA MODES (SPECIMENTS CT) | MiddleCord Add James 2005 (20050CCT); the sidebid CP course C which is werth death you in swepth with a world for ECC and at the Engage CP Registrate. | ik | N | 0.5 | min od mae od 8 | SWONEGCT | App COL 2.3 pp (20). The color of colors of the colors of the colors of col | Upon to code set | the former development where all their in- ternations from find report introduced and company and with mode data development than the second data development of the control of the second data development of the second control of the second data development of the second data development of the second data data development of the second data data data data data data data da | i i | For any case them which contains a value other than specified an interest colories, accord the value for a specime to all an interest colories. Accord the value for a specime to all the properties of the specimen to a specimen to a specimen to the specimen to the specimen to a specimen to the specimen to the specimen to specimen to the specimen to the specimen to specimen to specime | Originates from AAE COS Type 610 | |
| ROBERT SCHOOLS ACTIVITY CHARACTERISTICS | ANEXANY FOR ATTHUMBNIC CATAGORY | An entgray of language Carl Brondons | ā. | N | 0.5 | ani | DAREO | aper CORS L-19 per cells. The contract of the | | the filter foresteened in Albert (town filter filter week town filter filter enging greatene gregory code do ghibanasso | v | io. | Originates from AAE CIS Type BID | |
| NEANCE OCCURRENCE ACTIVITY CHARACTERISTICS | INSIGNACY CASE ATTRIBUTED SQUART (INCOMED CT) | The success inference of each Accident and Energenics Speach. Source from which partient was referredly advised to atte- tion St. Acc mode of transport. | nd is | * | 0.5 | min né-mau ntili | SNOMED CT | Code set supdated to include greater granularity in descriptions than currently used. This data item is necessary to understand why systems attend Sneegens, care. This inference commissioning both body; and ceretally and to brough sern such draws planning so that the NHS can ensure that the cornect blend of staff are recruited and trained. | | http://www.dasdictionary.nhc.uk/dass_di donary/dass_field_noteel/sha/na.gd ; femal_for_a_and_e_de-angl-shownaw-di femal_for_a_and_e_de-angl-shownaw-di | | for any data item which contains a value other than specified in mirrorat code set, accept the value but suppress it so it cannot lesse bifu for less like less to show with DSA access and therefore available for followed is show with DSA access and therefore available for followed is now set such as "value for seconds X, field Y is not in the acceptable range". | Originates from A&E COS Type-950 | |
| ORGANICA SCLUBBACK ACTIVITY COMMICTIONING | connectation and construct phenomers can estimate according | Obsensions in Scotters Specialism (see Afficiacy) and policy the december on schools or ma- opposition before within MOMM sheet are longuage, the Reportment. | ik | N | 0.1 | nin anS max an9 | 605 | These are account to the second to the law, to the law could prime to a considered between colors, and such are an extended continued by an extended between colors, and account to the colors and controlly between the colors and | e logita and ser | N/o | | co. | New Add data Inno | |
| SHOWEG OCCURRENCE ACTIVITY CHARACTERISTICS | NAMEGING Y CASE ASSOCIATES | NAL COMPANY CASE ARE MADE AND ASSESSMENT OF THE | м | N | 1.1 | SH3SCCYY-MM-QD | OMED | As per CDG 6.2 Type 018 | nja | http://www.draderionary.abs.uk/data.d descarations field openinfactorization de aut-Monetovid | | nja | Originates from A&C CDS Type 810 | |
| NONICE OCCURRENCE ACTIVITY CHARACTERISTICS | Asselsancy case assous, took | The Engagemy Cash Annual There are parties of the Cash Annual The Annual The Annual The Annual The Annual The Annual The Annual Cash Cash Annual Cash Cash Annual | м | N | 1.1 | anil HH MMSS | OMEO | As per CDG 6.2 Trype 430 | eph | ing Heen bradictoner plus is flass, di tony fister, field posely hypothesis times as acclus, and energency department to sightnown and | E F | uja | Originates from A&C CDS Type-050 | |
| NDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | AGE AT COS ACTIVITY DATE | AGE AT CDS ACTIVITY DATE is derived as the number of completed years between the PERSON BRITIS DATE of the PATIGHT and the CDS ACTIVITY DATE. | м | N | 1.1 | maxed | DMED | As per COS 6.2 Type 010 | nja | etto (Fener datadictionary nhs. sk/data di Sonary,ldata field noter/a/bg/bge at cide activity data de aspithownavió | F | e/s | Originates from A&C CDS Type-050 | |
| OCCUMENTS ACTIVITY COMMUNICATIONS | MARKANITO CARR ANTINA, RESISSANTO ENTE | The integrant, of Section Sections and Section (Section Section Sec | ik. | N | 0.1 | ansective MM OD | DAMED | Rs per CSS 4.3 * Paper DSS | rija | have Cheese Arts delictionary, only all files in property of the Control of the | F | No | Designation from A&C COS Type 000 | |
| GCGBBCG ACHIEF COMMCREECS | Anderson's core units, authorised their | The changes of part 2018 Annual Per resident and other and the second of the changes of participation of the changes of participation of the changes of participation of the changes of th | a · | N | 0.5 | and HAMMISS | DAREO | ns per GH 4.3 Yape this | nja | ingen Pengan Amademistran andre Administration of Amazember (and Amademistration Constitution of Amazember (a fine data amademistration of anternament, a fine dia amademistration of a fine dia amadem | f | NO. | Originates from AAE CIS Type BID | |
| SCENERGE ACTION COMMUNICATIONS | AMBRIGHT COM ACITY (MINNESCT) | Indication Code Activity (Indicated City) in the materials of Code School (Indicated Code Activity) (Indicated Code Activi | ik of | N | 0.5 | min né mas nd R | ENCINED CT | Energy Con Analysis as measure of the agrees and owner's of the conditions of the conditions who assess the protect. The first discuss who assess the protect. The first discuss who assess the protect of an agreement by the force of the conditions who assess that a person protect of the protect of the discuss of the assess and a first discuss of the discuss of th | Delica succession and | No. | | for my data from with sections and me the same years for interest colors of the color of the value flux colors of the minimization of the colors of the colors of the colors of the section of the colors of the colors of the colors of the section of the colors of the colors of the colors of the section of the colors of the colors of the colors of the section of the section of the section of the section of the section of the section of section of sec | New Add data tion | No. 20 the of special guidest the gas cover tings cover a distance of a principle cover of the c |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|------------|---|------------------|---|-------|
| 2018110000 | 11 | n/a | Patient arranged own transport / walk-in | 1048071000000103 | Arrival by patient's own transport (finding) | |
| 2018210000 | 21 | n/a | Public transport / taxi | 1048061000000105 | Arrival by public transport (finding) | |
| 2018310000 | 31 | n/a | Emergency road ambulance | 1048031000000100 | Arrival by emergency road ambulance (finding) | |
| 2018350000 | 35 | n/a | Emergency road ambulance with medical escort | 1048041000000109 | Arrival by emergency road ambulance with medical escort (finding) | |
| 2018370000 | 37 | n/a | Non-emergency road ambulance | 1048021000000102 | Arrival by non-emergency road ambulance (finding) | |
| 2018510000 | 51 | n/a | Helicopter | 1048051000000107 | Arrival by helicopter Air Ambulance (finding) | |
| 2018550000 | 55 | n/a | Fixed wing / medical repatriation by air | 1048081000000101 | Arrival by medical repatriation air ambulance (finding) | |
| 2018810000 | 81 | n/a | Custodial services: prison / detention centre transport | 1047991000000102 | Arrival by prison transport (finding) | |
| 2018910000 | 91 | n/a | Police transport | 1048001000000106 | Arrival by police transport (finding) | |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|-------|------------|---|-----------|---|-------|
| 2018111100 | 11 | n/a | Unplanned First Emergency Care Attendance for a new clinical condition (or deterioration of a chronic condition). | 1 | Unplanned First Emergency Care Attendance for a new clinical condition (or deterioration of a chronic condition). | |
| 2018211100 | 21 | n/a | condition). | 1 | Condition). | |
| | | | Unplanned Follow-up Emergency Care Attendance for the same or a related clinical condition and | | Unplanned Follow-up Emergency Care Attendance for the same or a related clinical condition and | |
| | | | within 7 days of the First Emergency Care Attendance at THIS Emergency Care Department | 2 | within 7 days of the First Emergency Care Attendance at THIS Emergency Care Department | |
| 2018311100 | 31 | n/a | Unplanned Follow-up Emergency Care Attendance for the same or a related clinical condition and | | Unplanned Follow-up Emergency Care Attendance for the same or a related clinical condition and | |
| | | | within 7 days of the First Emergency Care Attendance at ANOTHER Emergency Care Department | | within 7 days of the First Emergency Care Attendance at ANOTHER Emergency Care Department | |
| | | | | 3 | | |
| 2018511100 | 51 | n/a | Planned Follow-up Emergency Care Attendance within 7 days of the First Emergency Care Attendance | | Planned Follow-up Emergency Care Attendance within 7 days of the First Emergency Care Attendance | |
| | | | at THIS Emergency Care Department | 4 | at THIS Emergency Care Department | |
| 2018911100 | 91 | n/a | Not Applicable/Dead on arrival: no intent / attempt to resuscitate in Emergency Care facility | | Not Applicable (Patient dead on arrival at Emergency Care Department) | |
| | | | | Х | | |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description |
|---------------|-------|-------|---------------------------|--|------------------|---|
| 2018111100 | 11 | 11 | Personal | Self / family / friends / education / work colleague | 507291000000100 | Self-referral to accident and emergency department (procedure) |
| 2018113100 | 11 | 31 | Personal | Carer (external, not family / friend) | 1065391000000104 | Referred by carer (finding) |
| 2018117100 | 11 | 71 | Personal | Non-NHS telephone / internet advice | 315261000000101 | Advised to attend accident and emergency department (situation) |
| 2018311100 | 31 | 11 | Primary care | GP / practice nurse | 276491000 | Referred by member of Primary Health Care Team (finding) |
| 2018312100 | 31 | 21 | Primary care | Out of hours GP service | 166941000000106 | Referral by out of hours service (procedure) |
| 2018315100 | 31 | 51 | Primary care | NHS telephone / internet advice e.g. NHS 111 | 879591000000102 | Referred by National Health Service 111 service (finding) |
| 2018513100 | 51 | 31 | Hospital | Emergency department | 1066431000000102 | Referred by hospital emergency department (finding) |
| 2018514100 | 51 | 41 | Hospital | Urgent care service | 1066441000000106 | Referred by urgent care service (finding) |
| 2018515100 | 51 | 51 | Hospital | Outpatient service inc. ambulatory care | 835091000000109 | Referred by hospital outpatient department (finding) |
| 2018516100 | 51 | 61 | Hospital | Inpatient | 835101000000101 | Referred by hospital ward (finding) |
| 2018519100 | 51 | 91 | Hospital | Private specialist | 183877003 | Private referral (procedure) |
| 2018611100 | 61 | 11 | Community | Community nurse (not practice nurse) | 1077191000000103 | Referred by community nurse (finding) |
| 2018611500 | 61 | 15 | Community | Health visitor | 1052681000000105 | Referred by health visitor (finding) |
| 2018612100 | 61 | 21 | Community | Midwife | 185363009 | Referred by midwife (finding) |
| 2018612500 | 61 | 25 | Community | School nurse | 1065401000000101 | Referred by school nurse (finding) |
| 2018613100 | 61 | 31 | Community | Community mental health nurse | 1077201000000101 | Referred by community mental health nurse (finding) |
| 2018613700 | 61 | 37 | Community | Mental health assessment team | 1065991000000100 | Referred by mental health assessment team (finding) |
| 2018614100 | 61 | 41 | Community | Social services | 877171000000103 | Referred by social services (finding) |
| 2018614500 | 61 | 45 | Community | Older persons day care centre | 1077761000000105 | Referred by adult day care centre (finding) |
| 2018614700 | 61 | 47 | Community | Homeless persons drop in centre | 1077211000000104 | Referred by homeless drop-in centre (finding) |
| 2018615100 | 61 | 51 | Community | Custodial services : prison | 1066011000000104 | Referred by Her Majesty's Prison Service (finding) |
| 2018615500 | 61 | 55 | Community | Custodial services : detention centre | 1066001000000101 | Referred by detention centre (finding) |
| 2018616100 | 61 | 61 | Community | Pharmacist (including community pharmacist) | 185369008 | Referred by pharmacist (finding) |
| 2018617100 | 61 | 71 | Community | Dentist (including community dentist) | 185366001 | Referred by dentist (finding) |
| 2018618100 | 61 | 81 | Community | Optician / optometrist | 185368000 | Referred by optician (finding) |
| 2018812100 | 81 | 21 | Emergency Services | Advanced care practitioner | 1066021000000105 | Referred by advanced care practitioner (finding) |
| 2018813100 | 81 | 31 | Emergency Services | Ambulance service - patient in transit | 198261000000104 | Referred by ambulance service (finding) |
| 2018815100 | 81 | 51 | Emergency Services | Police service / forensic medical officer | 889801000000100 | Referred by police (finding) |
| 2018817100 | 81 | 71 | Emergency Services | Fire service | 1066031000000107 | Referred by Fire and Rescue Service (finding) |
| 2018818100 | 81 | 81 | Emergency Services | Search and rescue | 1066061000000102 | Referred by search and rescue service (finding) |
| 2018818300 | 81 | 83 | Emergency Services | Coastguard | 1066041000000103 | Referred by Coastguard Rescue Service (finding) |
| 2018818500 | 81 | 85 | Emergency Services | Mountain rescue | 1066051000000100 | Referred by mountain rescue service (finding) |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | | Notes |
|---------------|-------|------------|---|------------------|---|------------------|-------|
| 2018111100 | 11 | n/a | 1 - Immediate care level emergency care | 1064891000000107 | Immediate resuscitation level emergency care (regime/therapy) | Maps to 'Resus' | |
| 2018211100 | 21 | n/a | 2 - Very urgent level emergency care | 1064911000000105 | Very urgent level emergency care (regime/therapy) | | |
| 2018311100 | 31 | n/a | 3 - Urgent level emergency care | 1064901000000108 | Urgent level emergency care (regime/therapy) | Maps to 'Majors' | |
| 2018411100 | 41 | n/a | 4 - Standard level emergency care | 1077241000000103 | Standard level emergency care (regime/therapy) | Maps to 'Minors' | |
| 2018511100 | 51 | n/a | 5 - Low acuity level emergency care | 1077251000000100 | Non-urgent level emergency care (regime/therapy) | | |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Flag_Injury | Flag_Male | Flag_Female | Notes |
|--------------------------|----------|----------|---|--|-----------------------|--|-------------|-----------|-------------|-------|
| 1111110000 | 11 | 11 | Airway / breathing | Short of breath | 267036007 | Dyspnea (finding) | 0 | 1 | 1 | |
| 1111120000 | 11 | 12 | | Difficulty breathing | 230145002 | Difficulty breathing (finding) | 0 | 1 | 1 | |
| 1111130000 | 11 | | Airway / breathing | Noisy breathing | 70407001 | Stridor (finding) | 0 | 1 | 1 | |
| 1111310000 | 11 | 31 | Airway / breathing | Coughing up blood (haemoptysis) | 66857006 | Hemoptysis (disorder) | 0 | 1 | 1 | |
| 1111510000 | 11 | 51 | Airway / breathing | Foreign body in respiratory tract | 262599003 | Foreign body in respiratory tract (disorder) | 1 | 1 | 1 | |
| 1111610000 | 11 | 61 | Airway / breathing | Infant with episodes not breathing (apnoea) | 13094009 | Apnoea of newborn (disorder) | 0 | 1 | 1 | |
| 1111710000 1121110000 | 11 21 | 71 11 | Airway / breathing Circulation / chest | Respiratory arrest Chest pain | 87317003 29857009 | Respiratory arrest (disorder) Chest pain (finding) | 0 | 1 | 1 1 | |
| 1121110000 | 21 | 12 | | Palpitations | 80313002 | Palpitations (finding) | 0 | 1 | 1 | |
| 1121230000 | 21 | 23 | Circulation / chest | Collapse / fainting episode | 427461000 | Near syncope (disorder) | 0 | 1 | 1 | |
| 1121240000 | 21 | 24 | | Collapse / fainting episode with loss of consciousness | 271594007 | Syncope (disorder) | 0 | 1 | 1 | |
| 1121350000 | 21 | 35 | Circulation / chest | Swollen legs (both) | 275319005 | Swollen legs (finding) | 0 | 1 | 1 | |
| 1121360000 | 21 | 36 | Circulation / chest | Swollen leg (single) | 162784002 | Unilateral leg edema (situation) | 0 | 1 | 1 | |
| 1121440000 | 21 | 44 | Circulation / chest | Cold painful limb | 21631000119105 | Limb ischaemia (disorder) | 0 | 1 | 1 | |
| 1121510000 | 21 | 51 | Circulation / chest | Cardiac arrest | 410429000 | Cardiac arrest (disorder) | 0 | 1 | 1 | |
| 1121520000 | 21 | 52 | Circulation / chest | Cardiac arrest due to trauma | 422970001 | Cardiac arrest due to trauma (disorder) | 1 | 1 | 1 | |
| 1131110000 | 31 | 11 | Gastrointestinal | Abdominal pain | 21522001 | Abdominal pain (finding) | 0 | 1 | 1 | |
| 1131120000 | 31 | 12 | Gastrointestinal | Constipation | 14760008 | Constipation (disorder) | 0 | 1 | 1 | |
| 1131130000 | 31 | 13 | Gastrointestinal | Diarrhoea | 62315008 | Diarrhea (finding) | 0 | 1 | 1 | |
| 1131140000 | 31 | 14 | Gastrointestinal | Vomiting + / - nausea | 422400008 | Vomiting (disorder) | 0 | 1 | 1 | |
| 1131150000 | 31 | 15 | Gastrointestinal | Nausea without vomiting | 422587007 | Nausea (finding) | 0 | 1 | 1 | |
| 1131160000 | 31 | 16 | Gastrointestinal | Abdominal distension | 41931001 | Abdominal distension (finding) | 0 | 1 | 1 | |
| 1131170000 | 31 | 17 | Gastrointestinal | Hiccoughs | 65958008 | Hiccoughs (finding) | 0 | 1 | 1 | |
| 1131180000 1131210000 | 31 31 | 18 21 | Gastrointestinal Gastrointestinal | Jaundice | 18165001 79890006 | Jaundice (finding) | 0 | 1 | 1 1 | |
| 1131210000 | 31 | 31 | Gastrointestinal | Loss of appetite Vomiting blood | 8765009 | Loss of appetite (finding) Hematemesis (disorder) | 0 | 1 | 1 | |
| 1131310000 | 31 | 32 | Gastrointestinal | Rectal pain | 77880009 | Rectal pain (finding) | 0 | 1 | 1 | |
| 1131320000 | 31 | 33 | Gastrointestinal | Blood in stools | 249624003 | Blood in feces symptom (finding) | 0 | 1 | 1 | |
| 1131410000 | 31 | 41 | Gastrointestinal | Injury of anus | 276464002 | Injury of anus (disorder) | 1 | 1 | 1 | |
| 1131520000 | 31 | 52 | Gastrointestinal | Food / foreign body in oesophagus | 47609003 | Foreign body in esophagus (disorder) | 1 | 1 | 1 | |
| 1131550000 | 31 | 55 | Gastrointestinal | Foreign body in digestive tract | 33334006 | Foreign body in digestive tract (disorder) | 1 | 1 | 1 | |
| 1131590000 | 31 | 59 | Gastrointestinal | Foreign body in rectum | 70176004 | Foreign body in rectum (disorder) | 1 | 1 | 1 | |
| 1135110000 | 35 | 11 | Neurological | Headache | 25064002 | Headache (finding) | 0 | 1 | 1 | |
| 1135250000 | 35 | 25 | Neurological | Confusion | 40917007 | Clouded consciousness (finding) | 0 | 1 | 1 | |
| 1135270000 | 35 | 27 | Neurological | Drowsy (altered level of consciousness) | 3006004 | Disturbance of consciousness (finding) | 0 | 1 | 1 | |
| 1135310000 | 35 | 31 | Neurological | Limb weakness | 713514005 | Muscle weakness of limb (finding) | 0 | 1 | 1 | |
| 1135350000 | 35 | 35 | Neurological | Facial weakness | 95666008 | weakness of face muscles (finding) | 0 | 1 | 1 | |
| 1135410000 | 35 | 41 | Neurological | Speech disturbance | 23168003 | Speech dysfunction (disorder) | 0 | 1 | 1 | |
| 1135510000 | 35 | 51 | Neurological | Seizure (fit) | 91175000 | Seizure (finding) | 0 | 1 | 1 | |
| 1135610000 1135650000 | 35 35 | 61 65 | Neurological Neurological | Dizziness Numbness / tingling (parasthesia) | 404640003 44077006 | Dizziness (finding) Numbness (finding) | 0 | 1 | 1 1 | |
| 1135710000 | 35 | 71 | Neurological | Tremor | 26079004 | Tremor (finding) | 0 | 1 | 1 | |
| 1135750000 | 35 | 75 | Neurological | Falls / unsteady on feet | 394616008 | Unsteady gait (finding) | 0 | 1 | 1 | |
| 1135910000 | 35 | 91 | Neurological | Insomnia | 193462001 | Insomnia (disorder) | 0 | 1 | 1 | |
| 1141110000 | 41 | 11 | Skin | Wound : abrasion | 399963005 | Abrasion (disorder) | 1 | 1 | 1 | |
| 1141120000 | 41 | 12 | Skin | Wound : laceration | 312608009 | Laceration - injury (disorder) | 1 | 1 | 1 | |
| 1141130000 | 41 | 13 | Skin | Wound : puncture | 312609001 | Puncture wound - injury (disorder) | 1 | 1 | 1 | |
| 1141140000 | 41 | 14 | Skin | Wound : sting | 299972003 | Sting of skin (disorder) | 1 | 1 | 1 | |
| 1141150000 | 41 | 15 | Skin | Wound : bite | 283682007 | Bite - wound (disorder) | 1 | 1 | 1 | |
| 1141210000 | 41 | 21 | Skin | Burn | 125666000 | Burn (disorder) | 1 | 1 | 1 | |
| 1141310000 | 41 | 31 | Skin | Rash | 271807003 | Eruption of skin (disorder) | 0 | 1 | 1 | |
| 1141320000 | 41 | 32 | Skin | Localised swelling / redness / lumps / bumps | 95320005 | Disorder of skin (disorder) | 0 | 1 | 1 | |
| 1141420000 | 41 | 42 | Skin | Itching | 418363000 | Itching of skin (finding) | 0 | 1 | 1 | |
| 1141610000 | 41 | 61 | Skin | Spontaneous bruising | 161887000 | Spontaneous bruising (disorder) | 0 | 1 | 1 | |
| 1141710000 | 41 | 71 | Skin Head and neck | Foreign body in skin / subcutaneous tissue | 93459000 | Foreign body in subcutaneous tissue (disorder) | 1 0 | 1 | 1 | |
| 1151130000 1151180000 | 51 51 | 13 18 | Head and neck | Facial pain (inc. toothache) Neck pain | 95668009 81680005 | Pain in face (finding) Neck pain (finding) | 0 | 1 | 1 | |
| 1151210000 | 51 | 21 | Head and neck | Ear : pain | 162356005 | Earache symptom (finding) | 0 | 1 | 1 | |
| 1151210000 | 51 | 22 | Head and neck | Ear : injury | 2999009 | Injury of ear (disorder) | 1 | 1 | 1 | |
| 1151220000 | 51 | 23 | Head and neck | Ear : discharge | 300132001 | Ear discharge (finding) | 0 | 1 | 1 | |
| 1151240000 | 51 | 24 | Head and neck | Ear : hearing loss | 15188001 | Hearing loss (disorder) | 0 | 1 | 1 | |
| 1151250000 | 51 | 25 | Head and neck | Ear : ringing in ears (tinnitus) | 60862001 | Tinnitus (finding) | 0 | 1 | 1 | |
| 1151290000 | 51 | 29 | Head and neck | Ear : foreign body | 75441006 | Foreign body in ear (disorder) | 1 | 1 | 1 | |
| 1151310000 | 51 | 31 | Head and neck | Nose : bleeding from nose | 12441001 | Epistaxis (disorder) | 0 | 1 | 1 | |
| 1151320000 | 51 | 32 | Head and neck | Nose : injury | 19491003 | Injury of nose (disorder) | 1 | 1 | 1 | |
| 1151340000 | 51 | 34 | Head and neck | Nose : congestion | 68235000 | Nasal congestion (finding) | 0 | 1 | 1 | |
| 1151390000 | 51 | 39 | Head and neck | Nose : foreign body | 74699008 | Foreign body in nose (disorder) | 0 | 1 | 1 | |
| 1151410000 | 51 | 41 | Head and neck | Throat: sore | 267102003 | Sore throat symptom (finding) | 0 | 1 | 1 | |
| | | | | | | | | | | |

| 1151420000 | 51 | 42 | Head and neck | Throat : cough | 49727002 | Cough (finding) | 0 | 1 | 1 |
|------------|----|----|---------------------------------|---|-----------|--|-----|---|---|
| 1151490000 | 51 | 49 | Head and neck | Throat : foreign body in throat / mouth | 14380007 | Foreign body in mouth (disorder) | 1 | 1 | 1 |
| 1155110000 | 55 | | Eye | | 75705005 | Red eye (disorder) | 0 | 1 | 1 |
| | | | | Red eye | | | | | |
| 1155120000 | 55 | | Eye | Foreign body on eye | 55899000 | Foreign body on external eye (disorder) | 1 | 1 | 1 |
| 1155210000 | 55 | 21 | Eye | Pain in / around eye | 41652007 | Pain in eye (finding) | 0 | 1 | 1 |
| 1155220000 | 55 | 22 | Eye | Discharge from eye | 246679005 | Discharge from eye (finding) | 0 | 1 | 1 |
| 1155320000 | 55 | 32 | Eve | Visual disturbance | 63102001 | Visual disturbance (disorder) | 0 | 1 | 1 |
| 1155330000 | 55 | 33 | Eve | Photophobia | 409668002 | Photophobia (finding) | 0 | 1 | 1 |
| | | | , - | · | | | · · | | |
| 1155410000 | 55 | | Eye | Eye injury | 282752000 | Injury of eye region (disorder) | 1 | 1 | 1 |
| 1155510000 | 55 | 51 | Eye | Eye review | 170720001 | Follow-up ophthalmological assessment (regime / therapy) | 0 | 1 | 1 |
| 1161110000 | 61 | 11 | Trauma / musculoskeletal | Head injury | 82271004 | Injury of head (disorder) | 1 | 1 | 1 |
| 1161130000 | 61 | | Trauma / musculoskeletal | Facial injury | 125593007 | Injury of face (disorder) | 1 | 1 | 1 |
| | | | | | | | 1 | 1 | 1 |
| 1161180000 | 61 | 18 | Trauma / musculoskeletal | Injury of neck | 90460009 | Injury of neck (disorder) | = | - | |
| 1161210000 | 61 | 21 | Trauma / musculoskeletal | Injury of shoulder / arm / elbow / wrist / hand | 127278005 | Injury of upper extremity (disorder) | 1 | 1 | 1 |
| 1161310000 | 61 | 31 | Trauma / musculoskeletal | Injury of hip / leg / knee / ankle / foot | 127279002 | Injury of lower extremity (disorder) | 1 | 1 | 1 |
| 1161410000 | 61 | 41 | Trauma / musculoskeletal | Injury of thorax | 262525000 | Chest injury (disorder) | 1 | 1 | 1 |
| 1161450000 | 61 | | Trauma / musculoskeletal | Injury of abdomen | 128069005 | Injury of abdomen (disorder) | 1 | 1 | 1 |
| | | | | | | | = | - | |
| 1161460000 | 61 | | Trauma / musculoskeletal | Injury of cervical region of back (disorder) | 450724008 | Injury of cervical region of back (disorder) | 1 | 1 | 1 |
| 1161470000 | 61 | 47 | Trauma / musculoskeletal | Injury of upper back | 282765009 | Upper back injury (disorder) | 1 | 1 | 1 |
| 1161480000 | 61 | 48 | Trauma / musculoskeletal | Injury of lower back | 282766005 | Lower back injury (disorder) | 1 | 1 | 1 |
| 1161510000 | 61 | 51 | Trauma / musculoskeletal | Backache (no recent injury) | 161891005 | Backache (finding) | 0 | 1 | 1 |
| 1161530000 | 61 | 53 | Trauma / musculoskeletal | Pain in shoulder / arm / elbow / wrist / hand | 102556003 | Pain in upper limb (finding) | 0 | 1 | 1 |
| | | | | | | | | | |
| 1161610000 | 61 | | Trauma / musculoskeletal | Pain in hip / leg / knee / ankle / foot | 10601006 | Pain in lower limb (finding) | 0 | 1 | 1 |
| 1161710000 | 61 | 71 | Trauma / musculoskeletal | Joint swelling | 271771009 | Joint swelling (finding) | 0 | 1 | 1 |
| 1161810000 | 61 | 81 | Trauma / musculoskeletal | Major trauma (serious injury >1 body area) | 417746004 | Traumatic injury (disorder) | 1 | 1 | 1 |
| 1161910000 | 61 | | Trauma / musculoskeletal | Traumatic amputation | 262595009 | Traumatic amputation (disorder) | 1 | 1 | 1 |
| 1171110000 | 71 | | Genitourinary | Pain on passing urine | 49650001 | Dysuria (finding) | 0 | 1 | 1 |
| | | | • | · · · · · · · · · · · · · · · · · · · | | , | | | |
| 1171130000 | 71 | 13 | Genitourinary | Frequent urination | 28442001 | Polyuria (finding) | 0 | 1 | 1 |
| 1171140000 | 71 | 14 | Genitourinary | Unable to pass urine | 267064002 | Retention of urine (disorder) | 0 | 1 | 1 |
| 1171150000 | 71 | 15 | Genitourinary | Low urine output | 83128009 | Oliguria (finding) | 0 | 1 | 1 |
| 1171160000 | 71 | | Genitourinary | Blood in urine | 34436003 | Blood in urine (finding) | 0 | 1 | 1 |
| | | | • | | | | 0 | - | - |
| 1171210000 | 71 | | Genitourinary | Flank pain | 247355005 | Flank pain (finding) | - | 1 | 1 |
| 1171220000 | 71 | 22 | Genitourinary | Pain in scrotum / testes | 20502007 | Pain in scrotum (finding) | 0 | 1 | 0 |
| 1171410000 | 71 | 41 | Genitourinary | Abnormal swelling groin area | 281398003 | Groin mass (finding) | 0 | 1 | 1 |
| 1171610000 | 71 | 61 | Genitourinary | Pain in genital area (generalised) | 225565007 | Perineal pain (finding) | 0 | 1 | 1 |
| | 71 | | | | | | 1 | _ | |
| 1171620000 | | 62 | Genitourinary | Injury to genital area | 6923002 | Injury to perineum (disorder) | | 1 | 1 |
| 1171810000 | 71 | 81 | Genitourinary | Problem related to penis | 33958003 | Disorder of penis (disorder) | 0 | 1 | 0 |
| 1171910000 | 71 | 91 | Genitourinary | States victim of sexual assault | 56890008 | Victim of sexual aggression (finding) | 1 | 1 | 1 |
| 1175110000 | 75 | 11 | ObGyn | Pregnancy related: less than 20 weeks | 428566005 | Gestation less than 20 weeks (finding) | 0 | 0 | 1 |
| 1175210000 | 75 | | ObGyn | Pregnancy related : greater than 20 weeks | 429715006 | Gestation greater than 20 weeks (finding) | 0 | 0 | 1 |
| | 75 | | | | | | 0 | 0 | |
| 1175310000 | | 31 | ObGyn | Vaginal bleeding (abnormal) | 289530006 | Bleeding from vagina (finding) | - | - | 1 |
| 1175510000 | 75 | 51 | ObGyn | Foreign body in vagina | 34124000 | Foreign body in vagina (disorder) | 1 | 0 | 1 |
| 1175610000 | 75 | 61 | ObGyn | Problem related to vagina | 25658005 | Disorder of vagina (finding) | 0 | 0 | 1 |
| 1175710000 | 75 | 71 | ObGyn | Problem related to breast | 79604008 | Disorder of breast (finding) | 0 | 0 | 1 |
| 1181110000 | 81 | | Environmental | Poisoning from any source | 75478009 | Poisoning (disorder) | 1 | 1 | 1 |
| | 81 | | | , | | , | = | 1 | |
| 1181310000 | | | Environmental | Electrical exposure (inc. lightning) | 371708003 | Injury due to electrical exposure (disorder) | 1 | - | 1 |
| 1181410000 | 81 | 41 | Environmental | Hypothermia | 386689009 | Hypothermia (finding) | 1 | 1 | 1 |
| 1181450000 | 81 | 45 | Environmental | Frostbite | 370977006 | Frostbite (disorder) | 1 | 1 | 1 |
| 1181610000 | 81 | 61 | Environmental | Near drowning | 87970004 | Nonfatal submersion (disorder) | 1 | 1 | 1 |
| 1181710000 | 81 | | Environmental | Exposure to communicable disease (inc. needlestick / body fluids) | 417981005 | Exposure to blood and / or body fluid (event) | 1 | 1 | 1 |
| | | | | | | | = | | |
| 1181810000 | 81 | | Environmental | Chemical exposure | 371704001 | Injury due to chemical exposure (disorder) | 1 | 1 | 1 |
| 1181850000 | 81 | 85 | Environmental | Noxious inhalation - gas / fumes / vapour / smoke | 57335002 | Toxic effect of gas, fumes AND/OR vapors (disorder) | 1 | 1 | 1 |
| 1191110000 | 91 | 11 | Psychosocial / Behaviour change | Drug / alcohol intoxication or withdrawal | 66214007 | Substance abuse (disorder) | 0 | 1 | 1 |
| 1191310000 | 91 | 31 | Psychosocial / Behaviour change | Self-harm | 248062006 | Self-injurious behavior (finding) | 1 | 1 | 1 |
| 1191410000 | 91 | | Psychosocial / Behaviour change | Suicidal thoughts | 267073005 | Suicidal (finding) | 0 | 1 | 1 |
| | | | | | | | · · | | |
| 1191510000 | 91 | | Psychosocial / Behaviour change | Depressive disorder | 35489007 | Depressive disorder (disorder) | 0 | 1 | 1 |
| 1191610000 | 91 | 61 | Psychosocial / Behaviour change | Anxiety disorder | 48694002 | Anxiety (finding) | 0 | 1 | 1 |
| 1191810000 | 91 | 81 | Psychosocial / Behaviour change | Behaviour : unusual | 248020004 | Bizarre behavior (finding) | 0 | 1 | 1 |
| 1191820000 | 91 | 82 | Psychosocial / Behaviour change | Behaviour : agitated / violent | 248004009 | Physical aggression (finding) | 0 | 1 | 1 |
| | 91 | | | | | | 0 | 1 | 1 |
| 1191910000 | | | Psychosocial / Behaviour change | Hallucinations / delusions | 7011001 | Hallucinations (finding) | - | - | |
| 1197110000 | 97 | 11 | General / minor / admin | Fever | 386661006 | Fever (finding) | 0 | 1 | 1 |
| 1197210000 | 97 | 21 | General / minor / admin | Hyperglycaemia | 80394007 | Hyperglycemia (disorder) | 0 | 1 | 1 |
| 1197250000 | 97 | 25 | General / minor / admin | Hypoglycaemia | 302866003 | Hypoglycemia (disorder) | 0 | 1 | 1 |
| 1197310000 | 97 | | General / minor / admin | Postoperative / wound care (no complication) | 225358003 | Wound care (regime/therapy) | 0 | 1 | 1 |
| | | | | | | | - | | |
| 1197350000 | 97 | 35 | General / minor / admin | Postoperative / medical device with complication | 385486001 | Postoperative complication (disorder) | 1 | 1 | 1 |
| 1197510000 | 97 | 51 | General / minor / admin | Crying infant | 162214009 | Crying infant (finding) | 0 | 1 | 1 |
| 1197610000 | 97 | 61 | General / minor / admin | Generalised weakness | 13791008 | Asthenia (finding) | 0 | 1 | 1 |
| 1197640000 | 97 | 64 | General / minor / admin | Pale colour | 398979000 | Pale complexion (finding) | 0 | 1 | 1 |
| 1197690000 | 97 | 69 | General / minor / admin | Blue colour (cyanosis) | 3415004 | Cyanosis (finding) | 0 | 1 | 1 |
| 1137030000 | ٠, | 03 | Scherary minor / dumin | Diac coloai (cyallosis) | 3413004 | Cyanosis (alig) | o o | - | - |

| 1197810000 | 97 | 81 General / mino | or / admin | Social problem (medically well) | 161152002 | Social problem (finding) | 0 | 1 | 1 |
|------------|----|-------------------|------------|-----------------------------------|-----------|---|---|---|---|
| 1197850000 | 97 | 85 General / mind | or / admin | Direct referral to inpatient unit | 78680009 | Hospital admission, emergency, direct (procedure) | 0 | 1 | 1 |
| 1197890000 | 97 | 89 General / mino | or / admin | Requesting prescription | 182888003 | Medication requested (situation) | 0 | 1 | 1 |

DATA GROUP: INJURY CHARACTERISTICS

FUNCTION: To carry the details of injuries Group Status: R Group Repeats: 0..1

| DATA GROUP | DATA TEM NAME | DATA ITEM DECAITION | DATA STOW C | SERIO ALIONO | TW ECONAT | SWOMED CT/DMAD (DDS | HISTOPATON | cons cone ser | I BIX TO CHESTRY COS Tura 616 | VALIDATION BULES | | DATA ITEM DROVENANCE | NOTES |
|------------------------|--|---|---------------|--------------|-----------------|---------------------|---|--------------------|---|---|--|----------------------|--|
| OATA GEROOF | OAA NAW SAIR | and A real action (and | STATUS (MRIO) | EEM REPEAT | S SORMAT | SNOWED CT/DMED/DDS | ACCI II CANDA | ECOS COLO SEI | EWR TO UNIVERSITY OF THE STATE | POPULATION VALIDATION F - Format is validated V - Validated against an explicit | POST SCHEMA VALIDATION | DATA HEM PROVENANCE | NOTES |
| INJURY CHARACTERISTICS | MUST DATA | The date that the injury occurred. | M N | 1.1 | an10 CCYF-MM-00 | DMBO | This data later in necessary to identify delay between injury accumence and presentation. Delay from Injury is important to know in two chardwars: a in children, delay between Injury from and proventation to a healthcare professional is well | n/a | 1/0 | list of permitted values as defined in the NHS Data Dictionary | n/a | NEW A&E data item | injury data items should be captured when a Chief Complaint is records which has an injury flag. |
| | | | | | | | receptions of a 'n' ted Beg' inducting a high risk of risk about - velocine cut's dealing tom layer to presentation with change clinical treatment e.g. avoid closing wound when infection is talky to be present. If a subsequent complication occurs, such award preferricos, the velocine provided by this clin. In these was a side private injury and presentation would also reduce the risk of the healthcare provider being those faible. | | | | | | |
| NALERY CHARACTERISTICS | NUMP TOKE | One than that the injury accounts. | M N | 1.1 | and HH-MM-SS | DMSD | This data is min is necessary to identify fielding between logicy accumines and preventation. Using broan logicy in report to bease in two interests to have also accumined to the a to obtain, after prevent logicy them and preventation to a highlaturary preferational in well when the property of the preventation is a superior of the property of the preventation account of the property of the preventation account of the preventation account, such as wound about the fact loss is likely to be prevent. If a subsequent complication account, such as wound preventation would also reduce the risk of the healthcare provider being found table. | n/a | n/a | is . | n/a | NEW A&C data item | (quy data tems should be capsured when a Clief Complaint is recorded which has an injury flag. |
| NALUEY CHARACTERISTICS | OMBRIGACY CARE FACE OF BRAINY (SMONRO CT) | The later of flooristics of which the persons was present when the riphy occurred. | R N | 0.1 | min of max n18 | SNOWED CT | To be able to understand the patients of injury, and more importantly from to prevent them, it is excessary to be able to collect basis climitation appealing the part of pice where the high account of This information allows the data to be aggregated in a meaningful way so that analysis and the particular of the particular patients of the particular patients of the particular patients and particular patients and particular day of the week. | Link to code set | n/a | | For any data learn which consists a value other than specified in element code in Langerth which beit suppress it to it cannot insive \$2.5- [it will be visible to those with \$0.5 access and therefore available for disperself and tous/behooding). Log it appropriately for response to user such as "blow for records 3, field Yis not in the acceptable range". | NEW A&G data item | liquey data kens should be captured when a Chief Conglaint is recorder which has an injury flag. |
| INLURY CHARACTERISTICS | EMERGENCY CASE PLACE OF NULRY (LATITUDE) | EMERGENCY CASE PLACE OF BUILDY (EATHTUGE) is the labrade of the EMERGENCY CASE PLACE OF BUILDY (DWOMED CT), expressed in decimal degrees. | 0 N | 0.1 | max n2.n6 | DMED | Exact longitude and latitude is the preferred method of coding injury place if extracted from an electronic system e.g. ambulance electronic patient record system or a klock system with an inbul map. | n/a | 1/2 | F | n/a | NEW A&E data item | |
| INCURY CHARACTERISTICS | DASSIGENCY CASE PLACE OF INVESTY (LONGTRUDG) | EMBEGING CASE PACK OF BUILTY (LONGITUDE) is the lengitude of the EMBEGINGY CASE PLACE OF INVERY (EMDMED CT), expressed in decimal degrees. | 0 N | 0.1 | mas n3.n6 | DMILO | Exact longitude and latitude is the preferred method of coding injury place if extracted from an electronic system e.g. ambulance electronic patient record system or a klosk system with an inbul map. | n/a | 1/2 | F | n/a | NCW A&C data item | |
| NEURY CHARACTERISTICS | AMERICANCY CARE RELIEVE SHITMET (SACRAMED CT) | The most filely because intent in the activamence of the explay or policeoling as assessed by checken. | R N | 0.1 | min nú mas n13 | SNOWED CT | Preventing preventable (kept) is great benefit to includate and society, and identifying the number and invertige all assurable to be one yell official. Understanding (kept) intent underplors all kepty prevention such, whether as a local cor national level. An example of a targeted reserved in intellig sequencies triansing sequencies (section) on series of keter in the followed intelligence information Standard (ISS 1554), which relies on assault related data (nited - apparent assault). | (ink to code set | eja | s. | For any data them which contains a value other than specified in inelement code set, group the value but supposes it in it cannot inswe- sible it will be visible to those with SUS access and therefore available of deligenatic and handleshootingful, glid appropriately for response to were such as "Value for records X, field Y is not in the acceptable range". | NGW A&G data item | Isjury data items should be captured when a Chief Complaint is recorded which has an injury flag. |
| NEURY CHARACTERISTICS | AMERICANCY CARE RESIRVE ACTIVITY STATUS. (SHOMAGE CT) | The status of actively lesing evolentains by the person at the moment the spays cocurred. | R N | 0.1 | min nú max n13 | SNOWED CT | highy sevalence has resulted in major reductions in highly from road traffic collisions and contribute incidents. Neumer the highest in a highly rish the laws year are highly-rish cut for the horse and during linears and sport. The horse and during linears and sport. The horse has been a significant that the high high process the process of the | (inh to code set | eja | | nelevant code set, accept the value but suppress it to it cannot leave SLE- (it will be visible to those with SLE access and therefore available for diagnostic and troubleshooting). Log it appropriately for response to user such as "Value for records X, field Y is not in the acceptable range" | NEW A&E data item | Isjury data items should be captured when a Chief Complaint is recorder which has an injury flag. |
| NUMBER CHARACTERISTICS | GARGAGIC CARE REQUIR ACTION? THY GROWING CT | The figure of another, being quaderstates by the person of the received the upper accounts. | R N | 0.1 | тіп об так п18 | SNOWED CT | Gipt servisions has resident may reductions in larger from rost briffs collisions and enrigidant incidents. Never the biggent fini is hardy with the latter parts and with here and sharing incurs and upon the latter and sharing incurs and upon the latter and sharing incurs and upon the latter and upon the latter and the latter and the white of upon the securing at home latter and now granter activity data in execution for this process to understand the cases, which prevents are all the latter and white the latter than all with those process to white prevents and and a sharing and prevents are stated and some giving prevents and and a sharing and latter than the latter than the process and the latter and and white all prevents are stated and soming white prevents and and sharing and and all supply when recommission and continue to the latter of the latter and the latter and the latter and the latter and to regulate and preventions. | Clink to coder set | a/a | | For any data them which contains a value other than specified in relevant code et a., but the whale but suggest in to Cannot lises SUF-IF will be visible to those with SUS access and therefore available for dispercise and suberhelmosting. Let a give a proportion for response to were such as "Value for records X, field V is not in the acceptable range." | NGW A&G data item | Nijery data tems should be capsured when a Clief Camplaint is recorded which has an injury flag. |
| NUMEY CHARACTERSTICS | IMMERCACY CASE RULERY MECONOMINE (INCOMES CT) | Most the Royaly and Cassed. | R N | 0.1 | min of max n18 | SNOMED CT | In additional their popula is just themselves? In necessary to client a security description of the mechanism of injury, this is periodically imported for the increasing numbers of patients are injured in the home, as it is supported that including imple measurement, a wold positive floor or loose floor coverings may make a very large difference. | Link to code set | n/a | 5 | For any data item which contains a value other than specified in collections of the strength which has burgers it in it cannot have suffer any other strength of the strength of the strength of the SLF-it will be visible to those with SLF across and therefore available of diagnostic as of has buddleshooding (i.g. all appropriately for response to user such as "Value for records X, field Y is not in the acceptable range" | NGW A&G data isom | rijury data kens should be captained when a Chief Complaint is recorde which has an injury flag. |
| INURY CHARACTERISTICS | IMMEGIACY CHAS INVERTY ACCIDIOL OR DRIVE INVOLVEMENT (DISCHISE CT) | Accord of any drug or skinht used by the patent, which are thought their to have contributed to the read to attend the to. | R N | 0.* | min né mas n±8 | SNOWED CT | Dags and alcohol are frequently implicated in the cause of injury and the ECDS proposes a structured way to copture this data. | Link to code set | e/a | \$ | For any data item which contains a value other than specified in relevant code set, accept the value but supports it to it cannot leave SLE-Ef at will be value by the SLES access and therefore available for diagnostic and troubleshooting!. Log it appropriately for response to user such as "halve for records X, field Y is not in the acceptable range". | NEW A&C data item | injury data items should be captured when a Oxief Complaint is recorder which has an injury flag. |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description |
|---------------|-------|-------|------------|--------------------------------------|------------------|--|
| 2018111100 | 11 | 11 | Home | Living room | 1064991000000101 | Place of occurrence of injury is living room in home environment (finding) |
| 2018111500 | 11 | 15 | Home | Kitchen | 1065001000000108 | Place of occurrence of injury is kitchen in home environment (finding) |
| 2018112100 | 11 | 21 | Home | Garage | 1065011000000105 | Place of occurrence of injury is garage in home environment (finding) |
| 2018112500 | 11 | 25 | Home | Hallway | 1065021000000104 | Place of occurrence of injury is hallway in home environment (finding) |
| 2018113100 | 11 | 31 | Home | Stairway | 1065031000000102 | Place of occurrence of injury is stairway in home environment (finding) |
| 2018113500 | 11 | 35 | Home | Bathroom | 1065041000000106 | Place of occurrence of injury is bathroom in home environment (finding) |
| 2018114100 | 11 | 41 | Home | Bedroom | 1065051000000109 | Place of occurrence of injury is bedroom in home environment (finding) |
| 2018114500 | 11 | 45 | Home | Utility room | 1065061000000107 | Place of occurrence of injury is utility room in home environment (finding) |
| 2018115100 | 11 | 51 | Home | Study | 1065071000000100 | Place of occurrence of injury is study in home environment (finding) |
| 2018115500 | 11 | 55 | Home | Dining room | 1065081000000103 | Place of occurrence of injury is dining room in home environment (finding) |
| 2018116100 | 11 | 61 | Home | Home gym | 1065091000000101 | Place of occurrence of injury is gym in home environment (finding) |
| 2018116500 | 11 | 65 | Home | Conservatory | 1065101000000109 | Place of occurrence of injury is conservatory in home environment (finding) |
| 2018117500 | 11 | 75 | Home | Garden | 1065411000000104 | Place of occurrence of injury is garden in home environment (finding) |
| 2018118500 | 11 | 85 | Home | Outbuilding / shed | 1065121000000100 | Place of occurrence of injury is outbuilding in home environment (finding) |
| 2018119100 | 11 | 91 | Home | Swimming pool | 1065111000000106 | Place of occurrence of injury is swimming pool in home environment (finding) |
| 2018119200 | 11 | 92 | Home | Pond | 1065131000000103 | Place of occurrence of injury is garden pond in home environment (finding) |
| 2018211100 | 21 | 11 | Indoor | Educational establishment | 244211000000103 | Place of occurrence of injury is educational establishment (finding) |
| 2018212100 | 21 | 21 | Indoor | Retail service area e.g. shop | 981021000000108 | Place of occurrence of injury is trade or service environment (finding) |
| 2018212500 | 21 | 25 | Indoor | Licensed premises e.g. bar cafe club | 980911000000107 | Place of occurrence of injury is licensed premises (finding) |
| 2018216100 | 21 | 61 | Indoor | Public building | 244281000000105 | Place of occurrence of injury is public building environment (finding) |
| 2018217100 | 21 | 71 | Indoor | Sports facility | 244301000000106 | Place of occurrence of injury is sports facility (finding) |
| 2018218100 | 21 | 81 | Indoor | Workplace | 244321000000102 | Place of occurrence of injury is workplace environment (finding) |
| 2018218900 | 21 | 89 | Indoor | Medical / clinical area | 244251000000104 | Place of occurrence of injury is hospital environment (finding) |
| 2018411100 | 41 | 11 | Outdoor | Road / pavement | 244231000000106 | Place of occurrence of injury is highway environment (finding) |
| 2018412100 | 41 | 21 | Outdoor | Recreational area | 979981000000100 | Place of occurrence of injury is recreational area (finding) |
| 2018413100 | 41 | 31 | Outdoor | Countryside | 979971000000102 | Place of occurrence of injury is countryside environment (finding) |
| 2018414100 | 41 | 41 | Outdoor | Farm | 979961000000109 | Place of occurrence of injury is farm environment (finding) |
| 2018414500 | 41 | 45 | Outdoor | Construction area | 244201000000100 | Place of occurrence of injury is construction area (finding) |
| 2018419100 | 41 | 91 | Outdoor | Water / waterside | 980891000000109 | Place of occurrence of injury is water or waterside environment (finding) |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|------------|---|-----------------|--|-------|
| 2018110000 | 11 | n/a | Non-intentional injury | 242056005 | Accidental injury (disorder) | |
| 2018210000 | 21 | n/a | Self inflicted injury | 276853009 | Self inflicted injury (disorder) | |
| 2018310000 | 31 | n/a | Apparent assault | 298231000000106 | Alleged victim of physical assault (situation) | |
| 2018410000 | 41 | n/a | Complication of medical care | 35688006 | Complication of medical care (disorder) | |
| 2018510000 | 51 | n/a | Injury caused by animal | 242651001 | Injury caused by animal (disorder) | |
| 2018610000 | 61 | n/a | Injury due to legal intervention | 219256006 | Injury due to legal intervention (disorder) | |
| 2018710000 | 71 | n/a | Undetermined / no information available | 269735005 | Injury undetermined whether accidentally or purposely inflicted (disorder) | |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|------------|--------------------------|-------------|---|-------|
| 2018211100 | 21 | n/a | Activity of daily living | 129025006 | Activity of daily living (observable entity) | |
| 2018411100 | 41 | n/a | Unpaid work | 276061003 | Unpaid work (finding) | |
| 2018511100 | 51 | n/a | Being educated | 301466009 | Education and training activity (observable entity) | |
| 2018311100 | 31 | n/a | Paid work | 406156006 | In paid employment (finding) | |
| 2018111100 | 11 | n/a | Leisure | 4751000 | Leisure physical activity (observable entity) | |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS Description | SNOMED_Code | SNOMED_Description |
|---------------|-------|-------|----------------------|--|------------------|--|
| 1111210000 | 11 | 21 | Leisure at home | Indoor recreation | 1068401000000109 | Injury whilst engaged in indoor recreational activity (disorder) |
| 1111250000 | 11 | 25 | Leisure at home | Using electronic device - TV / game / computer | 1068291000000103 | Injury whilst using electronic audiovisual device (disorder) |
| 1111410000 | 11 | 41 | Leisure at home | Ascending stairs | 1068301000000104 | Injury whilst ascending stairs (disorder) |
| 1111420000 | 11 | 42 | Leisure at home | Descending stairs | 1068311000000102 | Injury whilst descending stairs (disorder) |
| 1111450000 | 11 | 45 | Leisure at home | Walking indoors | 1068321000000108 | Injury whilst walking indoors (disorder) |
| 1112110000 | 12 | 11 | Essential activities | Food preparation (inc. as work) | 1068341000000101 | Injury whilst preparing food (disorder) |
| 1112210000 | 12 | 21 | Essential activities | Food consumption | 1068351000000103 | Injury whilst consuming food (disorder) |
| 1112410000 | 12 | 41 | Essential activities | In bedroom / sleeping | 1068421000000100 | Injury whilst sleeping (disorder) |
| 1112610000 | 12 | 61 | Essential activities | Bathing | 1068371000000107 | Injury whilst bathing (disorder) |
| 1112620000 | 12 | 62 | Essential activities | Showering | 1068381000000109 | Injury whilst showering (disorder) |
| 1112650000 | 12 | 65 | Essential activities | Using toilet facility | 1068791000000107 | Injury whilst using toilet facility (disorder) |
| 1112710000 | 12 | 71 | Essential activities | Being nursed / cared for | 1068361000000100 | Injury whilst receiving healthcare (disorder) |
| 1113610000 | 13 | 61 | Leisure | DIY / maintenance | 1068411000000106 | Injury whilst undertaking home maintenance (disorder) |
| 1113710000 | 13 | 71 | Leisure | Gardening | 1068391000000106 | Injury whilst gardening (disorder) |
| 1113810000 | 13 | 81 | Leisure | Crafts | 1068001000000102 | injury whilst engaged in crafting (disorder) |
| 1113850000 | 13 | 85 | Leisure | Hobbies | 1068061000000103 | Injury whilst engaged in hobby (disorder) |
| 1115110000 | 15 | 11 | Leisure outside home | Social : restaurant / cafe / pub / club | 1068281000000100 | Injury whilst engaged in social activity outside the home (disorder) |
| 1115210000 | 15 | 21 | Leisure outside home | Social: play / recreation | 1068271000000102 | Injury whilst engaged in outdoor recreational activity (disorder) |
| 1115310000 | 15 | 31 | Leisure outside home | Entertainment : cinema | 1068031000000108 | Injury whilst attending cinema (disorder) |
| 1115320000 | 15 | | Leisure outside home | Entertainment : theatre | 1068051000000101 | Injury whilst attending theatre (disorder) |
| 1115350000 | 15 | 35 | Leisure outside home | Entertainment : music | 1068041000000104 | Injury whilst attending music venue (disorder) |
| 1115810000 | 15 | 81 | Leisure outside home | Fishing | 1068811000000108 | Injury whilst fishing (disorder) |
| 1115850000 | 15 | 85 | Leisure outside home | Hunting | 1068801000000106 | Injury whilst hunting (disorder) |
| 1121110000 | 21 | | Transport | Walking outdoors | 1068331000000105 | Injury whilst walking outdoors (disorder) |
| 11211150000 | 21 | | Transport | Pedestrian crossing road | 1068651000000108 | Injury whilst walking across road (disorder) |
| 1121210000 | 21 | | Transport | Cyclist on road / public highway | 1068431000000103 | Injury whilst cycling on public highway (disorder) |
| 1121310000 | 21 | | Transport | Motorcycle rider | 1068681000000102 | Injury due to activity involving motorcycle riding (disorder) |
| 1121320000 | 21 | | Transport | Motorcycle passenger | 1068731000000106 | Injury whilst motorcycle passenger (disorder) |
| 1121410000 | 21 | 41 | Transport | Motor vehicle driver | 1068741000000102 | Injury whilst driving motor vehicle on public highway (disorder) |
| 1121420000 | 21 | | Transport | Motor vehicle passenger (not public transport) | 1068751000000104 | Injury whilst motor vehicle passenger (disorder) |
| 1121610000 | 21 | | Transport | Passenger (public transport) | 1068781000000105 | Injury whilst passenger on public transport (disorder) |
| 1121710000 | 21 | | Transport | Electric personal mobility device | 1076901000000105 | Injury whilst using electronic personal transport (disorder) |
| 1141110000 | 41 | 11 | Work | Manual / unskilled / labour | 1068591000000101 | Injury whilst undertaking manual work (disorder) |
| 1141150000 | 41 | | Work | Trade / retail | 1068621000000103 | Injury whilst engaged in retail work (disorder) |
| 1141210000 | 41 | 21 | Work | Administration / clerical / professional | 1068581000000103 | Injury whilst engaged in administrative work (disorder) |
| 1141310000 | 41 | 31 | Work | Healthcare / caring | 1068531000000102 | Injury whilst delivering healthcare (disorder) |
| 1141350000 | 41 | 35 | Work | Teaching | 1068641000000105 | Injury whilst teaching (disorder) |
| 1141410000 | 41 | 41 | Work | Entertainment / creative | 1068661000000106 | Injury whilst engaged in entertainment work (disorder) |
| 1141450000 | 41 | 45 | Work | Security work | 1068631000000101 | Injury whilst engaged in security work (disorder) |
| 1141550000 | 41 | 55 | Work | Factory work | 1068551000000109 | Injury whilst working in factory (disorder) |
| 1141610000 | 41 | 61 | Work | Environmental | 1068611000000109 | Injury whilst engaged in environmental work (disorder) |
| 1141650000 | 41 | 65 | Work | Engineering / technology | 1068601000000107 | Injury whilst engaged in engineering work (disorder) |
| 1141670000 | 41 | 67 | Work | Science / research | 1068671000000104 | Injury whilst engaged in scientific work (disorder) |
| 1141710000 | 41 | 71 | Work | Construction / maintenance | 1068571000000100 | Injury whilst engaged in construction work (disorder) |
| 1141750000 | 41 | 75 | Work | Farming | 1068541000000106 | Injury whilst working on farm (disorder) |
| 1141770000 | 41 | 77 | Work | Mining | 1068561000000107 | Injury whilst working in mine (disorder) |
| 1161110000 | 61 | 11 | Sports : team : ball | Football (soccer) | | Injury whilst playing football (disorder) |
| 1161210000 | 61 | 21 | Sports : team : ball | Rugby union | 1067331000000106 | Injury whilst playing rugby union (disorder) |
| 1161220000 | 61 | | Sports : team : ball | Rugby league | 1067321000000109 | Injury whilst playing rugby league (disorder) |
| 1161310000 | 61 | 31 | Sports : team : ball | Australian rules football | 1067591000000102 | Injury whilst playing Australian rules football (disorder) |
| 1161320000 | 61 | 32 | Sports : team : ball | Gaelic football | 1067581000000104 | Injury whilst playing Gaelic football (disorder) |
| 1161350000 | 61 | 35 | Sports : team : ball | American football | 1067391000000107 | Injury whilst playing American football (disorder) |
| | | | | | | |

| 1161410000 | 61 | 41 | Sports : team : ball | Basketball | 1067341000000102 | Injury whilst playing basketball (disorder) |
|------------|----------|----|--------------------------------------|-------------------------------|------------------|--|
| 1161430000 | 61 | 43 | Sports : team : ball | Netball | 1067351000000104 | Injury whilst playing netball (disorder) |
| 1161450000 | 61 | 45 | Sports : team : ball | Volleyball | 1067371000000108 | Injury whilst playing volleyball (disorder) |
| 1161470000 | 61 | 47 | Sports : team : ball | Korfball | 1067381000000105 | Injury whilst playing korfball (disorder) |
| 1161910000 | 61 | | Sports : team : ball | Handball | 1067361000000101 | Injury whilst playing handball (disorder) |
| 1163110000 | 63 | | Sports : team : bat / stick | Hockey | 1067401000000105 | Injury whilst playing hockey (disorder) |
| 1163210000 | 63 | | | Cricket | 1067421000000101 | Injury whilst playing cricket (disorder) |
| 1163310000 | 63 | | Sports : team : bat / stick | Baseball | 1067431000000104 | Injury whilst playing baseball (disorder) |
| 1163350000 | 63 | | Sports : team : bat / stick | Softball | 1067441000000108 | Injury whilst playing softball (disorder) |
| 1163410000 | 63 | 41 | Sports : team : bat / stick | Lacrosse | 1067411000000107 | Injury whilst playing lacrosse (disorder) |
| 1163450000 | 63 | | Sports : team : bat / stick | Hurling | 1068011000000100 | Injury whilst playing hurling (disorder) |
| 1169110000 | 69 | | Sports : racquet | Tennis | 1067451000000106 | Injury whilst playing tennis (disorder) |
| 1169210000 | 69 | | Sports : racquet | Squash | 1067461000000109 | Injury whilst playing squash (disorder) |
| 1169310000 | 69 | | Sports : racquet | Badminton | 1067471000000103 | Injury whilst playing squasif (disorder) |
| 1169310000 | 69 | | Sports : racquet | Table tennis | 1067471000000102 | |
| | | | | | | Injury whilst playing table tennis (disorder) |
| 1169510000 | 69 | | · · | Real tennis | 1068021000000106 | Injury whilst playing real tennis (disorder) |
| 1170110000 | 70 | | Sports : target / precision | Golf | 1067491000000103 | Injury whilst playing golf (disorder) |
| 1170210000 | 70 | | Sports : target / precision | Pool | 1067501000000109 | Injury whilst playing pool (disorder) |
| 1170220000 | 70 | | Sports : target / precision | Snooker | 1067511000000106 | Injury whilst playing snooker (disorder) |
| 1170310000 | 70 | | Sports : target / precision | Darts | 1067521000000100 | Injury whilst playing darts (disorder) |
| 1170410000 | 70 | | Sports : target / precision | Croquet / roque | 1067531000000103 | Injury whilst playing croquet (disorder) |
| 1170450000 | 70 | | Sports : target / precision | Bowls | 1067541000000107 | Injury whilst playing bowls (disorder) |
| 1170470000 | 70 | | Sports : target / precision | Ten pin bowling | 1067551000000105 | Injury whilst playing ten-pin bowling (disorder) |
| 1170710000 | 70 | 71 | Sports : target / precision | Archery | 1068071000000105 | Injury whilst engaged in archery (disorder) |
| 1170730000 | 70 | 73 | Sports : target / precision | Boules | 1068261000000109 | Injury whilst playing boules (disorder) |
| 1170750000 | 70 | 75 | Sports : target / precision | Clay pigeon shooting | 1067561000000108 | Injury whilst clay-pigeon shooting (disorder) |
| 1170770000 | 70 | 77 | Sports : target / precision | Target shooting | 1067571000000101 | Injury whilst target shooting (disorder) |
| 1173110000 | 73 | 11 | Sports : athletics | Jogging | 1068091000000109 | Injury whilst jogging (disorder) |
| 1173210000 | 73 | 21 | Sports : athletics | Running | 1068081000000107 | Injury whilst running (disorder) |
| 1173310000 | 73 | 31 | Sports : athletics | Fell / mountain running | 1067611000000105 | Injury whilst fell running (disorder) |
| 1173410000 | 73 | 41 | Sports : athletics | Power-walking / race-walking | 1068101000000101 | Injury whilst power-walking (disorder) |
| 1173510000 | 73 | 51 | Sports : athletics | Jumping sports | 1068111000000104 | Injury whilst engaged in jumping sports activity (disorder) |
| 1173610000 | 73 | 61 | Sports : athletics | Throwing sports | 1068121000000105 | Injury whilst engaged in throwing sports activity (disorder) |
| 1175110000 | 75 | 11 | Sports: gym / acrobatic / aesthetic | Trampoline | 1068131000000107 | Injury whilst trampolining (disorder) |
| 1175210000 | 75 | 21 | Sports: gym / acrobatic / aesthetic | Gymnastics | 1067621000000104 | Injury whilst engaged in gymnastics (disorder) |
| 1175230000 | 75 | 23 | Sports : gym / acrobatic / aesthetic | Gym : aerobics | 1067631000000102 | Injury during aerobic exercise (disorder) |
| 1175250000 | 75 | 25 | Sports : gym / acrobatic / aesthetic | Gym : circuit training | 1067641000000106 | Injury whilst circuit training (disorder) |
| 1175270000 | 75 | 27 | Sports: gym / acrobatic / aesthetic | Yoga | 1068491000000102 | Injury whilst engaged in yoga (disorder) |
| 1175280000 | 75 | 28 | Sports: gym / acrobatic / aesthetic | Tai chi | 1068511000000105 | Injury whilst engaged in tai chi (disorder) |
| 1175290000 | 75 | 29 | Sports : gym / acrobatic / aesthetic | Pilates | 1068501000000108 | Injury whilst engaged in pilates (disorder) |
| 1175410000 | 75 | 41 | Sports : gym / acrobatic / aesthetic | Cheerleading | 1068821000000102 | Injury whilst cheerleading (disorder) |
| 1175450000 | 75 | | Sports : gym / acrobatic / aesthetic | Dancing | 1068471000000101 | Injury whilst dancing (disorder) |
| 1175610000 | 75 | 61 | Sports : gym / acrobatic / aesthetic | Indoor gym equipment | 1067651000000109 | Injury whilst using gym equipment (disorder) |
| 1175650000 | 75 | 65 | Sports : gym / acrobatic / aesthetic | Weightlifting / body building | 1067661000000107 | Injury whilst weightlifting (disorder) |
| 1177110000 | 77 | 11 | Sports : combat | Judo | 1068151000000100 | Injury whilst engaged in judo (disorder) |
| 1177150000 | 77 | | Sports : combat | Taekwondo | 1068161000000102 | Injury whilst engaged in Taekwondo (disorder) |
| 1177210000 | 77 | | Sports : combat | Martial arts | 1068171000000102 | Injury whilst engaged in martial arts activity (disorder) |
| 1177410000 | 77 | | Sports : combat | Boxing | 1067671000000109 | Injury whilst engaged in martial arts activity (disorder) |
| 1177450000 | 77 77 | | Sports : combat | Kick-boxing | 1067681000000103 | Injury whilst kickboxing (disorder) |
| 1177510000 | 77 77 | | Sports : combat | Wrestling | 1067681000000103 | Injury whilst wrestling (disorder) |
| 1177610000 | 77 | | Sports : combat | Fencing | 1068141000000101 | Injury whilst sport fencing (disorder) |
| | 77 79 | | · | • | | |
| 1179110000 | | | Sports : wheeled | Cycling : track | 1068451000000105 | Injury whilst cycling on track (disorder) |
| 1179210000 | 79 | 21 | Sports : wheeled | Cycling: mountain biking | 1068461000000108 | Injury whilst mountain biking (disorder) |

| 1179310000 | 79 | 31 | Sports : wheeled | Cycling : BMX | 1068481000000104 | Injury whilst bicycle motocross biking (disorder) |
|------------|----|----|---------------------------------|-------------------------------|------------------|--|
| 1179410000 | 79 | 41 | Sports : wheeled | Skateboarding | 1067721000000105 | Injury whilst skateboarding (disorder) |
| 1179510000 | 79 | 51 | Sports : wheeled | Rollerskates | 1067711000000104 | Injury whilst roller skating (disorder) |
| 1179520000 | 79 | 52 | Sports : wheeled | Rollerblades | 1067701000000101 | Injury whilst rollerblading (disorder) |
| 1181210000 | 81 | 21 | Sports : wheeled : powered | Off road motorcycle | 1068711000000103 | Injury whilst riding motorcycle off-road (disorder) |
| 1181250000 | 81 | 25 | Sports : wheeled : powered | Off road quad bike | 1068251000000106 | Injury whilst off-road quad biking (disorder) |
| 1181710000 | 81 | 71 | Sports : wheeled : powered | Off-road car / buggy | 1068761000000101 | Injury whilst driving motor vehicle off-road (disorder) |
| 1181810000 | 81 | 81 | Sports : wheeled : powered | car / motor vehicle on track | 1068771000000108 | Injury whilst driving motor vehicle on track (disorder) |
| 1181850000 | 81 | 85 | Sports : wheeled : powered | Motorcycle on track | 1068701000000100 | Injury whilst riding motorcycle on track (disorder) |
| 1186110000 | 86 | 11 | Sports : swimming | Swimming | 1067731000000107 | Injury whilst swimming (disorder) |
| 1186210000 | 86 | 21 | Sports : swimming | Water polo | 1067741000000103 | Injury whilst playing water polo (disorder) |
| 1186310000 | 86 | 31 | Sports : swimming | Synchronised swimming | 1068181000000106 | Injury whilst synchronised swimming (disorder) |
| 1186410000 | 86 | 41 | Sports : swimming | Diving | 1067751000000100 | Injury whilst diving (disorder) |
| 1186510000 | 86 | 51 | Sports : swimming | SCUBA diving | 1067761000000102 | Injury whilst scuba diving (disorder) |
| 1187110000 | 87 | 11 | Sports : water-based | Rowing | 1067771000000109 | Injury whilst rowing boat (disorder) |
| 1187210000 | 87 | 21 | Sports : water-based | Canoeing | 1067781000000106 | Injury whilst canoeing (disorder) |
| 1187310000 | 87 | 31 | Sports : water-based | Sailing | 1067791000000108 | Injury whilst sailing (disorder) |
| 1187410000 | 87 | 41 | Sports : water-based | Windsurfing | 1067811000000109 | Injury whilst windsurfing (disorder) |
| 1187450000 | 87 | 45 | Sports : water-based | Surfing | 1067801000000107 | Injury whilst surfing (disorder) |
| 1187510000 | 87 | 51 | Sports : water-based | Kite surfing | 1068191000000108 | Injury whilst kite surfing (disorder) |
| 1187710000 | 87 | 71 | Sports : water-based | Powered boat | 1068231000000104 | Injury whilst power-boating (disorder) |
| 1187730000 | 87 | 73 | Sports : water-based | Water-skiing | 1067821000000103 | Injury whilst waterskiing (disorder) |
| 1187770000 | 87 | 77 | Sports : water-based | Towed behind power boat | 1068241000000108 | Injury whilst being towed by powerboat (disorder) |
| 1187910000 | 87 | 91 | Sports : water-based | Personal motorised watercraft | 1068221000000101 | Injury whilst using personal motorised watercraft (disorder) |
| 1191110000 | 91 | 11 | Sports : winter | Ice-skating | 1067831000000101 | Injury whilst ice skating (disorder) |
| 1191210000 | 91 | 21 | Sports : winter | Ice hockey | 1067841000000105 | Injury whilst playing ice hockey (disorder) |
| 1191310000 | 91 | 31 | Sports : winter | Skiing : downhill | 1067851000000108 | Injury whilst downhill skiing (disorder) |
| 1191350000 | 91 | 35 | Sports : winter | Skiing : cross country | 1067861000000106 | Injury whilst cross-country skiing (disorder) |
| 1191410000 | 91 | 41 | Sports : winter | Snowboarding | 1067871000000104 | Injury whilst snowboarding (disorder) |
| 1191510000 | 91 | 51 | Sports : winter | Snow walking | 1067881000000102 | Injury whilst snow walking (disorder) |
| 1191610000 | 91 | | Sports : winter | Motorised snow vehicle | 1068201000000105 | Injury whilst using motorised snow vehicle (disorder) |
| 1191710000 | 91 | 71 | Sports : winter | Curling | 1068211000000107 | injury whilst sport curling (disorder) |
| 1193110000 | 93 | 11 | ' ' | Horse riding | 1067991000000106 | Injury whilst horse riding (disorder) |
| 1193510000 | 93 | | Sports : equestrian / adventure | Hiking / hill-walking | 1067981000000109 | Injury whilst hill walking (disorder) |
| 1193610000 | 93 | 61 | | Climbing / mountaineering | 1067961000000100 | Injury whilst rock climbing (disorder) |
| 1193710000 | 93 | 71 | ' ' | Caving / pot-holing | 1067891000000100 | Injury whilst caving (disorder) |
| 1195110000 | 95 | | Sports : aero | Gliding | 1067921000000108 | Injury whilst glider flying (disorder) |
| 1195210000 | 95 | | Sports : aero | Hang-gliding | 1067911000000102 | Injury whilst hang gliding (disorder) |
| 1195310000 | 95 | | Sports : aero | Parachuting | 1067931000000105 | Injury whilst parachute jumping (disorder) |
| 1195350000 | 95 | 35 | Sports : aero | BASE jumping | 1067941000000101 | Injury whilst base-jumping (disorder) |
| 1195410000 | 95 | 41 | Sports : aero | Paragliding | 1067951000000103 | Injury whilst paragliding (disorder) |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED Description |
|---------------|-------|-------|---------------------|---|------------------|---|
| 1111110000 | 11 | 11 | Fall | Slipping | 54670004 | Slipping (event) |
| 1111120000 | 11 | 12 | Fall | Tripping | 75941004 | Tripping (event) |
| 1111410000 | 11 | 41 | Fall | Fall from height of less than one metre | 240871000000104 | Fall through height of less than one meter (event) |
| 1111510000 | 11 | 51 | Fall | Fall from height of more than one metre | 429482004 | Fall from high place (event) |
| 1121110000 | 21 | 11 | Blunt injury | Blunt force / pushed | 425359009 | Blunt injury (disorder) |
| 1121210000 | 21 | 21 | Blunt injury | Punch with fist | 242890000 | Punch with fist (event) |
| 1121220000 | 21 | 22 | Blunt injury | Kick with foot | 242892008 | Kick with foot (event) |
| 1121230000 | 21 | 23 | Blunt injury | Hit with head (head butt) | 242895005 | Head butt (event) |
| 1121410000 | 21 | 41 | Blunt injury | Blow from blunt object [specify] | 219236005 | Assault by striking with blunt object (event) |
| 1121710000 | 21 | 71 | Blunt injury | Crushing injury | 125665001 | Crushing injury (disorder) |
| 1131110000 | 31 | 11 | Sharp injury | Stabbed / cut with knife | 425322008 | Stab wound (disorder) |
| 1131210000 | 31 | 21 | Sharp injury | Stabbed / cut with glass / bottle | 426058000 | Penetrating injury by glass (disorder) |
| 1131310000 | 31 | 31 | Sharp injury | Stabbed / cut with other sharp object [specify] | 425999002 | Penetrating injury by sharp object (disorder) |
| 1141110000 | 41 | 11 | Firearm / explosion | Gunshot wound | 283545005 | Gunshot wound (disorder) |
| 1141210000 | 41 | 21 | Firearm / explosion | Injury due to projectile | 242999003 | Injury due to projectile (disorder) |
| 1141510000 | 41 | 51 | Firearm / explosion | Injury due to firework | 241924003 | Firework causing toxic effect (disorder) |
| 1141610000 | 41 | 61 | Firearm / explosion | Injury due to explosion | 397996002 | Injury due to explosion (disorder) |
| 1151110000 | 51 | 11 | Threat to breathing | Respiratory obstruction due to inhaled foreign body | 242669005 | Respiratory obstruction due to inhaled foreign body (event) |
| 1151210000 | 51 | 21 | Threat to breathing | Patient found hanging | 241121000000102 | Patient found hanging (finding) |
| 1151310000 | 51 | 31 | Threat to breathing | Asphyxia by obstruction of mouth and nose | 242020007 | Asphyxia by obstruction of mouth and nose (event) |
| 1151410000 | 51 | 41 | Threat to breathing | Asphyxiation : other | 66466001 | Asphyxiation (event) |
| 1161110000 | 61 | 11 | Environment | Poisoning / overdose | 75478009 | Poisoning (disorder) |
| 1161510000 | 61 | 51 | Environment | Burn : thermal | 314534006 | Thermal burn (disorder) |
| 1161530000 | 61 | 53 | Environment | Burn : chemical | 371704001 | Injury due to chemical exposure (disorder) |
| 1161550000 | 61 | 55 | Environment | Burn : electrical | 371708003 | Injury caused by electrical exposure (disorder) |
| 1161570000 | 61 | 57 | Environment | Burn : radiation | 24803000 | Injury caused by exposure to ionizing radiation (disorder) |
| 1161590000 | 61 | 59 | Environment | Burn : ultraviolet / sunlight | 402165001 | Acute effect of ultraviolet radiation on normal skin (disorder) |
| 1161710000 | 61 | 71 | Environment | Hyperthermia | 409702008 | Hyperpyrexia (finding) |
| 1161750000 | 61 | 75 | Environment | Hypothermia | 386689009 | Hypothermia (finding) |
| 1161810000 | 61 | 81 | Environment | Physical exertion | 64113006 | Exhaustion due to excessive exertion (finding) |
| 1161910000 | 61 | 91 | Environment | Near drowning | 87970004 | Nonfatal submersion (disorder) |
| 1161920000 | 61 | 92 | Environment | Diving barotrauma | 241977008 | Diving barotrauma (disorder) |
| 1171110000 | 71 | 11 | Animal related | Injury from dog | 283734005 | Dog bite - wound (disorder) |
| 1171210000 | 71 | 21 | Animal related | Injury from cat | 283782004 | Cat bite - wound (disorder) |
| 1171310000 | 71 | 31 | Animal related | Injury from horse | 283784003 | Horse bite wound (disorder) |
| 1171490000 | 71 | 49 | Animal related | Injury from mammal - other [specify] | 283683002 | Mammal bite wound (disorder) |
| 1171510000 | 71 | 51 | Animal related | Injury from reptile (e.g. snake) | 283838000 | Reptile bite wound (disorder) |
| 1171550000 | 71 | 55 | Animal related | Injury from bird | 217716004 | Peck by bird (event) |
| 1171610000 | 71 | 61 | Animal related | Injury from spider | 403149008 | Injury from arachnid (spider) |
| 1171710000 | 71 | 71 | Animal related | Injury from insect | 276433004 | Insect bite - wound (disorder) |
| 1171810000 | 71 | 81 | Animal related | Injury from aquatic animal | 283837005 | Fish bite wound (disorder) |
| 1191110000 | 91 | 11 | • • • | Patient refuses to disclose | | Declines to provide information on cause of injury (finding) |
| 1191510000 | 91 | 51 | Not applicable | Patient cannot disclose e.g. coma, intubated | 1077161000000109 | Unable to provide information on cause of injury (finding) |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|-------|----------------|--|------------------|---|-------|
| 2018111100 | 11 | 11 | Alcohol | Alcohol : retail beer / wine / spirits | 984801000000105 | Injury following alcohol use (disorder) | |
| 2018117100 | 11 | 71 | Alcohol | Alcohol: not sold for consumption e.g. meths, antifreeze | 1066421000000104 | Injury following industrial alcohol use (disorder) | |
| 2018211100 | 21 | 11 | Cannabis | Cannabis | 984851000000106 | Injury following cannabis use (disorder) | |
| 2018311100 | 31 | 11 | Opiate | Heroin | 984831000000104 | Injury following heroin use (disorder) | |
| 2018312100 | 31 | 21 | Opiate | Morphine | 1065191000000102 | Injury following morphine use (disorder) | |
| 2018313100 | 31 | 31 | Opiate | Codeine | 1065201000000100 | Injury following codeine use (disorder) | |
| 2018313300 | 31 | 33 | Opiate | Dihydrocodeine | 1065211000000103 | Injury following dihydrocodeine use (disorder) | |
| 2018313500 | 31 | 35 | Opiate | Oxycodone | 1065221000000109 | Injury following oxycodone use (disorder) | |
| 2018314100 | 31 | 41 | Opiate | Methadone | 1066091000000108 | Injury following methadone use (disorder) | |
| 2018319100 | 31 | 91 | Opiate | Other opiate drug | 984951000000101 | Injury following opiate use (disorder) | |
| 2018411100 | 41 | 11 | Club drug | Ecstasy (MDMA) | 984871000000102 | Injury following ecstasy use (disorder) | |
| 2018412100 | 41 | 21 | Club drug | Mephedrone (MKAT) | 1035751000000103 | Injury following mephedrone use (disorder) | |
| 2018413100 | 41 | 31 | Club drug | GHB (gamma hydroxybutyrate) | 984881000000100 | Injury following gamma hydroxybutyrate use (disorder) | |
| 2018413200 | 41 | 32 | Club drug | GBL (gamma butyrolactone) | 984891000000103 | Injury following gamma butyrolactone use (disorder) | |
| 2018414100 | 41 | 41 | Club drug | Synthetic cannabinoid e.g. Spice | 1065241000000102 | Injury following synthetic cannabinoid use (disorder) | |
| 2018417100 | 41 | 71 | Club drug | Ketamine | 1065231000000106 | Injury following ketamine use (disorder) | |
| 2018511100 | 51 | 11 | CNS Stimulant | Cocaine | 984841000000108 | Injury following cocaine use (disorder) | |
| 2018513100 | 51 | 31 | CNS Stimulant | Crack cocaine | 984901000000102 | Injury following crack cocaine use (disorder) | |
| 2018515100 | 51 | 51 | CNS Stimulant | Amphetamine | 984861000000109 | Injury following amphetamine use (disorder) | |
| 2018515500 | 51 | 55 | CNS Stimulant | Crystal meth | 984911000000100 | Injury following crystal methamphetamine use (disorder) | |
| 2018519100 | 51 | 91 | CNS Stimulant | Other CNS stimulant | 1066071000000109 | Injury following central nervous system stimulant use (disorder) | |
| 2018611100 | 61 | 11 | CNS Depressant | Benzodiazepine | 984941000000104 | Injury following benzodiazepine use (disorder) | |
| 2018615100 | 61 | 51 | CNS Depressant | Barbiturate | 1065251000000104 | Injury following barbiturate use (disorder) | |
| 2018619100 | 61 | 91 | CNS Depressant | Other CNS depressant / sleep-inducing drugs | 1066081000000106 | Injury following central nervous system depressant use (disorder) | |
| 2018711100 | 71 | 11 | Hallucinogen | LSD | 1065271000000108 | Injury following lysergic acid diethylamide use (disorder) | |
| 2018713100 | 71 | 31 | Hallucinogen | Organic e.g. magic mushrooms | 1065321000000102 | Injury following organic hallucinogen use (disorder) | |
| 2018715100 | 71 | 51 | Hallucinogen | PCP angel dust | 1065311000000108 | Injury following phencyclidine use (disorder) | |
| 2018811100 | 81 | 11 | Inhalant | Solvent | 1065291000000107 | Injury following solvent inhalation (disorder) | |
| 2018811500 | 81 | 15 | Inhalant | Aerosol | 1065301000000106 | Injury following aerosol inhalation (disorder) | |
| 2018815100 | 81 | 51 | Inhalant | Nitrous oxide | 1065281000000105 | Injury following nitrous oxide inhalation (disorder) | |
| 2018911100 | 91 | 11 | Unknown drug | Unknown drug | 984921000000106 | Injury following unknown drug use (disorder) | |

DATA GROUP: PATIENT CLINICAL HISTORY

FUNCTION: To carry the patient clinical history details Group Status: R Group Repeats: 0..1

| DATA GROUP | OF BOTATRIANS BOTATRIANS | | DATA FIEM COUNDATA DATA FEM PORMAT SI STATUS FEM RECORD (ERN) | | | SNOWED CT | BNOMED CT / DMLD /COS JUSTIFICATION | | ECOS CODE SET | LINK TO CURRENT CDS Type 810 NFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES | |
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| | | | | | | | | | | | | POPULATION VALIDATION F-Format is validated V-Validated against an explicit fet of permitted values as defined in the NHS Data Dictionary | POST SCHEMA VALDATION | | |
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| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description |
|---------------|-------|-------|--------------------------|---------------------------------------|-------------|---|
| 2018111100 | 11 | 11 | Circulation / blood | Hypertension | 38341003 | Hypertensive disorder, systemic arterial (disorder) |
| 2018111500 | 11 | 15 | Circulation / blood | History of anticoagulant therapy | 161647008 | History of anticoagulant therapy (situation) |
| 2018112100 | 11 | 21 | Circulation / blood | Ischaemic heart disease | 414545008 | Ischemic heart disease (disorder) |
| 2018113100 | 11 | 31 | Circulation / blood | Cardiac pacemaker in situ | 441509002 | Cardiac pacemaker in situ (finding) |
| 2018114300 | 11 | 43 | Circulation / blood | Congestive heart failure | 42343007 | Congestive heart failure (disorder) |
| 2018114500 | 11 | 45 | Circulation / blood | Left heart failure | 85232009 | Left heart failure (disorder) |
| 2018114900 | 11 | 49 | Circulation / blood | Heart failure | 84114007 | Heart failure (disorder) |
| 2018115100 | 11 | 51 | Circulation / blood | Mitral valve disorder | 11851006 | Mitral valve disorder (disorder) |
| 2018118100 | 11 | 81 | Circulation / blood | Congenital cardiac failure | 206586007 | Congenital cardiac failure (disorder) |
| 2018211100 | 21 | 11 | Respiratory | Asthma | 195967001 | Asthma (disorder) |
| 2018212100 | 21 | 21 | Respiratory | Chronic obstructive lung disease | 13645005 | Chronic obstructive lung disease (disorder) |
| 2018212300 | 21 | 23 | Respiratory | Chronic bronchitis | 63480004 | Chronic bronchitis (disorder) |
| 2018214100 | 21 | 41 | Respiratory | Pulmonary emphysema | 87433001 | Pulmonary emphysema (disorder) |
| 2018215100 | 21 | 51 | Respiratory | Respiratory failure | 409622000 | Respiratory failure (disorder) |
| 2018311100 | 31 | 11 | Gastrointestinal | Dysphagia | 40739000 | Dysphagia (disorder) |
| 2018312100 | 31 | 21 | Gastrointestinal | Jaundice | 18165001 | Jaundice (finding) |
| 2018312500 | 31 | 25 | Gastrointestinal | Liver function tests abnormal | 166603001 | Liver function tests abnormal (finding) |
| 2018511100 | 51 | 11 | Endocrine / Rheumatology | Diabetes mellitus | 73211009 | Diabetes mellitus (disorder) |
| 2018515100 | 51 | 51 | Endocrine / Rheumatology | Rheumatoid arthritis | 69896004 | Rheumatoid arthritis (disorder) |
| 2018551100 | 55 | 11 | Renal / urology | Retention of urine | 267064002 | Retention of urine (disorder) |
| 2018552100 | 55 | 21 | Renal / urology | Renal impairment | 236423003 | Renal impairment (disorder) |
| 2018553100 | 55 | 31 | Renal / urology | Chronic kidney disease | 709044004 | Chronic kidney disease (disorder) |
| 2018555100 | 55 | 51 | Renal / urology | Chronic interstitial nephritis | 60926001 | Chronic interstitial nephritis (disorder) |
| 2018555500 | 55 | 55 | Renal / urology | Small kidney | 236448000 | Small kidney (disorder) |
| 2018556100 | 55 | 61 | Renal / urology | Multiple renal cysts | 253883006 | Multiple renal cysts (disorder) |
| 2018556300 | 55 | 63 | Renal / urology | Congenital cystic kidney disease | 82525005 | Congenital cystic kidney disease (disorder) |
| 2018556500 | 55 | 65 | Renal / urology | Polycystic kidney disease, adult type | 28728008 | Polycystic kidney disease, adult type (disorder) |
| 2018611100 | 61 | 11 | Neurology | Epilepsy | 84757009 | Epilepsy (disorder) |
| 2018612100 | 61 | 21 | Neurology | Multiple sclerosis | 24700007 | Multiple sclerosis (disorder) |
| 2018613100 | 61 | 31 | Neurology | Cerebral infarction | 432504007 | Cerebral infarction (disorder) |
| 2018613300 | 61 | 33 | Neurology | Cerebrovascular accident | 230690007 | Cerebrovascular accident (disorder) |
| 2018613700 | 61 | 37 | Neurology | Cerebrovascular disease | 62914000 | Cerebrovascular disease (disorder) |
| 2018615100 | 61 | 51 | Neurology | Subarachnoid haemorrhage | 21454007 | Subarachnoid intracranial hemorrhage (disorder) |
| 2018615500 | 61 | 55 | Neurology | Cerebral haemorrhage | 274100004 | Cerebral hemorrhage (disorder) |
| 2018618100 | 61 | 81 | Neurology | Aphasia | 87486003 | Aphasia (finding) |
| 2018618100 | 61 | 81 | Neurology | Hemiplegia | 50582007 | Hemiplegia (disorder) |
| 2018711100 | 71 | 11 | Psychiatry / psychology | Anxiety disorder | 197480006 | Anxiety disorder (disorder) |
| 2018712100 | 71 | 21 | Psychiatry / psychology | Depressive disorder | 35489007 | Depressive disorder (disorder) |
| 2018712500 | 71 | 25 | Psychiatry / psychology | History of deliberate self harm | 314550003 | History of deliberate self harm (situation) |
| 2018712900 | 71 | 29 | Psychiatry / psychology | Bipolar disorder | 13746004 | Bipolar disorder (disorder) |
| 2018716500 | 71 | 65 | Psychiatry / psychology | Eating disorder | 72366004 | Eating disorder (disorder) |
| 2018716700 | 71 | 67 | Psychiatry / psychology | Schizotypal personality disorder | 31027006 | Schizotypal personality disorder (disorder) |
| 2018717100 | 71 | 71 | Psychiatry / psychology | Schizophrenia | 58214004 | Schizophrenia (disorder) |
| 2018717500 | 71 | 75 | Psychiatry / psychology | Psychotic disorder | 69322001 | Psychotic disorder (disorder) |
| 2018717700 | 71 | 77 | Psychiatry / psychology | Delusional disorder | 48500005 | Delusional disorder (disorder) |
| 2018751100 | 75 | 11 | Developmental | Developmental delay | 248290002 | Developmental delay (disorder) |
| 2018752100 | 75 | 21 | Developmental | Autistic disorder | 408856003 | Autistic disorder (disorder) |
| 2018753100 | 75 | 31 | Developmental | Learning difficulties | 161129001 | Learning difficulties (finding) |
| 2018754100 | 75 | 41 | Developmental | Developmental academic disorder | 1855002 | Developmental academic disorder (disorder) |

| 2018811100 | 81 | 11 | Sensory / age related | Dementia | 52448006 | Dementia (disorder) |
|------------|----|----|-------------------------|-------------------------------------|-----------------|--|
| 2018811500 | 81 | 15 | Sensory / age related | Alzheimer's disease | 26929004 | Alzheimer's disease (disorder) |
| 2018812100 | 81 | 21 | Sensory / age related | Elderly fall | 298344006 | Elderly fall (finding) |
| 2018814100 | 81 | 41 | Sensory / age related | Blindness - both eyes | 193699007 | Blindness - both eyes (disorder) |
| 2018814500 | 81 | 45 | Sensory / age related | Blindness of one eye | 22950006 | Blindness of one eye (disorder) |
| 2018814900 | 81 | 49 | Sensory / age related | Registered blind | 170727003 | Registered blind (finding) |
| 2018815100 | 81 | 51 | Sensory / age related | Complete deafness | 8531006 | Complete deafness (disorder) |
| 2018815200 | 81 | 52 | Sensory / age related | Bilateral deafness | 162344009 | Bilateral deafness (disorder) |
| 2018815300 | 81 | 53 | Sensory / age related | Profound acquired hearing loss | 525791000000105 | Profound acquired hearing loss (disorder) |
| 2018815400 | 81 | 54 | Sensory / age related | Profound sensorineural hearing loss | 700454004 | Profound sensorineural hearing loss (disorder) |
| 2018815500 | 81 | 55 | Sensory / age related | Severe hearing loss | 3561000119106 | Severe hearing loss (disorder) |
| 2018911100 | 91 | 11 | Social / drug / alcohol | Smoker | 77176002 | Smoker (finding) |
| 2018912100 | 91 | 21 | Social / drug / alcohol | Lives alone | 105529008 | Lives alone (finding) |
| 2018915100 | 91 | 51 | Social / drug / alcohol | Alcohol abuse | 15167005 | Alcohol abuse (disorder) |
| 2018916100 | 91 | 61 | Social / drug / alcohol | Recreational drug use | 26416006 | Drug abuse (disorder) |
| 2018916200 | 91 | 62 | Social / drug / alcohol | Misuses drugs | 361055000 | Misuses drugs (finding) |
| | | | | | | |

DATA GROUP: SERVICE AGREEMENT DETAILS

FUNCTION: To carry the details of the Service Agreement. Group Status: M Group Repeats: 1..1

| NATA GROUP | DATA (FEM NAME) | DATA ITEM OCFINITION | REG | DATA DATA ITE EM REPEATS JRED IN) | M FORMAT | SNOMED CT / DMAD X005 | JUSTIFICATION | ECDS CODE SET | LINK TO CURRENT COS Type 010 INFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|------------------------|--|---|-----|--|-------------------|-----------------------|---|---------------|--|---|------------------------|----------------------------------|-------|
| | | | | | | | | | | POPULATION VALIDATION F - Format is validated V - Validated against an explicit list of permitted values as defined in th NHS Data Dictionary | POST SCHEMA VALIDATION | | |
| NICE AGREEMENT DETAILS | COMMISSIONING SERVAL NUMBER | A number used to uniquely identify a NHS SERNCE AGRESMENT by an Organization acting as commissioner of patient care services. | R N | 0.1 | max and | DMED | As per CDS 6.2 Type 010 | n/a | http://www.datadictionary.nhs.uk/data_di ctionary/data_field_cotes/c/coroniesio ning_serial_number_de.asp?shownav=0 | F | n/a | Originates from A&E CDS Type 010 | |
| NICE AGREEMENT DETAILS | NHS SERVICE AGREEMENT LINE NUMBER | A number pliphanument() to provide a unique identifier for a line within a NHS SERVICE AGREEMENT. | O N | 0.1 | max an 10 | омво | As per CDS 6.2 Type 010 | n/a | http://www.datadirtionary.chu.uk/data_d ctionary/data_field_ectes/a/chu.nhu_serv ce_acreement_line_rumber_de_am?show avr0 | F | n/a | Originates from A&E CDS Type 010 | |
| VICE AGREEMENT DITAILS | PROVIDER REFERENCE NUMBER | PROVICER REFERENCE NUMBER is a number convention agreed locally between a provider and Commissioner for use within a Commissioning Data Set message. | O N | 0.1 | max an 17 | омво | As per CDS 6.2 Type 010 | n/a | http://www.datadictionary.phs.uk/data_di ctionary/data_field_notes/ja/prod/provide reference_number_de.asp?shownas=0 | F | n/a | Originates from A&E CDS Type 010 | |
| INCE AGREEMENT DITAILS | | A number (pliphanumeric) allocated by the commissioner to a REFERBAL REQUEST. | O N | 0.1 | max an 17 | омво | As per CDS 6.2 Type 010 | n/a | http://www.datadictionary.nhs.uk/data_di ctionary/data_field_notes/c/co/commissionar_neference_number_de.asg7/shownard | F | n/a | Originates from A&E CDS Type 010 | |
| MCE AGREEMENT DETAILS | ORGANISATION (DENTIFIER (CODE OF PROVIDER) | ORGANISATION IDENTIFIER (CODE OF PROVIDER) is the ORGANISATION IDENTIFIER of the Organisation acting as a Health Care Provider. | M N | 1.1 | min an 3 max an 5 | oos | Updated to new Organisation code guidelines | n/a | http://www.datadictionary.nhs.uk/data_di ctionary/data_field_notes/o/cos/cosanisati on_code_icode_of_provider_de.ass2vhou nav=0 | F | n/a | Originates from A&E CDS Type 010 | |
| ACE AGREEMENT DITAILS | ORGANISATION IDENTIFIER (CODE OF COMMISSIONER) | ORGANISATION DENTIFIER (CODE OF COMMISSIONER) is the ORGANISATION IDENTIFIER of the Organisation commissioning health care. | M N | 1.1 | min an3 max an5 | oos | Updated to new Organisation code guidelines | n/a | http://www.datadictionary.nhu.uk/data_di ctionary/data_field_notes/o/org/organisati on_code_icode_of_commissioneri_de_aspi showners/0 | F | n/a | Originates from A&E CDS Type 010 | |

DATA GROUP: CARE PROFESSIONALS (EMERGENCY CARE)

FUNCTION: To carry the details of the Care Professionals active during the Emergency Care Attendance. Group Status: R Group Repeats: 0.-

| TA GROUP | DATA ITEM NAME | OATA ITEM DEPARTON SATATEM STATUS (MIRLD) | COUNDATA DATA ITEM REPEATS REQUIRED (Y/N) | FORMAT | SNOMED CT / DMAD /ODS | JUSTFICATION | ECOS CODE SET | LINK TO CURRENT COS Type 618 INFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|--------------------------------|---|--|---|----------|-----------------------|--|-------------------|--|---|------------------------|----------------------------------|-------|
| | | | | | | | | | POPULATION VALIDATION F - Format is validated | POST SCHEMA VALIDATION | | |
| | | | | | | | | | V - Validated against an explicit lis of permitted values as defined in the NHS Data Dictionary | | | |
| PROFESSIONALS (EMERGENCY CARE) | PROFESSIONAL REGISTRATION ISSUER CODE | A code which identifies the PROFESSIONAL REGISTRATION BODY. M | N 1.3 | an2 | DMED | As per CDS 6.2 Type 0:00 | Link to code set. | http://www.datadictionary.nhs.uk/fata_dic tionary/data_field_notes/p/grod/profession al_nesistration_issuer_code_de_asp2showns | v | n/a | Originates from A&E CDS Type 010 | |
| PROFESSIONALS (EMERGENCY CARE) | PROFESSIONAL REGISTRATION ENTRY CONTINER | The registration identifier absorated by an Organisation. If | Y 1-1 | max an32 | DMED | As per CDS 6.2 Type 010 | n/a | http://www.datadictionary.nhs.uk/data_dic tionary/data_field_notes/b/arod/torofession gi_resistration_entry_identifier_(main_coes sting_care_professional)_de.ssg?dbownaw | i. | n/a | Originates from A&E CDE Type 010 | |
| PROTESSIONAL (SMIRCHET CAR) | COME PROFESSIONE - SISS SUMMARINO CONTO | The set of Cold McDiscolous towage or inclosed out-up an invegomen color strondown. The color of the color o | y 1.3 | an2 | DAMEG | Security (a) and ordinately impossible for parties and in even receivery for proposition for the given being compared and price and proposition for the given being compared for form and the proposition for the given being compared and price and an extra security and the price and price and price and an extra security and an ext | | nda | v - | in (in | NeW A&C data Denn | |
| PROTESSIONALS (SMIRGERY CORE) | ose norszone, sociente survinee, fri nedicita (seetuch? ceta) | In whiching of whether a CME RECESSIONA is required to facility of the RECEST from an Consequence CME RECEST from the CONSEQUE | v 1.1 | ani | DMED | becoming the distincted companies for a price can be received price of the price of | | nia. | v | inja | NGMY A&E data trient | |

| ECDS_UniqueID | Sort1 | ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|-------|------------|-------------------------------------|-----------|-------------------------------------|-------|
| 2018110000 | 11 | n/a | General Medical Council | 03 | General Medical Council | |
| 2018210000 | 21 | n/a | Nursing and Midwifery Council | 09 | Nursing and Midwifery Council | |
| 2018310000 | 31 | n/a | Health and Care Professions Council | 08 | Health and Care Professions Council | |
| 2018510000 | 51 | n/a | General Dental Council | 02 | General Dental Council | |

| ECDS_UniqueID | Sort1 ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|------------------|--|-----------|---|--|
| 2018111100 | 11 n/a | Require complete supervision. All PATIENTS must be signed off by a senior CARE PROFESSIONAL before admission or discharge. | 01 | Require complete supervision. All PATIENTS must be signed off by a senior CARE PROFESSIONAL before admission or discharge. | F1 doctors, trainee practitioners |
| 2018211100 | 21 n/a | Require access to advice or direct supervision, or practice independently but with limited scope. | 02 | Require access to advice or direct supervision, or practice independently but with limited scope. | ENPs, ANPs / ACPs, PAs, ESPs, F2 doctors, CT1-2 doctors, some primary care clinicians |
| 2018311100 | 31 n/a | More senior/experienced CARE PROFESSIONALS, requiring less direct supervision. Fewer limitations in scope of practice. | 03 | More senior/experienced CARE PROFESSIONALS, requiring less direct supervision. Fewer limitations in scope of practice. | CT3 in EM, junior Speciality Doctors, some ANPs / ACPs and PAs, some primary care clinicians |
| 2018411100 | 41 n/a | Senior CARE PROFESSIONALS able to supervise an Emergency Care Department alone with remote support. Possess some extended skills. Full scope of practice. | 04 | Senior CARE PROFESSIONALS able to supervise an Emergency Care Department alone with remote support. Possess some extended skills. Full scope of practice. | CT4 and above, senior Speciality Doctors |
| 2018511100 | 51 n/a | Senior CARE PROFESSIONALS (CONSULTANTS) with accredited advanced qualifications in Emergency Medicine. Full set of extended skills. Full scope of practice. | 05 | Senior CARE PROFESSIONALS (CONSULTANTS) with accredited advanced qualifications in Emergency Medicine. Full set of extended skills. Full scope of practice. | Consultants in EM |

| ECDS_UniqueID | Sort 1 ECDS_Group | ECDS_Description | DM&D_Code | DM&D Description | Notes |
|---------------|-------------------|--|-----------|--|-------|
| n/a | n/a n/a | Yes - the CARE PROFESSIONAL is responsible for discharge of the PATIENT | Υ | Yes - the CARE PROFESSIONAL is responsible for discharge of the PATIENT | |
| n/a | n/a n/a | No - the CARE PROFESSIONAL is not responsible for discharge of the PATIENT | N | No - the CARE PROFESSIONAL is not responsible for discharge of the PATIENT | |

DATA GROUP: EMERGENCY CARE DIAGNOSIS (SNOMED CT)

FUNCTION: To carry the details of SNOMED CT coded Clinical Diagnoses. Group Status: R Group Repeats: 0..*

| | Section Programmes | DATA TER SERVICE | STATUS | COLIN DATA ITEM REQUIRED (TIN) | DATA ITEM REPEATS | FORMAT | SNOWED CT / DMEC | OS ASSESSMENT ASSESSME | ECOS CODE SET | LINK TO CURRENT COS Type 018 INFORMATION ONLY | POPULATION VALIDATION F - Format is validated V - Validated against an explicit for or permitted values as defined in the MHS Data Dictionary | POST ACHEMY VALENTON | DATA ITEM PROVENANCE | NOTES |
|---------------------------------------|---|---|--------|---|----------------------|-----------------|------------------|--|----------------------|--|---|--|----------------------|---|
| | vanishment (van abudinis plotatus i) | | | 7 | 1.3 | Man Con Man CON | SOUND CO. | And grower of the COST as promot to more disposed by parties of degree states of the COST and th | is : | | | And the department is travert and the first that which the same floating and the same fl | | 1933 Support on self-out, These et an other show all reserving support of the AMI Clin. |
| EMERGENCY CARE DIAGNOSIS (SNOMED CT) | CODED CLINICAL ENTRY SEQUENCE NUMBER | The sequence of the diagnosis in order of relevance to the emergency department attendance. | м | * | 1.1 | max nS | OBMC | | 6/3 | 0/2 | F | nja | NEW A&E data item | This should be captured for each diagnosis recorded. |
| EMERGENCY CARE DIAGNOSIS (SINDAED CT) | ENGERGENCY CARE DIAGNOSES QUALIFIER (PROMED CT) | The qualifier allows the clinician to express the Juni certainty of each of the diagnoses: | м | * | 1.1 | min né max nd R | SNOMED CT | A qualifier enables users to express their certainty/fack of certainty regarding a diagno- | it. Link to code set | n/a | | For any data item which contains a value other than specified in nievant code set, accept the value but suppress it so it cannot leave \$505 it will be visible to those with \$0.5 access and therefore available for disposed; and southleshooting), Log it appropriately for response to user such as "Value for records X, field Y is not in the acceptable single" | NOW AEE data item | This should be captured for each diagnosis recorded. |

| | Sert1 Sert2 Sert3 ECDS_Group1 ECDS_Group2 | ECOS_Group3 | ECDS_Description | ECOS_SearchTerms | SNOMED_Code SNOMED_Description | Flag_inj Fla | g_AEC Flag_Allergy | Flag_NotifiableDisease | Flag_Male Flag_Female | Notes |
|--|--|--|--|--|--|--------------|--------------------|------------------------|-----------------------|--|
| 111111000 1111121000 1111123000 1111130000 1111131000 | to the second section of the section of th | Head False F | Wound: lac / Inched / bite : bead Wound: lac / Inched / bite : face Wound: lac / Inched / bite : neck Wound: lac / Inched / bite : neck Wound: lac / Inched / bite : whosider Wound: lac / Inched / bite : upper arm | wound lac include this head incernition face wound lac include this face incernition head wound lac include the next incernition head wound lac include this next incertainties he head wound lac include this headslef incernition next threat trank wound lac include this paginger mill-incertainties for forem | JBES-6005 open wound of head (disorder) 210339009 open wound of face (disorder) 12554-6007 open wound of rack (disorder) 125545000 open wound of neck (disorder) 125545000 open wound shoulder region (disorder) 125540005 open wound of upper arm (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1111123000 1111130000 | 11 11 23 Soft tissue inj / wound Wound : lac / incised / bite 11 11 30 Soft tissue inj / wound Wound : lac / incised / bite | Neck Shoulder | Wound : lac / inclued / bite : neck Wound : lac / inclued / bite : shoulder | wound lac include bite neck laceration face head wound lac include bite shoulder laceration neck thoras trunk | 12564007 open wound of neck (disorder) 125645006 open wound shoulder region (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1111131000 | 11 11 31 Soft tissue inj / wound Wound : lac / incised / bite | Upper arm | Wound : lac / inched / bite : upper arm | wound lac include bite upper arm laceration forearm | 125648005 open wound of upper arm (disorder) | 1 | 0 0 | | i i | |
| 1111135000 | 11 11 35 Soft tissue inj / wound Wound : lac / incised / bite | Hand | Wound: lac / incised / bite : hand | wound lac included hite hand laceration finger thumb | 125652005 open wound of hand (disorder) | 1 | | | i i | |
| 111113000 1111135000 1111137000 1111137000 1111151000 | 11 11 39 Soft tissue inj / wound Wound : lac / incised / bite | Finger | Wound : lac / incised / bite : finger | wound lac include bite finger laceration thumb tip | 125653000 open wound of finger (disorder) | 1 | | | i i | |
| 1111151000 1111153000 | 11 11 51 Soft tissue inj/ wound Wound: lac/incised/bite 11 11 53 Soft tissue inj/ wound Wound: lac/incised/bite | Thigh Knee | wounts late / incined to that is forearm Wound late / incined fo that is forearm Wound late / incined fo that is hand Wound late / incined fo that is thumb Wound late / incined fo that is thumb Wound late / incined fo that is finger Wound late / incined / that is thigh Wound late / incined fo that is they Wound late / incined fo that is they | swords it is created the upper area southerness to treatme sword in a trouble the foream housespine under any sword in the created between housespine under any sword less in created between housespine under any sword less in created between housespine under the present sword less in created the section present participation of the present sword less in created the section present participation of the present sword less in created the section present participation of the present sword less in created the section present participation of the present sword less in created the section of the present sword present sword less in the section of the section of the section of the section of the sword less in the section of the section of the section of the section of the sword less in the section of the sword less in the section of the section of the section of the section of the sword less in the section of the section of the section of the section of the sword less in the section of the section of the section of the section of the sword less in the section of the section of the section of the section of the sword less in the section of the section of the section of the section of the sword less in the section of the section of the section of the section of the sword less in the section of the sword less in the section of the secti | 1.2006/88020 Septim waters of opper are illustratery 1.2006/88020 Septim waters of opper are illustratery 1.2006/88020 Septim waters of offerenn (illustratery 1.2006/88020 Septim waters of of there illustratery 1.2006/88020 Septim waters of of their (illustratery 1.2006/88020 Septim waters of of their (illustratery 1.2006/88020 Septim waters of of their (illustratery 1.2006/88020 Septim waters of other (illustratery 1.2006/88020 Septim waters of sept | 1 | 0 0 | | 1 1 | |
| 111150000 111157000 111157000 111157000 111180000 1111810000 1111910000 1111910000 11111910000 1112110000 1112110000 | 11 11 55 Soft tissue inj / wound Wound : lac / incised / bite 11 11 57 Soft tissue inj / wound Wound : lac / incised / bite | Zone Louver leg Louver | Wound itself included that I towering Wound itself included that I towering Wound itself included that itself Wound itself included that inches | second in a facility of the first which have been a plant to descripe, second let increased the first let present any second and second let increased the first learner lets on the second let increased the the increaser lets of second let increased the the second lets of these learner lets and second let increased the them second lets the second lets the second lets of the second lets the second lets of these index second lets of the second l | 12,00,0000 open woust of leave practically 12,00,0005 open woust of lower leg (liberder) 12,00,0005 open woust of lots (liberder) 12,00,0002 open woust of lots (liberder) 12,00,0002 open woust of lots (liberder) 12,00,0002 open woust of lots (liberder) 12,771,4000 open woust of cheek voil (liberder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1111159000 1111181000 | 11 11 59 Soft tissue inj / wound Wound : lac / incised / bite 11 11 81 Soft tissue inj / wound Wound : lac / incised / bite | Toe Back | Wound : lac / incised / bite : toe Wound : lac / incised / bite : back | wound lac incised bite toe laceration foot wound lac incised bite thorax laceration back trunk | 125654002 open wound of toe (disorder) 269169002 open wound of back (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1111185000 1111191000 | 11 11 85 Soft tissue inj / wound Wound : lac / incised / bite 11 11 91 Soft tissue inj / wound Wound : lac / incised / bite | Thorax Abdomen | Wound : lac / incised / bite : thorax Wound : lac / incised / bite : abdomen | wound lac include bite thorax laceration back trunk wound lac include bite abdomen laceration stomach tummy trunk | 127314000 open wound of chest wall (disorder) 274170000 open wound of abdominal wall (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1111195000 | 11 11 95 Soft tissue inj / wound : Wound : lac / incised / bite 11 21 11 Soft tissue inj / wound : Sontin / itemped injury | Perineum Central mine | Wound: lac Incised bits : thorax Wound: lac Incised bits : subdomen Wound: lac Incised bits : perfereum Spanio Ingererent liquey : enclosed spins Spanio Ingererent liquey : thoraxic spins Spanio Ingererent liquey : thoraxic spins Spanio Ingererent liquey : thoraxic spins Spanio Ingererent liquey : bundar spins Spanio Ingererent liquey : bundar spins | sword is it is chied the flow on learned book to such a sword is it chied the flow on learned book to such a sword is it chied the displacement learned in content, bursey touch, such as the second of the space in legarate layer, before captured upon the second of the second of the space in legarate layer, bursel upon the second of the second of the space in legarate layer, bursel upon the second of the space in legarate layer, bursel upon the second of the space in legarate layer, bursel upon the second of the space in legarate layer, bursel, upon the space in legarate layer, bursel, upon the space in legarate layer, bursel, upon the space in legarate layer. | 12711-0000 open waxned of cheek wall (shourder) 2741170000 open waxned of shoursers wall (shourder) 2741170000 of declarational wall (shourder) 2775170000 open waxned of declarational shoursers) 2775170000 open waxned sprain (shourder) 27751700000 open waxned (shourder) 27751700000 open waxned of shoursers (shourder) 27751700000 open waxned of shoursers (shourder) 2775170000000000000000000000000000000000 | 1 | 0 0 | 0 | 1 1 | |
| 1112112000 | 11 21 12 Soft tissue inj / wound Sprain / ligament injury | Thoracic spine | Sprain / ligament injury : thoracic spine | sprain ligament injury thoracic spine lumbage back pain vertebral | 274152005 thorack back sprain (disorder) | 1 | 0 0 | | i i | |
| 1112131000 | 11 21 31 Soft tissue inj / wound Sprain / ligament injury | Shoulder Joint | Sprain / Igament injury : shoulder joint | sprain ligament injury shoulder joint clauicle scapula rotator culf humerus | 3199001 sprain of shoulder (disorder) | 1 | | | i i | |
| 1112135000 | 11 21 35 Soft tissue in/ wound Sprain / ilgament injury 11 21 35 Soft tissue in/ wound Sprain / ligament injury | Wrist joint | Sprain / ligament injury : easow joint Sprain / ligament injury : wrist joint | sprain agament injury elebik point colles smiths | 20.12.8001 sprain of signment or escous processy 70704007 sprain of wrist (disorder) | 1 | 0 0 | | : : | |
| 1112137000 | 11 21 17 Soft tissue in/ wound Sprain / ilgament injury 11 21 39 Soft tissue in/ wound Sprain / ligament injury | Thumb | Sprain / Igament injury : nana Sprain / Igament injury : thumb | sprain agament injury hand thumb inger digit sprain ligament injury thumb finger hand digit | 263130004 Sprain of figurent of thumb (disorder) | 1 | 0 0 | | : : | |
| 1112131000 111213000 1112135000 1112137000 1112137000 1112131000 1112151000 | 11 21 43 Soft tissue inj / wound Sprain / ligament injury 11 21 51 Soft tissue inj / wound Sprain / ligament injury | there yet was | Sprann (Spranner Spranner Spra | upon ligorent kinyn dusder jenti dusde upola dusten di Munezo. uran lagerant kinyn dusder jenti dusharen sakula da disercens uran lagerant kinyn da sakula da disercens uran lagerant kinyn dan di dusch beng deg deg uran lagerant kinyn dan di dusch beng deg deg uran lagerant kinyn dan beng beng desi deg uran lagerant kinyn dan beng ben del deg uran lagerant kinyn dan beng ben del deg uran lagerant kinyn dan judi pala pala desident del data del desident del deg uran lagerant kinyn dan judi pala pala desident del data del desident del | 1900001 sprain of shoulder (shourder) 261126001 sprain of should (shourder) 27070007 sprain of same of should (shourder) 37070007 sprain of same (shourder) 261120004 sprain of should (shourder) 261120004 Sprain of (signerer of thumb (shourder) 261120004 sprain of (signerer) 26112004 sprain of (signerer) 26112004 sprain of (signerer) 26112004 sp | 1 | 0 0 | | 1 1 | |
| 1112153000 1112155000 | 11 21 53 Soft tissue inj / wound Sprain / ligament injury 11 21 55 Soft tissue inj / wound Sprain / ligament injury | Knee joint Ankle joint | Sprain / ligament injury : knee joint Sprain / ligament injury : ankle joint | sprin is general tipin'i trea joint pilotic crolyle tibu frame bienessy. granine ligeners i provi per side joint bearine frame indexide statebuler citizenen bular tibule solaranen tibu sida arbilles granin general siaya fost lan big bioma crossioni cartisoni bearine salara sida sida sida sida sida sida sida sid | 5-8880000 | 1 1 | 0 0 | | 1 1 | |
| 1112157000 1112159000 | 11 21 57 Soft tissue inj / wound Sprain / ligament injury 11 21 59 Soft tissue inj / wound Sprain / ligament injury | Foot Toe | Sprain / ligament injury : foot Sprain / ligament injury : toe | sprain ligament injury foot toe arch flat Isfranc sprain ligament injury foot toe big | 49388007 sprain of foot (disorder) 262998001 sprain of toe joint (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1113111000 1113115000 | 11 31 11 Soft tissue inj / wound Bruise / contusion / abrasion 11 31 15 Soft tissue inj / wound Bruise / contusion / abrasion | Head Face | Bruise / contusion / abrasion : head Bruise / contusion / abrasion : face | bruise contusion abrasion head face soft tissue injury bruise contusion abrasion face head soft tissue injury | 283025007 superficial injury of head (disorder) 125668004 contusion of face (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1113121000 1113135000 | 11 31 21 Soft tissue inj / wound Bruise / contusion / abrasion 11 31 35 Soft tissue inj / wound Bruise / contusion / abrasion | Neck Thorax | Bruise / contusion / abrasion : neck Bruise / contusion / abrasion : thorax | bruise contrasion neck throat whiplash head soft tissue injury neck vertebral bruise contrasion abrasion thorax back trunk soft tissue injury | 274182009 superficial injury of neck (disorder) 274187003 superficial injury of chest (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1113137000 | 11 31 37 Soft tissue inj/wound Bruise / contusion / abrasion 11 31 41 Soft tissue inj / wound Bruise / contusion / abrasion | Back Abdoman | Bruise / contusion / abrasion : back Bruise / contusion / abrasion : abriomen | bruise contration abrasion back thorax trunk soft tissue injury | 274184005 superficial injury of back (disorder) 274183004 superficial injury of abdominal wall (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1113145000 | 11 31 45 Soft tissue inj / wound Bruise / contusion / abrasion | Perineum | urissa / consulori / plansion - neck Bruise / consulori / plansion - thorax Bruise / consulori / plansion - thorax Bruise / consulori / plansion - thorax Bruise / consulori / plansion - plansion - plansion Bruise / consulori / plansion - perineum Bruise / consulori / plansion - perineum Bruise / consulori / plansion - thoulder | books contained next mode ampliant has due that use legar more convertees between combined medium from the last but will be the last legar before contained affection delicense books with tissue layer books contained affection delicense books with tissue layer books contained affection public gain performes previous value status built bestile suffit tissue signay books contained affection public gain performes previous great value status built bestile suffit tissue signay books contained affection public gain performes previous great value status built bestile suffit tissue signay books contained affection builder and thom such as of tissue belong built built suffit tissue signay books contained affection builder and thom such as of tissue belong built built suffit tissue signay built built suffit tissue signay. | JAMANDON SUPERFICIAL PLAY of Sector planteries; AURILIANDON SUPERFICIAL PLAY OF SECTOR SUPERFICIAL PLAY ZAMANDON ZAMANDON ZAMANDON ZAMANDON SUPERFICIAL Play of Barbaneari Maril (Slaunder) ZAMANDON SUPERFICIAL Play of Barbaneari Maril ZAMANDON SUPERFICIAL Play of Barbaneari Maril ZAMANDON SUPERFICIAL Play of Barbaneari (Slaunder) ZAMANDON SUPERFICIAL Play of Shoulder (Slaunder) SUPERFICIAL Play of Shoulder (Slaunder) | 1 | 0 0 | | i i | |
| 1113151000 | 11 31 51 Soft tissue inj / wound Bruise / contusion / abrasion | Shoulder | Bruise / contusion / abrasion : shoulder | bruise contusion abrasion shoulder neck thorax trunk soft tissue injury | 274191008 superficial injury of shoulder (disorder) | 1 | | | i i | |
| 1113155000 | 11 31 53 Soft tissue in/ wound Bruse / contusion / abrasion 11 31 55 Soft tissue in/ wound Bruse / contusion / abrasion | Upper arm Elbow | Bruise / contusion / abrasion : elbow | bruise containon abrasion elbow elecranon soft tissue injury | 283032003 superficial injury of elbow (disorder) | 1 | | | 1 1 | |
| 1121/15/000 1122/15/000 1122/15/000 1121/15/000 1121/11/1000 1121/11/1000 1121/11/1000 1121/11/1000 1121/11/1000 1121/11/1000 1121/15/000 1121/15/000 1121/15/000 1121/15/000 1121/15/000 1121/15/000 1121/15/000 1121/15/000 | 11 31 59 Soft tissue (r/ Wound Bruise / contusion / abrasion | Wrist | Bicular Contrastion of Abertains - September and Bicular Contrastion of Abertains - September Abertain - Contrastion of Abertains - September - Sep | Under the consistence detailed in the control of the class of the control of the | January State Color September 1 September 1 September 1 September 1 September 2 September | 1 | 0 0 | 0 | 1 1 | |
| 1113164000 1113164000 | oi oi sort tissue inj / wound Bruise / contusion / abrasion 11 31 64 Soft tissue inj / wound Bruise / contusion / abrasion | Thumb | Bruise / contusion / abrasion : thumb | bruise contrainer auf asson hand what sort tissue injury bruise contrainer abrasion thamb soft tissue injury | 274194000 superficial injury of hand (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1113168000 1113171000 | 11 31 68 Soft tissue inj/wound Bruise / contusion / abrasion 11 31 71 Soft tissue inj/wound Bruise / contusion / abrasion | Finger Hip | arusse / contusion / abrasion : finger Bruise / contusion / abrasion : hip | onuse consuson acrasion ringer soft tissue injury bruise contrasion abrasion hip soft tissue injury | 274198003 superficial injury of finger (disorder) 274198003 superficial injury of hip (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1113175000 1113179000 | 11 31 75 Soft tissue inj / wound Bruise / contusion / shrasion 11 31 79 Soft tissue inj / wound Bruise / contusion / shrasion | Thigh Knee | Bruise / contusion / abrasion : thigh Bruise / contusion / abrasion : knee | bruise contusion abrasion thigh soft tissue injury bruise contusion abrasion knee soft tissue injury | 274198002 superficial injury of thigh (disorder) 283040009 superficial injury of knee (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 111161000 11116000 11116000 11117000 11117000 11117000 11117000 11118000 11118000 11118000 11118000 11118000 11118000 11118000 | 10.1 1.2 2.5 | Upper erm Erhour Word Frage Frage Gody Frage Gody Gody Gody Gody Gody Gody Gody Gody | Stocke Commission of Assesses hand Stocke Commission of Assesses than the Commission of Assesses than Stocke Commission of Assesses high Stocker Commission of Assesses high Stocker Commission of Assesses have Stocker Stocker of Assesses have Stocker Stocker of Assesses have March Stocker and March Stocker and M | boto or recitions devices to be of ent of the low largery below considered and ent of the low largery below or recitions devices to go of the low largery below or recitions devices to go of the low largery below or recitions devices to go of the low largery below or recitions devices to largery below or recitions devices to larger go of the low grey below or recitions devices to large go of the low grey below or recitions devices to large go of the low grey below or recitions devices to large go of the low grey below or recitions devices to larger go of the low grey below or recitions devices to largery larger larger go on the low grey below or recitions devices to a subject the low larger go on the low grey below or recitions devices to a subject to larger go on the low grey larger go of the low grey go of the low grey larger go of the low grey go of the low grey larger go of the low grey go of the low grey larger go of the low grey go of the low grey larger go of the low grey go of the low grey larger go of the low grey grey larger grey grey grey grey grey grey grey grey grey grey grey | JEROSEOS Jeros would fine fair Blomberl JEROSEOS JERO | 1 1 | 0 0 | 0 | 1 1 | |
| 1113187000 1113189000 | 11 31 87 Soft tissue inj / wound Bruise / contusion / shrasion 11 31 89 Soft tissue inj / wound Bruise / contusion / shrasion | Foot Toe | Bruise / contusion / abrasion : foot Bruise / contusion / abrasion : toe | bruise contusion abrasion foot ankle sprain toe soft tissue injury bruise contusion abrasion toe subungal haematoma soft tissue injury | 274199005 superficial injury of foot (disorder) 274200008 superficial injury of toe (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1114111000 1114121000 | 11 41 11 Soft tissue inj / wound Muscle injury 11 41 21 Soft tissue inj / wound Muscle injury | Neck Upper back | Muscle Injury : neck Muscle Injury : upper back | whiplash muscle neck injury cervical muscle injury upper back soft tissue injury | 3E0450007 strain of neck muscle (disorder) 812501000000108 injury of muscle of upper back (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1114122000 1114131000 | 11 41 22 Soft tissue inj / wound Muscle injury 11 41 31 Soft tissue inj / wound Muscle injury | Lower back Shoulder | Muscle Injury : lower back Muscle Injury : shoulder | muscle injury lower back lumbago pain mechanical soft thisse injury muscle injury shoulder soft thisse injury | 813411000000100 Injury of muscle of lower back (disorder) 812471000000101 Injury of muscle of shoulder (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1114132000 | 11 41 32 Soft tissue inj / wound Muscle injury 11 41 33 Soft tissue inj / wound Muscle injury | Upper anni Engagen | Muscle Injury : upper arm Muscle Injury : forearm | muscle injury upper arm soft those injury | 812511000000105 injury of muscle of upper arm (disorder) 812531000000103 injury of muscle of forearm (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1114134000 | 11 41 34 Soft tissue inj / wound Muscle injury | Hand | Muscle injury : hand | muscle injury hand soft tissue injury | 812721000000109 Injury of muscle of hand (disorder) | 1 | 0 0 | | | |
| 1114142000 | 11 41 42 Soft tissue inj / wound Muscle injury | Upper arm Foreign Foreign Thigh Lower Rg Foot | Marcia Papay - Nouther Marcia Papay - Septem Marcia Papay - Septem Marcia Papay - Septem Marcia Papay - Sheet Marcia Papay - Nouther Marcia Papay - Nouther Marcia Papay - Nouth Tendon Septy - Sheet Tendon Septy - Sheet Tendon Septy - Sheet Marcia Papay - Sheet | manula de la prija valendar mel Name de prija manula de la prija mel de mel Name de prija manula de la prija mel de di Name de prija manula de prija mel de di Name de prija mel de de prija mel de | \$13.7300000001 \$13.7300000001 \$13.73000000001 \$13.7700000000000000000000000000000000000 | 1 | | | i i | |
| 1115111000 | 11 41 45 Soft tissue inj / wound Tendon injury 11 51 11 Soft tissue inj / wound Tendon injury | Shoulder joint | Tendon injury : shoulder joint | muscui injury nost sort sissie injury tendon injury shoulder joint painful arc | 81331000000101 injury of fendon of shoulder joint (disorder) | 1 | 0 0 | | 1 1 | |
| 1115121000 1115125000 | 11 51 21 Soft tissue inj / wound Tendon injury 11 51 25 Soft tissue inj / wound Tendon injury | Elbow joint Wrist joint | Tendon injury : elbow joint Tendon injury : wrist joint | tendon injury elbow joint arm tendon injury wrist joint hand | B13101000000105 Injury of tendon of elbow joint (disorder) B13111000000107 Injury of tendon of wrist joint (disorder) | 1 1 | 0 0 | | 1 1 | |
| 1115131000 1115141000 | 11 51 31 Soft tissue inj / wound Tendon injury 11 51 41 Soft tissue inj / wound Tendon injury | FOOT Shoulder joint Ellow joint Write joint Hand Thumb Finger | Tendon injury : hand Tendon injury : thumb | tendon injury hand finger digit tendon injury thumb finger digit | 262971000 tendon injury of hand (disorder) 813231000000107 injury of tendon of thumb (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1115145000 1115151000 | 11 51 45 Soft tissue inj / wound Tendon injury 11 51 51 Soft tissue inj / wound Tendon injury | Finger Patellar tendon | Tendon injury : finger Tendon injury : patellar tendon | tendon injury finger digit ring middle index little hand tendon injury patellar tendon dialocation dialocated knee | 813121000000101 injury of tendon of finger (disorder) 209508007 strain of patellar tendon (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1115155000 1115159000 | 11 51 55 Soft tissue inj / wound Tendon injury 11 51 59 Soft tissue inj / wound Tendon injury | Achilles tendon Ankle | Tendon legyr passine tendon Tendon legyr passine tendon Tendon legyr passine tendon Tendon legyr passine Tendon legyr passine Tendon legyr passin Tendon legyr passin Tendon legyr tendo Tendon legyr tendo | tendon injury achilles tendon ankle tendon injury ankle foot | all 11 DOCCOLOGY strain of pitelliar brendom (cincefer) 22111005 strain of pitelliar brendom (cincefer) 22111005 strain of Arbillia brendom (cincefer) 12111100CCCCCCCCCCCCCCCCCCCCCCCCCCCCCC | 1 1 | 0 0 | 0 | 1 1 | |
| 1115161000 1115171000 | 11 51 61 Soft tissue inj / wound Tendon injury 11 51 71 Soft tissue inj / wound Tendon injury | Foot Toe | Tendon injury : foot Tendon injury : toe | tendon injury foot toe tendon injury toe foot | 2201.7005 Israin of Activities tendent (ascorder) 8239810000000109 injury of tendent of foot (disorder) 813310000000109 injury of tendent of foot (disorder) 81332000000109 injury of tendent of toe (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1116111000 1116115000 | 11 61 11 Soft tissue inj / wound Crush injury 11 61 15 Soft tissue inj / wound Crush injury | ringer Peleflar femdon Adhiles tendon Adhile Exot Toe Head Face | Crush injury : head Crush injury : face | | 262576002 crushing injury of skull and intracranial contents (disorder) 90465004 crushing injury of face (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1116119000 | 11 61 19 Soft tissue inj / wound Crush injury 11 61 21 Soft Harma inj / wound Crush injury | Traumatic asphysiation | Traumatic apphysiation Crush Intervious | trauma apphysiation strangle strangling hanging hanged traumatic obstruction breathing | 386732003 traumatic asphysiation (event) 50001009 cruphing injury of pack (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1114-13000 1114- | 12 | Thorax Back | Tendent sjory: I saw Chrish Heyri, Nad Chrish Heyri, Had Christ Heyri, Had Chrish Heyri, Had Christ Heyri, Had Chrish Heyri, Had Christ He | bourse apply-sation strengle strengling henging hanged traumatic obstruction breathing crush living years; crush living years; | 13.11.11.11.11.11.11.11.11.11.11.11.11.1 | 1 | 0 0 | 0 | 1 1 | |
| 1116141000 | 11 61 41 Soft tissue inj / wound Crush injury | Abdomen | Crush Injury : abdomen | crush injury abdomen | 68565009 crushing injury of abdomen (disorder) | 1 | 0 0 | | | |
| 1116147000 | 11 61 47 Soft tissue inj / wound Crush injury | Hand | Crush Injury : hand | coult beyon deficient count beyon deficient goes personnes perox segions valve trades balls treifs gentled count beyon participation goes goes goes count beyon to count beyon from the goes gold count beyon from the gold count beyon gold | 50793006 crushing injury of hand (disorder) | 1 | 0 0 | | | |
| 1116149000 | 11 61 49 Soft tissue inj / wound Crush injury | Finger | Crush Injury : finger | crush injury finger digit hand thumb ring middle little index | 10380004 crushing injury of finger (disorder) | 1 | 0 0 | | | |
| 1116153000 | 11 61 53 Soft tissue inj / wound Crush injury | Upper arm | Crush injury : upper arm | crush injury upper arm | 19180002 crushing injury of upper arm (disorder) | 1 | | | i i | |
| 1116161000 | 11 61 61 Soft tissue inj / wound Crush injury | Thigh | Crush injury : thigh | crush injury thigh leg | 74270009 crushing injury of thigh (disorder) | 1 | | | i i | |
| 1116165000 | 11 61 65 Soft tissue inj / wound Crush injury | Ankle | Crush injury : lower leg Crush injury : ankle | crush injury sower sig crush injury sokie foot | 65896005 crushing injury of solder sig (disorder) | 1 | 0 0 | | : : | |
| 1116167000 1116169000 | 11 61 67 Soft tissue inj / wound Crush injury 11 61 69 Soft tissue inj / wound Crush injury | Foot Toe | Crush Injury : foot Crush Injury : toe | crush injury foot toe crush injury toe foot | 43422002 crushing injury of foot (disorder) 74682007 crushing injury of toe (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 117711000 1177117000 1177127000 117727000 1177134000 1177134000 | 11 71 11 Soft tissue inj / wound Degloving injury 11 71 17 Soft tissue inj / wound Degloving injury | Head Neck | Degloving injury : head Degloving injury : neck | degloving injury head degloving injury neck | 82271004 Injury of head (disorder) 283843007 degloving injury of neck (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1117125000 1117131000 | 11 71 25 Soft tissue inj / wound Degloving injury 11 71 31 Soft tissue inj / wound Degloving injury | Thorax Back | Degloving injury : thorax Degloving injury : back | degloving injuny chest thorax back degloving injuny back chest thorax | 210408006 degloving injury chest wall (disorder) 210417006 degloving injury back (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1117134000 1117138000 | 11 71 34 Soft tissue inj / wound Degloving injury 11 71 38 Soft tissue inj / wound Degloving injury | Abdomen Perineum | Degloving Injury : abdomen Degloving Injury : perineum | degloving injury abdomen degloving pelvis pelvis groin perineum penis vagina vulva testes balls testis genital | 283846004 degloving injury of abdomen (disorder) 283848003 degloving injury of perineum (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 111713900 1117141000 1117141000 1117147000 1117155000 | 11 71 39 Soft tissue inj / wound Degloving injury 11 71 41 Soft tissue inj / wound Degloving injury | Buttock Shoulder | Degloving Injury : buttock Degloving Injury : shoulder | degloving injury buttock degloving injury shoulder | 210422006 degloving injury buttock (disorder) 210524009 degloving injury, shoulder area (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1117145000 | 11 71 45 Soft tissue inj / wound Degloving injury 11 71 47 Soft tissue inj / wound Degloving injury | Upper arm | Degloving injury : upper arm Degloving injury : forces | degloving injury upper arm degloving injury upper arm | 210527002 degloving injury, upper arm (disorder) 210523005 degloving injury, forearm (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1117155000 | 11 71 55 Soft tissue inj / wound Deglowing injury 11 71 58 Soft Hasse inj / wound Deglowing injury | Hand Thumb | Degloving Injury : hand Degloving Injury : thumb | degloving injury hand finger digit | 210571003 degloving injury of hand (disorder) 210594001 degloving injury of thumb (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1117150000 1117750000 11177150000 1117715000 1117771000 1117777000 | 11 71 59 Soft thane in / wound Degloving in jury 11 71 67 Soft thane in / wound Degloving in jury | Finger Think | Cosh birgo; Tex Regions (exp.); Tex Regions (exp.); Tex Degions (exp.); Text Degions (exp. | consideration price from the following consideration of the fo | Visionary on the filterated program of the seal filterated pr | i | 0 0 | | i | |
| 1117171000 | 11 71 5oft tissue inj / wound Degloving injury | Lower leg | Degloving injury: lower leg | degloving injury lower leg ankle knee dealtowing injury ankle foot | 210702006 degloving injury of lower leg (disorder) 210702001 degloving injury and defloreder) | i | 0 0 | | i | |
| 1117177000 | 11 71 77 Soft tissue inj / wound Deglowing injury 11 71 79 Soft tissue inj / wound Deglowing injury | Foot | Degloving injury : foot | deprives (a july) figure digit hand the whole needs or gittle deprives (a july) per deprive de l'entre deprives (a july) per de l'entre deprives (a july) per leut bush des des | 210070002 deglarence jeur yar û Helje (latanskri) 2100700002 deglarence jeur yar û Helje (latanskri) 2100700001 deglarence jeur yar û Howe hej (latanskri) 2100700001 deglarence jeur yar û Howe hej (latanskri) 2100720002 deglarence jeur yar fotor (fatunskri) 2100720003 deglarence jeur yar fotor (fatunskri) 21007200006 hesad burn (Bischerier) hesad burn (Bischerier) | 1 | 0 0 | | | |
| 1118111000 | 11 81 11 Soft tissue in / wound Burn | Head | Burn : head | burn head face | 262581006 head burn (disorder) | 1 | 0 0 | | 1 1 | Market Street and Control of the Street Stre |
| 1118118000 | 11 B1 18 Soft tissue (r) Wound Burn | Arway | Burn : airway | burn sirvary head face neck | 28418001 burn of respiratory tract (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1118125000 1118125000 | 11 B1 25 Soft tissue inj/ wound Burn | Neck | Burn : neck | Down one trace to the control of the | 60713008 burn of neck (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1118131000 1118141000 | 11 81 31 Soft tissue inj / wound Burn 11 81 41 Soft tissue inj / wound Burn | I runk Perinsum | wurn : trunk Burn : perineum | ourn cnest accomen stomach back flank thorax loin burn pelvis pelvic groin perineum penis vagina vulva testes balls testis genital | Szeusudő bum af trunk (disorder) 284219006 bum af perineum (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1118149000 1118151000 | 11 81 43 Soft tissue inj / wound Burn 11 81 51 Soft tissue inj / wound Burn | Shoulder | Conjunct space in tage Conjunct space Conjunct Conj | bourn dreif dicholenes distracio hand finale finale travaria loss than parking parking presistences penera supras codes bestere hash tendin gentrial tourn parking parking presistences penera supras codes bourn shoulder arm medi travaria finanze tourn suppor arm shoulder tourn medica mention of travaria finanze tourn support arm shoulder tourn medica mention tourn finanzen mentione | 2022/2020 hard for illuminary 2022/2020 hard for illuminary 2022/2020 hard for ingregorithmic 2022/2020 hard for ingregorithmic 2022/2020 hard for illuminary 2022/2020 hard for ill | 1 1 | 0 0 | 0 | 1 1 | |
| 1118155000 1118157000 | 11 81 55 Soft tissue inj / wound Burn 11 81 57 Soft tissue inj / wound Burn | Upper ann Elbow | Burn : upper arm Burn : elbow | burn upper arm shoulder burn elbow arm | 14261008 burn of upper arm (disorder) 18084001 burn of elbow (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1177 70000 11181 11000 11181 11000 11181 11000 11181 11000 11181 12000 11181 12000 11181 12000 11181 13000 11181 13000 | 12 | Transmiss analyses of the control of | Burn : forearm Burn : hand | burn forearm arm elbow burn hand forearm wrist | 80827001 burn of forearm (disorder) 14893008 burn of hand (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1118167000 1118168000 | 11 81 67 Soft tissue inj / wound Burn 11 81 68 Soft tissue inj / wound Burn | Thumb Finger | Burn : thumb Burn : finger | burn thumb digit finger burn finger thumb digit ning index middle little | 64090007 burn of thumb (disorder) 31946005 burn of two OR more fingers not including thumb (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1118171000 1118173000 | 11 81 71 Soft tissue inj / wound Burn 11 81 73 Soft tissue inj / wound Burn | Thigh Knee | Burn: tonearm Burn: thund Burn: thund Burn: thunb Burn: figuer Burn: thigh Burn: knee Burn: knee | South tracers are records The both hard for exercise with When hard for exercise with South Register hards digit ring index models little South Register | INSULVOUS Bound or benefited processing to the control of the cont | 1 1 | 0 0 | 0 | 1 1 | |
| 1118175000 1118177000 | 11 81 75 Soft tissue inj / wound Burn 11 81 77 Soft tissue in/ wound Burn | Lower Leg Foot | Burn : lower leg Burn : foot | burn lower leg burn foot toe | 37696000 burn of lower leg (disorder) 11980003 burn of foot (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1118175000 1118175000 1118176000 1211111000 1211118000 1211125000 1211127000 1211127000 | 11 12 75 Soft trave of wound Sure | Toe Skull | Sen's Insent by Sen's Insen's Sen's Sen's Sen's Sen's Insen's Sen's Insen's Sen's Se | burn foot toe burn tee foot closed firsture skull head injury | 1700,000 | 1 | 0 0 | | 1 1 | |
| 1211118000 1211179000 | 21 11 18 Fracture / dislocation Closed fracture 21 11 25 Fracture / dislocation Closed fracture | Facial bones / mandible Sternum | Closed fracture : facial bones / mandible Closed fracture : sternum | closed fracture facial bones mandible jew face closed fracture sternum breatbone | 430984009 closed fracture of facial bone (disorder) 66112004 closed fracture phonous Albander ¹ | i | 0 0 | | i i | |
| 1211127000 1211131000 | 21 11 27 Fracture / dislocation Closed fracture 21 11 31 Fracture / dislocation Closed fracture | Rib (s) Cervical spine | Closed fracture : rib Closed fracture : cervical spine | closed fracture rib chest fluil segment pneumothorax closed fracture cervical spine neck hangmans | 60667009 closed fracture of rib (disorder) 263062008 closed fracture of cervical soine (disorder) | 1 | 0 0 | 0 | i i | |
| 1211132000 1211133000 | 21 11 32 Fracture / dislocation Closed fracture 21 11 33 Fracture / dislocation Closed fracture | Thoracic spine Lumbar spine | Closed fracture : thoracic spine Closed fracture : lumbar soine | closed fracture thoracic spine chest closed fracture lumbar spine back | 207938004 closed fracture thoracic vertebra (disorder) 207957008 closed fracture (without vertebra (disorder) | 1 | 1 0 | | 1 1 | |
| 121112000 121113000 121113000 1211137000 | 21 11 35 Fracture / dislocation Closed fracture | Public nami | Closed fracture : public rami | closed fracture public rami pelvis | 11695006 fracture of public rami (clinorder) | 1 | 1 0 | | 1 1 | |
| 1211138000 | 21 11 37 Fracture / dislocation Closed fracture 21 11 38 Fracture / dislocation Closed fracture 21 11 39 Fracture / dislocation Closed fracture | Coccys | Closed fracture : coccys | closed fracture coccyc tallbore coccydynia pelvis | 20797400E closed fracture of sacrum (disorder) 207980000 closed fracture pelvis, coccys (disorder) 91037003 closed fracture of pelvis (disorder) | 1 | 0 0 | 0 | 1 1 | |
| 1211139000 1211141000 | 21 11 41 Fracture / defocation Closed fracture 21 11 41 Fracture / defocation Closed fracture | Clavicie | Closed fracture : clavicle | closed fracture clavice collarbone | 33173003 closed fracture of pelvis (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1211143000 1211145000 | 21 11 41 Fracture / dislocation Closed fracture | Scapera Humerus | Liosed fracture: scapula Closed fracture: humerus | crosses tracture anoulder shoulderblade acromiom coracold glenold closed fracture humerus arm | 33173003 closed fracture of clavicle (discoder) 29790002 closed fracture of sayula (discoder) 43295006 closed fracture of humerus (disorder) 30222008 elbow fracture - closed (discoder) | 1 1 | 1 0 | 0 | 1 1 | |
| 1211149000 1211151000 | 21 11 49 Fracture / dislocation Closed fracture 21 11 51 Fracture / dislocation Closed fracture 21 11 53 Fracture / dislocation Closed fracture | Elbow Radius | Closed fracture : elbow joint Closed fracture : radius Closed fracture : ulna | closed fracture elbow joint closed fracture distal radius colles uniths bartons wrist forearm | 302222008 elbow fracture - closed (disorder) 11640008 closed fracture of radius (disorder) 77555008 closed fracture of una (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 1211153000 1211155000 | 21 11 53 Fracture / dislocation Closed fracture 21 11 55 Fracture / dislocation Closed fracture | Ulna Radius AND ulna | | closed fracture wins styloid wint forearm closed fracture radius wins forearm | 7155508 closed fracture of ulna (disorder) 53627009 closed fracture of radius and ulna (disorder) | 1 1 | 1 0 | 0 | 1 1 | |
| 1211158000 1211159000 | 21 11 58 Fracture / dislocation Closed fracture 21 11 59 Fracture / dislocation Closed fracture | Monteggia (frac ulna : dialoc rad) Galeazzi (frac rad : dialoc ulna) | Closed fracture: Monteggia (frac ulna: disloc rad) Closed fracture: Galeazzi (frac rad : disloc ulna) | closed fracture monteggia dislocation galeazzi elbow forearm closed fracture monteggia dislocation galeazzi forearm writt | 20045004 closed Monteggia fracture (disorder) 200322000 closed Galeazzi fracture (disorder) | 1 1 | 0 0 | 0 | 1 1 | |
| 121114000 1211141000 121114000 121114000 121114000 121115000 121115000 121115000 121115000 121115000 121115000 121115000 | 11 31 Fracture / dislocation Closed fracture | Ulna Rudun ANO ulna Monteggia (frac ulna : disloc rad) Galesza (frac rad : disloc ulna) Scaphold Carpal bones | Cose of recture : caths AND wins Closed frecture : radius AND wins Closed frecture : Meninggis (frec. wins : daloc rad) Closed frecture : Catherat (frec. rad : daloc wins) Closed frecture : caphorid Closed frecture : caphorid Closed frecture : caphorid | Sum for the state of the state | 2.000000 Closed financial of unit period using particulary Colored financial of unit period using Chinarder 2.0000000 Closed Microlleggia financial (Glaceder) Closed Microlleggia financial (Glaceder) Closed Colored Colored Colored financial financial (Glaceder) Closed Glaceder in fracture (Glaceder) Closed financial or financial period bone (glaceder) Closed financial colored (Glaceder) Closed financial colored (Glaceder) Closed financial colored (Glaceder) | 1 1 | 1 0 | 0 | 1 1 | |
| 1211165000 1211167000 1211168000 | 2 | Hand Thumb metacarpal Thumb phalanx | Closed fracture : hand Closed fracture : thumb metacarpal Closed fracture : thumb phalanx | closed fracture hand metacerpid carpal carpus closed fracture thumb bennett rolendo metacerpal thener closed fracture thumb phalans to participate to the participate | 20070022 country grow of a fine and more and common (burner) (burn | 1 1 | 0 0 | 0 | 1 1 | |
| 1211168000 | 21 11 68 Fracture / dislocation Closed fracture | Thumb phalanx | Closed fracture: thumb phalanx | closed fracture thumb phalanx tip | 704213001 closed fracture of phalanx of thumb (disorder) | 1 | 0 0 | 0 | 1 1 | |

| 1211169000 1211171000 | 21 1 | 1 69 1 71 1 75 1 78 | Fracture / dislocation | Closed fracture Closed fracture | Fing Nof Hip Nof Ferror (not Nof) Kine Patella | Closed fracture : finger Closed fracture : his (NoF) | closed financia fragmentalism. The proceedings of the control of subsignation of subsignation and subsignati | 24424003 359817006 | closed fination of phalasts of large planatedy lossed fination of high (planatedy) closed fination of high (planatedy) closed fination of former planatedy closed fination of borne of kneep joint (planatedy) closed fination of blanks (planatedy) closed fination of blanks (planatedy) closed fination of blanks (planatedy) | | 0 0 | 1 1 |
|--|--|------------------------------|--|--|--|--|--|--|--|-----|-----|-----|
| 1211171000 1211175000 1211178000 | 21 1 21 1 21 1 | 75 | Fracture / dislocation | Closed fracture Closed fracture Closed fracture Closed fracture Closed fracture | Fernur (not NoF) | Close of tracture : Ingple? Close of facture : high [NeT] Close of facture : high NeT] Close of facture : Insert Close of facture : Insert Close of facture : Insert Close of facture : that (not ankle) | closed fracture femur shaft supracondylar | 359817006 25415003 428151000 | closed fracture of femur (disorder) | | 0 0 | 1 1 |
| 1211179000 1211179000 1211181000 | 21 1 21 1 21 1 | 1 79 | Practure / dislocation | Closed fracture | Patella | Closed fracture : stee Closed fracture : patella | closed fracture shee closed fracture patella knee cap kneecap | 80756009 447139008 | closed tracture of patella (disorder) closed fracture of patella (disorder) | | 0 0 | 1 1 |
| 1211183000 | 21 1 | 1 81 | Fracture / dislocation | Closed fracture | | Closed fracture : tibia (not ankle) Closed fracture : fibula (not ankle) | closed fracture tibia lower leg | 447139008 447395005 | closed fracture of tibia (disorder) | 1 1 | 0 0 | 1 1 |
| 1211185000 1211189000 1211191000 | 21 1 21 1 | 85 | Fracture / dislocation | Closed fracture | Fibula (not ankle) Tibla AND fibula (not ankle) | Union of Instance - Install price annively Close of Instance - Install price annively Close of Instance - Install price annively Close of Instance - Install price - Install price Close of Instance - Insel | closed fracture tibia fibular | 447395005 413877007 | closed firsteries of this glastrately: these financiare of this glastrately: these financiare of this limiteder (limited financiare) of this limiteder closed financiare of plantic glastratery closed financiare of clastratery of financiary closed financiare of financiare of financiary closed financiare of financiare of financiary closed financiare of plantic of financiary financiare of plantic of financiary financiare of financiary of plantic or financiary financiare of financiary of plantic or financiary | i | 0 0 | i i |
| 1211189000 1211191000 | 21 1 | 1 89 | Fracture / dislocation Fracture / dislocation | Closed fracture Closed fracture | Ankle Heel Foot Toe | Closed fracture : ankle Closed fracture : heel | closed fracture ankle bimalleolar trimalleolar plafond pilon closed fracture ankle foot calcaneum heel | 42188001 64665009 342070009 81576005 | closed fracture of ankle (disorder) closed fracture of calcaneum (disorder) | 1 1 | 0 0 | 1 1 |
| 1211193000 1211197000 | 21 1 | 93 | Fracture / dislocation | Closed fracture | Foot | Closed fracture : foot | closed fracture foot | 342070009 | closed fracture of foot (disorder) | 1 | 0 0 | 1 1 |
| 1212111000 | 21 2 | 1 11 | Fracture / dislocation | Open fracture | Skull | Count for Marchine trac Person Section 2 and Count for | closed fractions lets only on fractions with the add injury ones fractions with the add injury ones fractions with the add injury ones fraction with ones add injury ones fractions with ones promotedness used on ones fractions with ones promotedness used on ones fractions with ones promotedness ones fractions and ones promotedness ones fractions are desired upon more open fractions are desired upon more open fractions are desired upon developed ones fractions are developed upon developed ones fractions are developed upon | 371161001 111609001 | clased finance and palament of text (planned) specification of all palament of text (planned) specification of all palaments specification specifications specif | | 0 0 | 1 1 |
| 1212118000 | 21 2 | 1 18 | Practure / dislocation | Open fracture | Facial bones / mandible | Open fracture : facial bones / mandible | open fracture facial bones mandible jaw | 111609001 | open fracture of facial bones (disorder) | | 0 0 | : : |
| 1212125000 1212127000 1212131000 1212132000 | 21 2 | 1 27 | Fracture / dislocation | Open fracture | State Stocks, minimate The Sill Cancel spine Thereis's spine Lumbur spine Sacram Felia Cancel Sacram Felia Sacram Felia Sacram Felia Sacram Sacram Felia Sacram Sacram Sacram Felia Sacram Sacra | Open fracture : rib (s) | open fracture itserium preastoone open fracture rib chest preumothrorax sucking wound | 87225004 45910007 269070003 207949005 | open fracture of literium (disorder) open fracture of rib (disorder) | . 0 | 0 0 | 1 1 |
| 1212131000 1212132000 | 21 2 | 1 31 | Fracture / dislocation | Open fracture Open fracture | Cervical spine Thoracic spine | Open fracture : cervical spine Open fracture : thoracic spine | open fracture cervical spine neck open fracture thoracic spine chest | 269070003 207949005 | open fracture of cervical spine (disorder) open fracture thoracic vertebra (disorder) | . 0 | 0 0 | 1 1 |
| | 21 2 | 33 | Fracture / dislocation | Open fracture | Lumbar spine | Open fracture : lumbar spine | open fracture lumbar spine | 207965006 | open fracture lumbar vertebra (disorder) | | 0 0 | 1 1 |
| 1212136000 1212137000 | 21 2 | 1 36 | Fracture / dislocation Fracture / dislocation | Open fracture Open fracture | Sacrum Coccyx | Open fracture : sacrum Open fracture : coccyx | open fracture sacrum pelvis open fracture pelvis coccyx | 207977001 207981001 | open fracture sacrum (disorder) open fracture pelvis, coccyx (disorder) | 1 0 | 0 0 | 1 1 |
| 1212136000 1212137000 1212139000 1212141000 | 21 2 | 1 39 | Fracture / deliceation | Open fracture | Pelvis | Open fracture : pelvis | open betaute bezonet open deue gene bedaute zu eine prijde deue gene bedaute zu eine prijde deue gene bedaute zu eine prijde deue gene bedaute park op deue bedaute deue bedaute park op deue bedaute gene bedaute bezonet deue bedaute gene bedaute bedaute deue bedaute gene bedaute bedaute deue | 207965006 207977001 207981001 15474008 111637008 | open fracture of pelvis (disorder) | . 0 | 0 0 | 1 1 |
| 1212141000 1212141000 1212145000 | 21 2 | 1 43 | Fracture / dislocation | Open fracture | Scapula | Open fracture : crayuca Open fracture : scapula | open fracture shoulder capula shoulderblade acromiom coracold glenold | 47864008 89294002 | open fracture of scapula (disorder) | | 0 0 | 1 1 |
| 1212145000 1212149000 | 21 2 | 1 45 | Fracture / dislocation | Open fracture | Humerus | Open fracture : humerus | spen hearts have just ever some process of the proc | 89294002 | open fracture of humerus (disorder) | | 0 0 | : : |
| 1212151000 | 21 2 21 2 | 51 | Fracture / dislocation | Open forsiture | numerus thow Radus Ulra Radus ANO ulna Radus ANO ulna Monteggia (frac ulna : cistoc rad) Galeara (flac rad : distoc rad) | Upon tracture : debug joint Opon fracture : debug joint Opon fracture : radius Opon fracture : radius Opon fracture : valua Opon fracture : valua Opon fracture : radius AND u/ra Opon fracture : radius AND u/ra Opon fracture : Galeacul (frac rad ; daloc cnd) Opon fracture : Galeacul (frac rad ; daloc clas) | open fracture radius colles uniths bartons forearm wrist | 302232001 42945005 37449000 81966000 34578006 208341002 | open fracture of radius (disorder) | | 0 0 | i i |
| 1212151000 1212153000 1212156000 | 21 2 | 51 | Fracture / dislocation | Open fracture | Ulna Bartina AND vina | Open fracture : ulna Onen fracture : radius AND ulna | open fracture ultra forearm | 37449000 81966000 | open fracture of radius and sina (disorder) | | 0 0 | 1 1 |
| 1212158000 1212159000 | 21 2 | 58 | Fracture / dislocation | Open fracture | Monteggia (frac ulna : disloc rad) | Open fracture : Monteggia (frac sina : disloc rad) | open fracture monteggia galeazzi radius uina elbow dislocation forearm | 34578006 | open Monteggia fracture (disorder) | | 0 0 | 1 1 |
| 1212159000 1212160000 | 21 2 | 1 59 | Practure / dislocation | Open fracture Open fracture | Galeazzi (frac rad : disloc uina) Carpal bones (wrist) | Open Senior Montage (New John Action and Open Senior Montage (New John Action and Open Senior Montage (New John Action and Open Senior Montage (New John Action Montage (Ne | open fracture monteggia galeazzi radius ulna wrist dialocation forearm open fracture caroal bones wrist | 208341002 29014003 | open Galeazzi fracture (disorder) open fracture of carpai bone (disorder) | 1 0 | 0 0 | 1 1 |
| 1212161000 | 21 2 | 61 | Fracture / dislocation | Open fracture | Carpal bones (wrist) Hand | Open fracture : hand | open fracture metacarpal | 29014001 1370007 | open fracture of metacarpal bone (disorder) | | 0 0 | i i |
| 1212165000 1212166000 1212167000 | 21 2 21 2 21 2 | 1 65 | Fracture / dislocation Fracture / dislocation | Open fracture Open fracture | Hand Thumb metacarpal Thumb phalane Finger Hig (NoT) Fernar (not NoT) | Open fracture : thumb metacarpal Open fracture : thumb phalanx | open fracture thumb bennett rolando open fracture thumb phalans tip | 208420009 704236005 21698002 | open fracture of metacarpal of thumb (disorder) open fracture of phalanx of thumb (disorder) | 1 0 | 0 0 | 1 1 |
| 1212167000 | 21 2 | 67 | Fracture / dislocation | Open fracture | Finger | Open fracture : finger | open fracture finger | 21698002 | open fracture of phalanx of finger (disorder) | | 0 0 | 1 1 |
| 1212169000 1212171000 | 21 2 21 2 | 1 71 | Fracture / dislocation | Open fracture | Fernur (not NoF) | Open fracture : np (nor) Open fracture : femur | open fracture rip nor neck of ternur subcapital trochanteric open fracture femur leg supracondylar | 361118003 28576007 | open fracture of nep (disorder) | . 0 | 0 0 | 1 1 |
| 1212175000 | 21 2 | 75 | Fracture / dislocation | Open fracture | Kose | Open fracture : knee | open fracture knee tibla leg | 428019004 | open fracture of bone of knee joint (disorder) | | 0 0 | 1 1 |
| 1212175000 1212178000 1212181000 1212181000 | 21 2 21 2 21 2 21 2 | 1 81 | Fracture / dislocation | Open fracture | Fetter (for not) Knee Patella This (not avide) Fibula (not avide) Fibula (not avide) Ana Ant fibula Anaka | Open fracture : tibia (not ankle) | open fracture lower leg tible fibula tible tible plateau | 428019004 111643005 446979005 447017008 414943006 48187004 | open fracture of tibia (disorder) | | 0 0 | 1 1 |
| 1212183000 | 21 2 | 83 | Fracture / dislocation | Open fracture | Fibula (not ankle) | Open fracture : fibula (not ankle) | open fracture lower leg tibis fibular | 447017008 | open fracture of fibula (disorder) | | 0 0 | 1 1 |
| 1212185000 1212189000 | 21 2 | | Practure / dislocation | Open fracture | Ankle | Open fracture : ankle | open fracture ankie bimalleolar trimalleolar plafond pilon | 48187004 | open fracture of ankle (disorder) | | 0 0 | i i |
| 1212191000 1212193000 | 21 2 21 2 | 91 | Fracture / dislocation | Open fracture Open fracture Open fracture Open fracture Open fracture Elidocation | Acabas Colomonos Tos Tos Coreci que Corect que Coreci que Corect q | Open fracture : calcaneum Onen fracture : foot | upon hector work Translator translator glander prince gen hector work to Security and Security a | 24948002 367527001 | open fracture of calcaneum (disorder) | | 0 0 | 1 1 |
| 1212197000 | 21 2 | 97 | Fracture / dislocation | Open fracture | Toe | Open fracture : toe | open fracture toe foot | 74395007 | open fracture of phalanx of foot (disorder) | | 0 0 | 1 1 |
| 1212197000 1213111000 1213112000 1213113000 | 21 3 | 1 11 | Fracture / dislocation | Dislocation Dislocation | Cervical spine Thoracic spine | Dislocation : cervical spine Dislocation : thoracic spine | dislocation cervical spine dislocation thoracic spine | 74395007 44254009 129165008 129166009 | traumatic dialocation of joint of cervical vertebra (disorder) traumatic dialocation of joint of thoracic vertebra (disorder) | . 0 | 0 0 | 1 1 |
| 1213113000 1213121000 | 21 3 | 1 13 | Fracture / dislocation | Dislocation | Lumbar spine | Dislocation : lumbar spine | dislocation lumbar spine | 129166009 125615005 | traumatic dislocation of joint of lumbar vertebra (disorder) | | 0 0 | 1 1 |
| 1213123000 | 21 3 | 1 21 | Fracture / dislocation | Dislocation | Elbow joint | Dislocation : shoulder joint Dislocation : elbow joint | dislocation shoulder joint dislocation elbow joint monteggia | 417558002 | dislocation of elbow joint (disorder) | | 0 0 | 1 1 |
| 1213123000 1213131000 1213133000 1213141000 | 21 3 21 3 21 3 21 3 | 31 | Fracture / dislocation | Dislocation | Wrist | Dislocation : wrist | dislocation wrist galeszal | 417558002 824071000000105 281503004 125620005 | traumatic dislocation of intercarpal joint (disorder) | | 0 0 | 1 1 |
| 1213133000 1213141000 | 21 3 | 1 33 | Fracture / dislocation | Dislocation Dislocation | Hand Thumb | Dislocation : hand Dislocation : thumb | dislocation hand dislocation of thumb rolando bennett | 281503004 125620005 | dislocation of carpometacarpal joint (disorder) traumatic dislocation of joint of thumb (disorder) | 1 0 | 0 0 | 1 1 |
| 1213144000 1213151000 | 21 3 | 44 | Fracture / dislocation | Dislocation | Finger | Dislocation : finger | dislocation of finger | 125619004 314201008 | traumatic dislocation of joint of finger (disorder) | | 0 0 | 1 1 |
| 1213152000 | 21 3 | 1 52 | Fracture / dislocation | Dislocation | Hip (natural joint) | Dislocation: hip (prostness: joint) Dislocation: hip (natural joint) | dislocation hip natural joint | 125621009 | traumatic dislocation of hip joint (disorder) | | 0 0 | 1 1 |
| 1213155000 | 21 3 | 55 | Fracture / dislocation | Dislocation | Hip (natural joint) Knee joint Putellu Ankle joint | Dislocation : knee joint | dislocation knee joint | 58320001 | traumatic dislocation of knee joint (disorder) | | 0 0 | 1 1 |
| 1213152000 1213152000 1213152000 1213157000 1213161000 1213165000 1213171000 | 21 3 21 3 21 3 21 3 21 3 21 3 | 1 61 | Fracture / dislocation | Dislocation Dislocation Dislocation Dislocation Dislocation Dislocation Dislocation Dislocation | Ankle joint | Cisioscolice: hip (proutheric pint) Cisioscolice: hip (printm) pint) Cisioscolice: hip (pintm) pint) Cisioscolice: hip (pintm) Cisioscolice: paralla Cisioscolice: analla pint Cisioscolice: resolice Cisioscolice: feot Cisioscolice: feot Cisioscolice: hip (pintm) | electrication protection; percentage (and electrication) percentage (and electrication) percentage (and electrication) percentage (allocations) perfect (allocations) perfect (allocations) percentage (allocations) percenta | 125621009 58120001 263029007 125622002 208986008 263030002 | traumatic delocation of ankle joint (disorder) | . 0 | 0 0 | 1 1 |
| 1213165000 | 21 3 | 65 | Fracture / dislocation | Dislocation | Foot | Dislocation : foot | dislocation tanometatansal joint lisfranc subtansal forefoot hind | 208986008 | dislocation or sublusation of foot (disorder) | | 0 0 | 1 1 |
| 1311111000 13111113000 | 31 1 | 1 11 | Trauma / FB | Head injury | Minor traumatic brain injury : no LDC | Minor traumatic brain injury (GCS more than 12) : no LOC | concussion syndrome concussive minor head injury concussion gcs LOC loss of consciousness traumatic brain injury | | traumatic brain injury with no loss of consciousness (disorder) | 1 1 | 0 0 | 1 1 |
| 13111113000 | 31 1 | 1 13 | Trauma / FB | Head Injury | Minor traumatic brain injury : LOC less than 30s | Minor traumatic brain injury (GCS more than 12) : LOC less than 30s | concussion syndrome concussive minor head injury concussion gcs LOC loss of consciousness traumatic brain injury | 127299008 127300000 40425004 262952002 | traumatic brain injury with brief loss of consciousness (disorder) | 1 | 0 0 | 1 1 |
| 1311115000 1311118000 1311121000 | 31 1 | 1 18 | Trauma / FB | Head injury | Post concussion syndrome | Post concussion syndrome (more than 1 day post incident) | concussion syndrome concussive minor head injury concussion gos LOC loss of consciousness traumatic brain injury | 40425004 | postconcussion syndrome (disorder) | | 0 0 | i i |
| 1311121000 | 31 1 | 1 21 | Trauma / FB | Head injury | Subdural hematoma Extractural hearmstorms | Subdural hernatoma Extradural heamatoma | subdural hernatoms sch major head injury trauma haemorrhage bleed brain autratural haematoma anishural auth major haad injury haad injury trauma haemorrhage bleed brain | 267949005 | traumatic intracranial subdural hematoma (disorder) | | 0 0 | 1 1 |
| 1311141000 | 31 1 | 1 41 | Trauma / FB | Head Injury | Traumatic subarachnoid haemonhage | Dislocation: size Minor transmit brain (s) jury (DCS more than 12) : no LOC Minor transmit brain (s) jury (DCS more than 12) LOC less than 30s Minor transmit brain (s) jury (DCS more than 12) : LOC less than 30s Minor transmit brain (s) jury (DCS more than 12) : LOC more than 30s Part concession syndrome (nore than 1 day post braiders) Solidural fractions (s) jury (DCS more than 1 day post braiders) Solidural fractions Sol | traumatic subarachnoid haemorrhage sah major head injury bleed brain | 262955000 | traumatic intracranial subarachnoid hemorrhage (disorder) | . 0 | 0 0 | 1 1 |
| 1311145000 1311151000 | 31 1 | 1 45 | Trauma / FB | Head injury Head injury | Traumatic intracerebral haemonthage Diffuse axonal injury | Traumatic intracerebral haemorrhage Diffuse axonal injury | head injury trauma intracerebral haemorrhage bleed brain diffuse brain axonal injury major head trauma haemorrhage bleed brain | 450418003 262693007 | traumatic intracerebral haemorrhage (disorder) diffuse brain injury (disorder) | 1 0 | 0 0 | 1 1 |
| 1311145000 1311151000 1311161000 1311181000 | 31 1 | 61 | Trauma / FB | Mend Splays Hand | Four Monte Transfell from 19 (pays) to LGC Monte Transfell from 19 (pays) LGC Monte Tr | Execution Searchises Transaction Stress of Searchises Continues of Javan Searchises Continues of Searchises Continues o | consistent updates accessed entire facility of conceiving p. LOC facility of conceivements between the layer conceivement performs accessed in the conceivement of the | 450418003 26,2693007 34663006 314661000 | contusion of brain (disorder) | | 0 0 | 1 1 |
| 1311181000 1311185000 1312111000 | 31 1 | 1 81 | Trauma / FB | Head injury Head injury | Moderate traumatic brain injury (GCS less than 13) Severe traumatic brain injury (GCS less than 9) | Moderate traumatic brain injury (GCS less than 13) Severe traumatic brain injury (GCS less than 9) | concussion syndrome concussive minor moderate severe head injury concussion gos LOC loss of consciousness traumatic brain injury concussion syndrome concussive minor moderate severe head injury concussion and LOC loss of consciousness traumatic brain injury | 314662007 42744004 | moderate head injury (disorder) major head injury (disorder) | . 0 | 0 0 | 1 1 |
| 1312111000 | 31 2 | 1 11 | Trauma / FB | Dental injury | Simple tooth fracture | Fracture of tooth (simple) | consistent upon prime an extra extra resolution access to a series based pipsy consistent gas 10.C too of consistences travaries to the light year is seller to the later of the series and a series of the later of | 42744004 | broken tooth without complication (disorder) | . 0 | 0 0 | 1 1 |
| 1312121000 1312131000 1312141000 1313111000 1313121000 | 31 2 31 2 | 1 21 | Trauma / FB | Dental injury Dental injury | Complicated tooth fracture Loose tooth | Fracture of tooth (complex) Loase tooth / teeth | complicated tooth fracture luxation of tooth loose teeth ligament | 58411009 109678002 109677008 125588009 262917009 50077003 238645004 78011002 127315004 42498002 42458003 | broken tooth with complication (disorder) extrusive luxation of tooth (disorder) | 1 0 | 0 0 | 1 1 |
| 1312141000 | 31 2 | 41 | Trauma / FB | Dental injury | Tooth removed from socket | Tooth/ teeth removed from socket | avulsion of tooth teeth removed out | 109671008 | complete avulsion of tooth (disorder) | | 0 0 | 1 1 |
| 1313121000 | 31 3 | 1 21 | Trauma / FB | Neck injury | Vascular injury | Vascular Injury | neck injury waxulur injury neck injury waxulur injury | 262937009 | injury or saryinx (ossoroar) injury to blood vessel of neck (disorder) | | 0 0 | 1 1 |
| 1314111000 1314121000 | 31 4 | 1 11 | Trauma / FB | Thoracic injury | Traumatic preumothorax | Traumatic presumothorax | thoracic injury traumatic pneumothorax | 90070003 | traumatic pneumothorax (disorder) | | 0 0 | 1 1 |
| 1314122000 | 31 4 | 1 22 | Trauma / FB | Thoracic injury | Flail chest | Flail chest | thoracic injury flall chest | 78011002 | fluil chest (disorder) | | 0 0 | 1 1 |
| 1314122000 1314123000 1314131000 1314132000 | 31 4 | 1 23 | Trauma / FB | Thoracic injury Thoracic injury | Open chest wound | Open chest wound | thoracic injury open chest wound | 127315004 | sucking chest wound (disorder) | | 0 0 | 1 1 |
| 1314132000 | 31 4 | 1 32 | Trauma / FB | Thoracic injury | Massive haemothorax | Massive haemothorax | thoracic injury massive haemothorax | 42458003 | traumatic hemothorax (disorder) | | 0 0 | i i |
| 1314171000 1314181000 | 31 4 | 71 | Trauma / FB | Thoracic injury Thoracic injury | Lung contusion | Lung contusion | lung contusion flall | 42458033 262784001 86175033 59568004 125625000 23589004 39400004 125626004 61823004 | contusion of lung (disorder) | . 0 | 0 0 | 1 1 |
| 1314182000 1315111000 1315121000 1315122000 | 31 4 | 1 82 | Trauma / FB | Thoracic injury | Injury of thoracic aorta | Injury of thoracic sorts | aorta dissection rupture tear | 59568004 | injury of thoracic acrts (disorder) | | 0 0 | 1 1 |
| 1315111000 | 31 5 | 1 11 | Trauma / FB | Abdominal injury Abdominal injury | Injury of solven | Injury of solven | bowel intestine perforation | 125625000 | injury of intestine (disorder) | | 0 0 | 1 1 |
| 1315122000 | 31 5 | 1 22 | Trauma / FB | Abdominal injury | Injury of liver | Injury of liver | liver hepatic segment lobe | 39400004 | injury of liver (disorder) | . 0 | 0 0 | 1 1 |
| 1315131000 1315135000 | 31 5 | 1 31 | Trauma / FB | Abdominal injury Abdominal injury | Injury of Nourick central Injury of Nourick central Injury of Nourick central Injury of Nourick central Injury of Nourick Injury of Inju | Injury of stomach Injury of pancress | injury stornach injury pancreas | 125626004 61823004 | injury of stomach (disorder) injury of pancreas (disorder) | 1 0 | 0 0 | 1 1 |
| 1315141000 1315151000 1315161000 1315171000 1316111000 | 31 5 | 41 | Trauma / FB | Abdominal Injury | Injury of abdominal aorta | rejor of paramena lingua of desiraminal content largor of desiraminal content largor of desiraminal content largor of the desiraminal largor of the des | Injury abdominal acrts | 10392004 40095003 77165001 426997005 210305005 | injury of abdominal aorta (disorder) | | 0 0 | 1 1 |
| 1315161000 | 31 5 | 1 61 | Trauma / FB | Abdominal injury Abdominal injury | Injury of kladder | Injury of bladder | injury of bladder | 77165001 | injury of klanky (disorder) | . 0 | 0 0 | 1 1 |
| 1315171000 | 31 5 | 71 | Trauma / FB | Abdominal injury | Abdominal trauma in pregnancy | Abdominal trauma in pregnancy | abdominal trauma pregnancy gravid pregnant | 426997005 | traumatic injury during pregnancy (disorder) | | 0 0 | 1 1 |
| 1316113000 1316115000 | 31 6 | 1 13 | Trauma / FB | Amputation / partial amputation | Nose | Amputation / partial amputation : nose | amputation nose | 722704008 813131000000104 210649003 210649003 210642007 95856002 | traumatic amputation of nose (disorder) | | 0 0 | 1 1 |
| 1316115000 | 31 6 | 1 15 | Trauma / FB | Amputation / partial amputation Amoustation / partial amoustation | Tongue Shoulder | Amputation / partial amputation : tongue Amputation / partial amputation : shoulder | amputation tongue | 813131000000104 210649003 | traumatic amputation of tongue (disorder) | | 0 0 | 1 1 |
| 1316131000 1316133000 1316135000 1316137000 | 31 6 | 1 33 | Trauma / FB | Amputation / partial amputation | Upper arm | Amputation / partial amputation : upper arm | amputation upper arm limb | 210650003 | traumatic amputation, above elbow (disorder) | . 0 | 0 0 | 1 1 |
| 1316135000 | 31 6 | 1 15 | Trauma / FB Trauma / FB | Amputation / partial amputation Amputation / partial amputation | Forearm Hand | Amputation / partial amputation : forearm Amputation / partial amputation : hand | amputation forearm limb amputation hand limb | 210642007 95856002 | traumatic amputation, below elbow (disorder) traumatic amputation of hand (disorder) | 1 0 | 0 0 | 1 1 |
| 1316139000 1316141000 | 31 6 | 1 39 | Trauma / FB | Amputation / partial amputation | Thumb | Amputation / partial amputation : thumb | amputation thumb limb | 210611002 95855003 | traumatic amputation of thumb (disorder) | | 0 0 | 1 1 |
| 1316151000 | 31 6 | 1 51 | Trauma / FB | Amputation / partial amputation | Genital | Amputation / partial amputation : ninger Amputation / partial amputation : genital | amputation oight iniger ring middle index amputation genital | 211548006 | traumatic amputation or ringer (orional) traumatic amputation of external genital organs (disorder) | . 0 | 0 0 | 1 1 |
| 1316151000 1316161000 1316163000 1316167000 | 31 6 | 61 | Trauma / FB | Amputation / partial amputation | House of traditions of traditi | Amputation / partial amputation : hip Amountation / partial amountation : farmer | empotation greation reg insurance and empotation greation bear the extremely bindiguarter empotation bearer than extremely bindiguarter empotation format like an empotation pertial e | 211548006 210762009 824081000000104 812431000000103 95829009 | traumatic amputation, through hip (disorder) | | 0 0 | 1 1 |
| 1316165000 | 31 6 | 65 | Trauma / FB | Amputation / partial amputation | Tible / fibule | Amputation / partial amputation : tibla/ fibula | amputation partial amputation tibia fibula limb | 812431000000103 | traumatic amputation below knee (disorder) | | 0 0 | 1 1 |
| 1316167000 1316169000 | a1 6 | 1 67 | Trauma / FB | Amputation / partial amputation Amputation / partial amputation | Toe | Amputation / partial amputation : foot Amputation / partial amputation : toe | amputation root amputation partial amputation toe | 95858000 95858000 | traumatic amputation or foot (disorder) traumatic amputation of toe (disorder) | . 0 | 0 0 | 1 1 |
| 1317111000 | 31 7 | 1 11 | Trauma / FB | Foreign body | In / under skin | Foreign body: in / under skin | open wound fo | 213282006 | foreign body left in wound (disorder) | | 0 0 | 1 i |
| 1317115000 | 31 7 | 1 15 | Trauma / FB | Foreign body | Nose | Foreign body: nose | nose foreign body nasal fb | 74699008 | foreign body in nose (disorder) | | | 1 1 |
| 1316169000 1317111000 1317113000 1317113000 1317121000 1317121000 | 31 7 | 1 21 | Trauma / FB Trauma / FB | Foreign body Foreign body | Respiratory tract Alimentary tract | Foreign body: respiratory tract Foreign body: alimentary tract | respiratory foreign body inhaled lung bronchus tracheu fb foneign body direntive tract swallowed at tract fb alimentary | 95858001 211282006 75441006 74699008 262599001 33334006 | foreign body in respiratory tract (disorder) foreign body in directive tract (disorder) | | 0 0 | 1 1 |
| 1317141000 1317142000 1317142000 | 31 7 | 1 41 | Trauma / FB | Foreign body | Vulva/ vagina Penis | Foreign body: vulva / vagina | foreign body female genitalia vagina vulva fb | 34124000 | foreign body in vagina (disorder) | | | 0 1 |
| 1317142000 1317151000 | 31 7 | 1 42 | Trauma / FB | Foreign body Foreign body | Penis Recham | Foreign body : penis Foreign body : rectum | foreign body male genitalia penis fb foreign body rectum fb | 73830004 70176014 | foreign body in penis (disorder) foreign body in rectum (disorder) | . 0 | 0 0 | 1 1 |
| 1317171000 | 31 7 | 71 | Trauma / FB | Foreign body | Ring too tight on digit / extremity | Ring too tight on digit / extremity | ring tight on finger thumb toe digit penis | 248405004 | ring tight on fingers (finding) | | 0 0 | 1 1 |
| 1317151000 1317171000 1318111000 1318141000 | 31 B | 1 11 | Trauma / FB Trauma / FB | complication of injury Complication of injury | injury or blood vessel Injury of nerve | complication of soft tissue injury : vascular Complication of soft tissue injury : neurological | complication injury vascular vessel artery vein complication injury neurological nerve neuraprasia asonotmesis neurotmesis | 31334006 34124000 73830004 70176004 248405004 57662003 57382000 90584004 240037007 | injury or oxoco vessel (disorder) nerve injury (disorder) | . 0 | 0 0 | 1 1 |
| 1318142000 1318151000 | 31 8 | 1 42 | Trauma / FB | Complication of Injury | Spinal cord injury | Spinal cord injury | spinal cord injury cervical thoracic lumbar paralysis | 90584004 | spinal cord injury (disorder) | | 0 0 | 1 1 |
| 1318161000 | 31 8 | - 51 1 61 | Trauma / FB | Complication of injury | Person Registant right on digit / entermity higher of blood treast higher of blood Comparison of pictor Annual Commany syndrome (ACL) Myocomid and demotion (STEM) Blood of the STEM (STEM) Register of the STEM (STEM) Register of the STEM (STEM) | Amputation further demonstration than the Amputation of Amputation further demonstration of Amputation further demonstration for the Amputation further demonstration further demonstration for the Amputation further demonstration further demonstration for the Amputation further demonstration further demonstration for the Amputation further demonstration of the Amputation further demonstration furth | emporation four designations and emporation for the final whole emporation four designations for the emporation four emporations for the emporation four emporations for the emporation of | 240131006 | spen belander of January (January) gene belander of January (Janu | | | 1 1 |
| 1318161000 1318171000 1411111000 1411112000 1411113000 | 31 B | 1 71 | Trauma / FB Medical | Complication of injury Cardiac | Compartment syndrome Acute coronary syndrome (ACS) | Complication of soft tissue injury: compartment syndrome Acute coronary syndrome (ACS) | complication injury rhabdomyolysis compartment syndrome plaster popileg pain calf aneins chest pain heart attack ami myocardial infanction costochondritis ACS acute coronary syndrome | 240131006 111245009 394659003 401303003 401314000 | muscle crush syndrome (disorder) acute coronary syndrome (disorder) | 1 0 | 0 0 | 1 1 |
| 1411112000 | 41 1 | 1 12 | Medical | Carolac | Myocardial infarction (STEMI) | Myocardial infarction (STEMI) | angina chest pain heart attack ami myocardial infarction costochondritis ACS acute coronary syndrome | 401303003 | acute ST segment elevation myocardial infarction (disorder) | | | 1 1 |
| 1411113000 1411118000 | 41 1 | 1 13 | Medical Medical | Cardiac | Myocarosa innarction (NSTEMI) Angina - unstable | neyocarosa imarction (NSTEMI) Angina (unstable) | angina criest pain neart attack am myocardial infarction contochondritis ACS acute coronary syndrome angina chest pain heart attack ami myocardial infarction contochondritis ACS acute coronary syndrome | 401314000 4557003 | acuse non-si segment elevation myocardial infarction (disorder) pre-infarction syndrome (disorder) | 0 | 0 0 | 1 1 |
| 1411118000 1411119000 | 41 1 | 1 19 | Medical Medical | Cardiac | Angina - stable | Angina (stable) | angina chest pain heart attack ami myocardial infarction costochondritis ACS acute coronary syndrome | 4557003 233819005 | stable angina (disorder) | 1 | 0 0 | 1 i |
| 1411121000 1411123000 1411127000 1411129000 | 41 1 | . 21 1 23 | Medical | Cardiac | Left-sided heart failure | Left ventricular failure | left ventricular failure lvf cardiac heart attack myocardial infarction | 85232009 | left heart fallure (disorder) | 1 | | 1 1 |
| 1411127000 1411129000 | 41 1 | 1 27 | Medical Medical | Cardiac Cardiac | Acute pulmonary oedema Cardiosenic shock | Acute pulmonary oederna Cardiosenic shock | pulmonary oedema edema angina chest pain heart attack ami myocardial infarction costochondritis cardiosenic shock chest pain ami myocardial infarction heart attack | 40541001 89138009 | acute pulmonary edema (disorder) cardiosenic shock (disorder) | 0 | 0 0 | 1 1 |
| 1411131000 1411131000 | 41 1 | 1 31 | Medical | Cardiac | Postural hypotension | Postural hypotension | postural hypotension faint vasovagal syncope | 28651003 | orthostatic hypotension (disorder) | , í | | i i |
| 1411133000 1411137000 | 41 1 | 1 33 | Medical Medical | Cardiac Cardiac | Vasovagal syncope Micturition syncope | Vasovagal syncope Mictarition syncope | collapse vasovagal faint syncope postural hypotension collapse vasovagal faint syncope | 398665005 234168901 | vasovagal syncope (disorder) micturition syncope (disorder) | 1 | 0 0 | 1 1 |
| 1411137000 1411151000 1411153000 1411155000 | 41 1 | 1 51 | Medical | Carolac | Mayon and reference (PETMA) Angers - sensible Congenies North Anger Angers - sensible Angers - sensibl | Mayer medin denotes (MTMA) Agen a localisation (Agen a localisation (Agen a localisation (Agen a localisation (Agen a localisation (Agent a localisation (| hypertension high blood pressure | 23.881.9005 42.941.007 85.22.009 407.41.001 807.11.002 28651.003 286655005 28641.68001 281.941.003 700955007 7027.2006 26.0009 | hypertensive disorder, systemic arterial (disorder) | i i | | i i |
| 1411153000 1411155000 | 41 1 | 1 53 | Medical Medical | Cardiac Cardiac | Pulmonary hypertension Malignant hypertension | Pulmonary hypertension Malignant hypertension | pulmonary hypertension malignant hypertension crisis accelerated blood pressure SP | 70995007 70272006 | pulomanary hypertension (disorder) malignant hypertension (disorder) | 0 | 0 0 | 1 1 |
| | 41 1 | 1 61 | Medical | Cardiac | Heart valve disorder | Heart valve disorder | acrtic rheumatic pulmonary tricuspid mitral | 368009 | heart valve disorder (disorder) | | 0 0 | 1 i |
| 1411182000 | 41 1 | . 81 | Medical | Cardiac | Pericanditis Pericandial effusion | Pericarditis Pericardial effusion | pericardial effusion pericarditis myocarditis | 171945007 | per names periodotry pericardial effusion (disorder) | | 0 0 | 1 1 |
| 1411183000 | 41 1 41 - | 83 | Medical Medical | Cardia: | Myocarditis Endocarditis | Myocarditis Enforceditis | myocarditis endocarditis pericarditis endocarditis mocroarditis marcarditis | 50920009 5681900** | myocarditis (disorder) | 0 | 0 0 | 1 1 |
| 1411181000 1411182000 1411181000 1411185000 1411180000 14111811000 | 41 1 | . 85 | Medical | Cardiac | Endocarditis Endocardity Arial fibrillation/ flutter | Myocaeditis Endocarditis Caediocryposthy Arial fibrillation / flutter | cardiomyopathy myocarditis | 50920009 56819008 85898001 49436004 | near valve stander gescenning perioration (planter) meter perioration (planter) meter proporation (planter) proporation (planter) proporation (planter) cardiomycoglish (planter) cardiomycoglish (planter) cardiomycoglish (planter) cardiomycoglish (planter) | | | 1 1 |
| 1411311000 | 41 1 | 1 11 | Medical Medical | Cardiac electrical | Atrial fürillation/flutter Suppresentitiv der technoserie | Atrial fibrillation / flutter Suprementricular technologies | af fibrillation flutter with unpresupplicular harbor series | 49436004 | atrial fibrillation (disorder) | 1 | 0 0 | 1 1 |
| 1411315000 1411319000 | 41 1 | 1 19 | Medical | Cardiac electrical | Multi-focal atrial tachycardia | Supraventricular tachycardia Multifocal atrial tachycardia | multifocal strial tachycardia strial fibrillation flutter | 49982000 | multifocal atrial tachycardia (disorder) | | | 1 1 |
| 1411331000 1411339000 | 41 1 | 1 31 1 30 | Medical Medical | Cardiac electrical Cardiac electrical | Ventricular tachycardia Ventricular extrasystole | Ventricular tachycardia Ventricular extrasystole | ventricular tachycardia ectopic estrasystole premature | 25569003 29717002 | ventricular tachycardia (disorder) premature beats (disorder) | 0 | 0 0 | 1 1 |
| 1411151000 1411151000 1411153000 | 41 1 | 1 51 | Medical | Administration systems of the control of the contro | Heart block - first degree | Heart block : first degree | heart block - first degree trifasicular atrioventricular | 6456007 46982000 25569003 29717002 270492004 54016002 | atrioventricular block first degree (disorder) | | | i i |
| 1411154000 | 41 1 | 1 51 1 54 | Franchisch (Absorbine) | Cardiac electrical Cardiac electrical | Ainsi fundiaruo/future Supreventicular tushqurata Mulli-bud ainsi tushqurata Vunticular ainsi tushqurata Vunticular ainsi tushqurata Vunticular ainsi quate Henri Buda-Henri ainsi quese Henri Buda-Henri ainsi quese Henri Buda-Henri diquere - Multita type i Henri Buda-Henri Quese - Multi | Notemberka invest contrigents Ventricular tastique and se Ventricular estimaçunda Notemberka estimaçunda Notemberka estimaçunda Notemberka estimaçunda Notemberka estimaçunda dingeres (Modela type I Newet Model : second dingeres (Modela type I Newet Model : second dingeres (Modela type I Newet Model : estimaçunda dingeres (Modela type II Newet Modela : estimaçunda dingeres (Modela type I | of fordistruction and experience of the composition | 28189009 | are in the filterino (Internet) supervisor of the Analyse of Internet supervisor of the Analyse of Internet supervisor of the Analyse of Internet supervisor than (Internet) supervisor to the Contract of Internet complex or to venetical internet complex or to venetical internet supervisor to venetical inte | 0 | 0 0 | 1 1 |
| 1411355000 1411357000 | 41 1 41 1 41 1 | 55 | Medical | Cardiac electrical Cardiac electrical Cardiac electrical | Heart block - third degree (complete) | Heart block : third degree (complete) | heart block - third degree complete strioventricular | 27885002 59118001 | complete atrioventricular block (disorder) | | 0 0 | 1 1 |
| | ** 1 | - 57 | THE STATE OF THE S | | region was have written where | | Application of the Control of the Co | STATES OF | -gramma and the state of the st | | | 1 |

| 1411358000 | 41 | 13 58 | Medical . | Cardiac electrical | Left bundle branch block | Left bundle branch block | left bundle branch block fasicle | 63467002 | left bundle branch block (disorder) | 0 0 | | | 1 1 |
|--|----------------------|--|--|---|--|---|---|-----------------------------------|---|--------------------------|------------------|-------------|-------------------------------|
| 1411161000 | 41 | 13 61 13 62 13 65 | Medical Medical Medical | Cardiac electrical Cardiac electrical Cardiac electrical | Bifasicular block Trifasicular block Conduction disorder / heart block | Bifusicular block Trifusicular block Conduction disorder / heart block | bifastoriar block ribbb lad right bundle fastick branch block left asis deviation Infalsociar block ribbb lad right bundle branch block fastick left asis deviation hasts conductor oldsorder | 74021003 | bifasicular block (disorder) trifasicular block (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1411162000 | 41 | 13 62 | Medical Medical | Cardiac electrical Cardiac electrical | Trifasicular block Conduction dispoder / heart block | Trifusicular block Conduction disorder / heart block | trifasicular block rbbb lad right bundle branch block fasicle left axis deviation heart conduction disperser. | 86014007 418341009 | trifasicular block (disorder) atrioventricular conduction disorder (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1411167000 | | 13 67 | Medical | | | | | 36083008 | sick sinus syndrome (disorder) | 0 1 | 0 | ō | i i |
| 1411169000 | 41 | 13 69 | Medical | Cardiac electrical | Bradycardia | Bradycardia | bradycardia | 48867003 | bradycardia (disorder) | 0 0 | 0 | | 1 1 |
| 1411373000 | 41 | 13 73 | Medical Medical | Cardiac electrical Cardiac electrical | Pre-excitation syndrome Brugada syndrome | Pre-excitation (WPW / LGL) Brugada syndrome | wolff parkinson white lown ganong levine pre-excitation kent accessory brugada syndrome mitochodria channelopathy | 195060002 418818005 | ventricular pre-excitation (disorder) Brugada syndrome (disorder) | 0 0 | 0 | | 1 1 |
| 1411375000 1411379000 | 41 | 13 75 | Medical Medical | Cardiac electrical Cardiac electrical | Long QT syndrome Arrhythmia : other | | long qt syndrome qtc arrhythmia thythm cardiac heart | 9651007 44808001 | long QT syndrome (disorder) conduction disorder of the heart (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1411179000 | 41 | 13 79 | Medical Medical | Cardiac electrical Cardiac electrical | Anthythmia : other Mechanical complication of cardiac electronic device Discharge of implantable cardiac defibrillator | Arrhythmia: other Mechanical complication of cardiac electronic device Discharge of impliantable cardiac defibrillator | arrhythmia rhythm cardiac heart complication electronic pacemaker implantable device cardiac icd ppm event recorder dacharge implantable cardiac detholistor icd | 44808001 271966006 | conduction disorder of the heart (disorder) disorder of cardiovascular prostheses and implants (disorder) | 1 0 | 0 | | 1 1 |
| 1411395000 | 41 | 13 95 | Medical Medical | Cardiac electrical | Discharge of implantable cardiac defibrillator | Discharge of implantable cardiac defibrillator | discharge implantable cardiac defibrillator icd | 271966006 431415002 | disorder of cardiovascular prostheses and implants (disorder) management of internal defibrillation (procedure) | 0 0 | 0 | ō | i i |
| 1411199000 1412111000 | 41 | 13 99 | Medical Medical | Cardiac electrical Gastroenterology | Cardiac arrest Gastro-cesophageal reflux | Cardiac arrest Gastro-oesophageal reflux | cardiac arrest heart matronanch send reflex arred | 410429000 235595009 | cardiac arrest (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1412112000 | 41 | 21 12 | Medical Medical | Gastroenterology | Gastrictis Gastrictuodenal ulcer | Gastritis Gastriduodenal uker | gastroesophageal reflux gord gastrits ulcer peptic | 4556007 | tan tans, arrivs, postovier y gastronesphagari erflux disease (disorder) gastritis (disorder) Peptic uter (disorder) Peptic uter (disorder) | 0 0 | 0 | | 1 1 |
| 1412115000 1412117000 | 41 | 21 15 | Medical Medical | Gastroenterology Gastroenterology | Gastroduodenal ulcer Constigation | Gastroduodenal ulcer Constituation | gastroduodenal peptic ulcer gastritis constituation | 13200003 14760008 | Peptic ulcer (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1412117000 | 41 | 21 17 | Medical Medical | Gastroenterology Gastroenterology | Constitution Complication of eastrostomy (PEG tube) | Constigution Complication of sastrostomy (PEG tube) | constitution sastrostomy stoma stroke one tube fall out fell | 14760008 309773000 | constipution (disorder) complication of gustrostomy (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1412121000 | 41 | 21 21 | Medical Medical Medical Medical | Gastroenterology | Upper gastrointestinal hernorrhage Lower gastrointestinal hernorrhage | Upper gastrointestinal hemorrhage Lower gastrointestinal hemorrhage | upper gastrointestinal hemorrhage haematemesis gi bleed lower gastrointestinal hemorrhage melaena gi bleed | 37372002 | upper gastrointestinal hemorrhage (disorder) | 0 1 | 0 | | 1 1 |
| 1412122000 1412141000 | 41 | 21 22 | Medical | Gastroenterology Gastroenterology | Lower gastrointestinal hemorrhage Oesophageal spasm | Lower gastrointestinal hemorrhage Gesophageal spasm | lower gastrointestinal hemorrhage melaena gi bleed oesophagus spasm | 87763006 79962008 | lower gastrointestinal hemorrhage (disorder) diffuse spasm of esophagus (disorder) | 0 1 | 0 | 0 | 1 1 |
| 1417142000 | 41 | 21 42 | Medical | Gastroenterology | Descohageal stricture | Oesophageal stricture | oesophagus stricture oesophageal legestion of coronive acid or caustic alkali bleach cleaning | 63305008 | stricture of exochanus (disorder) | 0 1 | | | iii |
| 1412144000 | 41 | | | Gastroenterology Gastroenterology | Desophageal stricture Ingestion of corrosive acid / alkali | Oesophageal stricture ingestion of corrosive acid / alkali | Ingestion of cornosive acid or caustic alkali bleach cleaning | 418409002 | stricture of ecophagus (disorder) Polsoning of undetermined intent by corrosive, acid or caustic alkali (disorder) | 1 0 | 0 | 0 | 1 1 |
| 1412147000 1412149000 | 41 | 21 47 | Medical Medical | Gastroenterology Gastroenterology | Oesophageal perforation Oesophageal varioes with bleeding | Oesophageal perforation Oesophageal various with bleeding | ostophagus perforation | 23387001 17709002 | perforation of exophagus (disorder) bleeding exophagus/varices (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1412161000 | 41 | 21 61 | Medical Medical | Gastroenterology Gastroenterology | Hepatith Chronic liver disease | Repatits Chronic liver disease | conspings for the with bleeding liver hospitals liver chronic liver disease hepatic chronic liver disease hepatic | 128241005 328383001 | inflammatory disease of liver (disorder) chronic liver disease (disorder) | 0 0 | 0 | | 1 1 |
| 1412163000 1412166000 | 41 | 21 63 | Medical | Gastroenterology Gastroenterology | Chronic Iver disease Ascites | Chronic liver disease Ascites | chronic liver disease hepatic ascites | 328383001 389026000 | chronic liver disease (disorder) ancites (disorder) | 0 0 | 0 | | 1 1 |
| 1412168000 | 41 | 21 68 | Medical Medical | Gastroenterploey | Hepatic failure or coma | Hegatic failure or coma | liver fallure hepatic fallure laundice encephalopathy | 59927004 | harvatir falkusa (rikorodar) | 0 0 | 0 | | 1 1 |
| 1412181000 1412185000 | 41 | 21 81 | Medical Medical | Gastroenterology Gastroenterology | Crohns disease Ulcerative colitis | Crohns disease Ulcerative colitis | crohns disease uz ulcerative colitis inflammatory bowel uz ulcerative colitis crohns disease inflammatory bowel | 34000006 64766004 | Crohn's disease (disorder) ulcerative colitis (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1412185000 | 41 | 21 85 | Medical Medical | Gastroenterology Gastroenterology | Ulcerative colitis Irritable bowel syndrome | Ulcerative colitis Irritable bowel syndrome | uc ulcerative colitis crohns disease inflammatory bowel inflable bowel | 64766004 10743008 | ulcerative colitis (disorder) Irritable bowel syndrome (disorder) | 0 0 | 0 | | 1 1 |
| 1413111000 | 41 | 11 11 | Medical | Neurology | Mirraine | Mirraine | headache migraine | 37796009 | migraine (discorder) | 0 1 | 0 | ō | i i |
| 1413112000 1413114000 | 41 | 11 12 | Medical Medical Medical | Neurology | Tension headache Ventriculoperitoneal shunt : complication | Tension headache Ventriculoperitoneal shunt : complication | headache tension ventricular peritoneal drain catheter complication | 398057008 371077002 | tension-type headache (disorder) ventriculoperitoneal shunt malfunction (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1413121000 | 41 | 11 21 | Medical | Neurology Neurology | Stroke | Stroke | stroke cva cerebrovascular accident tia transient ischaemic weakness | 210690007 | | 0 1 | 0 | | 1 1 |
| 1413122000 | 41 | 11 22 | | Neurology Neurology | Transient ischaemic attack | Transient ischaemic attack | transient ischemic attack tia stroke weakness | 266257000 | transient ischemic attack (disorder) | 0 1 | 0 | 0 | 1 1 |
| 1413123000 1413124000 | 41 | 11 23 | Medical Medical Medical | neurology Neurology | Subarachnoid haemorrhage Intracerebral haemorrhage | Subarachroid haemorrhage Intracerebral haemorrhage | subarachnoid sah stroke brain bleed headache cerebral haemorrhase bleed brain stroke headache | 21454007 274100004 | subarachnoid hemorrhage (disorder) cerebral hemorrhage (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1413131000 | 41 | 11 31 | Medical | Neurology Neurology | Status epilepticus | Status epilepticus | cerebral haemornhage bleed brain stroke headache status epilepticus fit tonic clonic grand mal seizure | 230456007 | status epilepticus (disorder) | 0 1 | ō | ō | 1 1 |
| 1413132000 | 41 | 11 32 | Medical Medical | Neurology Neurology | Epilepsy: generalised Epilepsy: absence | Epilepsy : generalised Epilepsy : absence | epilepsy status fit seture tonic clonic grand mal epilepticus epilepsy petit mal absence seture fit grand | 352818000 79631006 | tonic-clanic epilepsy (disorder) absence setzure (disorder) | 0 1 | 0 | 0 | 1 1 |
| 1413136000 | 41 | 11 36 | Medical Medical Medical Medical | Neurology | | | epilepsy focal partial local selzure fit grand mal petit status | 29753000 | focal seizure (disorder) | 0 1 | 0 | o o | i i |
| 1413139000 | 41 | 11 39 | Medical | Neurology Neurology | Pseudoseizure | Pseudoseizure | pseudo-fit pseudo seigure hysteria functional somatoform non epileptiform epileptic attack disorder status epilepticus | 191714002 | dissociative convulsions (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1413141000 1413142000 | 41 | 11 41 | Medical Medical Medical Medical | Neurology Neurology | Bell palsy Trigeminal neuralgia | Bell polity Trigeminal neuralgia | bell palsy stroke face weakness bells trigeminal neuralgia face facial pain | 193093009 31681005 | Bell's palsy (disorder) trigerninal neuralgia (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1413143000 | 41 | 11 43 | Medical | Neurology Neurology | Cranial nerve disorder | Cranial nerve palsy | isolated cranial nerve palsy disorder | 71011002 | cranial nerve disorder (disorder) | 0 0 | 0 | | 1 1 |
| 1413147000 1413149000 | 41 | 11 47 | Medical | Neurology | Carpal tunnel syndrome | Carpal tunnel syndrome | carpal tunnel median nerve | 57406009 | carpal tunnel syndrome (disorder) | 0 0 | 0 | | 1 1 |
| 1413151000 1413150000 | 41 | 11 49 | Medical Medical Medical | Neurology Neurology Neurology | Mensigis parasthetica Guillain-Barne syndrome | Guillain-Barre syndrome | gullan barre polyneuropathy | 85007004 40956001 230316009 | meragia parasmetica (oscorder) Guillain-Barré syndrome (disorder) | 0 0 | 0 | | 1 1 |
| 1413160000 | 41 | 11 60 | Medical | Neurology | Dystonic reaction | Meralgis parasthetica Guillain-Barre syndrome Dystonic reaction | lateral cutaneous nerve thigh menaliga parasthetica guillas barre polyecurposathy coologyer: crast deptinet reaction | 230316009 | meralgia parasthetica (discorder) Guillain-durris systems (discorder) drug-enduced acute dystonia (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1413161000 1413162000 | 41 | 11 61 11 62 | Medical | Neurology Neurology | Parkinson's disease Multiple scienasis | Parkinson's disease Multiple scienosis | parkinson disease tremor ms multiple science is octic atrophy | 32798002 24700007 | parkinsonium (disorder) multiple scienzala (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1413181000 1413199000 | 41 | 11 81 | Medical Medical | Neurology | Intracranial space occupying lesion Other nervous system disorder (see free test) | Intracranial space occupated lesion | brain turnour intracranial space occupying headache | 254935002 118940003 | intracranial tumor (disorder) disorder of nervous system (disorder) | 0 0 | 0 | | 1 1 |
| 1413199000 1414111000 | 41 | 11 99 | Medical | Neurology Respiratory | Other nervous system disorder (see free text) Authma | Other nervous system disorder (see free text) Asthma | neurological neuro asthma wheree COPO chronic obstructive pulmonary alneave pulmonary bronchiolitis allerny anachylasis | 118940003 195967001 | disorder of nervous system (disorder) asthma (disorder) | 0 0 | 0 | | 1 1 |
| 1414115000 | 41 | 11 15 | Medical Medical | Respiratory | Chronic obstructive pulmonary disease | Chronic obstructive pulmonary disease | cood chronic obstructive lung disease authma airways pink puffer blue bloater | 11645005 | chronic obstructive lung disease (disorder) | 0 1 | 0 | | 1 1 |
| 1414121000 1414131000 | 41 | 11 21 | Medical Medical | Respiratory Respiratory | Pulmonary embolism | Pulmonary embolism | pe pulmonary embolism dvt deep venous thrombosis | 59282003 | pulmonary embolism (disorder) | 0 1 | 0 | 0 | 1 1 |
| 1414131000 | 41 | 11 31 | Medical Medical | Respiratory Respiratory | Spontaneous pneumothorax Aspiration oneumonia | Spontaneous pneumothorax Assiration pneumonia | sportaneous pneumothorax pneumothorax asolration pneumonia | 80423007 422588002 | spontaneous pneumothorax (disorder) aspiration pneumonia (disorder) | 0 1 | | | 1 1 |
| 1414137000 | 41 | 11 37 | Medical | Respiratory | Pleural effusion | Pleural effusion | pleural effusion lung | 60046008 | pleural effusion (disorder) | 0 1 | 0 | | i i |
| 1414139000 | 41 | 11 39 | Medical Medical | Respiratory | Empyema Respiratory failure | Empyema Respiratory failure | empyema respiratory failure | 58554001 | empyema of pleura (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1414147000 1414149000 | 41 | 11 47 | | Respiratory Respiratory | Respiratory sarrest | Respiratory rasure Respiratory arrest | respiratory name respiratory arrest cardiac cardiorespiratory | 409622000 87317003 | respiratory failure (disorder) respiratory arrest (disorder) | 0 0 | 0 | | 1 1 |
| 1414175000 | 41 | 11 75 | Medical Medical Medical Medical | Respiratory Respiratory | Respiratory arrest Cystic fibrosis | Respiratory arrest Cystic fibrosis | respiratory arrest cardiac cardiorespiratory cystic fibrosis of haemophysic cough blood | 190905008 66857006 | cystic fibrosis (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1414189000 1415111000 | 41 | 11 89 | Medical Medical | Respiratory Haem / oncology | Haemophysis Anaemia | Haemophysis Anaemia | haemophysis cough blood anaemia pale | 66857006 271737000 | hemophysis (disorder) anemia (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1415113000 | 41 | 51 13 | Medical | Harm / openions | Ansemia , iron deficiency | Ansemia - Iron deficiency | anaemia into deficiento nale | 87522002 | (mn deficiency enemia (discoder) | 0 1 | 0 | | i i |
| 1415115000 | 41 | 51 15 | Medical Medical | Haem / oncology Haem / oncology | Idiopathic thrombocytopenic purpura Neutropenic sepsis | Idiopathic thrombocytopenic purpura Neutropenic sepsis | idiopathic thrombocytopenic purpura itp neutropenic sepsis chemotherapy septic shock | 32273002 443980004 | idiopathic thrombocytopenic purpura (disorder) neutropenic sepala (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1415122000 | 41 | 51 21 | Medical | Haem / oncology | Neutropenic sepsis Neutropenia | Neutropenia Neutropenia | neutropenia WCC white chemo sepsis septic | 165517008 | neutropenia (findine) | 0 0 | 0 | | 1 1 |
| 1415131000 | 41 | 51 31 | Medical Medical | Harm / openions | Harmophilia | Haemoohilia | has morbilla harmorbilla | 90935002 | neutropenia (finding) hemophilia (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1415135000 1415141000 | 41 | 51 35 | Medical Medical | Haem / oncology Haem / oncology | Bleeding / bruising tendency / coagulation defect Thrombourdoneria | Bleeding / bruising tendency / coagulation defect Thromborutownia | coagulation abnormality bleeding tendency thrombocytopenia platelet laurden low platelets | 64779008 302215000 | blood coagulation disorder (disorder) thrombocytopenic disorder (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1415151000 | 41 | 51 51 | Medical | | Sickle cell anaemia | Sickle cell anaemia | sickle cell disease sickline sickle cell crisis | 127040003 | | 0 0 | 0 | | 1 1 |
| 1415152000 | 41 | 51 52 | Medical | Haem / oncology | Sickle cell crisis | Sickle cell crisis | sickle cell disease sickling sickle cell crisis | 417425009 | hemoglobin SS disease with crisis (disorder) | 0 0 | 0 | | 1 1 |
| 1415155000 1415161000 | 41 | 51 51 | Medical Medical | Haem / oncology Haem / oncology | Thalassaemia Haemangioma / lymphangioma | Thalassaemia Haemangioma / lymphangioma | thalassaemia anaemia strawberry angiorna | 56975005 | thalassemia (disorder) strawberry nevus of skin (disorder) | 0 0 | 0 | | 1 1 |
| 1415181000 1415182000 | 41 | 51 B1 | Medical Medical | Haem / oncology Haem / oncology | Malignant tumour Myeloid leukaemia | Malignant tumour Myeloid leuksemia | malignant turnour carcinoma mesothelioma sarcoma basal cell cancer melanoma squamous merioid leukaemia AMLCML | 372087000 188732008 | malignant neoplastic disease (disorder) metoid leukemia (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1415182000 1415183000 | 41 | 51 82 | ! Medical ! Medical | Haem / oncology | Myeloid leukaemia Myeloid myeloma | Myeloid leuksemia Muhinle musimma | myeloid leuksemis AML CML myltinis myeloma | 188732008 | myeloid leukemia (disorder) multinia musikma (disorder) | 0 0 | 0 | | 1 1 |
| 1415184000 | 41 | 51 84 | Medical Medical Medical | Haem / oncology Haem / oncology | Multiple myeloma Lymphoid leuksemia | Multiple myeloma Lymphoid leuksemia | multiple myeloma lymphoid leukaemia | 188725004 | multiple myeloma (disorder) lymphoid leukemia (disorder) | 0 0 | 0 | ō | i i |
| 1415185000 1415186000 | 41 | 51 85 | Medical | Haem / oncology | Lymphoma Hodgkin's disease | Lymphoma Hodgkin's disease | lymphoma non-hodgkins lymphoma hodgkins | 118501006 118599009 | non-Hodgkin's lymphoma (disorder) Modekin's disease (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1415199000 | 41 | 51 99 | Medical | Haem / oncology Haem / oncology Endocrine / metabolic | Haematological condition not listed above Type 1 diabetes melitus | Haematological condition not listed above | haematological blood dyscrania haem heme myelodysplania leukaemia lymphoma | 414022008 | disorder of cellular component of blood (disorder) | 0 0 | 0 | | i i |
| 1416111000 1416115000 | 41 | 51 11 51 15 | Medical Medical Medical Medical | Endocrine / metabolic Endocrine / metabolic | Type 1 diabetes mellitus Diabetic ketoacidosis | Haematological condition not listed above Type I diabetes mellitus Diabetic ketoacidosis | hodgines disease kymphoma Inamensiological blood dyszasia haem heme myelodyspiasia leukasemia lymphoma das disheken type 1 das disheken type 1 | 46635009 420422005 | diabetes mellitus type 1 (disorder) ketoacidosis in diabetes mellitus (disorder) | 0 1 | 0 | 0 | 1 1 |
| 1416121000 | 41 | . 15 51 21 | Medical | Endocrine / metabolic | Type 2 diabetes melitus | Type 2 diabetes melitus | diabetes type 2 II | 44054006 | dishates multitus tune 7 (disnarder) | 0 1 | 0 | | 1 1 |
| 1416125000 | 41 | 51 25 | Medical Medical | Endocrine / metabolic Endocrine / metabolic | Type 2 diabetes melitus Hyperosmolar hyperglycaemic state (HRS) | Type 2 diabetes mellitus Hyperosmolar hyperglycaemic state (HHS) | diabeton type 2 II hank hihs hypenosmolar non ketolic | 310505005 | dlabetic hyperosmolar non-ketotic state (disorder) | 0 0 | 0 | | 1 1 |
| 1416131000 1416141000 | 41 | 51 31 51 41 | Medical Medical | Endocrine / metabolic Endocrine / metabolic | Hypoglycaemia without coma Hyperthyroidism / thyrotoxicosis | Hypoglycaemia without coma Hyperthyroidism / thyrotosicosis | hypoglycaemia hyperthyroidium hypotoxicosis Graves storm thyroid | 302866003 90739004 | hypoglycernia (disorder) thyrotoxicosis (disorder) | 0 1 | 0 | 0 | 1 1 |
| 1416143000 | 41 | 51 43 | Medical Medical | Endocrine / metabolic Endocrine / metabolic | Hypothyroidism / myxoedema Adrenocortical insufficiency (Addisonian crisis) | Hypothyroidkm / myosedema Adrenocortical insufficiency (Addisonian crisis) | hypothyroidilm mysoedema mysoedema coma hashimoto thyroid addisons crisis adrenal insufficiency adrenocortical | 40930008 | hypothyroidism (disorder) severe adrenal insufficiency (disorder) | 0 0 | 0 | | 1 1 |
| 1416151000 1416161000 | 41 | 51 51 51 61 | Medical Medical | Endocrine / metabolic Endocrine / metabolic | Adrenocortical insufficiency (Addisonian crisis) Syndrome of inappropriate anti-diaretic hormone secretion (SIADH) | Adrenocortical insufficiency (Addisonian crisis) Syndrome of inappropriate anti-diuretic hormone (SIADH) | additions crisis adrenal insufficiency adrenocortical worknown inaccordists anti-discretic hormone secretion sizeth | 24867002 55004003 | severe adrenal insufficiency (disorder) syndrome of inappropriate vasopressin secretion (disorder) | 0 0 | 0 | | 1 1 |
| 1416171000 | 41 | 51 71 | Medical Medical | | | | syndrome inappropriate anti-diuretic hormone secretion siadh potassium hyperkalaemia | | | 0 0 | 0 | ě | i i |
| 1416173000 | 41 | 51 73 | Medical Medical Medical | Endocrine / metabolic Endocrine / metabolic Endocrine / metabolic | Hypokalaemia Hypokalaemia Hypokalaemia Other endocrine disorder (see free text) | Hypokaleenia Hypokaleenia Other endocrine disorder (see free text) | putantian in grat industrials potantian in potalisamia hyperatikemia etaklum endocrine endocrinology | 43339004 66931009 362969004 | inger semina (sascium) hypokalemia (disorder) hypokalerasia (disorder) disorder of endocrine system (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1416179000 1416198000 | 41 | , 79 51 98 | Medical | Endocrine / metabolic | Other endocrine disorder (see free text) | Other endocrine disorder (see free text) | endocrine endocrinology | 362969004 | disorder of endocrine system (disorder) | 0 0 | 0 | 0 | 1 1 |
| | 41 | 51 99 | | | | | | | | 0 0 | 0 | 0 | 1 1 |
| 1417111000 1417113000 | 41 | 71 11 | Medical Medical | Skin and soft tissues Skin and soft tissues | Dermatitis : atopic / eczema Dermatitis : contact | Dermatitis : stopic / eczerna Dermatitis : contact | eczema dermatitis ned rash atopic atopy allergic allergy dermatitis contact dermatitis analy and path | 43116000 40775004 | eczema (disorder) | 0 0 | 0 | | 1 1 |
| 1417115000 | 41 | 71 15 | Medical Medical | Skin and soft tissues Skin and soft tissues | Dermatitis : contact Dermatitis : seborrhoeic | Dermatitis : contact Dermatitis : seborrhoeic | dermatitis contact dermatitis scaly red rash sebonheic dermatitis scaly | 50563003 | contact dermatitis (disorder) seborrheic dermatitis (disorder) | 0 0 | ô | ě | i i |
| 1417121000 | 41 | 71 21 | Medical Medical | Skin and soft tissues | Urticaria Rash : drug induced | Urbicaria Rash : drug induced | untinaria linhu allanetr allanet neartion ned resh | 126485001 89172006 | urticaria (disorder) urticaria medicamentosa (disorder) | 0 0 | 1 | 0 | 1 1 |
| 1417125000 1417131000 | 41 | 71 25 | Medical Medical Medical | Skin and soft tissues Skin and soft tissues Skin and soft tissues | Pagrimia | Psprissis | urticaria drug neaction allengy allengic red rash psociasis red scaly rash | 89322006 9014002 | urticaria medicamentosa (disorder) psoriasis (disorder) | 0 0 | 0 | | 1 1 |
| 1417141000 | 41 | 71 41 | Medical | Skin and soft tissues | Pityriasis rosea | Pityriasis rosea | | 77252004 | pityriasis rosea (disorder) | 0 0 | 0 | | 1 1 |
| 1417143000 1417145000 | 41 | 71 43 71 45 | Medical Medical | Skin and soft tissues Skin and soft tissues | Erythema multiforme Erythema nodonum | Erythema multiforme Erythema nodosum | erythema multiforme red rash erythema rodosum Till red rash lump | 36715001 32861005 | erythema multiforme (disorder) erythema nodosum (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1417151000 | 41 | 71 51 | Medical Medical Medical | Skin and soft tissues Skin and soft tissues | Sunbarin Heat rash | Sunbum Heat rash | sunburn red rash | 403194002 | erythema nodosum (disorder) solar erythema (disorder) | 1 0 | | | 1 1 |
| 1417152000 1417161000 | 41 | 71 52 | Medical Medical | Skin and soft tissues Skin and soft tissues | Seharanya post | Seharanya part | heat rash red rash | 72658003 419603000 | prickly heat (disorder) epidermoid cyst of skin (disorder) | 0 0 | 0 | | 1 1 |
| 1417162000 | 41 | 71 62 | Medical Medical Medical | Skin and soft tissues Skin and soft tissues | Sebactors cyst Ingrowing rail of finger or toe Bedsore / pressure sone | Seascous cynt Ingrowing nali of finger or toe Bedsore / pressure sore | sebaceoux cyst ingrowing bereali rad bedoore decembra utcer pressure sore | 400097005 399912005 | episermois cyst or son (pisoroer) ingrowing rual (disorder) pressure sore (disorder) | 0 0 | 0 | ě | i i |
| 1417165000 1417171000 | 41 | 71 65 | Medical | Skin and soft tissues Skin and soft tissues | Bedsore / pressure sone Pyogenic granuloma | Bedsore / pressure sore Pyogenic grasuloma | bedsore decubitus uker pressure sore pyogenic granuloma | 399912005 200722003 | pressure sore (disorder) | 1 0 | 0 | 0 | 1 1 |
| 1418111000 | 41 | 71 11 11 | Medical Medical | Skin and soft tissues Renal | Pvelonephritis | Pyelonephritis | pyeloneshritis kidney infection | 45816000 | pyogenic granuloma (disorder) pyelonephritis (disorder) | | 0 | 0 | 1 1 |
| 1418115000 | 41 | 11 15 | Medical Medical | Renal | Hydronephrosis Acute Renal fallure | Hydronephrosis Acute renal failure | hydronephrosis arf acute renal failure | 43064006 | hydronephrosis (disorder) acute renal failure syndrome (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1418121000 1418125000 | 41 | 11 21 | Medical Medical | Recal | Acute Renal failure Chronic Renal failure | Acute renal failure Chronic renal failure | arf acute renal failure chronic renal failure | 14669001 90688005 | acute renal failure syndrome (disorder) chronic renal failure syndrome (disorder) | 0 0 | 0 | | 1 1 |
| 1418131000 | 41 | 11 31 | Medical | Renal Renal | Nephrotic syndrome | Nephrotic syndrome | nephrotic syndrome | 52254009 | nanhrotic syndrome (disorder) | 0 0 | ō | ō | 1 1 |
| | 41 | 11 55 | Medical Medical | Renal Renal | Glomerulorephritis Other renal system disorder (see free text) | Glomerulonephritis Other renal system disorder (see free text) | glomerulorusphritis kidney disvasse renal | 36171008 90708001 | giornerulonephritis (disorder) kidney disesse (disorder) | 0 0 | 0 | 0 | 1 1 |
| 1418155000 | | 99 91 11 | Medical | | | | harfever atopic | 367498001 | | 0 0 | 0 | | 1 1 |
| 1418155000 1418199000 1419111000 | 41 | 21 21 | Medical | Allergy Allergy | Americalisms | Anaphylasis | anaphylasis | 39579001 | anaphylaxis (disorder) | 0 0 | i | | 1 1 |
| 1419111000 1419121000 | 41 | | | | | | angioecema angiotensin converting enzyme inhibitor ace acei | 403607004 | angioecema due to angiotensin-converting-enzyme inhibitor (disorder) | 1 0 | | | 1 1 |
| 1419111000 1419121000 | 41 41 41 | 91 31 91 35 | Medical | Allergy | Angioneurotic oedema (C1 esterase inhibitor deficiency) | Angioneurotic gedema (C1 esterase inhibitor deficiency) | angioedema due to disorder of c1 exterase inhibitor | 402602000 | angioedema due to disorder of CI esterase inhibitor (disorder) | 0 0 | 0 | | 1 1 |
| 1419111000 1419121000 1419131000 1419135000 1419151000 | 41 41 41 41 | 91 31 91 35 91 51 | Medical Medical Medical | Allergy Allergy Allergy | ACTI related angioedema Angioneurotic oedema (C1 esterase inhibitor deficiency) Angioneurotic oedema | ACEI related angioedema Angioneurotic oedema (C1 esterase inhibitor deficiency) Angioneurotic oedema | argioedema angiotensin converting enzyme ixishibitor ace acei argiordema due to discretor ol CL esterase ixishibitor argiordema angioranectic odema | 402602000 41291007 | angioedema due to angiotennio-converting-enzyme inhibitor (disorder) angioedema due to disorder el C1 esterase inhibitor (disorder) angioedema (disorder) | 0 0 | 1 | 0 | 1 1 |
| 3419111000 3419121000 3419131000 3419135000 3419151000 3419171000 | | 91 31 91 35 91 51 91 71 | Medical Medical | Alergy Alergy Alergy | Angioneurotic cederna Scorebroid toxin (ND) | Angioneurotic oedema Scombroid toxin (ND) | angioedema angioneurotic oedema scombroid scombrotosin food fish shellfish poisoning | 41291007 83227006 | angioedema (disorder) scombroid fish poisoning (disorder) | 0 0 0 1 0 1 | 0 1 0 | 0 0 1 | 1 1 1 1 1 1 1 1 1 1 1 |
| 1419111000 1419121000 1419131000 1419135000 1419151000 | | 91 31 91 35 91 51 91 71 91 81 91 91 | Medical Medical | Allergy Allergy Allergy Allergy Allergy | | Angionaucotic cedema (C1 esterase inhibitor deficiency) Angionaucotic cedema Scombool tross (InC) Drug reaction Other allergic reaction (see free text) | antipedema antipneurotic pedema | 41291007 | angloederna (disorder) | 0 0 0 0 1 0 1 0 | 0 1 0 1 | 0 0 1 0 0 0 | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |

| ECDS_UniqueID | Sort 1 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|--------|------------|---------------------|-------------|-------------------------------------|-------|
| 2018110000 | n/a | n/a | Suspected diagnosis | 415684004 | Suspected (qualifier value) | |
| 2018210000 | n/a | n/a | Confirmed diagnosis | 410605003 | Confirmed present (qualifier value) | |

DATA GROUP: EMERGENCY CARE INVESTIGATIONS (SNOMED CT)

FUNCTION: To carry the details of SNOMED CT coded Clinical Investigations Group Status: R Group Repeats: 0..*

| a RouP | DATA ITEM NAME | DATA ITEM DEPRITION | STATUS (MRXO) | CQUINDATA DATA ITE ITEM REPEAT: REQUIRED (TIN) | M FORMAT | SNOWED CT / DMLD /CO | JUSTIFICATION | ECOS CODE SET | LINK TO CURRENT COS Type 619 NEORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|--------------------------|--|--|------------------|---|-------------------|----------------------|---|---------------|---|--|--|----------------------|---|
| | | | | | | | | | | POPULATION VALIDATION F - Format is validated V - Validated against an explicit lie of permitted values as defined in the NHS Data Districtary | | | |
| narrosa midisalos | neesses of one careful services power of | As a manigement gradient and while the present is under the second of the Energy (see the bidge | M | N L1 | Min nó mas ett il | SHOMES CT | As per CRL 2 Type CRL Associated to the common to CRC CRL Associated to the common to CRC CRL CRC CRC CRC CRC CRC CRC CRC CRC CRC CR | and and and | tem fingue destinations extraction and consistent and membranism and temporal temporalism. And the analysis areas. | | The region of the control of the con | | |
| ENCY CARE INVESTIGATIONS | PROCEDURE DATE (EMERGENCY CARE CLINICAL INVESTIGATION) | The date on which investigations were performed while the person was under the care of the Emergency Care facility | lity. R | N 0.1 | ansoccyy-MM-GG | OMBO | | n/a | n/a | F | n/a | NEW A&E data item | This data item should be recorded when an investigation |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | | CDS_Code mapping used | PbR_Category | CDS_Investigation mapping that is used for HRG Grouping |
|--------------------------|----------|-------|-----------------------------|--|------------------------|--|--------------|-----------------------|--------------|--|
| | | | | | | | | for HRG Grouping | | |
| 1171110000 | | | Radiology | X-ray plain film | 168537006 179929004 | Plain radiography (procedure) | | 01 01 | 2 | X-ray plain film |
| 1171610000 | 71 | | Radiology | Image intensifier | | Examination of joint under image intensifier (pro | | D1 10 | 2 | X-ray plain film |
| 1171210000 | 71 | | Radiology | Ultrasound | 16310003 | Diagnostic ultrasonography (procedure) | | 10 10 | 3 | Ultrasound |
| 1171250000 1171510000 | 71 | | Radiology | Echocardiography | 40701008 113091000 | Echocardiography (procedure) | | 10 | 3 | Ultrasound |
| 1171510000 | 71 71 | | Radiology | Magnetic Resonance Imaging | 77477000 | Magnetic resonance imaging (procedure) | | 12 | 3 | Magnetic Resonance Imaging |
| 11/1410000 | 41 | | Radiology | Computerised Tomography Clotting studies | 3116009 | Computerized axial tomography (procedure) Blood coagulation panel (procedure) | | 14 | 2 | Computerised Tomography (excludes genitourinary contrast examination / tomography) Clotting studies |
| 1121810000 | 21 | | Haematology Biochemistry | Immunology | 252375001 | Immunology profile (procedure) | | 15 | 2 | Immunology |
| 1121250000 | 21 | | Biochemistry | Cardiac enzymes | 74500006 | Cardiac enzymes/isoenzymes measurement (pro | | 16 | 2 | Cardiac enzymes |
| 1111550000 | 11 | | Bedside | Arterial / capillary blood gas | 60170009 | Analysis of arterial blood gases and pH (procedu | | 17 | 1 | Arterial / capillary blood gas |
| 1111510000 | 11 | | Bedside | Venous blood gas | 61911006 | Blood gases, venous measurement (procedure) | | 17 | 1 | Arterial / capillary blood gas |
| 1111510000 | 11 | | Bedside | Lactate | 270982000 | Serum lactate measurement (procedure) | | 17 | 1 | Arterial / Capillary blood gas |
| 1121310000 | 21 | | Biochemistry | Toxicology | 269874008 | Serum paracetamol measurement (procedure) | | 18 | 2 | Toxicology |
| 1151310000 | 51 | | Microbiology | Blood culture | 30088009 | Blood culture (procedure) | | 19 | 2 | Blood culture |
| 1111210000 | 11 | | Bedside | Electrocardiogram | 29303009 | Electrocardiographic procedure (procedure) | | 02 | 1 | Electrocardiogram |
| 1121910000 | 21 | | Biochemistry | Serology | 68793005 | Serologic test (procedure) | | 20 | 2 | Serology |
| 1121390000 | 21 | | Biochemistry | Pregnancy test | 67900009 | Human chorionic gonadotropin measurement (p | | 21 | 1 | Pregnancy test |
| 1161810000 | 61 | | Eyes / dental | Dental investigation | 53115007 | Diagnostic dental procedure (procedure) | | 22 | 2 | Dental investigation |
| 1161210000 | 61 | | Eyes / dental | Refraction, orthoptic tests and computerised visual fields | 86944008 | Visual field study (procedure) | | 23 | 2 | Refraction, orthoptic tests and computerised visual fields |
| 1161610000 | 61 | | Eyes / dental | Ocular coherence tomography | 392010000 | Optical coherence tomography (procedure) | | 23 | 2 | Refraction, orthoptic tests and computerised visual fields |
| 1161510000 | 61 | | Eyes / dental | Intra-ocular fluid sampling | 363255004 | Paracentesis of eye (procedure) | | 23 | 2 | Refraction, orthoptic tests and computerised visual fields |
| 1161710000 | 61 | | | | 282096008 | Retinal photography (procedure) | | 23 | 2 | Refraction, orthoptic tests and computerised visual fields |
| 1161150000 | 61 | | Eyes / dental | Tonometry | 164729009 | Tonometry (procedure) | : | 23 | 2 | Refraction, orthoptic tests and computerised visual fields |
| 1161110000 | 61 | | | Visual acuity testing | 16830007 | Visual acuity testing (procedure) | | 23 | 2 | Refraction, orthoptic tests and computerised visual fields |
| 1141110000 | 41 | | Haematology | Haematology | 26604007 | Complete blood count (procedure) | (| 03 | 2 | Haematology |
| 1141510000 | 41 | | Haematology | D-dimer | 70648006 | D-dimer assay (procedure) | | 03 | 2 | Haematology |
| 1141810000 | 41 | 81 | Haematology | Erythrocyte sedimentation rate (ESR) | 416838001 | Erythrocyte sedimentation rate measurement (p | orocedure) (| 03 | 2 | Haematology |
| 1141910000 | 41 | 91 | Haematology | Thromboelastography | 56027003 | Thromboelastography (procedure) | (| 03 | 2 | Haematology |
| 1141410000 | 41 | 41 | Haematology | Cross match blood / group and save serum for later cross match | 252316009 | Group and save (procedure) | (| 04 | 2 | Cross match blood / group and save serum for later cross match |
| 1121110000 | 21 | 11 | Biochemistry | Biochemistry | 252167001 | Urea and electrolytes (procedure) | (| 05 | 1 | Biochemistry |
| 1121150000 | 21 | 15 | Biochemistry | Amylase | 89659001 | Amylase measurement, serum (procedure) | (| 05 | 1 | Biochemistry |
| 1121290000 | 21 | 29 | Biochemistry | Bone profile | 167036008 | Bone profile (procedure) | (| 05 | 1 | Biochemistry |
| 1121510000 | 21 | 51 | Biochemistry | C reactive protein (CRP) | 55235003 | C-reactive protein measurement (procedure) | (| 05 | 1 | Biochemistry |
| 1121550000 | 21 | 55 | Biochemistry | Creatine kinase | 397798009 | Creatine kinase measurement (procedure) | (| 05 | 1 | Biochemistry |
| 1111310000 | 11 | 31 | Bedside | Glucose | 104686004 | Glucose measurement, blood, test strip (procedu | ure) (| 05 | 1 | Biochemistry |
| 1121450000 | 21 | 45 | Biochemistry | Glycosolated haemoglobin (HbA1c) | 43396009 | Hemoglobin A1c measurement (procedure) | (| 05 | 1 | Biochemistry |
| 1121130000 | 21 | 13 | Biochemistry | Liver function tests (LFTs) | 26958001 | Hepatic function panel (procedure) | (| 05 | 1 | Biochemistry |
| 1121410000 | 21 | 41 | Biochemistry | Lipid profile | 16254007 | Lipid panel (procedure) | | 05 | 1 | Biochemistry |
| 1121160000 | 21 | 16 | Biochemistry | Lipase | 271232007 | Serum lipase measurement (procedure) | | 05 | 1 | Biochemistry |
| 1121610000 | 21 | | Biochemistry | Thyroid function tests | 35650009 | Thyroid panel (procedure) | | 05 | 1 | Biochemistry |
| 1121210000 | | | Biochemistry | • | 105000003 | Troponin measurement (procedure) | | 05 | 1 | Biochemistry |
| 1121830000 | 21 | | Biochemistry | Mast cell tryptase | 62847008 | Tryptase release from mast cell measurement (p | | 05 | 1 | Biochemistry |
| 1111110000 | | | Bedside | Urinalysis | 27171005 | Urinalysis (procedure) | | 06 | 1 | Urinalysis |
| 1151110000 | 51 | | Microbiology | Bacteriology | 168338000 | Urine sent for culture (situation) | | 07 | 2 | Bacteriology |
| 1151210000 | 51 | | Microbiology | Swab for culture and sensitivities | 401294003 | Wound microscopy, culture and sensitivities (pro | | 07 | 2 | Bacteriology |
| 1111710000 | 11 | | Bedside | Dementia screening test | 165320004 | Dementia test (procedure) | | 99 | 1 | Other |
| 1111410000 | 11 | 41 | Bedside | Peak expiratory flow | 29893006 | Peak expiratory flow measurement (procedure) | 9 | 99 | 1 | Other |

DATA GROUP: EMERGENCY CARE TREATMENTS (SNOMED CT)

FUNCTION: To carry the details of SNOMED CT coded Procedures. Group Status: R Group Repeats: 0..*

| MATA GROUP | AN ATTERMENT | | DATA ITEM STATUS (MRIO) | COUNDATA DATA ITEM REPE. REGURED (YM) | ATS | | SNOWED CT / DMED /COS | | ECOS COCE SET | NFORMATION ONLY | F-Forman is validated Y-Validated against an explicit list of permitted values as defined in the NHS Oats Dictionary | FORT SCHOOL VALUATION | BATA ITEM PROVENANCE | Norra |
|---------------------------|---|---|-------------------------------|---|-----|---------------|-----------------------|--|--------------------|--|---|--|----------------------|---|
| MANUSCI COST TRANSPORTS | Manuschi Cross Account (Industrial Cris | The sequence gardened with the person is under the case of the Company Cam South | M | N 15 | | | swews cr | Appr 156.4 Type 604. Amendment to be software of 60,00450 CC. | seat to anothe set | Commission and American Commission and American Commission and Com | | And are a first to win with consequence and our winter the approach and consequence and conseq | | |
| EMERGENCY CARE TREATMENTS | PROCEDURE DATE | The date on which treatments were performed while the person was under the care of the Emergency Care facility. | ik . | N 0.1 | | M30CCYV-MM-OD | DMED | | 0/2 | n/a | | | NDW A&E data item | This data item should be recorded when an treatment is performed. |
| EMERGENCY CARE TREATMENTS | PROCESURE TIME | The time at which treatments were performed while the person was under the care of the Emergency Care facility. | k | N 0.1 | 20 | IN HEM HEM SO | OMEO | | n/a | n/a | £ | 4/9 | NEW ABE data item | This data item should be recorded when an treatment is performed. |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | CDS_Code mapping used for HRG Grouping | PbR_Category | CDS_Treatment mapping that is used for HRG Grouping |
|--|----------------|----------|--|---|------------------------|--|--|--------------|--|
| 1111110000 | 11 | 11 | Airway / Breathing | Supplemental oxygen | 57485005 | Oxygen therapy (procedure) | | 3-4 | Supplemental payaren |
| 1111110000 | | | Airway / Breatning Airway / Breathing | Supplemental oxygen Nebuliser / spacer | 56251003 | Nebulizer therapy (procedure) | | 3-4 | Supplemental oxygen Nebuliser / spacer |
| 1111350000 | | | Airway / Breathing | Metered dose inhaler + spacer | 243132000 | Inhaled drug administration (procedure) | | 3-4 | Nebuliser / spacer |
| 1111410000 | 11 | 41 | Airway / Breathing | Nasal airway | 182692007 | Nasopharyngeal airway insertion (procedure) | 38 | 1-2 | Nasal airway |
| 1111510000 | | | Airway / Breathing | Non-invasive ventilation | 428311008 | Noninvasive ventilation (procedure) | | 3-4 | Continuous positive airways pressure / nasal intermittent positive pressure ventilation / bag valve mask |
| 1111650000 | | | Airway / Breathing | Intubation : ETT or LMA | 112798008 | Insertion of endotracheal tube (procedure) | | 3-4 | Intubation & Endotracheal tubes / laryngeal mask airways / rapid sequence induction |
| 1111810000 | | | Airway / Breathing | Chest drain | 264957007 | Insertion of pleural tube drain (procedure) | 16 | 3-4 | Chest drain |
| 1121110000 | 21 21 | | Circulation | Observation / cardiac monitor, pulse oximetry / head injury / trends Intravenous cannula | 88140007 392231009 | Cardiac monitor surveillance (regime/therapy) Intravenous cannulation (procedure) | | 1-2 1-2 | Observation / cardiac monitor, pulse oximetry / head injury / trends Intravenous cannula |
| 1121150000 | | | Circulation | Intravenous cannula Intraosseous cannula | 430824005 | Intravenous cannulation (procedure) Intraosseous cannulation (procedure) | | 1-2 | Intravenous cannula |
| 1121210000 | | | Circulation | Infusion fluids | 103744005 | Administration of intravenous fluids (procedure) | | 1-2 | Infusion fluids |
| 1121310000 | 21 | 31 | Circulation | Blood product transfusion | 116859006 | Transfusion of blood product (procedure) | | 3-4 | Blood product transfusion |
| 1121510000 | | | Circulation | Arterial line | 392247006 | Insertion of catheter into artery (procedure) | | 3-4 | Arterial line |
| 1121610000 | | | Circulation | Central line | 233527006 | Central venous cannula insertion (procedure) | | 3 | Central line |
| 1121710000 | | | Circulation | External pacing | 18590009 | Cardiac pacing (procedure) | | 3-4 | External pacing |
| 1131110000 1131310000 | | | Resuscitation Resuscitation | Defibrillation | 250980009 | Cardioversion (procedure) | | 3-4 | Defibrillation |
| 1131310000 | | | Resuscitation Resuscitation | Resuscitation / cardiopulmonary resuscitation Active rewarming of the hypothermic patient | 439569004 241740008 | Resuscitation (procedure) Active warming of patient (procedure) | | 5 3-4 | Resuscitation / cardiopulmonary resuscitation Active rewarming of the hypothermic patient |
| 1131750000 | | | Resuscitation | Cooling : control body temperature | 182660006 | Cold therapy (procedure) | | 1-2 | Cooling : control body temperature |
| 1131810000 | 31 | | Resuscitation | Percutaneous vascular occlusion (e.g.REBOA) | 240943006 | Percutaneous non-embolic vascular occlusion (procedure) | | 5 | Resuscitation / cardiopulmonary resuscitation |
| 1131910000 | 31 | 91 | Resuscitation | Resuscitative thoracotomy | 36936009 | Major thoracotomy with cardiac massage (procedure) | | 5 | Resuscitation / cardiopulmonary resuscitation |
| 1135110000 | 35 | 11 | Analgesia | Anaesthesia : local anaesthetic | 386761002 | Local anaesthesia (procedure) | 232 | 1-2 | Anaesthesia : local anaesthetic |
| 1135210000 | 35 | 21 | Analgesia | Anaesthesia : entonox | 427035008 | Nitrous oxide and oxygen gas analgesia (procedure) | 234 | 1-2 | Anaesthesia : entonox |
| 1135410000 | 35 | 41 | Analgesia | Anaesthesia : regional block | 27372005 | Regional anesthesia (procedure) | | 1-2 | Anaesthesia : regional block |
| 1135610000 | 35 | 61 | Analgesia | Anaesthesia : sedation | 50697003 | General anesthesia (procedure) | 235 | 3-4 | Anaesthesia : sedation |
| 1141110000 | | | Medication | Administration of medication | 18629005 | Administration of medication (procedure) | 511 | 1-2 | |
| 1141110000 | | | Medication Medication | Administration of medication Intravenous drug : bolus | 18629005 433215005 | Administration of medication (procedure) Administration of drug or medicament by intravenous push (procedure) | | 1-2 3-4 | Medication : oral Intravenous drue : bolus |
| 1141210000 | | | Medication | Intravenous drug : boius Intravenous antibiotics | 433215005 281790008 | Intravenous antibiotic therapy (procedure) | | 3-4 | Intravenous drug : bolus |
| 1141250000 | | | Medication | Intravenous drug : infusion | 432054008 | Infusion of drug or medicament via intravenous route (procedure) | | 3-4 | Intravenous drug : infusion |
| 1141310000 | | | Medication | Prescription / medicines prepared to take away | 266712008 | New medication commenced (finding) | 57 | 1-2 | Prescription / medicines prepared to take away |
| 1141610000 | 41 | | Medication | Lavage / emesis / charcoal / eve irrigation | | Administration of activated charcoal (procedure) | | 2 | Layage / emesis / charcoal / eve irrigation |
| 1141810000 | 41 | 81 | Medication | Parenteral thrombolysis : tPA | 307521008 | Intravenous infusion of thrombolytic (procedure) | 282 | 5 | Parenteral thrombolysis : tPA |
| 1145110000 | 45 | 11 | Procedures | Urinary catheter / suprapubic | 410024004 | Insertion of catheter into urinary bladder (procedure) | | 3-4 | Urinary catheter / suprapubic |
| 1145210000 | | | Procedures | Nasogastric tube | 87750000 | Insertion of nasogastric tube (procedure) | | 1-2 | Other (consider alternatives) |
| 1145310000 | | | Procedures | Minor surgery | 711580002 | Minor ambulatory surgery (procedure) | | 3-4 | Minor surgery |
| 1145410000 | | | Procedures | Lumbar puncture | 265232001 | Diagnostic lumbar puncture (procedure) | | 3-4 | Lumbar puncture |
| 1145510000 | | | Procedures | Removal foreign body | 10849003 | Removal of foreign body (procedure) | | 3 | Removal foreign body |
| 1145610000 | 45 45 | | Procedures Procedures | Pleural aspiration Pleural drainage | 91602002 278296000 | Thoracentesis (procedure) | | 3-4 3-4 | Chest drain Chest drain |
| 1145620000 | 45 | | Procedures Procedures | Ascitic aspiration | 178016006 | Drainage of pleural cavity (procedure) Diagnostic aspiration of peritoneal cavity (procedure) | | 1-2 | Other (consider alternatives) |
| 1145660000 | 45 | | Procedures | Ascitic drainage | 178012008 | Percutaneous drainage of ascites (procedure) | | 1-2 | Other (consider alternatives) |
| 1145690000 | 45 | | Procedures | Gastrostomy tube change | 6125005 | Change of gastrostomy tube (procedure) | | 3-4 | Urinary catheter / suprapubic |
| 1151110000 | 51 | 11 | Wound Management | Dressing: wound / burn / eve | 15631002 | Application of dressing, minor (procedure) | | 2 | Dressing: minor / burn / eve |
| 1151310000 | 51 | 31 | Wound Management | Wound closure : steristrips | 71810007 | Closure of skin wound by tape (procedure) | 041 | 2 | Wound closure : steristrips |
| 1151350000 | 51 | | Wound Management | Wound closure : glue | 284182000 | Gluing of wound (procedure) | | 2 | Wound closure : glue |
| 1151390000 | 51 | | Wound Management | Wound closure : other e.g. staples | 50015006 | Closure by staple (procedure) | 043 | 1-3 | Wound closure : other e.g. staples |
| 1151510000 | | | Wound Management | Sutures : primary | 18557009 | Closure by suture (procedure) | | 3-4 | Sutures : primary |
| 1151550000 1151590000 | | | Wound Management | Sutures : complex / secondary | 71539001 | Suture of fascia (procedure) | | | Sutures : complex / secondary |
| 1151590000 | | | Wound Management Wound Management | Removal of sutures / clips Tetanus : toxnid - booster | 30549001 127786006 | Removal of suture (procedure) Tetanus vaccination (procedure) | 033 | 1-2 | Removal of sutures / clips Tetanus : toxoid - booster |
| 1151710000 | 51 | | Wound Management Wound Management | Tetanus : immunoglobulin | 117092006 | Administration of Tetanus immune globulin, human (procedure) | | 1-2 | Tetanus : toxolo - booster Tetanus : immunoelobulin |
| 1155110000 | | | Orthopaedic | Plaster of Paris : applied | 180289009 | Administration of retanus immune globulin, numan (procedure) Application of plaster cast (procedure) | | 1-3 | Plaster of Paris : applied |
| 1155150000 | | | Orthopaedic | Plaster of Paris : removed | 180291001 | Removal of plaster cast (procedure) | | 1-3 | Plaster of Paris : removed |
| 1155210000 | | | Orthopaedic | Splint | 179208004 | Apply Thomas splint traction (procedure) | | 1-3 | Splint |
| 1155230000 | | | Orthopaedic | Sling / collar cuff / broad arm sling | 52037006 | Application of sling (procedure) | | 1-2 | Sling / collar cuff / broad arm sling |
| 1155250000 | | | Orthopaedic | Provision of walking aid (e.g. crutches) | 243751002 | Provision of mobility device (procedure) | | 1-2 | Loan of walking aid (crutches) |
| 1155310000 | | | Orthopaedic | Manipulation upper limb fracture | 267765006 | Closed reduction of fracture of upper limb (procedure) | | 3-4 | Manipulation upper limb fracture |
| 1155350000 1155410000 | | | Orthopaedic Orthopaedic | Manipulation lower limb fracture Manipulation dislocation | 150617003 122944000 | Closed reduction of fracture of lower limb (procedure) | 102 103 | 4 | Manipulation lower limb fracture Manipulation dislocation |
| 1155410000 | | | Orthopaedic Orthopaedic | Manipulation dislocation Joint aspiration | 122944000 90131007 | Reduction of dislocation (procedure) Arthrocentesis (procedure) | | 4 3-4 | Manipulation dislocation Joint aspiration |
| 1171110000 | | | ENT / eye / dental | Joint aspiration Enistavis control | 35807001 | Control of hemorrhage of nose (procedure) | | 1-2 | Joint aspiration Enistanis control |
| 1171310000 | 71 | | ENT / eye / dental | Dental treatment | 81733005 | Dental surgical procedure (procedure) | | 1-2 | Dental treatment |
| 1171510000 | | | ENT / eye / dental | Eye : irrigation | 49999004 | Irrigation of eye (procedure) | | 2 | Lavage / emesis / charcoal / eye irrigation |
| 1171550000 | | | ENT / eye / dental | Eye : orthoptic exercises | 266740003 | Orthoptic treatment (procedure) | | 1-2 | Eye : orthoptic exercises |
| 1171610000 | | | ENT / eye / dental | Eye : epilation of lashes | 74004007 | Epilation of eyelid by forceps (procedure) | | 3-4 | Eye : epilation of lashes |
| 1171710000 | | | ENT / eye / dental | Eye : laser of retina / iris or posterior capsule | 35631009 | Laser surgery (procedure) | | 5 | Eye : laser of retina / iris or posterior capsule |
| 1171810000 | | | ENT / eye / dental | Eye : subconjunctival injection | 74410004 | Subconjunctival injection (procedure) | 555 | 3-4 | Eye : subconjunctival injection |
| 1171850000 | | | ENT / eye / dental | Eye : retrobulbar injection | 121005 | Retrobulbar injection of therapeutic agent (procedure) | | 3-4 | Eye : retrobulbar injection |
| 1181110000 | | | Discharge Planning | Guidance / advice - written | 413334001 | Patient given written advice (situation) | | 1-2 | Guidance / advice - written |
| | | | Discharge Planning | Psychosocial assessment | 371585000 | Psychosocial assessment (procedure) | | 1-2 | Other (consider alternatives) |
| 1181150000 | | | Discharge Planning Discharge Planning | Occupational therapy : functional assessment Occupational therapy : equipment provision / training | 304492001 410267000 | Activities of daily living assessment (procedure) Mobility/transfers education, guidance, and counselling (procedure) | | 3-4 1-2 | Occupational therapy : functional assessment Occupational therapy : equipment provision / training |
| 1181210000 | | | | | | | | | |
| 1181210000 1181250000 | 81 | | | | | | | 2 | |
| 1181210000 | 81 81 | 31 | Discharge Planning | Physiotherapy : falls prevention | 391027005 430481008 | Osteoporosis - falls prevention (procedure) | 092 | 2 | Physiotherapy : falls prevention |
| 1181210000 1181250000 1181310000 | 81 81 81 | 31 41 | | | 391027005 | | 092 091 | | |

This value should be used where sedation or anesthesia is used. In Oct 2017 we will add in 398239001 Monitored anesthesia care sedation (procedure) to go alongside General anesthesia (procedure) to allow differentiation of sedation and anesthesia.

DATA GROUP: REFERRALS TO OTHER SERVICES

FUNCTION: To carry the details of referrals to other services. Group Status: R Group Repeats: 0..*

| DATA GROUP | DATA ITEM NAME | CATA ITEM DEPINITION | DATA ITEM STATUS (MRIO) | CQUINDATA ITEM REQUIRED (YN) | REPEATS | FORMAT | SNOWED CT / DM&D | PROS JUSTIFICATION | ECOS CODE SET | LINK TO CURRENT COS Type 010 INFORMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|-----------------------------|--|--|-------------------------------|---------------------------------------|---------|-------------------|------------------|--|---------------|--|--|---|----------------------|--|
| | | | | | | | | | | | POPULATION VALIDATION F - Format is validated | POST SCHEMA VALIDATION | | |
| | | | | | | | | | | | V - Validated against an explicit list of permitted values as defined in the Nii Cuta Dictionary | d . | | |
| REFERENCES | NUTRANSIC TO SURVICE (SOMMAS) CT) | An appetent persons to which the patient was referred for particulars or updates by the franching disclaims. | à | N | 0.5 | min nú mas ná li | SHOMED CT | This process delicts is concerning to understand and options for one process within exception, cont. This concerning delicts is concerned to the option of the option opt | | n/a | 5 | For any data item which contains value other than specific is interest to deep recognite the value to propose it to it. I make a country to the value to propose it to it. I make a country to the value to the country | NOW A&A data item | |
| REFERRALS TO OTHER SERVICES | ACTIVITY SERVICE REQUEST MAIN (SWERGERCY CARE) | The Bell flour a Hillion's was referred to another SERVES during an Energency Care extenditure. | м | N | 1.1 | ansoccyy-MM-GD | DMEO | The ofter and time pinned with the quotality of intitle inferrals variable as it helps, understand issued substanced variable the care process. Conjugate for the real all leads better inchanged and catastriadization care processes and implementation of care potencials for questic conditional distances agreement quinting when and block concern. This data also leads particum contensiones as to what services and quotally support secretary to commission to extiller efficient energies of own. | | 0/2 | ş. | 6/9 | NGW ABS data item | This data item should be recorded when a garliest is referred to a service. |
| ESFERBALS TO OTHER SERVICES | ACTIVITY SERVICE REQUEST THAN (SANSINGSECT CARE) | The TIME that a MICKET was referred to another SCRINCS during an Emergency Case Attendance. | м | N | 1.1 | and HRMMSS | OMEO | The data and time planed with the speciality of insists inferensis visualities and highly understand interest hostifeneds within the cure process. Consists point and state of the better hendowshed upon the disturbinations can processes and implementation of our protection for specific conditional resistance age, revenue questing when exit botion concern. This data is also particular commissioners as to what services and specially support increasing to commission to existle efficient energies of one. | | o/o | 5 | n/a | NGW A&E data item | This data item should be recorded when a padient is referred to a service. |
| EFFERRALS TO OTHER SERVICES | MATERIAN TO SCIENCIA ASSISSABILITY DATA | Ashber of Escotts Assessed has not for the Bits CMR PREFESCORE. Some \$60000 of with a PASSAT Tables selected, a present of a CNSU. | R | N | 0.1 | ansiscovy www dis | DMED | CCC is an exceptional a date state by the date of indirect is supported. If question amones, these we excepted indirect the content of the co | | A/A | F | inja | NGW A&E data item | This is not the date and exist, the imparted until circums is called in important the date of the dat |
| BEFERRALS TO OTHER SERVICES | BRITAND TO CORNECT ASSESSMENT THAN | A february Is because the account from other days dated ARM SEGMENT Account and ARMS Affairs and ARMS Affair | Ř | N | 6.1 | and Helmoniss | DMED | COCK to except each observable for the and where to implement, expected enterior. When we expected where the contract of the c | 5 | n/a | į. | Agla | NGW A&E data item | This is det the date at which the impatent and clinical including prime impating the part of a guild read, register and properties or the the about the clinicals is physically in the same room as the patient and clini- eanists stock is exceeding. |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description |
|---------------|-------|-------|---------------|---------------------------------|------------------|---|
| 1111100000 | 11 | 11 | Medical | Acute medicine | 1064851000000104 | Referral to acute internal medicine service (procedure) |
| 1111300000 | 11 | 13 | Medical | Ambulatory care | 898791000000105 | Referral for ambulatory care (procedure) |
| 1111500000 | 11 | 15 | Medical | General medicine | 183516009 | Referral to general medical service (procedure) |
| 1112100000 | 11 | 21 | Medical | Care of the elderly | 183522000 | Referral to care of the elderly service (procedure) |
| 1112500000 | 11 | 25 | Medical | Respiratory medicine | 306114008 | Referral to respiratory medicine service (procedure) |
| 1113100000 | 11 | 31 | Medical | Cardiology | 183519002 | Referral to cardiology service (procedure) |
| 1113500000 | 11 | 35 | Medical | Gastroenterology | 183523005 | Referral to gastroenterology service (procedure) |
| 1114100000 | 11 | 41 | Medical | Infectious disease | 306124000 | Referral to infectious diseases service (procedure) |
| 1114500000 | 11 | 45 | Medical | Endocrinology | 306118006 | Referral to endocrinology service (procedure) |
| 1115100000 | 11 | 51 | Medical | Clinical oncology | 306140002 | Referral to clinical oncology service (procedure) |
| 1115500000 | 11 | 55 | Medical | Haematology | 306148009 | Referral to hematology service (procedure) |
| 1116100000 | 11 | 61 | Medical | Neurology | 183521007 | Referral to neurology service (procedure) |
| 1116500000 | 11 | 65 | Medical | Stroke | 306802002 | Referral to stroke service (procedure) |
| 1116700000 | 11 | 67 | Medical | Rehabilitation | 307374004 | Referral to rehabilitation service (procedure) |
| 1117100000 | 11 | 71 | Medical | Palliative care | 306237005 | Referral to palliative care service (procedure) |
| 1117500000 | 11 | 75 | Medical | Nephrology | 306125004 | Referral to nephrology service (procedure) |
| 1117700000 | 11 | 77 | Medical | Rheumatology | 306127007 | Referral to rheumatology service (procedure) |
| 1118100000 | 11 | 81 | Medical | Dermatology | 183518005 | Referral to dermatology service (procedure) |
| 1118500000 | 11 | 85 | Medical | Clinical allergy | 306111000 | Referral to clinical allergy service (procedure) |
| 1118700000 | 11 | 87 | Medical | Medical ophthalmology | 306285006 | Referral to medical ophthalmologist (procedure) |
| 1119100000 | 11 | 91 | Medical | Genitourinary medicine | 306123006 | Referral to genitourinary medicine service (procedure) |
| 1211200000 | 21 | 12 | Surgical | General surgery | 183542009 | Referral to general surgical service (procedure) |
| 1211500000 | 21 | 15 | Surgical | Orthopaedic surgery | 183545006 | Referral to orthopedic service (procedure) |
| 1212000000 | 21 | 20 | Surgical | Trauma surgery | 306200004 | Referral to trauma surgery service (procedure) |
| 1212500000 | 21 | 25 | Surgical | Neurosurgery | 183546007 | Referral to neurosurgical service (procedure) |
| 1212800000 | 21 | 28 | Surgical | Urology | 306201000 | Referral to urology service (procedure) |
| 1212900000 | 21 | 29 | Surgical | Vascular surgery | 306934005 | Referral to vascular surgery service (procedure) |
| 1213000000 | 21 | 30 | Surgical | Ear, nose and throat | 183544005 | Referral to ear, nose and throat service (procedure) |
| 1214000000 | 21 | 40 | Surgical | Plastic surgery | 306198005 | Referral to plastic surgery service (procedure) |
| 1214200000 | 21 | 42 | Surgical | Ophthalmology | 183543004 | Referral to ophthalmology service (procedure) |
| 1214500000 | 21 | 45 | Surgical | Cardiothoracic surgery | 306182003 | Referral to cardiothoracic surgery service (procedure) |
| 1214500000 | 21 | 45 | Surgical | Thoracic surgery | 306184002 | Referral to thoracic surgery service (procedure) |
| 1215000000 | 21 | 50 | Surgical | Dental surgery | 327121000000104 | Referral to dental service (procedure) |
| 1215100000 | 21 | | Surgical | Oral surgery | 384712002 | Referral to oral surgery service (procedure) |
| 1215200000 | 21 | 52 | Surgical | Maxillofacial surgery | 384711009 | Referral to maxillofacial surgery service (procedure) |
| 1311500000 | 31 | 15 | Critical Care | Adult intensive care | 306107006 | Referral to adult intensive care service (procedure) |
| 1312100000 | 31 | 21 | Critical Care | Paediatric critical care | 975951000000109 | Referral to paediatric critical care service (procedure) |
| 1313100000 | 31 | 31 | Critical Care | Interventional radiology | 382271000000102 | Referral to interventional radiology service (procedure) |
| 1411100000 | 41 | 11 | Paediatrics | General paediatrics | 306128002 | Referral to pediatric service (procedure) |
| 1411500000 | 41 | 15 | Paediatrics | Paediatric surgical | 183547003 | Referral to pediatric surgical service (procedure) |
| 1412200000 | 41 | 22 | Paediatrics | Neonatology | 306132008 | Referral to special care baby service (procedure) |
| 1413100000 | 41 | 31 | Paediatrics | Paediatric orthopaedic | 850281000000109 | Referral to paediatric orthopaedic service (procedure) |
| 1413500000 | 41 | 35 | Paediatrics | Paediatric ear, nose and throat | 850231000000105 | Referral to paediatric ear, nose and throat service (procedure) |
| 1413900000 | 41 | 39 | Paediatrics | Paediatric cardiology | 417311009 | Referral to pediatric cardiology service (procedure) |
| 1415000000 | 41 | 50 | Paediatrics | Paediatric dentistry | 306188004 | Referral to pediatric dentistry service (procedure) |
| 1415500000 | 41 | 55 | Paediatrics | Paediatric dermatology | 416076006 | Referral to pediatric dermatology service (procedure) |
| 1415900000 | 41 | 59 | Paediatrics | Paediatric eye care | 344131000000108 | Referral to paediatric eye care service (procedure) |
| 1416000000 | 41 | 60 | Paediatrics | Paediatric gynaecology | 700125004 | Referral to pediatric gynecology service (procedure) |
| 1416500000 | 41 | 65 | Paediatrics | Paediatric neurology | 306130000 | Referral to pediatric neurology service (procedure) |

| 1417000000 | 41 | 70 | Paediatrics | Paediatric oncology | 306131001 | Referral to pediatric oncology service (procedure) |
|------------|----|----|-----------------|--|-----------------|---|
| 1419100000 | 41 | 91 | Paediatrics | Paediatric allergy | 885391000000103 | Referral to paediatric allergy service (procedure) |
| 1511100000 | 51 | 11 | ObGyn | Gynaecology | 183549000 | Referral to gynecology service (procedure) |
| 1511500000 | 51 | 15 | ObGyn | Obstetrics | 183548008 | Referral to obstetrics service (procedure) |
| 1611100000 | 61 | 11 | Psychiatric | Mental Health Act assessment | 202291000000107 | Referral for mental health assessment (procedure) |
| 1611300000 | 61 | 13 | Psychiatric | Liaison psychiatry | 306136006 | Referral to liaison psychiatry service (procedure) |
| 1611500000 | 61 | 15 | Psychiatric | Child and adolescent mental health service | 380241000000107 | Refer to Child and Adolescent Mental Health Service (procedure) |
| 1612000000 | 61 | 20 | Psychiatric | Psychiatry (general) | 183524004 | Referral to psychiatry service (procedure) |
| 1612500000 | 61 | 25 | Psychiatric | Older persons mental health service | 306138007 | Referral to psychogeriatric service (procedure) |
| 1614000000 | 61 | 40 | Psychiatric | Learning disability team | 413127007 | Referral to learning disability team (procedure) |
| 1711300000 | 71 | 13 | Local Medical | General Practitioner | 183561008 | Referral to general practitioner (procedure) |
| 1711500000 | 71 | 15 | Local Medical | General practitioner out of hours | 770411000000102 | Referral to general practitioner out of hours service (procedure) |
| 1713100000 | 71 | 31 | Local Medical | Primary health care team | 276490004 | Refer to member of Primary Health Care Team (procedure) |
| 1716100000 | 71 | 61 | Local Medical | Occupational health | 306152009 | Referral to occupational health service (procedure) |
| 1811100000 | 81 | 11 | Community / OPD | Falls service | 247541000000106 | Referral to falls service (procedure) |
| 1811200000 | 81 | 12 | Community / OPD | Older people rapid assessment | 818861000000107 | Referral to older people rapid assessment service (procedure) |
| 1811300000 | 81 | 13 | Community / OPD | Community nursing out of hours | 516511000000107 | Referral to community nursing out of hours service (procedure) |
| 1811400000 | 81 | 14 | Community / OPD | Psychiatric aftercare | 61801003 | Patient referral for psychiatric aftercare (procedure) |
| 1811500000 | 81 | 15 | Community / OPD | Alcoholism rehabilitation | 38670004 | Patient referral for alcoholism rehabilitation (procedure) |
| 1811600000 | 81 | 16 | Community / OPD | Drug addiction rehabilitation | 4266003 | Patient referral for drug addiction rehabilitation (procedure) |
| 1811700000 | 81 | 17 | Community / OPD | Physical rehabilitation | 78429003 | Patient referral for rehabilitation, physical (procedure) |
| 1811800000 | 81 | 18 | Community / OPD | Anticoagulant clinic | 415263003 | Referral for warfarin monitoring (procedure) |
| 1811900000 | 81 | 19 | Community / OPD | Head injury rehabilitation | 307375003 | Referral to head injury rehabilitation (procedure) |
| 1812000000 | 81 | 20 | Community / OPD | Memory assessment service | 823961000000102 | Referral to memory assessment service (procedure) |
| 1812100000 | 81 | 21 | Community / OPD | Neurological rehabilitation | 894171000000100 | Referral to neurological rehabilitation service (procedure) |
| 1814100000 | 81 | 41 | Community / OPD | Community rapid response team | 353961000000104 | Referral to community rapid response team (procedure) |
| 1814200000 | 81 | 42 | Community / OPD | Community rehabilitation | 307376002 | Referral to community rehabilitation (procedure) |
| 1814300000 | 81 | 43 | Community / OPD | Community diabetes | 811391000000104 | Referral to community diabetes service (procedure) |
| 1814400000 | 81 | 44 | Community / OPD | Community paediatric | 306129005 | Referral to community pediatric service (procedure) |
| 1814500000 | 81 | 45 | Community / OPD | Community dermatology | 785701000000106 | Referral to community dermatology service (procedure) |
| 1814600000 | 81 | 46 | Community / OPD | Community cardiology | 785761000000105 | Referral to community cardiology service (procedure) |
| 1816100000 | 81 | 61 | Community / OPD | Swallow clinic | 307380007 | Referral to swallow clinic (procedure) |
| 1816200000 | 81 | 62 | Community / OPD | Community ophthalmology | 785721000000102 | Referral to community ophthalmology service (procedure) |
| 1816400000 | 81 | 64 | Community / OPD | Community gynaecology | 785781000000101 | Referral to community gynaecology service (procedure) |
| 1816500000 | 81 | 65 | Community / OPD | Community gastroenterology | 785621000000108 | Referral to community gastroenterology service (procedure) |
| 1816600000 | 81 | 66 | Community / OPD | Community ear, nose and throat | 785681000000109 | Referral to community ear, nose and throat service (procedure) |
| | | | | | | |

DATA GROUP: DISCHARGE FROM EMERGENCY CARE

FUNCTION: To carry the details of discharge from Emergency Care. Group Status: R Group Repeats: 0.1

| bata deloue | MA ATOMAK | MAIA disa dannona | DATASTEM STATUS STAM REPEATS RECOGNED (TIR) | FORMAT | SNOWED CT / DMLD /COS | AUTRICATION | ECCS COOE SET | LINK TO CURRENT COS Type 619 NEGRISATION COL.T | VALEDATION PULES POPULATION VALEDATION F - Format is wildstand V - Validation displant an explicit field of parenthed values as defined in the NHS Does Dictionary | PORT SCHEM VALENTION | DATA ITEM PROVENANCE | NOTES |
|--------------------------------|--|---|---|--------------------|-----------------------|---|------------------------|---|--|--|-------------------------------------|---|
| DISCHARIE PROMITABILISTIC CARE | ALGGS TO ADMITISH'S | The day \$100000 To billed we made. | N 6.1 | ansoccy while do | OMEO . | The Discount I Admir discounts into all first the processors in a particle (Jamery Binks, 2014), and with the order of the processor of the pr | n/a | nja | | AO | NGW A&G data item | This disk have never for exceeded as the CD record on the occasion whereby a discriming in made to make a patient to a service. |
| DOCHMAIS REDVENMENSING CANE | Occode to deserf trade | The time a SIGNIGIAN TO ABBIT was made. | 8 8.1 | and HH MM.SS | OMEO . | The Security Asserts design in the order to provide a specification in a patient (Journey Notice), which is executed to differ all the supposed patient design design of the supposed patient, within a security in an analysis of the supposed patient and patient, the substitute which the loss to be a security of pages a Security on a light of the supposed patient and a supposed a security on a light of the supposed as security on a light of the supposed as security on a light of the supposed as security or a light of the supposed as security or a light of the supposed as security of the supposed as security or a light of the supposed | 1/0 | nga | g. | ų k | NOW ARE data mem | This data from should be recorded in the CD record on the occasion whereby a decision in made to refer a patient to a convice. |
| DECHARGE FROM EMPRISON OF CARE | ACTIVITY TRACETUREST FUNCTION CODE (SECCEDIR TO ACMET) | ACTIVITY TRAINMENT PRACTION CODE (SECSION TO ADMIT) is the TRAINMENT PRACTION CODE of the LEGICS to while a MINISMENT to be admined. | h le 10 5.1 | anii | DMED | The districtions is independently and included particulated and included in any fire at a local most to able so plan ingreated the foreignment. At a commissioning the left fixed and independently and included any other commissioning the left fixed as a local commissioning the left fixed and left fixed commissioning the left fixed any left fixed and left fixed any left fixed any left fixed any left fixed and left fixed any left fixed and left fixed any left fixed and left fixed any | Link to code set | n/a | ş | -10a | NGW ABE data kem | |
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| SECONDE TOP SERVICE COE | CONSTRUCTION OF THE CONSTR | SOURCE OF CONTROL FOR PRINCIPLE CALL AND CONTROL CONTR | N A.A | ein nil max nil il | oncomes ct | The control of the co | Sales has conduct used | lab. | f | we spire has well-designed as what the first to a good of a desired and the control of the contr | New Add date down | |

| DISCHARGE FROM EMERGENCY CARE | EMERGENCY CARE DISCHARGE INFORMATION GIVEN (SHOMED CT) | EMERGENCY CARE DISCHARGE INFORMATION GIVEN (SNOMED CT) is the SNOMED CT* concept to which is used to identify it | N 0.1 | min né max ná k | SNOMED CT | There are many reasons to include this item: giving the patient a copy of the discharge letter | Link to code set | F | For any data item which contains a value other than specified in relevant code set, | NEW A&E data item | |
|-------------------------------|--|---|-------|-----------------|-----------|---|------------------|---|--|-------------------|---|
| | | whether a copy of a letter to their GENERAL PRACTITIONER has been printed and given to the PATIENT on discharge from an | | | | Improves and ensures consistency of communication between Emergency Care clinician, | | | accept the value but suppress it so it cannot leave SUS+ (it will be visible to those | | |
| | | Emergency Care Department. | | | | patient and GP, and ensures that the patient undentands what is communicated to the GP and | | | with SUS access and therefore available for diagnostic and troubleshooting). Logit | | |
| | | | | | | expectations regarding followup. | | | appropriately for response to user such as "Value for records.X. field Y is not in the | | |
| | | | | | | . Ensures that the clinician does not write anything in the GP letter that they would not want | | | acceptable range" | | |
| | | | | | | the patient to read. | | | | | |
| | | | | | | Allows the clinician to so through the letter with the gatient to check understanding. This | | | | | |
| | | | | | | reduces the risk of complaints and is also provides the hospital with a good defence against | | | | | |
| | | | | | | complaints or legal action e.g. a patient who has a fit is told they cannot drive. If such a patient | | | | | |
| | | | | | | subsequently drives and injures other road users and there is evidence that the gatient had a | | | | | |
| | | | | | | letter printed that contained the instruction not to drive, this ensures the NHS is not potentially | | | | | |
| | | | | | | liable. | | | | | |
| | | | | | | It ensures the doctor has entered all the relevant clinical information before the patient | | | | | |
| | | | | | | laner | | | | | |
| | | | | | | Nil this is not a substitute for an electronic copy of the letter, which will be sent anyway as part | | | | | |
| | | | | | | of the service specification. However it is well known that a relatively high proportion of | | | | | |
| | | | | | | Emergency Care gardents do not have a General Practitioner or may be itinerant, so this | | | | | |
| | | | | | | document may be the only record they have to take to another healthcare provider. | | | | | |
| | | | | | | | | | | | |
| T . | II | 1 | n II | | 1 | | | 1 | | I | 1 |
| | | | | | | | | | | | |
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| T . | II | 1 | n II | | 1 | | | 1 | | I | 1 |

| ECDS_UniqueID | | | ECDS_Group | ECDS_Description | DM&D_Code | DM&D_Description | Notes |
|--------------------------|----------|-----|--|---|------------|---|--|
| 2018151100 | | | EM / critical care / anaesthesia | Accident & Emergency | 180 | Accident & Emergency | SERVICES to care for PATIENTS with urgent problems delivered as part of an Accident and Emergency Attendance or admission at an Accident and Emergency Department |
| 2018815500 | 81 | 55 | Mental health and cognition | Addiction Services | 721 | Addiction Services | The prevention and treatment of substance misuse including drugs and alcohol. If PATIENTS have both severe mental illness and problematic substance misuse, see TREATMENT FUNCTION CODE 726 Dual Diagnosis Service |
| 2018394100 | 39 | 41 | Medical subspecialties | Adult Cystic Fibrosis Service | 343 | Adult Cystic Fibrosis Service | The prevention and destinent of substance insuse including drugs and action. If PATIENTS have both severe internal limites and proviendate substance insuse, see TREA INCLUDE CODE 720 but brightness Service |
| 2010354100 | 33 | 7. | medical subspecialities | riddic cystic ribrosis service | 343 | Addit Cystic Historia Scivice | Specialised, multidisciplinary SERVICE concerned with the diagnosis, assessment and management of PATIENTS with cystic fibrosis. This TREATMENT FUNCTION CODE should be used by recognised specialist centres only |
| 2018811100 | | | Mental health and cognition | Adult Mental Illness | 710 | Adult Mental Illness | SERVICES provided to adult PATIENTS for the assessment, diagnosis and treatment of mental illness |
| 2018397300 | 39 | | Medical subspecialties | Allergy Service | 317 | Allergy Service | The diagnosis and management of allergic disease (abnormal immune responses to external substances) and the exclusion of allergic causes in other conditions |
| 2018155100 | 15 39 | | EM / critical care / anaesthesia | Anaesthetics | 190 | Anaesthetics | This can be used in out-patients only. Pain Management should be recorded in 191 |
| 2018391100 | 39 | 11 | Medical subspecialties | Anticoagulant Service | 324 | Anticoagulant Service | The monitoring and control of anticoagulant therapy including the initiation and/or supervision of oral anticoagulant therapy and the determination of anticoagulant dosage. This can be used in out-patients only |
| 2018939100 | 93 | 91 | Allied health services | Art Therapy | 660 | Art Therapy | The use of art techniques including clay, paint and paper for thereputic purposes and as a measor of communication and activities and activit |
| 2018378100 | 37 | | Medical subspecialties | Audiological Medicine | 310 | Audiological Medicine | 8-1/1 |
| | | | • | | | | The medical specialty concerned with the investigation, diagnosis and management of patients with disorders of balance, hearing, tinnitus and auditory communication. Excludes audiology and hearing tests |
| 2018933500 | | | Allied health services | Audiology | 840 | Audiology | Physiological measurement and diagnosis of hearing disorders, and the rehabilitation of PATIENTS with hearing loss |
| 2018372100 | | | Medical subspecialties | Blood And Marrow Transplantation | 308 | Blood And Marrow Transplantation | Previously coded within Clinical Haematology (TREATMENT FUNCTION CODE 303). Includes haemopoietic stem cell transplantation |
| 2018253100 | | | Surgical subspecialties | Breast Surgery | 103 | Breast Surgery | includes treatment for cancer, suspected neoplasms, cysts and post-cancer reconstructive surgery. Excludes cosmetic surgery |
| 2018215500 | 21 55 | | Surgical specialties Social / rehabilitation care | Burns Care Cardiac Rehabilitation | 161 327 | Burns Care Cardiac Rehabilitation | To be used by recognised specialist units and associated outreach SERVICES only Rehabilitation SERVICE for PAIRINTS with or recovering from heart related conditions such as heart attacks or from procedures such as coronary artery bypass surgery to ensure that they achieve their full potential in terms of |
| 2010337100 | 33 | /1 | Social / Tellabilitation care | Cardiac Renabilitation | 327 | Cardiac Renabilitation | physical and psychological health |
| 2018217100 | 21 | 71 | Surgical specialties | Cardiac Surgery | 172 | Cardiac Surgery | Surgical treatment of the heart or great vessels |
| 2018312500 | 31 | | Medical specialties | Cardiology | 320 | Cardiology | SERVICES treating diseases and abnormalities of the heart |
| 2018217700 | 21 | | Surgical specialties | Cardiothoracic Surgery | 170 | Cardiothoracic Surgery | Should only be used where there are no separate SERVICES for Cardiac Surgery and Thoracic Surgery |
| 2018255500 | 25 | | Surgical subspecialties | Cardiothoracic Transplantation | 174 | Cardiothoracic Transplantation | To be used by recognised specialist units and associated outreach services only. Includes pre- and post-operative services |
| 2018373100 | | | Medical subspecialties Mental health and cognition | Chemical Pathology Child And Adolescent Psychiatry | 822 711 | Chemical Pathology Child And Adolescent Psychiatry | To be used for clinical management only SERVICES providing diagnosis, treatment, and prevention of psychopathological disorders of children and adolescents |
| 2018812100 | 37 | | Medical subspecialties | Clinical Genetics | 311 | Clinical Genetics | SERVILES provious diagnosis, treatment, and prevention or psychopathological disorders or children and adolescents |
| 2010370300 | ٠, | 05 | medical subspecialities | cilital deficacy | 311 | Cilifical Scriedes | Diagnosis of disorders caused by genetic mechanisms and counselling SERVICE to PATIENTS and affected family members. To be used by recognised specialist units and associated outreach SERVICES only |
| 2018319500 | 31 | 95 | Medical specialties | Clinical Haematology | 303 | Clinical Haematology | Excludes Anticoagulant Service - see TREATMENT FUNCTION CODE 324 |
| 2018373300 | 37 | 33 | Medical subspecialties | Clinical Immunology | 316 | Clinical Immunology | The treatment of disorders of the immune system |
| 2018397100 | | | Medical subspecialties | Clinical Immunology And Allergy Service | 313 | Clinical Immunology And Allergy Service | Should only be used where there are no separate SERVICES for Clinical Immunology and Allergy |
| 2018373500 | 37 | | Medical subspecialties | Clinical Microbiology | 322 | Clinical Microbiology | SERVICES to treat diseases caused by bacteria, viruses, fungi and parasites |
| 2018378700 | 37 | | Medical subspecialties | Clinical Neurophysiology | 401 | Clinical Neurophysiology | The study of the central and peripheral nervous systems through the recording of bioelectrical activity. Includes Electroencephalogram (EEG) |
| 2018319300 | 31 37 | | Medical specialties Medical subspecialties | Clinical Oncology (Previously Radiotherapy) Clinical Pharmacology | 800 305 | Clinical Oncology (Previously Radiotherapy) Clinical Pharmacology | The diagnosis and treatment, typically with Radiotherapy, of PATIENTS with cancer. SERVICES providing drug information, medication safety and other aspects of obstracts or providing and the providing drug information, medication aspects and providing the providing and the providin |
| 2018379100 | 37 | | Medical subspecialties | Clinical Physiology | 305 | Clinical Physiology | SERVILES providing or up information, medication safety and other aspects or pharmacy practice Physiological measurement including ECG (e.g. exercise testing, stress testing), gastrointestinal physiology, cardiac physiology, vascular technology, urodynamics, and ophthalmic and vision science. Excludes Clinical |
| 20165/9100 | 3/ | 91 | Medical subspecialities | Cillical Physiology | 304 | Cillical Physiology | Physiological measurement incurrence Exclusive Section (Section 2), advantage in the physiology and physiology and physiology asset and performance, and opinionalized and opi |
| 2018935100 | 93 | 51 | Allied health services | Clinical Psychology | 656 | Clinical Psychology | The diaenosis and treatment of emotional and behavioural disorders |
| 2018211700 | 21 | | Surgical specialties | Colorectal Surgery | 104 | Colorectal Surgery | Surgical treatment of disorders of the lower intestine (colon, anus and rectum) |
| 2018671100 | 67 | | Paediatric subspecialties | Community Paediatrics | 290 | Community Paediatrics | Includes routine health surveillance, health promotion, behavioural paediatrics and Looked After Children. Excludes Paediatric Neuro-Disability |
| 2018559200 | 55 | 92 | Social / rehabilitation care | Complex Specialised Rehabilitation Service | 344 | Complex Specialised Rehabilitation Service | |
| | | | | | | | Complex specialised rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Services' criteria and is registered as a Level 1 service. For further information see the NHS Specialised Services website |
| 2018396100 | | | Medical subspecialties | Congenital Heart Disease Service | 331 | Congenital Heart Disease Service | The management and treatment of congenital heart disease, this includes the ongoing care of children in to adulthood |
| 2018152100 2018818500 | | | EM / critical care / anaesthesia | Critical Care Medicine | 192 727 | Critical Care Medicine Dementia Assessment Service | also known as Intensive Care Medicine |
| 2018818500 | 81 | 85 | Mental health and cognition | Dementia Assessment Service | 121 | Dementia Assessment Service | SERVICES for the assessment of PATIENTS with dementia, which may complicate care giving and can occur at any stage of the illness. In addition to memory impairment, dementia may include behavioural and psychological problems |
| 2018519100 | 51 | 91 | Maxillo-facial / oral surgery | Dental Medicine Specialties | 450 | Dental Medicine Specialties | proprieties Includes Oral Medicine. |
| 2018351500 | | | Medical subspecialties | Dermatology | 330 | Dermatology Dermatology | SERVICES for the treatment of diseases of the skin |
| 2018934500 | 93 | 45 | Allied health services | Diabetic Education Service | 920 | Diabetic Education Service | SERVICES providing dedicated small group education courses regarding self management for diabetic PATIENTS |
| 2018354100 | 35 | | Medical subspecialties | Diabetic Medicine | 307 | Diabetic Medicine | SERVICES to diagnose, treat and support PATIENTS with diabetes |
| 2018751100 | | | Imaging | Diagnostic Imaging | 812 | Diagnostic Imaging | The production and interpretation of high quality images of the body to diagnose injuries and disease, e.g. x-rays, Ultrasound Scan, MRI Scan, PET Scan or CT Scan. |
| 2018934100 | 93 | 41 | Allied health services | Dietetics | 654 | Dietetics | The application of the science of nutrition to devise eating plans for PATIENTS to treat medical conditions. The promotion of good health by helping to facilitate a positive change in food choices amongst individuals, groups and |
| 2018939300 | 02 | 0.2 | Allied health services | Daniel Theorem | 659 | Drama Therapy | communities |
| 2018939300 | | | Mental health and cognition | Drama Therapy Eating Disorders | 720 | Eating Disorders | The use of drama and theatre techniques including role play, voice work and storytelling for therapeutic purposes A specialist SERVICE for the diagnosis and treatment of eating disorders including anorexia, bullmia and compulsive overeating |
| 2018313500 | 31 | | Medical specialties | Endocrinology | 302 | Endocrinology | A specialist Service on the diagnosis and treatment of eating disorders including anotexia, builtina and compulsive overeating. The treatment of disorders of the endocrine system. |
| 2018216700 | | | Surgical specialties | FNT | 120 | FNT | Fig. nose and throat |
| 2018817100 | 81 | | Mental health and cognition | Forensic Psychiatry | 712 | Forensic Psychiatry | SERVICES to assess PATIENTS who have committed an offence and are receiving treatment in high, medium and low secure units or prisons |
| 2018313100 | 31 | | Medical specialties | Gastroenterology | 301 | Gastroenterology | The treatment of disorders of the digestive system |
| 2018311100 | | | Medical specialties | General Medicine | 300 | General Medicine | Includes sub-categories not elsewhere listed e.g. Metabolic Medicine. |
| 2018211100 | | | Surgical specialties | General Surgery | 100 | General Surgery | Includes sub-categories not elsewhere listed e.g. endocrine surgery |
| 2018374100 | 37 | | Medical subspecialties | Genitourinary Medicine | 360 | Genitourinary Medicine | Primarily related to medicine dealing with sexually transmitted diseases |
| 2018311500 | 31 | 15 | Medical specialties | Geriatric Medicine | 430 | Geriatric Medicine | SERVICES to treat diseases and disabilities in older adults. There is no set age at which PATIENTS may be under the care of Geriatric Medicine, this decision should be determined by the individual PATIENT's needs |
| 2018457500 | 45 | 75 | Obstetrics / gynaecology | Gynaecological Oncology | 503 | Gynaecological Oncology | SERVICES to treat crossesses and oscionatives in order addition. There is no set age at which PATIENTS may be under the care or centartic weblicine, this decision should be determined by the individual PATIENTS needs |
| 2018457100 | | | Obstetrics / gynaecology | Gynaecology | 502 | Gynaecology | SERVICES to treat tailors of the female reproductive system. Includes planned terminations Disorders of the female reproductive system. Includes planned terminations |
| 2018393100 | 39 | | Medical subspecialties | Haemophilia Service | 309 | Haemophilia Service | Previously coded within Clinical Haematology (TREATMENT FUNCTION CODE 303). |
| 2018251100 | 25 | | Surgical subspecialties | Hepatobiliary & Pancreatic Surgery | 105 | Hepatobiliary & Pancreatic Surgery | Includes liver surgery, but liver transplantation should be recorded in 102 Transplantation Surgery |
| 2018355100 | 35 | | Medical subspecialties | Hepatology | 306 | Hepatology | Also known as liver medicine |
| 2018314100 | | | Medical specialties | Infectious Diseases | 350 | Infectious Diseases | SERVICES to diagnose and treat contagious or communicable diseases |
| 2018552100 2018752100 | 55 | | Social / rehabilitation care Imaging | Intermediate Care Interventional Radiology | 318 811 | Intermediate Care Interventional Radiology | Intermediate care encompasses a range of multi-disciplinary SERVICES designed to safeguard independence by maximising rehabilitation and recovery after illness or injury |
| 2018752100 | | | Imaging Mental health and cognition | Interventional Radiology Learning Disability | 811 700 | Interventional Radiology Learning Disability | Diagnosis and treatment of diseases utilising minimally-invasive image-guided procedures. Not to be used for Diagnostic Imaging - see TREATMENT FUNCTION CODE 812 SERVICES provided to PATIENTS with a Learning Instability |
| 2018818100 | 81 | | Mental health and cognition | Liaison Psychiatry | 700 | Liaison Psychiatry | SERVICES provided to PATIENTS WITH a Learning Usaciumly The provision of psychiatric treatment to PATIENTS attending general hospitals including out-patient clinics, Accident and Emergency Departments and admission to wards. Deals with the interface between physical and |
| | | | | | | .,, | psychological health. |
| 2018559300 | 55 | 93 | Social / rehabilitation care | Local Specialist Rehabilitation Service | 346 | Local Specialist Rehabilitation Service | |
| | | | | | | | Local specialist rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Services' criteria and is registered as a Level 2b service. For further information see the NHS Specialised Services website |
| 2018511100 | | | Maxillo-facial / oral surgery | Maxillo-Facial Surgery | 144 | Maxillo-Facial Surgery | Mouth, jaw and face related surgery The diagnosis and treatment, toyically with Chemotherapy, of PATIENTS with cancer |
| 2018319100 2018378300 | 31 37 | | Medical specialties Medical subspecialties | Medical Oncology Medical Ophthalmology | 370 460 | Medical Oncology Medical Ophthalmology | The diagnosis and treatment, typically with Chemotherapy, or PATIENTS with cancer SERVICES to diagnose and treat medical conditions affecting the eye, orbits, and visual pathways |
| 2018378300 | | | Medical subspecialties Medical subspecialties | Medical Virology | 834 | Medical Virology Medical Virology | Services to diagnose and uses medical conditions affecting the eye, of ones, and visual partners |
| | | | | | | | The diagnosis and management and prevention of virus and related infections, in hospital and in the community including HIV/AIDS, other blood-borne infections like hepatitis B and C and viruses such as SARS and avian flu |
| 2018819100 | | | Mental health and cognition | Mental Health Dual Diagnosis Service | 726 | Mental Health Dual Diagnosis Service | SERVICES to provide support to PATIENTS with both severe mental illness and substance misuse problems. Personality disorder may coexist with psychiatric illness and/or substance misuse |
| 2018819500 | | 95 | Mental health and cognition | Mental Health Recovery And Rehabilitation Service | 725 | Mental Health Recovery And Rehabilitation Service | SERVICES provided to support recovery from mental illness that maximises the PATIENT's quality of life and social inclusion by encouraging their skills, promoting independence and autonomy |
| 2018452100 | 45 | | Obstetrics / gynaecology | Midwifery Service | 560 | Midwifery Service | SERVICES provided under the direct care of a MIDWIFE. Excludes Obstetrics see TREATMENT FUNCTION CODE 501 |
| 2018939200 | | | Allied health services | Music Therapy | 661 | Music Therapy | The use of music and all of its facets to help clients to improve or maintain their health |
| 2018611900 | | | Paediatric specialties | Neonatology | 422 | Neonatology | Special Care, High Dependency and Intensive Care FERRITE to the Middle conditions and the appropriate to the Care of the Care |
| 2018314500 | | | Medical specialties Medical specialties | Nephrology Neurology | 361 400 | Nephrology Neurology | SERVICES to treat kidney conditions and abnormalities SERVICES to diagnose and treat conditions and abnormalities SERVICES to diagnose and treat conditions and diseases of the central nervous system |
| 2010310100 | 31 | 91 | medical specialities | ···carology | 400 | ···ca·ology | annica to unignose una tract conditions and useases of the term at net your system |

| 2018216100 21 61 Surgical specialties | Neurosurgery | 150 | Neurosurgery | |
|---|---|---|---|--|
| 2010210100 21 01 Surgical speciations | rearosurgery | 130 | Neurosurgery | The prevention, diagnosis, treatment, and rehabilitation of disorders which affect any portion of the nervous system including the brain, spinal cord, peripheral nerves, and extra-cranial cerebrovascular system |
| 2018755100 75 51 Imaging | Nuclear Medicine | 371 | Nuclear Medicine | The treatment of PATIENTS through the use of radioactive substances |
| 2018451100 45 11 Obstetrics / gynaecology | Obstetrics | 501 | Obstetrics | The management of pregnancy and childbirth including miscarriages and still births but excluding planned terminations. Excludes Midwifery Service see TREATMENT FUNCTION CODE 560 |
| 2018931100 93 11 Allied health services | Occupational Therapy | 651 | Occupational Therapy | The use of specific activities to limit the effects of disability and promote independence in all aspects of daily life |
| 2018813100 81 31 Mental health and cognition | Old Age Psychiatry | 715 | Old Age Psychiatry | SERVICES providing the diagnosis, treatment, and prevention of mental and emotional disorders in older adult PATIENTS |
| 2018216500 21 65 Surgical specialties 2018936500 93 65 Allied health services | Ophthalmology Optometry | 130 662 | Ophthalmology Optometry | The surgical treatment of disorders and diseases of the eye. Excludes Medical Ophthalmology - see TREATMENT FUNCTION CODE 460 The diaenosis and non-surgical treatment of disorders of the eye and vision care |
| 2018936500 93 65 Allied health services 2018511500 51 15 Maxillo-facial / oral surgery | Optometry Oral Surgery | 140 | Oral Surgery | Ine diagnosis and non-surgical treatment of disorders of the eye and vision care. The diagnosis and unon-surgical treatment of disorders of the eye and vision care. The diagnosis and surgical treatment of diseases, injuries and defects involving both the functional and aesthetic aspects of the hard and soft tissues of the head, mouth, teeth, gums, jaws and neck |
| 2018513100 51 15 Maxillo-facial / oral surgery 2018513100 51 31 Maxilla-facial / oral surgery | Orthodontics | 140 | Orthodontics | ine diagnoss and surgical treatment or diseases, injuries and detects involving both in the functional and abstract aspects or the nate and so full rests. To its case, mount, retent, gums, jaws and neck. The treatment of malocicusions (improper bites). Orthodorful treatment can focus on dental displacement only, or can deal with the control and modification of facial growth |
| 2018936600 93 66 Allied health services | Orthontics | 655 | Orthontics | The diagnosis and treatment of visual problems involving eve movement and alignment |
| 2018937200 93 72 Allied health services | Orthotics | 658 | Orthotics | The supply of orthoses for PATIENTS |
| 2018674900 67 49 Paediatric subspecialties | Paediatric Audiological Medicine | 254 | Paediatric Audiological Medicine | |
| · | - | | - | The medical specialty concerned with the investigation, diagnosis and management of patients with disorders of balance, hearing, tinnitus and auditory communication. Excludes audiology and hearing tests |
| 2018614200 61 42 Paediatric specialties | Paediatric Burns Care | 220 | Paediatric Burns Care | To be used by recognised specialist units and associated outreach SERVICES only |
| 2018614500 61 45 Paediatric specialties | Paediatric Cardiac Surgery | 221 | Paediatric Cardiac Surgery | Surgical treatment of the heart or great vessels |
| 2018615500 61 55 Paediatric specialties | Paediatric Cardiology | 321 | Paediatric Cardiology | Dedicated SERVICES to children with diseases and abnormalities of the heart, with appropriate facilities and support staff |
| 2018617300 61 73 Paediatric specialties 2018674700 67 47 Paediatric subspecialties | Paediatric Clinical Haematology | 253 | Paediatric Clinical Haematology | Excludes Anticoagulant Service - see TREATMENT FUNCTION CODE 324 |
| 2018673500 67 35 Paediatric subspecialties | Paediatric Clinical Immunology And Allergy Service Paediatric Cystic Fibrosis | 255 264 | Paediatric Clinical Immunology And Allergy Service Paediatric Cystic Fibrosis | Clinical Immunology is the treatment of disorders of the immune system. Allergy Service is the diagnosis and management of allergic disease |
| 2016075500 67 55 Paediatric subspecialties | raediatric Cystic Fibrosis | 204 | Paediatric Cystic Fibrosis | Specialised, multidisciplinary SERVICE concerned with the diagnosis, assessment and management of PATIENTS with cystic fibrosis. This TREATMENT FUNCTION CODE should be used by recognised specialist centres only |
| 2018613800 61 38 Paediatric specialties | Paediatric Dentistry | 142 | Paediatric Dentistry | Dentistry SERVICES dedicated to children with appropriate facilities and support staff |
| 2018674100 67 41 Paediatric subspecialties | Paediatric Dermatology | 257 | Paediatric Dermatology | SERVICES for the treatment of diseases of the skin |
| 2018673100 67 31 Paediatric subspecialties | Paediatric Diabetic Medicine | 263 | Paediatric Diabetic Medicine | SERVICES to diagnose, treat and support PATIENTS with diabetes |
| 2018613500 61 35 Paediatric specialties | Paediatric Ear Nose And Throat | 215 | Paediatric Ear Nose And Throat | Ear, nose and throat |
| 2018616100 61 61 Paediatric specialties | Paediatric Endocrinology | 252 | Paediatric Endocrinology | The treatment of disorders of the endocrine system |
| 2018673700 67 37 Paediatric subspecialties | Paediatric Epilepsy | 223 | Paediatric Epilepsy | Designated clinic which provides SERVICES to children led by CONSULTANT paediatrician with expertise in epilepsy supported by specialist staff |
| 2018615300 61 53 Paediatric specialties | Paediatric Gastroenterology | 251 | Paediatric Gastroenterology | The treatment of disorders of the digestive system |
| 2018612300 61 23 Paediatric specialties 2018617100 61 71 Paediatric specialties | Paediatric Gastrointestinal Surgery Paediatric Infectious Diseases | 213 256 | Paediatric Gastrointestinal Surgery Paediatric Infectious Diseases | Surgical treatment of disorders of the gastrointestinal tract SERVICES to dispanse and treat contagious or communicable diseases |
| 201861/100 61 /1 Paediatric specialties 2018611500 61 15 Paediatric specialties | Paediatric Infectious Diseases Paediatric Intensive Care | 256 | Paediatric Infectious Diseases Paediatric Intensive Care | SERVICES to diagnose and treat contagious or communicable diseases Only to be used by designated Paediatric Intensive Care Units |
| 2018611500 61 15 Paediatric specialties 2018677100 67 71 Paediatric subspecialties | Paediatric Intensive Care Paediatric Interventional Radiology | 242 | Paediatric Intensive Care Paediatric Interventional Radiology | Only to be used by designated reactionatic intensive care. Units Diagnosis and treatment of diseases utilising minimally-invasive image-guided procedures. Not to be used for Diagnostic Imaging - see TREATMENT FUNCTION CODE 812 |
| 2018613700 61 37 Paediatric specialties | Paediatric Maxillo-Facial Surgery | 217 | Paediatric Maxillo-Facial Surgery | Mouth, jaw and face related surgery |
| 2018617500 61 75 Paediatric specialties | Paediatric Medical Oncology | 260 | Paediatric Medical Oncology | The diagnosis and treatment, typically with Chemotherapy of PATIENTS with cancer |
| 2018674500 67 45 Paediatric subspecialties | Paediatric Metabolic Disease | 261 | Paediatric Metabolic Disease | The diagnosis and management of inherited metabolic conditions |
| 2018616900 61 69 Paediatric specialties | Paediatric Nephrology | 259 | Paediatric Nephrology | SERVICES to treat kidney conditions and abnormalities |
| 2018672100 67 21 Paediatric subspecialties | Paediatric Neuro-Disability | 291 | Paediatric Neuro-Disability | Dedicated SERVICES for children with Cerebral Palsy and non-progressive handicapping neurological conditions, with or without Learning Disability |
| 2018616500 61 65 Paediatric specialties | Paediatric Neurology | 421 | Paediatric Neurology | Dedicated SERVICES to children to diagnose and treat conditions and diseases of the central nervous system, with appropriate facilities and support staff |
| 2018613100 61 31 Paediatric specialties | Paediatric Neurosurgery | 218 | Paediatric Neurosurgery | |
| 2018613300 61 33 Paediatric specialties | Paediatric Ophthalmology | 216 | Paediatric Ophthalmology | The prevention, diagnosis, treatment, and rehabilitation of disorders which affect any portion of the nervous system including the brain, spinal cord, peripheral nerves, and extra-cranial cerebrovascular system |
| 2018672500 67 25 Paediatric specialties | Paediatric Ophthalmology Paediatric Pain Management | 216 | Paediatric Ophthalmology Paediatric Pain Management | The surgical treatment of disorders and diseases of the eye. Complex pain disorders requiring diagnosis and treatment by a specialist multi-professional team |
| 2018614100 61 41 Paediatric specialties | Paediatric Plastic Surgery | 219 | Paediatric Plastic Surgery | SERVICES to correct or restore form and function. In addition to cosmetic or easthetic surgery, plastic surgery includes many types of reconstructive surgery, and the treatment of burns |
| 2018615100 61 51 Paediatric specialties | Paediatric Respiratory Medicine | 258 | Paediatric Respiratory Medicine | Also known as Thoracic Medicine |
| 2018616700 61 67 Paediatric specialties | Paediatric Rheumatology | 262 | Paediatric Rheumatology | SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments |
| 2018612100 61 21 Paediatric specialties | Paediatric Surgery | 171 | Paediatric Surgery | This is paediatric general surgery |
| 2018614600 61 46 Paediatric specialties | Paediatric Thoracic Surgery | 222 | Paediatric Thoracic Surgery | Surgical treatment of diseases affecting organs inside the thorax (the chest). Generally treatment of conditions of the lungs, chest wall, and diaphragm |
| 2018676100 67 61 Paediatric subspecialties | Paediatric Transplantation Surgery | 212 | Paediatric Transplantation Surgery | Includes pre- and post-operative care for major organ transplants except heart and lung (see Cardiothoracic Transplantation). Excludes corneal grafts |
| 2018612700 61 27 Paediatric specialties | Paediatric Trauma And Orthopaedics | 214 | Paediatric Trauma And Orthopaedics | |
| | | 211 | | Surgery to treat injuries, congenital and acquired disorders of the bones, joints, and their associated soft tissues, including ligaments, nerves and muscles. Excludes Spinal Surgery Service - see TREATMENT FUNCTION CODE 108 |
| 2018612500 61 25 Paediatric specialties 2018611100 61 11 Paediatric specialties | Paediatric Urology Paediatrics | 211 420 | Paediatric Urology Paediatrics | Surgical treatment of disorders of the urinary system and male reproductive system SERVICES to treat infants children, and adolescents |
| 2018157100 61 11 Paediatric speciatries 2018157100 15 71 EM / critical care / anaesthesia | | 191 | Pain Management | SERVICES to treat iniants, ciniuren, and adolescents Complex pain disorders requiring diagnosis and treatment by a specialist multi-professional team |
| 2018352100 35 21 Medical subspecialties | Palliative Medicine | 315 | Palliative Medicine | The treatment for curable linesses and tensions for a commence of a several section of the comment of the comme |
| 2018816100 81 61 Mental health and cognition | Perinatal Psychiatry | 724 | Perinatal Psychiatry | A specialist psychiatric SERVICE for the diagnosis and treatment of ante-natal and post-natal psychiatric problems |
| 2018932100 93 21 Allied health services | Physiotherapy | 650 | Physiotherapy | The treatment of human function and movement to help people to achieve their full physical potential. The use of physical approaches to promote, maintain and restore wellbeing |
| 2018215100 21 51 Surgical specialties | Plastic Surgery | 160 | Plastic Surgery | SERVICES to correct or restore form and function. In addition to cosmetic or aesthetic surgery, plastic surgery includes many types of reconstructive surgery, and the treatment of burns |
| 2018937500 93 75 Allied health services | Podiatric Surgery | 663 | Podiatric Surgery | The treatment of foot problems, including soft tissue, bone and joint surgery of the foot, ankle and associated structures, excludes Podiatry see TREATMENT FUNCTION CODE - 653 |
| 2018937600 93 76 Allied health services | Podiatry | | | |
| 2018557500 55 75 Social / rehabilitation care | | 653 | Podiatry | Also known as Chiropody. The diagnosis and treatment of disorders, diseases and deformities of the feet. Excludes Podiatric Surgery see TREATMENT FUNCTION CODE 663 |
| 2010337300 33 73 30clary remadilitation care | Programmed Pulmonary Rehabilitation | 653 342 | Programmed Pulmonary Rehabilitation | |
| | | 342 | Programmed Pulmonary Rehabilitation | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy |
| 2018937100 93 71 Allied health services | Prosthetics | 342 657 | Programmed Pulmonary Rehabilitation Prosthetics | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS |
| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition | Prosthetics Psychiatric Intensive Care | 342 657 723 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings |
| 2018937100 93 71 Allied health services | Prosthetics | 342 657 | Programmed Pulmonary Rehabilitation Prosthetics | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS |
| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition 2018935500 93 55 Allied health services | Prosthetics Psychiatric Intensive Care Psychotherapy | 342 657 723 713 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings |
| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition 2018935500 93 55 Allied health services 2018555100 55 51 Social / rehabilitation care 2018312100 31 21 Medical specialties | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine | 342 657 723 713 314 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions |
| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition 2018935500 93 55 Allied health services 2018555100 55 51 Social / rehabilitation care | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service | 342 657 723 713 314 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine |
| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition 2018935500 93 55 Allied health services 2018555100 55 51 Social / rehabilitation care 2018312100 31 21 Medical specialties 2018394500 39 45 Medical subspecialties | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology | 342 657 723 713 314 340 341 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological measurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) |
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| 2018937100 93 71 Allied health services | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry | 342 657 723 713 314 340 341 319 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Respiratory Exercise Respiratory Physiology | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological measurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodomics, Periodomics and Prostrodomics are all part of Restorative Dentityry |
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| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition 2018935500 93 55 Allied health services 2018555100 55 51 Social / rehabilitation care 2018312100 31 21 Medical specialties 2018394500 39 45 Medical subspecialties 2018551100 55 11 Social / rehabilitation care 2018515100 51 51 Maxilio-facial / oral surgery 2018559100 55 91 Social / rehabilitation care | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology | 342 657 723 713 314 340 341 319 141 410 345 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rehumatology | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERNICES to unlerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological measurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodontics, Periodontics and Prosthodontics are all part of Restorative Dentistry SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments |
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| 2018937100 93 71 Allied health services | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speck And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine | 342 657 723 713 314 340 341 319 141 410 345 652 323 108 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Respiratory Entire Physiology Respite Care Resporative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy. The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to underable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological measurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodontics, Periodontics and Prosthodontics are all part of Restorative Dentistry SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments Specialist rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Services' criteria and is registered as a Level 2a service. For further information see the NHS Specialised Services website The assessment, treatment and help to prevent speech, language and swallowing difficulties To be used by recognised specialist units and associated outreach SERVICES only, Excludes Spinal Surgery Service - see TREATMENT FUNCTION CODE 108 Surgery concentrating on specialised and complex treatment of the back and spine. The SERVICE has a significantly different composition and profile from the SERVICE provided in TREATMENT FUNCTION CODE - 110 Trauma & Orthopaedic: Carciues Spinal Junives - see TREATMENT FUNCTION CODE - 110 Trauma & Orthopaedic: Carciues Spinal Junives - see TREATMENT |
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| 2018937100 93 71 Allied health services | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speck And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine | 342 657 723 713 314 340 341 319 141 410 345 652 323 108 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Respiratory Entire Physiology Respite Care Resporative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy. The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological meassurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodontics, Periodontics, and Prosthodontics are all part of Restorative Dentistry SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments Specialist rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Services' criteria and is registered as a Level 2a service. For further information see the NHS Specialised Services website The assessment, treatment and help to prevent speech, language and swallowing difficulties To be used by recognised specialist units and associated outreach SERVICES only, Excludes Spinal Surgery Service - see TREATMENT FUNCTION CODE 108 Surgery concentrating on specialised and complete reteration of the back and spine. The SERVICE has a significantly different composition and profile from the SERVICE provided in TREATMENT FUNCTION CODE - 110 Trauma & Orthopaedic. Excludes Spinal Impries - see TREATMENT FUNCTION CODE 323 The diagnosis and management of medical problems caused by ph |
| 2018937100 93 71 Allied health services 2018817500 81 75 Mental health and cognition 2018935500 93 55 Allied health services 20189355100 55 51 Social / rehabilitation care 2018312100 31 21 Medical specialties 201859100 55 51 Social / rehabilitation care 201855100 51 51 Maxillo-facial / oral surgery 2018559100 55 91 Social / rehabilitation care 2018559100 55 93 Social / rehabilitation care 2018393100 93 31 Allied health services 2018556100 55 61 Social / rehabilitation care 201821700 21 27 Surgical specialties 2018353100 37 11 Medical subspecialties 2018353100 35 31 Medical subspecialties 2018392100 39 21 Medical subspecialties | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine Thoracic Surgery Transient Ischaemic Attack | 342 657 723 713 314 340 341 319 141 410 345 652 323 108 325 328 173 329 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine Thoracic Surgery Transient Ischaemic Attack | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological measurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodontics, Periodontics and Prosthodontics are all part of Restorative Dentistry SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments Specialist rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Service's criteria and is registered as a Level 2a service. For further information see the NHS Specialised Services website The assessment, treatment and help to prevent speech, language and swallowing difficulties To be used by recognised specialist units and associated outereds PSRIVICES only. Excludes Spinal Surgery Service - see TREATMENT FUNCTION CODE 108 Surgery concentrating on specialised and complex treatment of the back and spine. The SERVICE has a significantly different composition and profile from the SERVICE provided in TREATMENT FUNCTION CODE 329 The diagnosis and management of medical problems caused by physical activity, the prevention of related injury and disease and the role of exercise |
| 2018937100 93 71 Allied health services | Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine Thoracic: Surgery | 342 657 723 713 314 340 341 319 141 410 345 652 323 108 325 328 173 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine Thoracic Surgery | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy. The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological meassurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodontics, Periodontics, and Prosthodontics are all part of Restorative Dentistry SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments Specialist rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Services' criteria and is registered as a Level 2a service. For further information see the NHS Specialised Services website The assessment, treatment and help to prevent speech, language and swallowing difficulties To be used by recognised specialist units and associated outreach SERVICES only, Excludes Spinal Surgery Service - see TREATMENT FUNCTION CODE 108 Surgery concentrating on specialised and complete reteration of the back and spine. The SERVICE has a significantly different composition and profile from the SERVICE provided in TREATMENT FUNCTION CODE - 110 Trauma & Orthopaedic. Excludes Spinal Impries - see TREATMENT FUNCTION CODE 323 The diagnosis and management of medical problems caused by ph |
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| 2018937100 93 71 Allied health services | Prosthetics Psychlatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Restorative Dentistry Rheumatology Specialist Rehabilitation Service Speech And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine Thoracic Surgery Transient Ischaemic Attack Transplantation Surgery Trama & Orthopaedics Tropical Medicine | 342 657 723 314 340 341 319 141 410 345 652 323 108 173 329 102 110 | Programmed Pulmonary Rehabilitation Prosthetics Psychiatric Intensive Care Psychotherapy Rehabilitation Service Respiratory Medicine Respiratory Physiology Respite Care Respiratory Physiology Respite Care Respiratory Endicine Respirative Dentistry Rheumatology Specialist Rehabilitation Service Specal And Language Therapy Spinal Injuries Spinal Surgery Service Sport And Exercise Medicine Stroke Medicine Thoracic Surgery Transient Ischaemic Attack Transplantation Surgery Transma & Orthopaedics Tropical Medicine | A multidisciplinary programme of care for PATIENTS with chronic respiratory impairment that is individually tailored and designed to optimise the individual's physical and social performance and autonomy. The supply of prosthetics for PATIENTS The provision of psychiatric SERVICES to vulnerable individuals who are admitted to Psychiatric Intensive Care Units from open acute wards and forensic settings SERVICES providing therapy used to treat emotional problems and mental health conditions SERVICES to enhance and restore functional ability and quality of life to those with physical impairments or disabilities. Excludes Mental Health Recovery and Rehabilitation Service - see TREATMENT FUNCTION CODE 725 Also known as Thoracic Medicine Physiological measurement of the function of the respiratory system. Includes Sleep Studies (the diagnosis and treatment of sleep disordered breathing, including upper airway resistance syndrome and sleep apnoea) SERVICES providing temporary care of a dependant person, providing relief for their usual caregivers Endodontics, Periodontics and Prosthodontics are all part of Restorative Dentistry SERVICES to treat rheumatism, arthritis, and other disorders of the joints, muscles and ligaments Specialist rehabilitation SERVICE which meets the NHS Specialised Services Rehabilitation Services' criteria and is registered as a Level 2a service. For further information see the NHS Specialised Services website The assessment, treatment and help to prevent speech, language and swallowing difficulties To be used by recognised specialist units and associated outreach SERVICES only, Excludes Spinal Surgery Service - see TREATMENT FUNCTION CODE 108 Surgery concentrating on specialised and complex treatment of the back and spine. The SERVICE has a significantly different composition and profile from the SERVICE provided in TREATMENT FUNCTION CODE - 110 Trauma & Orthopaedic. Excludes Spinal Junives - see TREATMENT FUNCTION CODE - 110 Trauma & Orthopaedic. Excludes Spinal Junives - see TREATMENT |

 2018213100
 21
 31
 Surgical specialties
 Vascular Surgery
 107
 Vascular Surgery

 2018454100
 45
 41
 Obstetrics / gynaecology
 Well Babies
 424
 Well Babies

Surgical treatment of diseases of the vascular system

Use when NEONATAL LEVEL OF CARE = 0 · Normal Care: Care given by the mother/substitute with medical and neonatal nursing advice if needed. See Well Baby

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|-------|--------------------------------|---|------------------|--|-------|
| 2018111111 | 11 | 11 | Treatment complete | Treatment complete | 182992009 | Treatment completed (situation) | |
| 2018211111 | 21 | 11 | Streamed at assessment | Streamed to primary care service / GP | 1077021000000100 | Streamed from emergency department to general practitioner following initial assessment (situation) | |
| 2018212111 | 21 | 21 | Streamed at assessment | Streamed to Urgent Care Centre | 1077031000000103 | Streamed from emergency department to urgent care service following initial assessment (situation) | |
| 2018213111 | 21 | 31 | Streamed at assessment | Streamed to Emergency Department | 1077781000000101 | Streamed to emergency department following initial assessment (situation) | |
| 2018214111 | 21 | 41 | Streamed at assessment | Streamed to Ambulatory Emergency Care service | 1077081000000104 | Streamed from emergency department to ambulatory emergency care service following initial assessment (situation) | |
| 2018215111 | 21 | 51 | Streamed at assessment | Streamed to falls service | 1077091000000102 | Streamed from emergency department to falls service following initial assessment (situation) | |
| 2018215511 | 21 | 55 | Streamed at assessment | Streamed to frailty service | 1077101000000105 | Streamed from emergency department to frailty service following initial assessment (situation) | |
| 2018216111 | 21 | 61 | Streamed at assessment | Streamed to mental health service | 1077041000000107 | Streamed from emergency department to mental health service following initial assessment (situation) | |
| 2018311111 | 31 | 11 | Streamed at assessment | Streamed to pharmacy service | 1077071000000101 | Streamed from emergency department to pharmacy service following initial assessment (situation) | |
| 2018313111 | 31 | 31 | Streamed at assessment | Streamed to dental service | 1077051000000105 | Streamed from emergency department to dental service following initial assessment (situation) | |
| 2018315111 | 31 | 51 | Streamed at assessment | Streamed to ophthalmology service | 1077061000000108 | Streamed from emergency department to ophthalmology service following initial assessment (situation) | |
| 2018511111 | 51 | 11 | Left before treatment complete | Left before initial assessment | 1066301000000103 | Left care setting before initial assessment (finding) | |
| 2018512111 | 51 | 21 | Left before treatment complete | Left after assessment with intent to attend other healthcare provider | 1066311000000101 | Left care setting after initial assessment (finding) | |
| 2018514111 | 51 | 41 | Left before treatment complete | Left after assessment but before treatment complete (destination unknown) | 1066321000000107 | Left care setting before treatment completed (finding) | |
| 2018811111 | 81 | 11 | Died | Dead on arrival | 63238001 | Dead on arrival at hospital (finding) | |
| 2018812111 | 81 | 21 | Died | Died in the Emergency Care facility | 75004002 | Emergency room admission, died in emergency room (procedure) | |

Notes

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED Description |
|--------------------------|----------|----------|---|---|------------------------------|--|
| 2018111100 | 11 | 11 | No safeguarding issue | No safeguarding issues identified | 861931000000100 | No safeguarding issues identified (finding) |
| 2018221100 | 22 | 11 | Concern | Frequent attender of emergency department | 826931000000104 | Frequent attender of accident and emergency department (finding) |
| 2018221500 | 22 | 15 | Concern | Delay in seeking medical advice | 449889006 | Delay in seeking medical advice (finding) |
| 2018222100 | 22 | 21 | Concern | Child is cause for safeguarding concern | 836881000000105 | Child is cause for safeguarding concern (finding) |
| 2018223100 | 22 | 31 | Concern | Adult safeguarding concern | 766561000000109 | Adult safeguarding concern (finding) |
| 2018224100 | 22 | | Concern | Family is cause for concern | 300731000000106 | Family is cause for concern (finding) |
| 2018225100 | 22 | 51 | Concern | Carer behaviour is cause for safeguarding concern | 1076171000000100 | Carer behaviour is cause for safeguarding concern (situation) |
| 2018226100 | 22 | | Concern | Unborn child is cause for safeguarding concern | 878111000000109 | Unborn child is cause for safeguarding concern (finding) |
| 2018311100 | 31 | | At risk - general | At risk for deliberate self harm | 401206008 | At risk for deliberate self harm (finding) |
| 2018312100 | 31 | | At risk - general | At risk of physical abuse | 416936003 | At risk of physical abuse (finding) |
| 2018312300 | 31 | | At risk - general | At risk for other-directed violence | 129707006 | At risk for other-directed violence (finding) |
| 2018313100 | 31 | | At risk - general | Child at risk | 160877008 | Child at risk (finding) |
| 2018313300 | 31 | | At risk - general | Vulnerable adult At risk of financial abuse | 417430008 761571000000106 | Vulnerable adult (finding) |
| 2018315100 2018315500 | 31 31 | | At risk - general At risk - general | At risk of discriminatory abuse | 417427001 | At risk of financial abuse (finding) At risk of discriminatory abuse (finding) |
| 2018316100 | 31 | | At risk - general | At risk of institutional abuse | 838481000000106 | At risk of institutional abuse (finding) |
| 2018310100 | 31 | | At risk - general | At risk of human trafficking | 1045861000000100 | At risk of histitutional abuse (midnig) At risk of human trafficking (finding) |
| 2018317100 | 31 | | At risk - general | At risk of radicalisation | 1076841000000100 | At risk of radicalisation (finding) |
| 2018317700 | 31 | | At risk - general | Has child subject of child protection plan | 864491000000105 | Has child subject of child protection plan (situation) |
| 2018318300 | 31 | | At risk - general | Family member subject of child protection plan | 375041000000100 | Family member subject of child protection plan (situation) |
| 2018318700 | 31 | 87 | At risk - general | Domestic abuse victim in household | 881081000000100 | Domestic abuse victim in household (finding) |
| 2018351100 | 35 | | At risk - psychological / sexual | At risk of domestic violence | 707087005 | At risk of domestic violence (finding) |
| 2018353100 | 35 | | At risk - psychological / sexual | At risk of sexual abuse | 417361000 | At risk of sexual abuse (finding) |
| 2018353500 | 35 | | At risk - psychological / sexual | At risk of sexual exploitation | 919461000000108 | At risk of sexual exploitation (finding) |
| 2018356100 | 35 | | At risk - psychological / sexual | At risk of female genital mutilation | 713201008 | At risk of female genital mutilation (finding) |
| 2018356500 | 35 | 65 | At risk - psychological / sexual | At risk of honour based violence | 1066201000000100 | At risk of honour based violence (finding) |
| 2018356900 | 35 | 69 | At risk - psychological / sexual | At risk of forced marriage | 1054321000000100 | At risk of forced marriage (finding) |
| 2018357100 | 35 | 71 | At risk - psychological / sexual | At risk of emotional abuse | 1065691000000100 | At risk of emotional abuse (finding) |
| 2018357500 | 35 | | At risk - psychological / sexual | At risk of psychological abuse | 1045831000000100 | 1 , 3 , 3 |
| 2018511100 | 51 | 11 | Drug / alcohol / neglect | Suspected alcohol abuse | 415685003 | Suspected alcohol abuse (situation) |
| 2018511500 | 51 | 15 | Drug / alcohol / neglect | Family history of alcohol misuse | 293161000000103 | Family history of alcohol misuse (situation) |
| 2018512100 | 51 | 21 | Drug / alcohol / neglect | Suspected drug abuse | 162591001 | Suspected drug abuse (situation) |
| 2018512500 | 51 | 25 | Drug / alcohol / neglect | Family history of substance misuse | 287351000000105 | Family history of substance misuse (situation) |
| 2018514100 | 51 | 41 | Drug / alcohol / neglect | Suspected victim of child neglect | 702953007 | Suspected victim of child neglect (situation) |
| 2018515100 | 51 | 51 | | Self-neglect | 248054003 | Self-neglect (finding) |
| 2018551100 | 55 | | Psychological / sexual | Suspected victim of emotional abuse | 697951004 | Suspected victim of emotional abuse (situation) |
| 2018552100 2018552200 | 55 55 | 21 22 | Psychological / sexual Psychological / sexual | Suspected victim of sexual abuse Suspected victim of child sexual abuse | 702579009 700254002 | Suspected victim of sexual abuse (situation) Suspected victim of child sexual abuse (situation) |
| 2018552500 | 55 | 25 | Psychological / sexual | Suspected victim of crinic sexual abuse Suspected victim of sexual grooming | 700254002 | Suspected victim of child sexual abuse (situation) Suspected victim of sexual grooming (situation) |
| 2018555100 | 55 | 51 | Psychological / sexual | Alleged victim of sexual assault | 297591000000108 | Alleged victim of sexual assault (situation) |
| 2018661100 | 66 | 11 | General / physical | Suspected non-accidental injury to child | 700255001 | Suspected non-accidental injury to child (situation) |
| 2018661500 | 66 | 15 | General / physical | Suspected victim of child abuse | 162596006 | Suspected victim of child abuse (situation) |
| 2018663100 | 66 | 31 | General / physical | Suspected domestic abuse | 697950003 | Suspected domestic abuse (situation) |
| 2018665100 | 66 | 51 | General / physical | Suspected victim of physical abuse | 697949003 | Suspected victim of physical abuse (situation) |
| 2018665500 | 66 | 55 | General / physical | Suspected victim of bullying | 1065911000000100 | Suspected victim of bullying (situation) |
| 2018669100 | 66 | 91 | General / physical | Disclosure of being subjected to abuse | 1065901000000100 | |
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| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|-------|-------------------------|--|------------------|--|-------|
| 2018111111 | 11 | 11 | Discharged | Home | 306689006 | Discharge to home (procedure) | |
| 2018112111 | 11 | 21 | Discharged | Residential care facility without 24 hour nursing care (e.g. residential home) | 306691003 | Discharge to residential home (procedure) | |
| 2018113111 | 11 | 31 | Discharged | Residential care facility with 24 hour nursing care (e.g. nursing home) | 306694006 | Discharge to nursing home (procedure) | |
| 2018114111 | 11 | 41 | Discharged | Police | 306705005 | Discharge to police custody (procedure) | |
| 2018114511 | 11 | 45 | Discharged | Custodial services e.g. prison / detention centre | 50861005 | Patient discharge, to legal custody (procedure) | |
| 2018311111 | 31 | 11 | Ambulatory / short stay | Short stay (less than 24hr) ward outside the ED but managed by ED | 1066331000000109 | Emergency department discharge to emergency department short stay ward (procedure) | |
| 2018312111 | 31 | 21 | Ambulatory / short stay | Ambulatory Emergency Care service | 1066341000000100 | Emergency department discharge to ambulatory emergency care service (procedure) | |
| 2018313111 | 31 | 31 | Ambulatory / short stay | Hospital in the home service | 1066351000000102 | Discharge to hospital at home service (procedure) | |
| 2018511111 | 51 | 11 | Admitted | Ward – physical ward bed outside ED | 306706006 | Discharge to ward (procedure) | |
| 2018551111 | 55 | 11 | Admitted | High Dependency Unit (level 2) | 1066361000000104 | Emergency department discharge to high dependency unit (procedure) | |
| 2018553111 | 55 | 31 | Admitted | Coronary Care Unit (level 2) | 1066371000000106 | Emergency department discharge to coronary care unit (procedure) | |
| 2018555111 | 55 | 51 | Admitted | Special Care Baby Unit (level 2) | 1066381000000108 | Emergency department discharge to special care baby unit (procedure) | |
| 2018611111 | 61 | 11 | Admitted | Intensive Care Unit (level 3) | 1066391000000105 | Emergency department discharge to intensive care unit (procedure) | |
| 2018614111 | 61 | 41 | Admitted | Neonatal Intensive Care Unit (level 3) | 1066401000000108 | Emergency department discharge to neonatal intensive care unit (procedure) | |
| 2018911111 | 91 | 11 | Transfer | Transfer to another hospital | 19712007 | Patient transfer, to another health care facility (procedure) | |
| 2018951111 | 95 | 11 | Died | Mortuary | 305398007 | Admission to the mortuary (procedure) | |

| ECDS_UniqueID | Sort1 | Sort2 | ECDS_Group | ECDS_Description | SNOMED_Code | SNOMED_Description | Notes |
|---------------|-------|-------|-------------|--|------------------|---|-------|
| 2018111100 | 11 | 11 | Community | General Practitioner | 989501000000106 | Discharge from Accident and Emergency service with advice for follow up treatment by general practitioner (procedure) | |
| 2018112100 | 11 | 21 | Community | Physiotherapy | 306170007 | Referral to physiotherapy service (procedure) | |
| 2018113100 | 11 | 31 | Community | Dentist | 306735003 | Referral to general dental surgery service (procedure) | |
| 2018114100 | 11 | 41 | Community | Community psychiatric support services | 183584001 | Referral to community psychiatric nurse (procedure) | |
| 2018115100 | 11 | 51 | Community | Other community service | 710915002 | Referral to community service (procedure) | |
| 2018211100 | 21 | 11 | Hospital | Fracture clinic | 301791000000104 | Referral to fracture clinic (procedure) | |
| 2018212100 | 21 | 21 | Hospital | Ambulatory Care service | 898791000000105 | Referral for ambulatory care (procedure) | |
| 2018213100 | 21 | 31 | Hospital | Outpatients (not fracture clinic) | 1066111000000103 | Referral to outpatients department (procedure) | |
| 2018214100 | 21 | 41 | Hospital | Review in ED (scheduled) | 1077181000000100 | Follow-up review in emergency department (finding) | |
| 2018216100 | 21 | 61 | Hospital | Medical specialist (private) | 266747000 | Referral to private doctor (procedure) | |
| 2018911100 | 91 | 11 | No referral | No referral | 3780001 | Routine patient disposition, no follow-up planned (procedure) | |

ECDS_UniqueIDSort 1ECDS_GroupECDS_DescriptionECDS_CodeSNOMED_DescriptionNotesn/an/aCopy of discharge letter provided to patient787281000000102Provision of copy of discharge letter to patient (procedure)

DATA GROUP: RESEARCH AND OUTBREAK NOTIFICATION

FUNCTION: To carry details of any Research and/or Disease Outbreak Notifications. Group Status: O Group Repeats: 0..1

| DATA GROUP | DATA ITEM NAME | DATA ITEM DEFINITION | | DATA ITEM REPEATS | FORMAT | SNOWED CT/DMAD/005 | JUSTIFICATION | ECOS CODE SET | LINK TO CURRENT CDS Type \$18 NEGRMATION ONLY | VALIDATION RULES | | DATA ITEM PROVENANCE | NOTES |
|-------------------------------------|------------------------------|---|---|----------------------|-----------|--------------------|--|-----------------|--|--|------------------------|----------------------|--|
| | | | | | | | | | | POPULATION VALIDATION F - Format is validated V - Validated against an explicit list of permitted values as defined in the NHS Data Dictionary | POST SCHEMA VALIDATION | | |
| RISS ASCHARGE OUTSEARS NOTIFICATION | CARCE TORK ESSIVERS | A surgest advertifor range of tra G. RECS, TRUL. | 0 | 0.1 | max and/0 | OMEO | loose, all manufacts his largeages (can in this bit is Apparented House, and Membero attack and supportion has been control for any measure, and apparent has been control for any measure, and a place of a position of a positio | or NY sat | trja | is . | n/a | NSW A&E data bem | CARROLL TRACK CONTROLL THE CARROLL THROUGH THR |
| RESEARCH AND OUTSREAK NOTIFICATION | OSSASE OUTSBLAK NOTISICATION | DISSES COTISES AN EXPENSION to what the NECK WE'S 12 years (12 - Lineagency Card Commissioning Date for to support efficient or distribution wherething stating to undersist of state with an interflect in Energops Com- plements, Weber 1900/416 CT COST is assisted, the DISSES COTISES AN EXPENSION field shad consist min. If a 2400/650 CT COST is NCT assistant, than it is permissible to submit the half didn't the disses. | T | 0.1 | max an20 | DM&D | By exhibiting this field, the data set will address by National Institute of Health Research (1992) provides for efficient research design, and will enable research into and rapid response to major infectious disease health threats. | m/a | n/a | F | n/a | NEW A&E data item | DISEASE CUTBERS NOTIFICATION is collected for a specified purpose at national level only and will not be variable from the Secondary Uses Service for use by unsubhorized ORCANISATIONS or Individuals. |

| DATA GROUP | SATE PER NAME | DATA PEW DEPORTOR | SCHEMA COUR DATA FEM III STATUS PROD (MINO) | DATA DATA ITEM REPEATS M MED | FORMAT | BHOMED CT / EMAD IONS | JURTIPICATION | NCDS COOK BAT | LINK TO CURRENT CDG Type 618 BIPOREE TION ONLY | NACES TO A RELEASE | | DATA ITEM PROVENANCE | NOTES |
|---|--|--|--|------------------------------------|---------------------------------|-----------------------|--|--|--|---|--|--|--|
| | | | , man " | , | | | | | | POPULATION VALIDATION | POST SCHEMA VALIDATION | - | |
| | | | | | | | | | | For Personal its subdished Y - Personal its subdished Y - Validated apprival are explicit that of personal values are defined in the 1000 Casta | | | |
| PATRICT PATRICT - PATRICT PATRICT CONTITY | | | | | | | | | | , | | | |
| DATA GROUP ETATUS M DATA GROUP REPEATS 1.1 | | | | | | | | | | | | | |
| NOTES: Balans wine "UNIQUE BOOKING REPERENCE NUMBER (CONVERTED)" or T PASSAM PATHEMY - PATENT PASHANY IDENTITY | PATENT PATHALY GENERALS UNIQUE GEOGRAS REFERENCE NUMBER (CONVERTED) | The usique booking reference number assigned by the Choose and Book system when a PATERNT accepts an | Iv Is | li-r | lez | CMAZO | As per CDS 8.2 Type 010 | Ira | Transverse detailement of the skiller de | le. | na . | Originates from AME CDS Type 010 | After salvie UNIQUE BOOKING REFERENCE NUMBER (CONVERTED) |
| | | The region better primers nation assigned by the Young as black space share. First Not discuss and Notice Whited Cold Services of an Americanic CHIES where the same can be as Document Back spaces. The region of the Primers of the Primers of the Services of the Service | | | | | | | connection feet consequences to an in inference currier increased de an inference currier increased de an | | | | OR PATIENT PATHWAY IDENTIFIER |
| | | recorded, and the PATISHT has been placed on an Out-Patient titlating List even if subsequently the PATISHT does not attend or canonic the APPCINTMISH. | | | | | | | | | | | |
| | | UNIQUE ROCKING REFERENCE NUMBER (CONVENTED) should only be recorded where the type of booking system is the Choose and Book system. | | | | | | | | | | | |
| PATIENE PATHEAY - PATIENT PATHWAY IDENTITY | PATIENT PATHWAY IDENTIFIER | An identifier, which supplies with the ORGANISATION COOK / ORGANISATION IDENTIFIER of the issuer, uniquely identifies a PATRICT PATHORY. This is a specific type-of the assistant ACTIVITY IDENTIFIER. | M N | 1.1 | ara0 | DMAD | As per CDS 6.2 Type 010 | ria. | ten l'inne dataditionen niu schite di tonanytista faiti nonely-parpatiere par terior identifer de ass'inhoustance | * | Na | Originates from A&E CDS Type 010 | EINER GUINT UNICLE BOOKING REFERENCE NUMBER (CONVERTED) OR PATHENT PATHWAY ICENTIFIER |
| | | This is a specific type of the attitude X-CTIVITY CONTINUEX. Where a partney is initiated by a SERVING RECOLDED using the Choice and Block system, the PATENT PATHANX will be unquely identified by the Unique Booking Reference Humber (UBDR) of the first indental and the | * | | | | | | | | | | |
| | | The as a special, register the adults also CENTER CENTERS AS THE ASSESSMENT OF THE A | | | | | | | | | | | |
| PATIENT PATHEAY - PATENT PATHANY IDENTITY | ORGANISATION IDENTIFIER (PATIENT PATHALAY IDENTIFIER GIGLER) | COSTANDATION (SATISFIES AND LINEARS THAT ARE PARTIES FARMED AND LINEARS AND LINEARS AND LINEARS AND LINEARS AND LINEARS AND LINEAR A | M N | 1.1 | min and max and | 009 | As per CDS 6.2 Type 010 | ria . | tro house datable to our me up data de cours ambient you be assessed on code de anni francesco | • | via | Originates from A&E CDS Type 010 | |
| PATERNY PATHWAY - REPERRAL TO TREATMENT PERIOD CHARACTERISTICS DATA GROUP STATUS M | | | | _ | | | | | de asof domonos | | | | |
| DATA GROUP REPEATS 1.1 | | | | | | | | | | | | | |
| PATEINT PATHAGE - REPERRIL TO TREATMENT PERIOD CANALITERETICS | REFERON. TO TREATMENT PERIOD STATUS | The status of an ACTIVITY for anticipated ACTIVITY) for the REPERBAL TO TREATMENT PERSOD decided by the lead CARE PROFESSIONAL. | M N | 1.1 | and | OMAD | As per CDS 6.2 Type 010 | Link to code and | topologies detacherany risk serials de topologies feet constructivities at partners period status de assistation as | v | nia | Originates from A&E CDS Type 010 | |
| PATIENT PATHWAY - REPERPAL TO TREATMENT PERIOD CHARACTERISTICS | WATER TIME MEASUREMENT TYPE | The type of waiting time measurement methodulogy which may be applied during a PATIENT PATHONAY. The methodulogy applied may be for one part of a PATIENT PATHONAY, without the measurement of a REFERENCE TO TREATMENT PERIOD, or other parts of the PATHONAY according to Department of Health policy. | M N | 1.1 | wa | CMAD | As per CDS 6.2 Type 010 | Link to coolin and | ED Trans detailment on section in total right and construents fine | · v | nia | Originates from A&E CDS Type 010 | |
| | | TO TREATMENT PERIOD, or other parts of the PATHENT PATHENAY according to Department of Health-policy. | | | | | | | passened for draw blomand | | | | |
| PATIENT PATHWAY - REFERRAL TO TREATMENT PERSON CHARACTERISTICS | S REPERFOR TO TREATMENT PERIOD START DATE | The start date of a REPERFAL TO TREATMENT PERFOO. | 0 N | 0.1 | ains CCYY-MM-OID | DMMD | As per CDS 6.2 Type 010 | ena . | tric Type Strak Stran McGride & Sonarches Set noneconductoral to | | nia . | Originates from A&E CDS Type 010 | |
| PATIENT PATHWAY - REFERRAL TO TREATMENT PERIOD CHARACTERISTICS | REFERRAL TO TREATMENT PERIOD END DATE | The end date of a REFERRAL TO TREATMENT PERIOD. | 0 N | 0.1 | avio ocyy-sim-ob | DMAD | As per CDS 6.2 Type 010 | eia. | instruct period start date de accinho artisted | F | nia | Originates from A&E CCS Type 010 | |
| PATENT PATHWAY - WITHHELD IDENTITY ETRUCTURE | | | | | | | | | Sonanciates feet nonequivalisational to patients defect and date draws hitcon (about | | | | |
| DATA GROUP STATUS. | | | | | | | | | | | | | |
| GRIA GROUP STATUS GRIA GROUP SEPERATE 1.1 MOTES: Would be used where the Commissioning Data Set record has been assemble | _ | | | | | | | | | | | | |
| MITENT GENTLY - WITHOUT GENTLY STAUCTURE | NHS NUMBER STATUS RESIGNATION CODE | The tolore status of the NHS number. | M N | 1.1 | and . | DMED | July per COS 6.3 Type 030 | Link to sode set | http://www.dafadetonare.etc.uk/lida_do tonarelida_bidd_estech-bis.htm | * | n/a | Degrades from ABE CDS Type 030 | |
| PATRICT CREATERY - WITHHELD CREATERY STRUCTURE | ORGANISATION CONTINUE (INSCRICE RESPONSIBLITY) | ORGANIZATION DENTITIES (RESCENCE REPONSESSITY) is the ORGANIZATION DENTITIES devived from the PATENT'S POSTCOOR OF USUAL ADDRESS, where they really within the Insurating of a: | к м | 0.1 | min and max and | 008 | Updated to new Organisation code | e/a | http://www.datade/inservoles.de/data/data/ inservoleta/field nates/indexide, eurole or status indicator code de ass/houseau http://www.datade/inservoles.de/data/data/data/ | , | n/a | Originales Non AMI COLType 030 | |
| | | Clinia Commissioning Group Clare Trail | | | | | passes | | http://www.databaltimary.chi.childat.chi (mary.lata field natroliologicapinario p. sale brokenir mary.latin/ de auch (martin) | | | | |
| | | *Classed Commissioning Group *Land Hook Based (Street) *Land Hook Based (| | | | | | | | | | | |
| | | Primary Healthcare Directorate (lide of Man) Initial Authority. | | | | | | | | | | | |
| MATERY GRAFTY - WISHELD GRAFTY STRUCTURE | WITHHILD DESIGNY MEADON | WTHHILD DESCRIP MAJOR allows supplies of data on except to initiate to respirate of the except for example, the Commissioner of the activity) that the record has been purposely assorption for a valid massin. | | 0.1 | and | DMED | Ju per COS 6.3 Type 030 | Link to under set | http://www.datedritoracy.ch.uk/date.do (marchista field notes/w/we/withed) politic reason draws/bloomacs/ | Ť | n/a | Drigosales Now A&E COS Type 030 | |
| PATRAT PATHWAY - VERPED DENTITY STRUCTURE DATA GROUP STATUS | | - | | | | | | | • | | | | |
| DATA ORDER TRATES DATA ORDER FERFALTS 1.1 NOTES: When he used where the NPES NUMBER STATUS ROSCATOR CODE Nationals | Code x 21 Number ursums and verified) | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| MATERY GENTLY - LOCAL PATENT GENTRES STRUCTURE MATERY GENTLY - LOCAL PATENT GENTRES STRUCTURE | LOCAL PATRIAT IDENTIFIES (INTERIOR) | A number used to identify a PATENT uniquely edition a World Care Provider. It may be different from the PATENT's care mire number and may be acquired automatically by the computer updem. ORGANISATION CONTINUES DOCUS PATENT CONTINUES to the ORGANISATION CONTINUES DOCUS PATENT AND ANALYSIS OF CONTINUES TO CONTINUES. AND ADMINISTRATION CONTINUES. | | 1.1 | max and 0 | DAMED | As yer COS 6.3 Type 030 Updated to new Organisation code guidelines. | 1/4 | hts/femilateletimerush.uktida du timerutata beta nates/Articol autent destiter deau Novembro hts/femilateletimerysh.uktida du | | n/a | Originates from ABE COSType-020 Distinates from ABE COSType-020 | |
| MATERY CHAPTY - LOCAL PATERY GENTINES STRUCTURE | CHADAGATION CONTINUE (CCCLL PATTERT CONTINUES) | OREMENTON CONTROL DOCK PETERT DESITINGS, a.b. OREMENTON DESTREE of the Organization that anogone the SOCIL PETERT EDITIFIES. | | 1.1 | min and max and | dox | | 4/4 | http://www.databilionary.ch.c.dc/lide do tomary/late field rodes/by/arglingsmatte a sode floor) patient (dentifier) de augh- temary.cl | | n/a | | |
| MATERIAL DEPARTS - VIRENIES DEPARTS STRUCTURE | N/45 NUMBER | The NHS NUMBER, the primary identifier of a PERION, is a unique identifier for a PETERT within the NHS in England and Males. | | 1-1 | +33 | DMSD | da per COS 6.3 Type 030 da per COS 6.3 Type 030 | */* | http://www.datadetorary.ch.uk/data_do torary/data_field_notes/in/shahits_numb | | n(a | Disposates New ABS CDS Type-020 | |
| PATENT DESTITY - VERYED DENTITY STRUCTURE | NHS NUMBER \$15.7US INDICATOR CODE | The Insur status of the NHS number. | | 1.1 | and | DAMECO | | Lock to andread | er de aus Novemberold hits // www.datade/tomaryolos.ch/data_do forward/data_fold_mates/in/his-lenke_mank er status indicator under de aus Novemberold | * | n/a | | |
| MATERY DEATHY - VERYIS GENTY ENGINEE | POSTCODE OF USUAL ADDRESS. | The code assigned by Engol Mail to identify poolal delivery areas series the United Engines. | | 1-1 | max and | DAME.D | 26 per CDS 6.3 Type 030 | n/a | The control of the co | | n/a | Originates from ABE COSType-020 | |
| PATRIAT GENTLY - VERFIG GENTLY STACTURE | ORGANIZATION GENTRIES (RESCENCE RESPONSIBILITY) | An ORGANIATION CODE is a code which literature an Organization uniquely. | | 0.1 | min and max and | 006 | Updated to new Organization code guidelines | e/a | ida Mese dalah basayah shilida da Sesarahida Sela selasia kesistesakansi | | n/a | Diginales from AMI CDI Type 510 | |
| NUMBER DESCRIPT - VERSING DESCRIPT STRUCTURE | MIRON BITH DATE | The date on which a PEECN was born or is officially deemed to have been born. | x 8 | 0.1 | and CEW MM CO | DAMEO | 8s. yer COS 6.3 Type 030 | e/a | e sode fembleme versenskrive de soch bosensen? Mari Ferne delade lineary obs. skrivta de bosenskrivta field materialemskersen bi | | n/a | Originales have ABE CDS Type 930 | |
| PATIENT PATHWAY - UNIVERSED CONTITY STRUCTURE | | 1 | | | | l | | | is dife drawblesered | | | | |
| PATENT PERMAN - INVENTED CONTITY STRUCTURE ONLY GROUP REPAIR ONLY GROUP REPAIR I.1 MOTES IN-INVENTED CONTITY STRUCTURE (CONVENTED) WITH ANEXE CONTITY - INVENTED CONTITY STRUCTURE ANEXE CONTITY - INVENTED CONTITY STRUCTURE ONLY IN CONTITY - INVESTIGATION CONTINUES (CONTINUES OF CONTINUES | | | | | | | | | | | | | |
| MATERY CENTEY - UNERFIELD DENTTY STRUCTURE | LOCAL PATRIAT GENTPER (INTENDED) | A sunder-count to strottly a PETERT company within a highli Clear Proteint it comp for different from the PETERT's commonly and only for different from the PETERT's commonly and only the conjugate department of the PETERT's commonly and part and part and partment of the PETERT's common for different from the PETERT's common for the PETERT's common for different from the PETERT's common for | | 1.1 | max an 20 | DAMED | 84 per CDS 6.3 Type 030 | 1/4 | http://www.fatadettorary.chu.uk/fata-for innary/fata-folid-notre/7/iffood-author/ ilmother-de-authorary.com/ | l' | n/a | Originates how ABE COLType 330 | |
| | | Where size for NHS patients is sub-commissioned in the independent uniter or oversea, the NHS commissioner PSS. Number should be used. If no NHS PSS Number has been uniqued the independent uniter or oversean PSS Number should | | | | | | | plantifier de aux filteranies () | | | | |
| PATENT GRATTY - UNIFERRID GENTTY ETRUCTURE | ORGANISATION GENTRIES (GOCIL PATIENT IGENTRIES) | or some. An ORGANISATION CODE is a color which identifies an Organisation uniquely. | | 1-1 | min and max and | 004 | Updated to new Organization code guidelines | e/a | http://www.datadetionary.chi.uk/lida_do bonary/data_field_noter/uk/palvesporation p_sode_field_satient_identifier(_de_asafe_ | | n/a | Originates Non A&E CDI Type 030 | |
| MITENT SENTEY - UNIFERING SENTITY STRUCTURE | NV6 NLAMER | The NMI NUMBER, the primary identifier of a PERSON, is a unique identifier for a PERSON within the NMI in England and Native. | | 8.1 | +13 | DINEO | As per CDS 6.3 Type 010 | a/a | transport Interview distributions of collection of | | n/a | Originates from ASE CDS Type 010 | |
| MATERY GRATEY - UNIFERFED DENSITY ETRUCTURE | ANS NUMBER SYSTAL INDICATOR CODE | The biase slabut of the NHS number | | 1.1 | and and | Street C | 8s.per CDS 6.2 Type 030 | MANAGE MA | in de ana historiana di hittp://www.datade.tomary.ch.col/data_do (onanylista_botd_natas/bobs/sch.comb | · | n/a | Organies how ABI CDI Type 330 | |
| MITENT SENTEY - UNIFERING SENTITY STRUCTURE | PRITEIN NAME - PERION NAME STRUCTURES OR | NUTERY MAKE IS the PERSON NAME where the PERSON NAME CLASSIFICATION IS Traffered Name" of the PATENT. | 0 8 | 8.1 | mar an 70 | DINEO | St. per COS 6.3 Type 030 | n/a | incomplete beld networkshocks again or status, indicator code de accelhocasion of the language of the design of the de- sign of the field and other status of the oral de accelhocation of the de- act de accelhocation. | | n/a | Dignates how AMI CDS Type 030 | |
| MITENT GENTLY - UNMERHED GENTLY STRUCTURE | OR MITEN NAME - PERION NAME UNSTRUCTURED PRITERY DIGHT ADDRESS - NODRESS STRUCTURED (Likely Remail Project Address) | FEERNT USUA ACCRESS is the used ACCRESS numericated by the PATRIXT, where the ACCRESS ASSOCIATION | | 8.1 | max an 175 (5 lines made an 15) | DANKO | Js. per COS 6.3 Type 030 | e/a | itta/lean falafilturaryity skilleta du | , | n/a | Originales from AMI CDS Type 030 | |
| PATRINT GENETY - UNDERFREG GENETTY ETRUCTURE | OR STREET USUAL ADDRESS - RODRESS UNIVERSITYUSED SCharacter street POSTCODE OF USUAL ADDRESS. | PRIEST VISUAL ADDRESS in the wood ADDRESS communical by the PATRIST, where the ADDRESS ASSOCIATION TOTAL is Maken Permanent Residence" or 'Diller Permanent Residence". The code analyzed by Royal Mad to shretify proclad derivery areas access the United Engines. | | 0.1 | rise and | DINED | Ja per COS 6.3 Type 030 | e/a | Immanistration that materials sufficient us and address of executive surveyed. What Propose datasets to many view shifted a dis- tance of the first to the materials of the change of paid address of executive surveyed. | | n/a | Driginales how A&E CDS Type (ISD) | |
| MUTERY CONTY - UNIONING CONTY STRUCTURE | ORGANIATION GENTIFIER (RESIDENCE REPONSIBILITY) | OREGINATION CONTINUE (RESCENCE RESPONSIBILITY) is the OREGINAL TON CONTINUE devived from the PATIENT'S | x 8 | 0.1 | min and max and | 006 | Updated to new Organization code | 4/4 | und allow to anthropout | | n/a | Diginales him AMI CDS Type 020 | |
| | | DESENTATION DESCRIPTION DESCRIPTION DE CONTRACTOR DE LA CONTRACTOR DE LA CONTRACTOR DE CONTRACTOR DE LA CONT | | | | | guidelines | | tite / here distalistica evolus distalis do los archides field not evilusiration positio a sobre fernidense responditivo de archi- losationis. | | | | |
| | | - Sandiloh Hedili Basad - Marilhen Intiand Land Commissioning Group - Homany Fedinand Lands Commissioning Group | | | | | | | | | | | |
| NUTRAL DENTLY - UNDERFED DENTLY STRUCTURE | PERCHANTAGAN | - incid Authority. The date on which a PESINI was been or is officially deemed to have been been. | | 0.1 | and COV MM CO | DMAD | As per CDS 6.3 Type 03.0 | 6/8 | hita//www.dataduliuranyohy.elitas.du | | n/a | Drainates flow AMI CDS Train 030 | |
| MUTERY CHARACTERISTICS (IMMRGENCY CARE) | PERSON STATES GRADER CODE | The gender of a MENDS. | x 8 | 0.1 | ant | DINEO | Ja per COS 6.3 Type 030. | Link to sode set | tonavitate held nateriolenskemen bi in date drawnhivenend | v | n/a | Diginales him AMI CDS Type 020 | |
| | | The gender of a PERION. PERION INTEREST CODE is self-declared an informed by observations for those unable to declare their PERION ITEMS CORONICATION. ITEMS CONDEX. | | | | | ds per CDS 6.2 Type-020. Updated to align to most recent information danderd to describe gender, shanged from Person Geoder Code. | | Marken databahan menghi shiida da | | | | |
| MATERIAL CHARACTERISTICS (SIMBRIGANCY CARG) | ETHALC CATIODAY | The ethnicity of a PERION, as specified by the PERION. | к к | 0.1 | max and | DMED | ds per CDS 6.3 Type 030 | (set to code set | Intervidate field notes/afterviewer at older sider summit de ausfahrenzund hite/hann fallsfahrtnamen haublides du terarolitate field notes/afterviehen, sales | ¥ | n/a | Originales Som AMI CDS Type 010 | |
| | | | | | | | | | an drawfilmound | | | | |
| MATERIAL CHARACTERISTICS (SIMBRIGANCY CARE) | ACCOMMODATION STATUS (WIGHING CT) | ACCOMMODATION STATUS (BROWNED CT) is the SNOWED CT canneys to which is used to identify the details of the ACCOMMODATION of the PREIGN. | × × | 0.1 | min nil max nI.E | INCHINO CT | This item is necessary to identify rates of ED treatment, administration and discharge of specific populations of | and to under set | e/a | | The angue parks are would be consistent a state of other three against all a reflected sides in Co., sample the state had suppose to the it cannot be a first park and the state with SLA assocs and otherwise and the state of the state of the state of the state of the state required to some of such as "Nate the remarks, I (shell I's, and in the anguestate to one of the state of the state of the state of the state of the sample state one with the state on our state of the state of the transport of the state of the state of the state of the state of the transport of the state of the stat | NEW ABE data tem | |
| | | <u> </u> | | | | | patients. This will calciumtally aid planning and delivery of care for specific population groups at both a | | <u> </u> | | available for diagnostic and trouble-booting, logic appropriately to require to som such as "likker for records X, field Y is not in the acceptable range" | | |
| MATERNY CHARACTERISTICS (SAMERGENCY CARE) | PREPARAD SPOKEN LANGUAGE (SWOMED CT) | PROTESTED SPORTS LINESSAGE (SECRED CT) is the SPORTS CT comings to which is used to capture the professed spates LANGUAGE of the PRESON. | | 0.1 | min oil man elif | SVOMED CT | Nonmany is understand how limit to provide for patient needs, identify language harries that may prevent | and to sode set | n/a | | for any data item which contains a value other than specified in referred code set, assept the natur but suppress it so it cannot have \$25° (it will be soldle to those with \$25 access and therefore | NW ALL data Eem | |
| | | | | | | | optimal healthcare and enable planning for how these may be amelocated. This data is excessary to account and how. | | | | ausfable for diagnosis and troubleshooting), log if appropriately to response to user such as "libbe for records X, field Y is not in the acceptable range". | 1 | |
| PAZENT CHARICTERISTICS (IMBRIGANCY CARE) | ACCESSELS INFORMATION PROFESSIONAL REQUIRES CODE (INCOMES CT) | ACCESSION REPORTATION REPORTS AND REQUIRED CODE (INCOMED CT) is the MICHAEL CT concept ID which is used to side-sity that the NUCLEAT requires support from a communication professional. | | 0.1 | min oil man elif | INDIMID CT | match patient need. Necessary is undestand howitest to | Lots for code set | n/a | , | for any data item which contains a value other than specified in | NEW ARE data from | |
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| NUTRINY CHRAICTERISTICS (IMMRGENCY CARE) | INTERMETER LANGUAGE (INCINE) CT) | INTERPETER LANGUAGE (MADASS CT) is the MADASS CT concept ID which is used to capture the performed quotien LANGUAGE of the communication professional. | | 0.1 | min nã mạu nIX | SWOMED CT | We have a surrection to admitty of the first first and the first f | Link to sode set | n/a | * | her any field then which contains a value at their than specified in the contained code or, assay the value had supported to it is cannot been taken for the solid to in how with this areas and foresther. The contained has been also been been about the solid contained as he say field the solid contained to the solid contained to the her any field the which contained out to their their specified or her any field the which contained contained the three specified or the solid contained to the solid contained the solid contained to the solid contained to the solid contained to the solid contained to the solid contained to the solid contained to the solid contained and the solid contained to the solid contained to the solid contained to and the solid contained to the solid con | NW AM data from | This data item must be softenized if Assessible Information Professional Required Code is "biting-orien needed". |
| METERY CHARACTERISTICS (IMMERIENCY CARD) | OVERMAN VIDEOR CHAMGING CATROCHY AT CREACTIVITY DATE | The sharging usingpey relating to an OVERSAS VISION STATUS. | | 8.1 | ant | DINEO | optimal healthcare and evable officers for him flows one ha do per CDS 6.2 Type 020. Code set amended to align to new CHI guidance on reclaiming overseas, shillers contributions to NMS care. | and to make set. | Mallematetalitaren eksakitata da Marantitia hati missikininaren e | r | available for diagnostic and trouble-booking), logit appropriately for minima to use with an Tobbackin points in Bald V is not to the n/a | Dignates how AMI CDS Type 030 | |
| | | | | | | | | | http://epus.datado/tonary.obs.sal/data-do lon-ary/data-data/nadas/liv/hollowypas-u- for-datas-dasadhatan-at-obs.addois-d do-da-arabhasandoid- | | | | |
| MERCIAL HEALTH ACT LINGUIL STATUS | START DATE (MINYS), PEACHWACT LIBER STATUS CLISSIFICATION ASSOCIATION PRICES) | The MENTIL HEALTH ACT LEGIS, STATUS CARRENCETON ASSISTMENT PERCO START SHIT recents the start date of the Montal Realth Act Legisl Status Clausification Assignment Person. | , a | 1.1 | and CCW MM CD | DINEO | To support a better understanding of the use of the bleedal Health Aut in anale trucks, openitually Emergency Proceedings 1 | apa. | N/M | | nja. | new one sold from | |
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| MENDAL HEALTH ACT LEGAL STATUS | START TIME (MENTAL HEALTH ACT LEGAL STATUS CLASSIFICATION ASSOCIATION PERIOD) | The MENTAL PEACHWACT LIGHE STREET, CLEENFALTON ASSESSMENT PERCOSTART TRAIT recents the start time of the Mental Realth Act Legal Balos Cleocification designment Period. | M 1.1 | and HAMMES | DIVISO | To support a better understanding of *f*a the use of the liferacit health did in adult invite, qualifically time group (Experiment). | 1/4 | | n/a | NEW ARE data from | |
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| Market Will To Art 1994 STATE | THE TATE BEING MEN AT THE PARTY OF THE PARTY. | The DATE when a Market William Particle William Company of the Com | | autorio antico | THE CO. | Second chair and second of the | | | NO. | NEW AM data from | |
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| MENDAL MALTH ACT LIGAL STATUS | EUROV TIME (MERCIAL HEALTH SCT LEGAL STATUS CLASSIFICATION) | The TAME when a MENTAL HEALTH SCT LIFESE STREET, CLIEBFEATION for a METERY region. | N 0.1 | and HHAMMASS | DANKO | Proceedings of the Section and Proceedings of the Section Sec | n/a F | | n/a | NEW ARE dida from | |
| | | | | | | eade trush, speakaby Emergency Departments | | | | | |
| | | Note that the National Code Informal' is used for those PETERTS who are neither formally detained nor receiving | | | | the use of the Mexical Health Aut in acute trucks, specifically Emergency | | | - | | |
| O RESTANDA | GINERAL MEDICAL PRACTITIONER (SPECIFICS) | MEMORPH SERVICE. ORDERNA MEMORPH PROCESSOR (PROCESSOR I) THE GENERAL MEDICAL PRACTITIONER PRO CODE of the GENERAL MEDICAL PRACTITIONER SPECIAL PROCESSOR SERVICES. PRACTITIONER specified by the PATERIX. | 0 N 0.1 | ant | DMRD | Departments. As per COS E.2 Type 030 a/a | Starless datebases on skiller de P | | n/a | Originales from ABE CDS Type 010 | |
| | | Are DESCRIPTION WITH CODE is a under which intensifies an Organization liter unbounty. | | | | St. on COS 6.3 Trans 000 or fa | practices transfed departments | | | | |
| OF RESERVATION | GINERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) | An ORGANISATION STECODE is a under which identifies an Organisation Site uniquely. | n 6 0.1 | ant | COS | 84 per CSS 6.3 Type 930 a/a | the framed stands for early the stands of th | | n/a | Originates from ABE CDS Type 020 | |
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| | | | | | | | | | | | |
| EMERGENCY CHAS ATTENDANCE LOCKTION | ORGANISATION SET EXEMPTER (OF TREATMENT) | An ORGANISATION SITE COSE is a scale which identifies an Organisation Site uniquely. | M N 1.1 | min and may and | Updated to new Department and a guidelines | 8s yer CSS 8.3 Type 930 In/a | Mariama detailment obstation de | | n/a | Originates from A&E CDS Type 930 | |
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| EMERGENCY CHAE ATTENDANCE LOCKTION | EMERGENCY CARE DEPARTMENT TYPE | The type of Emergency Care Department | M N 1.1 | and | As per CDS 6.2 Type DDS. Spideled its include new under for Androdolory Energency Care Unit in anticipation of this data set being un to support the soldedism of ADC data in the follows. | Sk per CDS 6.3 Type 930 (and to under set) | tills // legen data delegency on a child's de l' leman data field note chall and e desse territ have de sea "chane acció. Illa // legen data de legency on a child's de l' | | n/a | Originales from ABE CDS Type 020 | Digent Care Centres should be recorded as a Type II. Department. |
| AMBULANCE DITALS | AMBULANCI NICONY NAMER | de identifier for each PATERT TRANSPORT (QUINNEY. | N N 8.1 | max an 20 | DIVED | As you COS 6.7 Toper 000 Assemble Them "Quitters" to "Designed" an impact of the Manage Manager of the Manager Manager of the Manager Manager of the Manager | http://www.datedutoreary.chy.uk/fida-day-f | | n/a | Originates how AMI CDS Type 020 | This influence chanded he recorded where EMERGENCY CARE ARRIVAL MODE is recorded as policy is annear by |
| | | | | | | Amended from "Optional" in "Sequinal" of request of DK Making these data time: required will allow | tionaryfista field notesfafasfanladana politica number de arafelosanand | | | | Emergency road archidance, Emergency road archidance with medical excert, Non-emergency road archidance, telespion, or Fixed using / medical repair action by air. |
| | | | | | | linking of andsolance and energency department data, thus providing | | | | | |
| | | | | | | information about a patient from the manners an ambulance is salled until they feare hospital. This will provide | | | | | |
| | | | | | | barring opportunities that can benefit ambulance services, | | | | | |
| | | | | | | | | | | | |
| AMBUANCE DETAILS | ORGANISATION CODE ICONNEYING AMBALISMCE TRUST | An ORGANIATION COST is a code which benefity on Organization unloads. | s 8 0.1 | min and may and | 006 | Didded to new Origination order | http://www.datadationary.ch.yub/lista.dis.dl | | N/A | Originates from A&E CDS Train 03D | This information should be recorded when IMERGENCY CARE ARRIVAL MODE is resirred as soldiers arrives by |
| | * | and the second s | | 1 | | guidelines. Jamended from "Optional" to Managing of paragraph of Pil Mathew | Mis / here dated intervents shifted do. F Smarshide held selective principalities a sole homeony ambulance bradi de as shiftenancia. | | | | This information should be recorded after IMMEDISCY CARE ARRIVAL MODE is recorded as patient amoves by temperary read evaluations, firming region and antidation with medical exacts, Non-emergency road antidation, Medicaptins, or fixed using / medical repolarization by air. |
| | | | | 1 | | these data tieres required will allow briting of ambulance and energency | | | | | |
| | | | | 1 | | department data, thus providing information about a patient from the | 1 | | | | |
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| ATTENDANCE OCCUMENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ATTENDANCE DENTITIES | A unique number or set of characters that is applicable to only one ACTIVEY for a MITERY within an Organization. | M N 1.1 | max ar 13 | DMED | ds.per CDS 6.3 Type 030 e/a | Markey dated to an about a sile of | | n/a | Originates Non A&E CDS Type 930 | |
| | | | | | | | Miss / James data de Servaro de vidada de la Servaro data de de vidada de vidada Servar number de vida hacembro d | | | | |
| | | | | 1 | | | | | | | |
| ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ARRIVAL MODE (INDINED CT) | EMBREINLY CARE ARRIVAL MCDE (SKOMEO CT) is the SKOMEO CT* concept to which is used to identify the banquist mode by which the PATERT arrival at the languary Care Department. | N 0.1 | min of man elf | SMONIED CT | And the Collection of the Coll | Site/Appendated/Conservative Addition of P | | For any data item which contains a value after than specified in network oids not, insept the sub-bot suppress it is it cannot been filled (if it is both in those with like aroun and therebe analidate to diagnosis and trouble-booking. Legit appropriately for enquance in our mask as "Nature for records I, field I is not in the anaptable range." | Originates from AMI CDS Type 030 | |
| | | | | | | granularity in description: than used summely (knought in by emergency | paramon arrival made unde de analyticas parafic | | SUS+ (it will be stuble to those with SUS assess and therefore available for diagnostic and troubleshooting), log it appropriately for | | |
| | | | | | | ambulance and other). denied made helps commissioners, to match the records of ambulance | | | response to user such as "Salue for records X, field Y is not in the acceptable range" | | |
| | | | | | | patients to Emergency Care and inpatient activity and is part of the | | | | | |
| | | | | | | information or that allows the patient journey to be across different arounders in the healthcare sources. | | | | | |
| | | | | | | duried mode is after used as a group for policest assets in analysis and | | | | | |
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| ATTENDANCE OCCUMENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ATTENDANCE CATEGORY | The salings of timesgency Care Attendance. | n 6 0.1 | anti | DAVIS.D | one more Thirt's to be admitted them. As per COSA 5.7 per COSA. Telescoper for understand the measure and readown for the unit to the testibilities provider. This data time, providers are institution of understand a PETENT is making first or thistory or administration of understand a PETENT is making first or thistory or administration or substitution of understand and the periodical field indicated. | http://www.datablemarcobs.ub/data.du/ tomarchita field index/stambert and e- property attendance saleson code de as philosophical | | n/a | Originates from ABE CDS Type (32) | |
| | | | | | | healthcare provides. This data time provides an indication of whether | a Politica de la constanta de | | | | |
| | | | | | | a PETERT is making first or follow-up attendance at a particular handless and foundation of the particular | | | | | |
| ATTENDANCE OCCUMENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE ATTENDANCE SOURCE (SWEAKED CT) | The number of each Assident and Emergency Epicide. Source from which patient was referred/absted to attend the ES. Not make of transport. | N V 0.1 | min nã mas e 18 | INOMED CT | and literagency Department. Code in a special service greater generating to department to the contract of the contract of the code of the | http://www.datadetterary.chr.sh/data-de-F terary/data-hald-enter/shashquer-df-sa feral-for-a-and-e-de-aus/shashquer-d- | | For any data item which contains a value of the specified in referred order or, insept the sales but suppress it is it cannot been \$200 (i) and the other with the same and the select sandards to slage-order and involved ordering. Legisla paymentarly for engances in some and as "Native for research 3, field Y is not in the antiquitation cauge." | Originates Non A&E CDS Type 930 | |
| | | | | | | controlly used. This data time is recessary to understand only patients. | tend for a and a departmental of | | SUD- (it will be stille to those with SUS assess and therefore available for diagnostic and troubleshooting), log it appropriately for | | |
| | | | | | | attend Emergency Care. This informs, commissing both leadily and controlls and for long-term socializes. | | | response to user such as "Value for records X, field Y is not in the acceptable range" | | |
| | | | | | | planning so that the 1955 can ensure that the correct blend of staff are | | | | | |
| ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | ORGANISATION STEE DESCRIPTION (IMPRIGENCY CARE ATTENDISHCE SOURCE) | ORGANISATION STEEDEN PRINTERS (SMERCENCY CARE ATTENDANCE SOURCE) is the ORGANISATION IDENTIFIES of the Organisation Size from which a PATIENT arrived at an immegency Cure Department. | K N 0.1 | min and max and | 008 | | n/a F | | n/a | NEW ARE data from | |
| | | | | | | This data envenancy in this results for Infa the (low), but light among justices, what are transformed between each and the control of the control and enforcing from the control and the control | | | | | |
| | | | | | | designe more summan, recording this information will be increasingly | | | | | |
| | | | | | | important for commissioners of services to understand patient | | | | | |
| | | | | | | salue is added. This information is also important in | | | | | |
| | | | | | | payment mechanisms as incentives. acti need to be in place to ensure that | | | | | |
| | | | | | | e.g. referring providers are not penalised because they issender Trigh | | | | | |
| | | | | | | value" patients. The regional organization of healthcare into retirents has | | | | | |
| | | | | | | inarcased the need for patients to be transferred to Emergency Centres | | | | | |
| | | | | 1 | | e g unbreing granulation are said presential a finance with youther high section of patients. With present a section of the patients of the patients of the patients of the patients of the terminant finance and the temperature of the resemble patients to be founded and for event for patients to be a founded and for event for representation of the patients of the pa | 1 | | | | |
| AFTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMERGENCY CARE BRINGS DATE | An Emergency Care Artisti Sale may be either: | M N 1.1 | and CCW MM CO | ONEC | regional centres e.g. Siroler, Candias, and Topoma. &s per CDS 6.3 Type 530 a/a | Mariama databan paranchi stillata 🗠 . | | n/a | Originales from ABE CDI Type 930 | |
| | | The face group can be for the course or either. Considered or The decided of the course of the co | | 1 | | | Somery Make, Solid, molecula (agriculation), date also any Princes and all agricultures and agricultures agricultures and agricultures | | | | |
| | | An Annual Date Air Assistant and Emergency Department is the date the PATENT self-proceeded at the Assistant and Emergency Department or arrived in an Antodonce at the Assistant and Emergency Department. | | | | | 1 | | | | |
| ATTENDED CO OCCURRACI ACTIVITI CAMPATTRADAS | EMBREINCY CARE ARRIVAL TIME | The foreign of the Annual Transaction of the | | and records | Taken . | As per COS 6.3 Type 0300 M/A | | | ria | Originales from AME COS Train 000 | |
| | | The Emergency Care Annual Time may be either: - the Annual Time in Annual Time may be either: - the Annual Time in Annual Emergency Department or - the Annual Emergency Care Serviced Time. | | | | To you will had a ppersonal | title //epos databilitieservish, shifted do for tempolitate field nater/also/erosal time at available and exercises/ described: | | | | |
| | | de Annal Time Al Ashimt and Emergeniy Department is the date the PATRET self-presented at the Ashident and Emergency Department or arrived in an Anhadance of the Ashident and Emergency Department. | | 1 | | | de ana Talonamano C | | | | |
| | | and the state of t | | 1 | | | 1 | | | | |
| ATTENDANCE OCCURRENCE ACTIVEY CHARACTERISTICS | AGE AT COL ACTIVITY GATE | AGE AT CELEACTIVITY GATE is derived as the number of completed years between the PERSON BETTY GATE of the PATENT and the COLACTIVITY GATE. | M N 1.1 | max ell | DANEO | 8s per COS 8.2 Type 030 N/A | Interview databases on the children do P Interview and Interview of the P Annual State of the Parameter of the | | nja | Originales have A&E COS Type 030 | |
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| ATTENDEDCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMBROOKY CARE INTIAL RESIDENCE GATE | The Emergency Care Initial Javananesi Este may be eithen: • the Antitives and Emergency Initial Assessment Este or • the Antitives and Emergency Initial Assessment Este. | N N 0.1 | and CCW MM CO | 28/6E/D | Na per COS 6.3 Type 030 e/a | http://www.datedstonery.chs.uk/date_ds_P toneryldate_field_nates/s/autident_and_n | | n/a | Originales New A&E CDS Type 010 | |
| | | The Anticulatory Emergency Care Initial Scorecent Date. An Anticulated and Emergency Initial Assessment Date is the given that the MATRIM's from assessed in the | | 1 | | | desired initial assessment data desired | | | | |
| | | Emergency Organizations. | | 1 | | | 1 | | | | |
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| ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMPROPRICY CARE INVIAL RESISTANCE TIME | The Energency Care Initial Assessment Time may be either: • the Assisted and Energency Initial Assessment Time or • the Assisted primergency Care Initial Assessment Time. | * a. | and Heradika II | DANKO | Ja. per COS 6.3 Type 930 e/a | title // epocatate de transporte de la francisco de la francis | | n/a | Originales from A&E COS Type 010 | |
| | | de duident and Emergency Initial discounsed Time is the time, recorded using the 26 hour disk, that the RETERT is first | | 1 | | | | | | | |
| | | assesses or one misident and Emergency Department for first attendances and unplanned follow-up attendances. | | 1 | <u> </u> | | <u> </u> | | | | |
| ATTENDANCE OCCURRENCE ACTIVEY CHARACTERISTICS | EMERGENCY CARE ACUSTY (INCAREDICT) | EMERGENCY CARE SCUTY (BAGMED CT) is the same as attribute CARCAL TERMINOLOGY CODE. | 8 Y 8.3 | min of max e18 | INOMED CT | Emergency Care Justily is a measure of the upgroup and controlly of the condition with which the patient has prevented as the emergency care tastily as defined by the this classical share according to the patient. | n/a | - | For any data-item which contains a value other than specified in referrant order set, assign the nature lost suppress it so it cannot been \$250.0 (it will be shade in blow-will his assess and therefore auxiliate for dispression and involve-denotings (seg it appropriately for requirement in outer such as "Water for receival, X, deal V is not in the assignable range." | NEW Add data lien | This data lens will required providers to may ourself triage salers or affording of a pulseon briended feedbeend area to a fine point analy soon. Please when to ECSI User Guidance |
| | | NETERT's condition on the Emergency Care Initial Assessment Date and Emergency Care Initial Assessment Time. | | 1 | | presented to the emergency care facility as defined by the first clinician | 1 | | auxiliable for diagnostic and troubleshooting), logic appropriately for response is user such as "Sklue for records X, field Y is not in the | | Please refer to ECIS User Guidance |
| | | The EMERCENCY CARE ACULTY (INCAMEDCT) may be determined by a formal briage process, or by the physical allocation of the PETENT to a | | L | | who assesses the patient. *Closidan' in this control sould be any | <u>↓</u> ↓ | | acceptable range" | | |
| | | | | | | | | | | | |

| ATTENDANCE OCCURRENCE ACTIVEY CHARACTERISTICS | EMERGENCY CARE CHEF COMPLINY (INDANS CT) | SMERGERICY CARE CHEF COMPLIANT (SMOARD CT) in the same as although CLRICAL TERMINOLOGY CODE. | * * 6.1 | min nil man elif | SNOWED CT | There is a need for Emergency Care to State to under set standardise input measurement to | n/a | | For any data item which contains a value other than specified in referant code set, accept the salue but suppress it so it cannot have | WW AEE data Error | District compliant code sets should be implemented with flags as highlighted. When a shief compliant has an injury flag this will require the injury data times to be completed. |
|--|--|---|---------|---------------------|--|--|---|---|--|-------------------------------------|--|
| | | EMERCENCY CARE CHIEF COMPLAINT (INDAMECT) in the SNOMES CT* concept ID which is used to indicate the nature of the PATENCY short complaint as averaged by the CARE PROYESSCHAL first assembly the PATENCE. | | | | allending across a range of Emergency Care service, which will | | | Nor any data item which contains a value other than sportfed in orderant code set, using the natur but suppress it is it is amount here: \$200 (if will be shade in those with 100 areas and therefore available for diagnostic and invader-booting), long it appropriately for engines to two exacts as "Value for exceeds 3, field 17 is not in the acceptant to work as "Value for exceeds 3, field 17 is not in the acceptable range". | | |
| | | | | | | Store is a search for Energyany Con to children series includablesh polygical processorment for record accountiety; the logic and pulmons attending accounts on regard foreigning Core services, which self help inhors commissioners - beliefs provided and local - as to the help service and local - as to the help selected and local - as the help sele | | | aconyliable range* | | |
| | | | | | | brads. As the 1915 moves to value based commissioning, it is fundamentally | | | | | |
| ATTENDANCE OCCURRENCE ACTIVEY CHARACTERISTICS | EMBRIGHTY CARE DATE BEEN FOR TREATMENT | The Emergency Care Data Seen For Treatment may be: - the Assistent and Emergency Eals Seen For Treatment or - the Assistent Emergency Care Seles Seen For Treatment - the Assistant Emergency Care Seles Seen For Treatment. | 8 8 8.1 | avice co.A. elem do | DMED | Ja per COS 6.3 Type 030 e/a | hite Amerikala kirak kerantah sebilah da kerantah bidi sebesahan berandan and a penjenyi dala sesa bir beginsesi dawa bingsahan | | n/a | Deginates Non-ABE CDS Type 230 | |
| | | Introduction of Emergency Carle Sean For Transferred in the date, that the PATERT is seen by a throad decision maker (senses who can define the management plan and disharps the PATERT) is diagnose the problem and among an start definite benimms a sensesso." | | | | | Shankal | | | | |
| ATTENDANCE OCCURRENCE ACTIVITY CHARACTERISTICS | EMBREINCY CARE THAT SHEN FOR THEATMENT | definite instinent at enteranty. | | and the Add to | There is a second of the secon | Ja per CSS 6.2 Type 330 1/a | | | 10 | Distriction from AMI CDI Train 200 | |
| | | The Emergency Care Time Izers for Trasloveni may be either: • the Jointhni and Emergency Time Izers for Trasloveni or • the Joshicking Emergency Care Time Izers for Trasloveni | | | | | http://www.datade/tonary.ohs.ub/fide do tonary/data-field outer/alls and a time green for treatment de asse/blogues/s/ | | | | |
| | | do Audient and Energency Time Item Not Treatment is the time, recorded using the 26 hour clock, that the RETENT is uses by a distribution make becomes who are define the management plon and dissharps the PATENCY) to diagnose the publish mod arrange or start definite freshment as necessary.* The date that the injury moneral. | | | | | | | | | |
| NUMY CHARACTERISTICS | DAGNY DATE | The slate that the injury accurred. | M 1.1 | ance cow www.co | DMED | The addies demonits encourage to already by the delay between to those government and present alless government and present alless to the present alless. Using the temperature to the present alless to the present alless to the present and the present alless and the present alless are already to the present and the pr | n/a | | h/a | WW ARE tida tem | Ripary data items should be captured when a Chief Complaint is recorded which has an injury flag. |
| | | | | | | proventation. Certary from injury is important to become in two schoolsons: | | | | | |
| | | | | | | time and presentation to a healthcare professional is well recognised as a | | | | | |
| | | | | | | whome and a didently linear simply to a production and of didently linear simply to a promotionist and of those professional and the second of | | | | | |
| | | | | | | teratment e.g. avoid clining a wound when infinition is likely to be present. | | | | | |
| | | | | | | such as wound infection, the evidence provided by this data - that there was a philosophyren trium and | | | | | |
| | | | | | | presentation would also reduce the risk of the healthcare provider being found liable. | | | | | |
| | | | | | | | | | | | |
| NOWY CHARCEMETERS | INCOM TAME | The line that the injury assured. | M 1.1 | and HAMMAN | DIREC | This, data down is necessary to identify of a delay between the processor and a delay between the processor and a delay between the processor and a delay from the play is integrated to a between it is the thinking to be the shadow in the shadow in the shadow in the shadow is the shadow in the shadow in the shadow in the shadow is a processor and a well recognized as a year between the shadow in the shadow is a processor and a well recognized as a year and other and a shadow in the shadow | n/a | | n/a | WW ABI data tem | injury data items should be captured when a Chief Complaint is recorded which has an injury flag. |
| | | | | | | Delay from injury is important to denies in two statements | | | | | |
| | | | | | | Sine and presentation to a healthcare professional is well recognised as a level flad indicating a both risk of shift | | | | | |
| | | | | | | abuse. • evidence of a delay from injury to preventation will sharp stream. | | | | | |
| | | | | | | treatment e.g. auntil diving a wound subsected in the subsection of the present. If a subsequent complication occurs, | | | | | |
| | | | | | | such as wound infinition, the evidence provided by this data - that there was, a delay between injury and | | | | | |
| | | | | | | permetations will change distinct translation of a good bridge around subars infoliation in lately to lar permeta. If a subsequent confidence mount, tanks as word infoliation, the relations proceeding by the late of their later was permetation to make a subsequent or permetation would also reduce the case of the later later later and all the healthcare procedure later for all the healthcare procedure later for all tables. | 1 | | | | |
| | | | | | | | 1 | | | | |
| NURY CHARCTERISTICS | EMERCENCY CARE PLACE OF INJURY (MICHAEL CT) | The type of Socialism of which the person was present when the injury countred. | N 8 0.1 | min of max #18 | INCHED CT | The her date to endowment the supplication and the supplication is to be a provided from a final part of the supplication of t | n/a | , | for any data-ties which contains a value other than specified in orderant code set, assign the value but suppress it is at it amount issue \$200 (if will be which to him with 100 arount and other auxiliate for dispression of the contained and the first days with a boundary to the appropriately lise required to the days with a "Nation for records 3, field 17 is not in the anomatical energy." | WW MM data from | topusy stata items should be captured when a Chief Complaint is recorded which has an injury flag- |
| | | | | | | is recessing to be able to collect basis information regarding the type of place where the injury assumed. This | 1 | | available for diagnosis and troubleshooting), Logil appropriately for response to user such as "Value for records X, field Y is not in the acceptable range". | | |
| BULKY OMANCTERITICS | BARBACINEY CARE PLACE OF HARM (JATTUCE) | MARKEDICY CARE PLACE OF BUILDY (LATITUDE) is the Latitude of the EMERGENCY CARE PLACE OF BUILDY (BYOMED CT), represend to desired degrees. | 0 6 0.1 | max n2 mb | DANKO | enservation allows the data to be aggregated in a meaningful way so Easist longitude and latitude is the M/A | n/a | , | n/a | WW MAX data term | |
| | | regions are in decision copyrim. | | | | preserves menoual of coding injury place if extracted from an electronic sprine e.g. and coding injury sprine e.g. and coding injury | 1 | | | | |
| | | | | | | spriem with an inbuilt map. | | | | | |
| NURY CHARCEMETCS | EMBIGINEY CARE PLACE OF INLINY (LONGITUDE) | IMPRICATOR FACE OF DELICE (GROUNDS) is the language of the EMERGENCY CARE FACE OF BALLEY (DICARED CT), represed in desired degrees. | 0 N 8.1 | man ed. ed | DANKO | Exact longitude and fatilisate is the preferred method of coding injury place if exhibited from an electronic | n/a | | n/a | WW AEE data lien | |
| | | | | | | Each langifulate and letterate is the synthesis of miles of sudan graphy place if exclusional for miles graphy glace if exclusional for man et entiresso synthesis or, a sendularon et electronia partient misendi episcon es a linich synthes marité an industri map. | | | | | |
| NUMY CHARACTERISTICS | BMINDINGY CARE INDIFF INTERFER (INCARE CT) | The mod likely human intent in the occurrence of the injury or paraming as accessed by climates. | 8 N 8.1 | min në man r18 | INCHED CT | Presenting presentable injury is of | e/a | | For any data item which contains a value other than specified in | WW AM data tem | Ripay state items should be captured when a Chief Complaint is recorded which has an injury Reg. |
| | | | | | | Proventing presentable injusy is of gent benefit to individuals and society, and stresslying the number and servely of assaults has been very difficult. | | | Our any data lines which contains a writer of the then specified in ordered under set, insept life and he for suppress it to it cannot beare the (i) (ii) will be which is blower with like some and therefore another for diagnostic and invahelvehoologic (e) appropriately for engagence is some and as "Walter for exceeds, I, field II is not in the anoptical to came and as "Walter for exceeds, I, field II is not in the anoptically cauge." | | |
| | | | | | | Understanding injury intent undergins all injury prevention work, whether at a facult or national level. An example | | | acceptable range" | | |
| BILLIFY CHARACTERISTICS | EMERGENCY CARE INJURY ACTIVETY EXECUTE (INCOMES CT) | The status of activity being undertaken by the person at the mannest the injury occurred. | 8 N 8.3 | min në man rIE | INDIVID CT | Injury surveillance has resided in major reductions in spury from road both collectors sed modelning | n/a | | for any data item which contains a value other than specified in referant code set, accept the value had suppress it as it cannot have title of and the violate to those with title proper and therefore. | WW MM data term | lejury slida items should be suptured when a Chief Complaint is recorded which has an injury flag. |
| | | | | | | Signey surveillance has resulted in major reductions in highly bean rand statills collisions and workplane totalizests. However the higgest rise in payry in the Lale be years are highers southering in the home and during this result and and. | | | For any data item which contains a value other than specified in refression other or, insept the each but suppress it to it cannot been faller (if will be white in blow with IEE stans. and therefore another for deposits and involved origing in paymyrishing to emplore in our match as "Nilsen for except, II, field I' is not in the anoptonic in our match as "Nilsen for except, II, field I' is not in the anoptonic to come and as "Nilsen for except, II, field I' is not in the anoptonic to come and as "Nilsen for except, II, field I' is not in the | | |
| NUMY CHARACTERISTICS | EMBIGUINCY CAME INJURY ACTIVITY THY (INCIMIC CT) | The type of activity being undertaken by the person at the nument the injury occurred. | 8 N 8.1 | min në man r18 | INCHED CT | Supply file for all in present or register. When and supply file for all in the supple file file file file file file file fi | e/a | | The any data less which incidents a value officer than specified in orderent code set, except the other bed suppress it so it cannot been \$20°c (it and for except the set bed suppress it so it cannot be suitable for diagnosis and incidentiality in the proposal property exception is seen such as "Value for except," in \$20 per periodicy for exequence is seen such as "Value for except, 5, field if it not in the amyteliate range." | WW AM data tem | Ripay state items should be captured when a Chief Complaint is recorded which has an injury Reg. |
| | | | | | | traffic cell bioms and workplace southerns. However the biggest rise in biologic file field feet seems one bioministration | | | Table (if will be skiddle to those with SUS access and therefore auditorior and the skiddle for those with SUS access and therefore auditorior for the skiddle for displayment and trustershooting. Logist appropriately for accessors to commonly to the control of field 5 is not in the | | |
| | | | | | | enjoy in the bone and during between and sport. The second sport. | | | acceptable range* | | |
| | | | | | | Shall the palliers and severity of injuries occurring at home has become a stantificant health burden to | | | | | |
| | | | | | | the NM. Beller data will inform prevention of these injuries, and more granular activity data is. | | | | | |
| | | | | | | manifal for this process to understand the sauce. In pay prevention could not and | | | | | |
| | | | | | | loging promotion could not and thindd not promotion all colors from exceptional and sporting activity. However injury surrections should storolly activities that send in significant percentable injury. | | | | | |
| | | | | | | | | | | | |
| BULKY CHARACTERISTICS | EMERGENCY CARE INJURY MECHANISM (INCARES CT) | Hew the Injury was caused. | 8 N 0.1 | min nii man e18 | INDIVID CT | To understand how people injure Shemarlam, it is necessary to sollent a | n/a | | For any data item which contains a value other than specified in relevant code set, accept the nature but suppress it so it cannot have | WW MI data lien | bipry dida items should be captured when a Chief Complaint is recorded which has an injury Reg. |
| | | | | | | thrustured description of the mechanism of injury. This is particularly important for the | | | For any data item which contains a value other than specified in orderant code set, assign the nature lost suppress it is at it amount trace EUD (if will be hadde but household assess and the read of the auditor and the last set in the auditor and the last set is an extracted and the set is appropriately like required to the depression of the code in "White for records 3, field 1 is not in the anomatical energy". | | |
| | | | | | | terrening numbers of patients who are injured in the home, as it is surperied that relatively simple | 1 | | acceptable range* | | |
| | | | | | | To understand how prosper report (Invariants: E.) is no recopy to solve a control of the control of the control of t | 1 | | | | |
| BULKY OMAICTIMITICS | EMERGENCY CARE INJURY ALCOHOL OR DRUG INVOLVEMENT (INCAME C-T) | A round of any drugs or alsohol used by the patient, which are thought likely to have contributed to the need to altend the ED. | K 8. | min oil man e18 | MONITO CT | Drugs and shishol are hesperolly implicated in the states of styley and the ECDS proposes a shishored way to capture this data. | n/a | , | As any fifth from the bill medicine, a size of their fitting signification is a size of the size of th | NEW MEE data from | lojury slida Bens should be captured when a Chief Complaint is exceeded which has an injury Rag. |
| | | | | | | la capture this data. | 1 | | available for diagnosis and broadreshooting), log if appropriately for response to user such as "Value for records X, field Y is not in the accordable cours" | | |
| PROTEIN LAMBAGE HEITORY | Name and American Company of the Com | a resure or workness a personn has any of the NML toll of medical six-markedities. | | mo oli min elli | DOMINION L. | The white of the control of the cont | - | | rer any sala nert which contains a value other than specified in referant code set, accept the value but suppress it so it cannot have BUT: (It will be soldle to those with BUT such and therefore and other to describe the sold included but and the set of | WWW AND SHARE STOP | It is antisipated that data three will be populated automatically from the potent's local electronic health record or in from a local or national care record updom such as SCS. Data entry will not be positionized by ED stall. |
| | | | | | | admitted to playetted e.g. for procuments, ortholio. An associate foll of our marketities, and | 1 | | response is user such as "Value for records X, field Y is not in the acceptable range" | | |
| | | | | | | surred medical laws are therefore exercisely please of benefore in the effect to minimize inputient | 1 | | | | |
| | | | | | | administers and risk to patients — ensuring the right breakness in the right place. | 1 | | | | |
| | | | | | | Plewing this data nationally allows a berier understanding of the factors, that predist complexity of emergency | 1 | | | | |
| | | | | | | sare which in turn allows accurate summitvaining of sentires is meet the eneds of patients in the heal and | 1 | | | | |
| | | | | | | most effective way e.g. if there are many attendiances for patients with district voluted complaints, would a | 1 | | | | |
| | | | | | | consequelly surie be an effective intervention to prevent these? Equally, if a patient presents with | 1 | | | | |
| MENICE ADMINISTRATION | COMMISSIONING SERVIL NUMBER | A number used to uniquely identify a NMS SERVICE AGREEMENT by an Organization acting as commissioner of patient saw enclars. | 8 N 8.1 | max and | DAMED | Andrew or a first observe the As per CS 6.2 Type 330 e/a | hite//epochishikunanyihi shiida da Ismaniista hiid natashi ka kanasalad ay antai number da asa'hbismand | , | n/a | Diginales from ABE CDS Type 030 | |
| MENICE AGREEMENT DETAILS | NAS SERVICE ADRIEDMENT CASE NAMER | A number [diphanuments] in provide a unique identifier for a line within a NMS SERVICE ACRESMENT. | 0 N 0.1 | mas and 0 | DNEO | Japen COS 6.2 Type 000 A/a | es until number de sea Novembro. Marijana detablismento de la de- | | n/a | Diginales from AMI CDS Type 030 | |
| | | | | | | | State profession field restarch obtained consen- acresment from number the professionary 10 | | | National Section 1887 778 Property. | |
| AND THE PERSON NAMED IN COLUMN | A. Wallett | and the second and the second | | | | To and the opposite the same of the same o | teranylisis held naturally and licensis- plement number de mallocana. | | | | |
| SERVICE AGREEMENT DETAILS | COMMERCIAL REFERENCE NUMBER | A number (diphasometric) allocated by the commissioner to a NOTERIC REQUEST. | o N 8.1 | mas and? | DANKO | Julyer CSS 6.2 Type 930 A/a | Star Committee State States with a Militar dis- Star any Mala State States States and States and States Sta | | n/a | Originates from ABE CDS Type 030 | |
| MENICE ADMINISTRAÇÃO DETANA | ORGANISATION DENOTINE (CODE OF PROVIDER) | ORGANISATION CONTINUES (COCK OF PROVIDER) is the ORGANISATION CONTINUES of the Organisation asking as a Health Care Principe. | W 1.1 | min and may and | oos | Updated to new Organization code A/a guidelines | Marines falsk bereit de skilde de Meantide held esterbeleskensende | | n/a | Diginales from A&E CDS Type 930 | |
| MENICA ADMINISTRAÇÃO | OWENNING COLUMNS (CODE ON COMMISSIONIS) | DRAINMANTON CENTRIES (COCK OF COMMISSIONING IN the ORGANIZATION CENTRIES of the Organization surreleaseing | M 8 1.1 | mir and may and | 506 | System to new Organization code: a/a anadetines | and the state of an analysis de annihilation of the state | | n/a | Driginales how ABE COSType 930 | |
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| CARE PROPERIORALS (EMERGENCY CARE) | PROFESSIONAL REGISTALTION RIGHT CODE | A code which identifies the PROFESSORIE REQUIREMENT SCOP. | M 6 1.1 | and | DMED | da per COS 6.3 Type 990 Ship to sole set | the //www.dateds/toners.ohs.uk/folia da toners/date field notes/as/arables/esign | * | n/a | Originales Now A&C CDS Type 020 | |
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| | | | | | | | nal recolosion incom under de acabhone. | | | | |
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| CIME PROFESSIONALS (EMERGENCY CARE) | PROPERSONAL REGISTRATION INTER DESCRIPER | The regislation identifier allocated by an Organisation. | M Y 5.1 | max an SI | DAMED | St. per CDS 6.2 Type 030 e/a | http://www.datade.torace.chs.ub/data_dis_ | | nja | Originates how AMI CDS Type 030 | |
| | | | | | | | innarylista field nateulu/and finafectic pat republishe entry identifier finate au entres save entresimal de auchbourse | | | | |
| | | | | | | | entire con entreteral describbourse of | | | | |
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| CARL PROFESSIONALS (IMBRIGINGY CARL) | CARE PROPERSONAL THE (INSPIRATING CARE) | The law of CARL PROFESSIONAL Leading the PATENT during an Emergency Care Alternations. | M V 1.1 | and | DINEO | Recording the cleanant), responsible (see to under se) | e/a | v v | nja | NEW AM data time | |
| | | The time of CASE PROFISSIONAL treating the PATENT during an Emergency Care Johnstone. The CASE PROFISSIONAL STREAM STREAMSTANCY CASE are defined in the Royal Codings of Emergency Medicine Guidelines, the Medical and Patentineser Stating in Emergency Departments, See the Royal Codings of Emergency Medicine website at Medical and Paulitionese Worldfore. | | | | for patient care is necessary for • Operational planning and climate | | | | | |
| | | Medical and Practitioner Workforce Guidance | | | | the patient care is enemany for Operational planning and clinical generators—requiring that the right patient of clinical is enequenable for the right involvy and assorptionity of patient hand Windows planning - ensuring that | | | | | |
| | | | | | | patient load | | | | | |
| | | | | | | Withflare planning - enuming that the right number of clonical staff are tourned to satisfy the service med Touring metrics - enuming that tourness are enumed to a validate | | | | | |
| | | | | | | Training metrics - enoughing that Contract the enough is a collection. | | | | | |
| | | | | | | case min of patients in advisor as assertantate level of materials in their | | | | | |
| | | | | | | field. • Performance data. Time to use | | | | | |
| | | | | | | dinisian is used as a performance/ quality metric in many healthcare | | | | | |
| | | | | | | spilene. This process data is necessary to | | | | | |
| II. | T. | | 1 1 1 | 1 | 1 | process within energency care. | | | 1 | | |
| I | | | 1 1 1 | 1 | 1 | smurring that patients are assessed by a treating healthcare professional area of the solute formation that of | | | 1 | | |
| | <u> </u> | | <u> </u> | | <u> </u> | of undiagnosed owner disease, and is, an important and of oil control by | 1 | | | | <u> </u> |
| CARE PROPERSONALS (EMERGENCY CARE) | CHE PROPERTIES DECHARGE REPORTEDTY MECCATOR (IMPRESENCY CARE) | An industrial of whether a CARE MICHELECHAL is requireshire for drahage of the PAZENT from an Emergency Care Attendance. | M V 1.1 | ant | DINEO | An emperical as and of the description of the control of the contr | n/a | * | nja | NEW AM data from | |
| | | | 1 1 1 | 1 | 1 | Operational planning and clinical governance enouring that the right | | | 1 | | |
| | | | 1 1 1 | 1 | 1 | grade of clinician is responsible for the right analy and complexity of | | | 1 | | |
| II. | T. | | 1 1 1 | 1 | 1 | passes load Workfore planning - ensuring that | | | 1 | | |
| I | | | | 1 | | the right number of clinical staff are found to satisfy the service need | | | 1 | | |
| I | | | 1 1 1 | 1 | 1 | toxiners are exponent to a untable sare mix of authors in authors an | | | 1 | | |
| I | | | 1 1 1 | 1 | 1 | appropriate level of experime in their field. | | | 1 | | |
| I | | | | 1 | | Performance data. Time to use climitan is used as a performance/ | | | 1 | | |
| I | | | | 1 | | quality metric in many healthcare systems. | | | 1 | | |
| I | | | | 1 | | This process data is necessary to understand and optimize the save | | | 1 | | |
| I | | | 1 1 1 | 1 | 1 | process within energency care. Ensuring that patients are assessed. | | | 1 | | |
| I | | | 1 1 1 | 1 | 1 | protects will be more general case. Considing their patients are assessed by a breath plantilinare protectional sales after avoid miscentes; the risk of sublissmooth come distance, and its | | | 1 | | |
| INVESTACY CASE GALANCIES INVOMES *** | EMERGENCY CARE ENGINEER ENGINEER CT | Diagnoses of the outland, in order of their reference to the available of the outland. | lu . | min of mar +78 | WAND CT | of undergowed correct discope, and as an operation and of the discoperation. As you can be all the SCDD in a system to the system and the SCDD in a system discoperation and the SCDD in a system discoperation and the state of the SCDD in a system discoperation and the state of SCDD in a system discoperation and the state of SCDD in a system state is the state of SCDD in a system state in the state of SCDD in a system state of the SCDD in a system state state of the SCDD in a system state stat | eria | | a. For any data they which contages a value when these on | Originates from A&E CDS Train 03D | Experimental Dal Garnes & carbord according to the WARFS about RFW Science Services |
| Balance Constitution (Balance) | somethic r constraints (second c.) | sugment at the patient, it arises of their prevants at the emisgroup preventions. | " I' I'' | NA 16 PAR 124 | MANUAL LI | A key element of the ECSS is a sprient | 1,4 | | referred under set, using the value but suppress it so it cannot have title it will be visite in the sales but suppress it so it cannot have | California (min yan CCR (Black)) | These are the codes which will need to flow as part of the A&E CCS. |
| | | | | | | disprets code from a NICARD-CT subset (the ECD Dispress) is Data Let) | | | referred code set, assept the ratio had suppress it is it cannot have \$20° (I will be solde to those with U.S. assess and therefore auxifiable for dispureds and invelopmenting. Eagl appropriately for empirison in some such as "Nation for record X, field I's soil in the sineptiable range". In addition, any numeral funitees, legis for \$5 examps that the followed. | | |
| | | | | | | with a two way qualifier. The modits of diagrams, data | | | acceptable range". In addition, any normal business logic for IS records shall be followed. | | |
| | | | | | | connectly collected in emergency care (CDS have EDO of 21 in very soon. | | | Fore of the item corresponds to the "extremely sensitive" but of times then the record MUT be appropriated. | | |
| | | | | | | in developing the SCOS Diagnostic Data Set (DDII) a few key design | | | c. The "naisemely sensitive" (oil of SVCNED values must be added to BUS on that it can cross sheek, and then follow existing ID rules: | | |
| | | | | | | principles were used Exhaustive - the DDE items, should | | | appropriately (Tagging / warning to the user for freeback). • NB: Provides shouldn't send this information, so this is a back- | | |
| | | | | | | sover all conditions commonly seen, but not very rise conditions – i.e. if a | | | stop in case they do. • Mil. there aren't any "extremely sensitive" items in the current fail. | | |
| | | | | | | condidate condition had not been seen during the HSI physician years of | | | (see a verial), but in theory one could be introduced in future as part of maintenance, so it's leed to have this function in from the outset | | |
| | | | | | | experience of the senior IM physicians constructing the original | | | so we don't forget. d. Supplier guidance is to provide the ECSS sub-set in the interface. | | |
| | | | | | | | | | | | |
| 1 | | | | | | - Endusive for any given clinical | | | because the grouper can handle unlimited values | | |
| | | | | | | poliure, there should be one and only one level arrows. | | | because the grouper can handle unfinited values. • Mil: this is not a problem for IUI and HIS in future will be able to being axion either exempting, or prioritize and/or de-duplicate. | MV MI day be- | |
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Board Meeting – Public Session

| Title of paper: | Community Services Data Set Direction | |
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| Poord mosting date: | 21 May 2017 | |
| Board meeting date: | 31 May 2017 | |
| Agenda item no: | NHSD 17 02 04 bii | |
| Paper presented by: | Prof. Martin Severs Medical Director and Caldicott Guardian | |
| Paper prepared by: | Gouri Shanker Chandel, Senior Project Manager, Community Services Data Set Project | |
| Paper approved by: (Sponsor Director) | Prof. David Hughes, Director of Information & Analytics | |
| Purpose of the paper: | Full Directions request from Department of Health and NHS England to enable the flow of data from Providers | |
| Additional Documents and or Supporting Information: | Annexe A – The Direction – final draft v0.2 from DH/NHSE Annexe B – Statutory Direction Giving Checklist – v1.4 Annexe C – Requirements Specification v1.0 Annexe D – CSDS Dataset v1.0 (TOS for SCCI) | |
| Please specify the key risks and issues: | There is no risk directly associated with the acceptance of the Directions. | |
| Patient/public interest: | There are no significant patient or public interest issues, there will be a reduction in burden as local collection will no longer be required. | |
| Supplementary papers: | Annexe E – Responses to EMT suggestions | |
| Actions required by the Board: | The paper is being submitted for the acceptance of the Full Directions to enable data collection to be undertaken as part of the development of the Community Services Health Dataset. | |



Community Services Data Set Direction

Published 19 May 2017

Information and technology for better health and care

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The Health and Social Care Information Centre is a non-departmental body created by statute, also known as NHS Digital.

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Executive Summary

Further to the approval of Directions for the Community Services Data Set Pilot that came into force on 20 March 2017 this paper is a request for the agreement to the attached Full Directions to enable the collection of data from all providers of Community Services to support the implementation of a new national Community Services Data Set (CSDS).

Background

The flow of a national community services data set has been prioritised by NIB and has a ministerial focus. Agreement has been reached with NHS England to amend the existing 'Children and Young Persons Health Services dataset' (CYPHS) to enable the collection of data for the whole community by removing the age restriction presently enforced when collecting data.

An application for the issue of an Information Standards Notice was approved by the Standardisation Committee for Care Information (SCCI) on 29 March 2017 and was issued on 21 April 2017 (Appendix A)

Directions have been raised by NHS England on behalf of Department of Health in support of the 'full' collection of data relating to all Community Service Providers.

Recommendation

The Directions have been put in place to ensure we have a clear legal basis for collection of the data from providers, on the advice of Information Governance.

Providers will be asked to flow the same data to NHS Digital as they currently do for the CYPHS data set, but include all patients (not just those aged 0-18 yrs.). In practice, we believe that a number of providers already produce an extract from their systems which includes all patients, and then strip out any patients over 18 when creating their submission file for the CYPHS data set. The providers will be asked to include all patients in their submission

It is proposed that NHS Digital Board approve the attached Directions to enable the collection of data to be undertaken under the new national Community Services Data Set (CSDS).

Implications

Strategy Implications

The project is aligned with the strategic objective of centralising major data collections to reduce local collection requirements and develop agreed information standards. It also supports both the NIB Paperless 2020 Agenda, being an explicit objective of Domain H, Programme 26, and the NHS England 5 Year Forward Plan.

Financial Implications

The funding for Phase 1 of the programme has been agreed through a new Work Commission and Investment Justification which this forms part of. The funding for Phase 2, which involves increasing the scope of the collection to include a greater depth of community data, is subject to a separate investment justification being made in May 2017. The project is

one of the prioritised projects under the NIB Programme and will be supported under Domain H's Data Content Programme.

Stakeholder Implications

There is clear focus and drive at the senior stakeholder level for a national flow of community services data, with an expected timeline for delivery of Phase 1 in autumn 2017. There are no major stakeholder implications at present, as the existing CYPHS dataset will continue to operate until the Community Health Services Data Set is operational. The CSDS will effectively be a new dataset providing centralised community information and be welcomed by stakeholders.

Phase 2 of the programme will look at increasing the scope of the existing data set to include a greater depth of community data and support strategies/initiatives including P2020, the NHS Improvement Scorecard, evidence-based commissioning, patient-centred outcomes and the creation of community tariffs/payment mechanisms.

An Advisory Group will be set up to ensure we have comprehensive input into the development of future requirements.

Handling

There are no handling issues directly associated with accepting the Directions.

Risks and Issues

The request for the acceptance at this early stage is to ensure we reduce the overall risk on the development of the Community Services Data Set as it moves from pilot to full implementation and provides the legal basis for NHS Digital to collect the data from agreed launch date in autumn 2017. There are no risks directly associated with the acceptance of the Directions.

Corporate Governance and Compliance

As part of the consultation process, this Direction was reviewed at EMT on 11 May 2017 and all Directions should be referred to the NHS Digital Board for consideration and acceptance.

The legal basis for the collection is described in the Direction.

Management Responsibility

Jackie Shears, Programme Director – Data Content and New Data Collections is responsible for the delivery of the CSDS. The CSDS project has its own project board with an NHS England SRO, Suzanne Rastrick, and reports to the Domain H Board via the Data Content Programme Board.

Professor David Hughes, Executive Director of Information and Analytics. This Portfolio will deal with the Directions on a day to day basis.

Actions Required of the Board

The paper is being submitted for the acceptance of the Directions to enable data collection to be undertaken as part of the development of the national level Community Services Data Set. Following acceptance by the NHS Digital Board data will be collected on a regular basis from all publically funded community service providers, commencing from autumn 2017.

Note: EMT feedback and supplementary information are provided in a separate document, Annexe E.

DIRECTIONS

NATIONAL HEALTH SERVICES, ENGLAND

The Health and Social Care Information Centre (Establishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017

The Secretary of State for Health gives the following Directions to the Health and Social Care Information Centre in exercise of the powers conferred by sections 254(1), (2)(a), and (6) of the Health and Social Care Act 2012.

In accordance with section 254(5) of the Health and Social Care Act 2012, the Secretary of State has consulted the Health and Social Care Information Centre before giving these Directions.

Citation, commencement and interpretation

1. These Directions may be cited as The Health and Social Care Information Centre (Establishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017 and shall come into force on 01 November 2017.

2. In these Directions-

| "The 2012 Act" | means the Health and Social Care Act 2012 ¹ ; | |
|---------------------------|---|--|
| "Information Standard" | means a document containing standards in relation to the processing of information as provided for in section 250(2) of the 2012 Act. References to the number and title of an Information Standard are to the number and title given to a particular Information Standard within the Information Standards Notice; | |
| "HSCIC" | means the Health and Social Care Information Centre ² ; | |
| "Relevant | means an organisation type that is listed under "applies to" | |

² The Health and Social Care Information Centre is a body corporate established under section 252(1) of the Health and Social Care Act 2012

Organisation" in the Specification;

"SCCI1069" is the unique reference number for the Community Services

Data Set Information Standard;

"Specification" means the Community Services Data Set v1.0 Requirements

Specification that has been published by the Secretary of State on 20 April 2017 and annexed to these Directions at Annex A or any subsequent amended version of the same

document published by the Secretary of State;

"Technical Output Specification"

means the Community Services Data Set (CSDS) v1.0
Technical Output Specification version 1.0.4 dated

28/02/2017 and annexed to these Directions at Annex B or any subsequent amended version of the same document

published by the Secretary of State.

Establishing and Operating the Community Services Data Set Information System

- 3. -(1) Pursuant to its powers under sections 254(1) and 254(6) of the 2012 Act, the Secretary of State directs the HSCIC to establish and operate a system for the collection of the information described in sub-paragraph (2) from the Relevant Organisations, such system to be known as "the Community Services Data Set Information System".
 - (2) The information referred to in sub-paragraph (1) is the information described in the Technical Output Specification.
 - (3) The Secretary of State directs HSCIC to carry out the activities described in subparagraph (1) in accordance with the Specification and generally in such a way as to enable and facilitate compliance with the Specification.

S254(3) - Requirement for these Directions

4. In accordance with section 254(2)(a) of the 2012 Act, the Secretary of State confirms that it is necessary or expedient for him to have the information that will be obtained through the HSCIC complying with these Directions in relation to the Secretary of State's functions in connection with the provision of health services. In particular the information obtained through compliance with these Directions will facilitate or enable the achievement of the purposes of Information Standard SCCI1069 that are described in the Specification.

Accounts

5. The HSCIC must keep proper accounts, and proper records in relation to the accounts, in connection with the Community Services Data Set Information System.

Signed by authority of the Secretary of State for Health

[INSERT DATE]

Annex A – Community Services Data Set v1.0 Requirements Specification

(This document has been removed. Please see the Shared Documents Folder)

Annex B – Community Services Data Set (CSDS) v1.0 Technical Output Specification version 1.0.4

(This document has been removed. Please see the Shared Documents Folder)

The Health and Social Care Information Centre (Establishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017

Statutory Direction Giving Checklist

The HSCIC can only act within the boundaries as set out by the 2012 Health and Social Care Act. As such, in order to commission the HSCIC to collect data, or provide advice or guidance on IT or system delivery functions, it is often necessary to give direction in the form of Statutory Instrument. Completion of this checklist will establish whether a Statutory Direction is require. Please note:

- It is important to respond to each question in the checklist
- Where the information requested is dependent on a decision that had yet to be made, please state that this issue will be decided in due course
- Please use 'plain English'

Completion of the checklist will enable any potential problems or legal dead-ends to be identified. DH and NHS E each have a separate process which must be followed in order to issue a direction and separate documentation detailing these is available.

| Re | Required Information Legal Basis / Power under 2012 Act Response (to be completed by Policy Team) | | | |
|----|---|-------|--|--|
| | Summary: The Health and Social Care Information Centre (Establishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017 | | | |
| 1. | What work would you like the HSCIC to perform? | s.254 | Establish and operate a system for the collection of the Community Services Data Set (CSDS). This is the full implementation of the pilot data collected under the <i>The Health and Social Care Information Centre (Establishment of Information Systems for NHS Services: Children and Young People's Health Services) Directions 2015.</i> This extends the Children and Young Peoples' Health Services (CYPHS) dataset, to remove the age restriction. The collection will include data from NHS and local authority providers. Once established this collection will supersede the CYPHS collection, and this direction will be repealed. There is no repeal in these directions to allow flexibility should the CSDS collection be delayed. | |
| 2. | What purpose will this serve? | s.254 | The Community Services Data Set (CSDS) is a patient level, output based, secondary uses data set which will deliver robust, comprehensive, nationally consistent and comparable person-centred information for people who are in contact with publicly-funded Community Services. | |
| | > Prerequisites | | | |
| 3. | [DH DIRECTIONS ONLY]Does it relate to a function of the Sec of State in relation to the provision of health services or adult social care in England? | s.254 | Provision of Health Services – to inform provision of Community Services to all ages. Services are delivered by the NHS and some children's services by local authorities. | |

| TI | - H14h I C If | Contro (E + 1 | disharant of Information Contains for National Health Comiton Community Comiton Date C. A.D. (1997) |
|-----|---|----------------------|--|
| | e Health and Social Care Information [DH DIRECTIONS ONLY] If not, would | s.254 | olishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017 |
| | the direction be in the interests of | | |
| | the health service in England or | | |
| | recipients or providers of adult social | | |
| | care in England? | | |
| 5. | [NHS ENGLAND DIRECTIONS ONLY] | s.254(3) | |
| | What are the NHS England functions | , , | |
| | in respect of which it is necessary or | | |
| | expedient for NHS England to have | | |
| | the data? | | |
| 6. | How has HSCIC been consulted? | s.254(5) | HSCIC is has developed the standard upon which the collection is based. This has been published on the recommendation of |
| | | | SCCI |
| 7. | Is it possible that the proposal could | s.254 | No |
| | be deemed to be potentially | | |
| | controversial? ¹ If so, why? | | |
| 8. | Will the HSCIC collect information? If so, then to the best of your | s.254(1), s.253 & | Yes. The specification documents are embedded in the draft directions. |
| 8. | so, then to the best of your knowledge and in as much detail as | | Yes. The specification documents are embedded in the draft directions. |
| | possible, what data is to be collected? | | |
| 9. | Which persons is the information to | s.254(1), | The Specification lists the organisations from which the data are to be collected. |
| | be collected from? | s.259 & | |
| | | s.253 | |
| 10. | When is the collection due to | s.260 & | November 2017. |
| | commence? | s.262 | |
| 11. | Will the collection be person level or | s.254(1), | Person level. |
| | aggregate data ² ? | s.253 & | |
| | | s.256 | |
| 12. | Will consent be sought? If not, if | s.259 | Consent will not be sought. There is no direction to respect objections beyond those issued by the Secretary of State. |
| | objections are registered, will they be | | |
| | respected? | | |
| 13. | What will HSCIC do with the | s.253, | None under these directions. |
| | information? For example, will it be | s.254(1) & | |
| | put together with other information? | s.254(6) | |
| 4.4 | and a little little | 252 | AL PLANT |

14. What analysis is to be undertaken by

s.253,

None directed.

¹ Please see explanatory note A. ² Please see explanatory note B.

| the HSCIC? | Centre (Estab s.254(1) & | |
|---|--------------------------------------|---|
| the fiscie. | s.254(1) & | |
| 15. Are there documents which describe what HSCIC is to do? | s.254 | The Specification and Technical Output Specification are embedded in the directions. |
| 16. Are there data processing / information standards to be met? | s.254 | The Specification and Technical Output Specification are part of standard SCCI1069 that has been published under s.250. |
| 17. Will the HSCIC have to make | Reg. 32 of SI | |
| significant changes to their IT | 2013/259, | |
| infrastructure? If so, what is the | s.254(6) & | |
| latest estimate of the cost? | s.253 | |
| Publication | | |
| 18. What information is to be published ³ (if any)? Please note the HSCIC must publish unless certain specific confidentiality, data protection or information standard concerns are applicable. | s.260(1), s.260(2) & s.260 (3) | None directed. |
| 19. What information is not to be published (if any)? | s.260(1), s.260(2) & s.260 (3) | None directed. |
| 20. What is the form, manner and timing of publication (if any)? | s.260 | None directed. |
| 21. What advice has been given to HSCIC by the CAG in relation to publication that HSCIC must have regard to? ⁴ | s.260 | N/A |
| Dissemination | | |
| 22. What information is to be disseminated ⁵ (if any)? | s.262 | None directed |
| 23. Who will the information be disseminated to? What is their legal | s.261(1), s.261(4), | N/A |

basis to receive it? (please contact the information and Transparency

s.261(5) &

s.262

Please see explanatory note C.
 DN - effective from October 2015
 Please see explanatory note C.

The Health and Social Care Information Centre (Establishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017

| team at the Department of Health | 1 | |
|---|-------|-----|
| who can secure legal advice) | 1 | |
| 24. What form, manner and timing must | s.262 | N/A |
| the information take? Will the | 1 | · · |
| information disseminated be | 1 | |
| personal or aggregate? | 1 | |
| 25. What advice has been given to HSCIC | s.262 | N/A |
| by the CAG in relation to | 1 | |
| dissemination that HSCIC must have | 1 | |
| regard to? ⁶ | 1 | |

⁶ DN - effective from October 2015

The Health and Social Care Information Centre (Establishment of Information Systems for National Health Services: Community Services Data Set) Directions 2017

Explanatory notes

A. Is the proposal controversial? (Q7)

- If you think that the collection might attract a high level of public, political or media interest, please explain why. Examples might include:
 - Collections involving commercial bodies
 - Dissemination of any person level data
 - Collections involving anything other than explicit consent
 - Collections where the collection of the data could bring harm or distress to the patient, either indirectly or if collected incorrectly
 - Collection of data of vulnerable groups of people
 - Collection of data of politically sensitive groups of people, for example asylum seekers or benefits claimants

B. Person level data vs. aggregate data

- Person level data, or 'personally identifiable' data, is any which can be used to identify the individual concerned. This can extend beyond direct personal identifiers such as a person's name into other factors which could together be used to work out the identity of an individual, such as sexual preference, family size, long-standing conditions and many more.
- If you have any doubts about whether your data will be personally identifiable, please explain the proposal in as much detail as possible.

C. Publication vs. dissemination

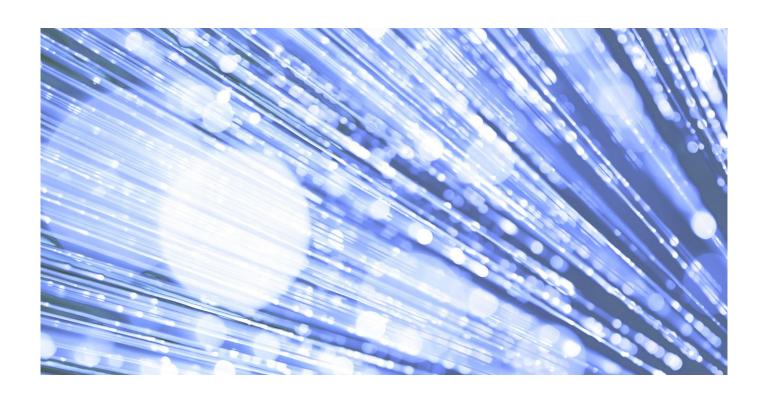
- Publication refers to the preparation and issue of information for public consumption.
- Dissemination refers to the sharing of information within and between organisations and individuals, but not a public release.



Community Services Data Set v 1.0

Requirements Specification

Published 20 April 2017



Information and technology for better health and care

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The Health and Social Care Information Centre is a non-departmental body created by statute, also known as NHS Digital.

This information standard (SCCI1069) has been approved for publication by the Department of Health under <u>section 250 of the Health and Social Care Act 2012.</u>

Assurance that this information standard meets the requirements of the Act and is appropriate for the use specified in the specification document has been provided by the Standardisation Committee for Care Information (SCCI), a sub-group of the National Information Board.

This information standard comprises the following documents:

- Requirements Specification
- Change Specification
- Implementation Guidance.

An Information Standards Notice (SCCI1069 Amd 57/2016) has been issued as a notification of use and implementation timescales. Please read this alongside the documents for the standard.

The controlled versions of these documents can be found on the NHS Digital website. Any copies held outside of that area, in whatever format (e.g. paper, email attachment), are considered to have passed out of control and should be checked for currency and validity.

Date of publication: 20 April 2017



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Glossary of Terms

| Term / Abbreviation | What it stands for | |
|---------------------------------------|--|--|
| Aggregate data set | A set of data items (i.e. a data set) that captures data in aggregate form. Each record within the data set pertains to a specific form of grouping. | |
| AHP | Allied Health Professionals work across a wide range of locations and sectors within acute, primary and community care. They are made up of the following staff groups: • Art, Drama, Music Therapists • Chiropodists/Podiatrists • Occupational Therapists • Orthoptists • Physiotherapists • Prosthetists and Orthotists • Radiographers Diagnostic and Therapeutic • Speech and Language Therapists • Dietitians | |
| Anonymisation | A method applied to patient identifiable data items to protect the identity of individuals. Under anonymisation, the relevant data items are either randomly encrypted and no keys retained, or completely removed. Anonymised data cannot be linked with other data sets for the same individual, nor can it be reversed to expose the identity of an individual. Anonymisation is different from Pseudonymisation. | |
| AQP | Any Qualified Provider - a means of commissioning certain NHS services in England. Clinical Commissioning Groups (CCGs) will determine the services to be commissioned as AQP; the intention is to increase patient choice. All providers must meet the qualification criteria set for a particular service and once qualified their service will appear on the NHS e-Referral Service for patients to select. | |
| | The AQP scheme means that, for some conditions, patients will be able to choose from a range of approved providers, such as hospitals or high street service providers. | |
| BAAS | The Burden Assessment and Advice Service (BAAS) process makes sure that information demands on the NHS are minimised, fit with current national health policies and are carried out in the most efficient way without duplication. It covers the Department of Health and its Arm's Length Bodies (ALBs). | |
| Care Pathway Central Data Repository | Care pathways describe the route that a patient will take from their first contact with a healthcare provider to the completion of their treatment. A repository of data relating specifically to the CSDS. Could also be known | |
| CIDS | as a Central Data Warehouse. The Community Information Data Set is an information standard, approved by the governing standards body, which defines a patient-level data set. CIDS is an 'output data set'; therefore it sets out to describe "what should be extracted" from local IT systems. CIDS is not an input standard or 'clinical data set'; therefore, CIDS does not define "what should be captured or collected" from local IT systems. CIDS is approved for local collection only and is being retired on introduction of the CSDS, eliminating the need for a separate local data flow. | |
| Clinical Governance | Clinical governance is defined by the Department of Health as describing "the structures, processes and culture needed to ensure that healthcare organisations - and all individuals within them - can assure the quality of the care they provide and are continuously seeking to improve it". | |

| Collection Date | The date when services within the scope of this standard should start data collection in their electronic systems. |
|-------------------------|---|
| Commissioned Currencies | The payment system in England under which commissioners pay healthcare providers for each patient seen or treated, taking into account the complexity of the patient's healthcare needs. The two fundamental features being nationally determined currencies and tariffs. Currencies are the unit of healthcare for which a payment is made, and can take a number of forms covering different time periods from an outpatient attendance or a stay in hospital, to a year of care for a long term condition. Tariffs are the set prices paid for each currency. |
| Conformance Date | The date when services and IT systems must conform to standards and meet the specification as set out in the mandate and guidance. This can be read as when the first submission window closes for the CSDS and care providers must therefore be fully conformant. |
| CSDS | The Community Services Data Set is an information standard, approved by the governing standards body, which defines a patient-level data set for all patients in receipt of publicly-funded Community Services. CSDS is an 'output data set'; therefore it sets out to describe "what should be extracted" from local IT systems and periodically be submitted to the central data repository. CSDS is not an input standard or 'clinical data set'; therefore, this data set does not define "what should be captured or collected" from local IT systems. |
| CYPHS Data Set | The Children and Young People's Health Services Data Set is an information standard, approved by the governing standards body, which defines a patient-level data set for all patients, aged 0-18 inclusive, in receipt of NHS-funded Community Services. The CYPHS data set is an 'output data set'; therefore it sets out to describe "what should be extracted" from local IT systems and periodically be submitted to the central data repository. The CYPHS data set is not an input standard or 'clinical data set'; therefore, this data set does not define "what should be captured or collected" from local IT systems. The CSDS replaces the CYPHS data set. |
| Data Controller | A person who (either alone or jointly or in common with other persons) determines the purposes for which and the manner in which any personal data are, or are to be, processed. |
| | A data controller must be a "person" recognised in law, that is to say: individuals; |
| | organisations; and |
| | other corporate and unincorporated bodies of persons. |
| | Data controllers will usually be organisations, but can be individuals, for example self-employed consultants. Even if an individual is given responsibility for data protection in an organisation, they will be acting on behalf of the organisation, which will be the data controller. |
| Data Group | A collection of data items that describe a distinct event or episode. This can also be referred to as a table of data. |
| Data Item | A single component of a data group that holds one piece of information relating to an event or episode. |
| Data Set | The full collection of data groups. See 'Technical Output Specification'. |
| Data Submission File | One file related to a data set that data providers submit to the central data repository. A data submission consists of an Extensible Markup Language (XML) file containing the data for a single reporting period in the format defined by NHS Digital. When submitting two reporting periods in a single file, this would be the primary submission for month one and the refresh submission for month two. |
| Derived | A data item populated at the central data repository as part of post-deadline processing. The derived data item is based on the manipulation of the 'source' data items using mathematical, logical or other types of transformation process, or by using source data to derive further data from |

| Information Standard Social Care Information Centre - A non-departmental body created by statute, also known as NHS Digital. Information Standard as specified within the Health and Social Care Act 2012 is 'a document containing standards as specified within the Health and Social Care Act 2012 is 'a document containing standards in relation to the processing and use of information'. An Information Standard as specifies what process in eneeded, the 'quality' required in the form of conformance criteria and how it can be implemented. ISN Information Standards Notices (ISNs) are issued by the Standardisation Committee for Care Information (SCCI) to give notice of changes to information requirements and information standards used by the NHS and Social Care Services. Last Good File The most recent collection of valid records submitted by a data provider for a reporting period. N3 The NHS national broadband network linking hospitals, medical centres and General Medical Practices in England and Scotland. To be replaced by the Health and Social Care Network (HSCN). https://digital nhs.uk/health-social-care-network NHS Digital Adata, information and technology resource for the health and care system which plays a fundamental role in driving better care, better services and better outcomes for patients in England. Previously (and still legally) known as the HSCIC. Null A data item with no value (i.e. blank) which therefore has no meaning. This is different from a value of 0, since 0 is an actual value. ODS Organisation Data Service (ODS) codes facilitate a patient's treatment by providing unique identification codes for organisational entities of interest to the NHS, for example NHS trusts or CCGs, organisation types, names, addresses etc that are consistent across the board. Output Data Set Output Data Set A set of standardised data lems defining 'what should be extracted' from local clinical IT systems. NHS trusts have the flexibility of adopting any local data collection processing undertaken at the close of | | |
|--|--------------------------|---|
| An Information Standard An Information Standard as specified within the Health and Social Care Act 2012 is 'a document containing standards in relation to the processing and use of information.' An Information Standard specifies rules for the processing in management and sharing of information and specifies what process is needed, the 'quality' required in the form of conformance criteria and how it can be implemented. ISN Information Standards Notices (ISNs) are issued by the Standardisation Committee for Care Information (SCCI) to give notice of changes to information requirements and information standards used by the NHS and Social Care Services. Last Good File The most recent collection of valid records submitted by a data provider for a reporting period. N3 The NHS national broadband network linking hospitals, medical centres and General Medical Practices in England and Scotland. To be replaced by the Health and Social Care Network (HSCN). https://digital.nhs.uk/health-social-care-network NHS Digital Ada, information and technology resource for the health and care system which plays a fundamental role in driving better care, better services and better outcomes for patients in England. Previously (and still legally) known as the HSCIC. Null A data item with no value (i.e. blank) which therefore has no meaning. This is different from a value of 0, since 0 is an actual value. ODS Organisation Data Service (ODS) codes facilitate a patient's treatment by providing unique identification codes for organisational entities of interest to the NHS, for example NHS Trusts or CCGs, organisation sites such as hospitals, or GP Practices. The codes are distributed to the wider NHS and uploaded on to IT systems, thus providing a set of organisation and that and organisation types, names, addresses etc that are consistent across the board. A set of standardised data items defining "what should be extracted" from local clinical IT systems, NHS trusts have the flexibility of adopting any local data collection process | HSCIC | Health and Social Care Information Centre - A non-departmental body |
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| General Medical Practices in England and Scotland. To be replaced by the Health and Social Care Network (HSCN). https://digital.nbs.uk/health-social-care-network A data, information and technology resource for the health and care system which plays a fundamental role in driving better care, better services and better outcomes for patients in England. Previously (and still legally) known as the HSCIC. Null A data item with no value (i.e. blank) which therefore has no meaning. This is different from a value of 0, since 0 is an actual value. Organisation Data Service (ODS) codes facilitate a patient's treatment by providing unique identification codes for organisational entities of interest to the NHS, for example NHS Trusts or CCGs, organisation sites such as hospitals, or GP Practices. The codes are distributed to the wider NHS and uploaded on to IT systems, thus providing a set of organisational data and organisation types, names, addresses et that are consistent across the board. Output Data Set A set of standardised data items defining "what should be extracted" from local clinical IT systems. NHS trusts have the flexibility of adopting any local data collection process and system they see fit, so long as the system can extract data as per the Technical Output Specification (TOS). An output data set is not usually used for direct patient care and is only for secondary uses purposes e.g. national reporting. Patient Level Relating to a single data subject (e.g. person or patient), as opposed to an aggregate data set. Post-deadline Processing The processing carried out immediately on a submission window by the central data repository. Pre-deadline Processing The processing carried out immediately on a submission window by the central data repository. A method applied to identifiable data items to protect the identity of individuals. Under pseudonymisation, a standard encryption key is used to encode patient identifiable data items so tidal, are fassible. Because the encryption key is retained by a | Last Good File | The most recent collection of valid records submitted by a data provider for |
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| | Reference Data Set | A data set containing data groups and data items which are outside the |

| | comprehensive secondary uses data set for community care. The Reference Data Set has not been approved as a national data standard by the Standardisation Committee for Care Information (SCCI) or predecessor board, nor does the central data repository provide any storage capability for its data items. |
|---|--|
| Reporting Period | The period (usually a calendar month) for which a particular data upload refers. |
| RTT | Referral To Treatment refers to the length of waiting time for a patient's treatment, focusing on the entire patient journey from the initial receipt of a referral to the first definitive treatment. |
| SCCI | Standardisation Committee for Care Information - a committee with membership drawn from a range of health and social care organisations with responsibility for overseeing the development, assurance and approval of information standards, data collections and data extractions used within the health and social care system. |
| Screening | A public health service in which members of a defined population, who do not necessarily perceive they are at risk of, or are already affected by a disease or its complications, are asked a question or offered a test, to identify those individuals who are more likely to be helped than harmed by further tests or treatment to reduce the risk of a disease or its complications. |
| Secondary Uses | Re-using clinical and operational information for purposes other than direct patient care. For example, national reporting. |
| Submission Cycle | The data submission frequency and timescales to which Information Management Services must be able to compile electronic files and make periodical electronic submissions in accordance to the standard. |
| Submission Period or Submission Window | The time period (usually approximately one calendar month) during which a data provider may submit data uploads for a given reporting period. |
| Systemic Capability | The ability to record information (clinical, administrative or for any other purposes) in an electronic form. This applies to commercial IT solutions, bespoke IT systems or modular electronic services which have the functional capability of extracting the required data to meet the standards of a specific output specification. |
| TCS | Transforming Community Services was a Department of Health programme that aimed to provide essential care to people, families and communities, from health promotion to end of life care. This care is provided in many settings, at critical points in people's lives, and often to those in vulnerable situations. |
| TOS | Technical Output Specification – a specification that fully defines the data items within the output data set. The Technical Output Specification splits the data set into a number of data groups (tables), each containing related |

data items and values.

the data set into a number of data groups (tables), each containing related

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04bii Community Services Dataset Direction

Overview

This product precisely defines the patient level Community Services Data Set (CSDS) standard, 'what it is' and 'how it should be implemented'.

It is the formal definition of the standard.

1.1 Background

| Standard | |
|--------------------|--|
| Standard Number | SCCI1069 |
| Standard Title | Community Services Data Set |
| Description | Background |
| | The Community Services Data Set (CSDS) is a patient level, output based, secondary uses data set which will deliver robust, comprehensive, nationally consistent and comparable person-centred information for people who are in contact with publicly-funded Community Services. As a secondary uses data set it intends to re-use clinical and operational data for purposes other than direct patient care. It defines the data items, definitions and associated value sets to be extracted or derived from local systems. |
| | The CSDS is an update to the Children and Young People's Health Services (CYPHS) data set standard (ref: SCCI1069) so that the scope includes data for people of all ages in receipt of publicly-funded Community Services. The CYPHS data set collected data for all patients aged 0 up until their nineteenth birthday. |
| | In addition, the Community Information Data Set (CIDS) standard (ref: SCCI1510), which is for local data collection and extraction only, is being retired as part of this release, eliminating the need for a separate local data flow. |
| | In Scope |
| | The data collected in the CSDS covers all publicly funded Community Services provided by Health Care Providers in England. This includes (but is not limited to) Community Health Trusts, acute organisations, Independent Sector Healthcare Providers and Local Authorities that provide Community Services. |
| | For the purpose of this scope, all services defined in 'Service or Team Type Referred To' within the CSDS Technical Output Specification that are delivered by Healthcare Professionals within the scope of providing Community Services are required to provide data to the CSDS. This includes any services that have transitioned into new organisational forms as a result of the Transforming Community Services (TCS) programme. Community Services that are funded and/or provided by the NHS or Local Authorities, for example provided by the NHS but commissioned by Local Authorities, are required to include their clinical activity in the CSDS. |
| | New care models are set to change the way in which primary, community and acute secondary services are organised. This makes it hard to define Community Services as organisational structures may include all three, as well as elements of social care. However, some examples of Community Service activity within the scope of the CSDS are outlined below: |
| | Health Promotion drop in sessions. |

)4bii Community Services Dataset

- Home visits by District Nursing or Allied Health Professionals.
- Residential care home visits.
- Health Visiting activities.
- Community Dentistry.
- Community Paediatrician sessions in a clinic.

These activities may take place in locations including health centres. Sure Start centres, day care facilities, schools or community centres, mobile facilities, hospitals, or the patient's own home (including care homes).

Following the recent transition of commissioning arrangements, the commissioning of public health services is the responsibility of the Local Authority. The following recently transitioned community services commissioned by Local Authorities are within the scope of the CSDS:

- Health Visiting Service.
- School Nursing Service.
- Public Health and Lifestyle Service.
- Family Support Service.

For further guidance on commissioning responsibilities for Local Authorities, see https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216 708/dh 131904.pdf. For the commissioning of such services for children, see https://www.gov.uk/government/publications/commissioning-of-public-healthservices-for-children.

Please refer to the CSDS Technical Output Specification for a complete list of the Community Services currently covered within the scope of CSDS. The list is also available in Appendix A.

Out of Scope

The data set scope excludes all care settings listed below, but may be readdressed in line with any changes in service model provision:

- Core Ambulance and Emergency Care Services.
- Services covered solely by primary care contracts (General Medical Services (GMS), Personal Medical Services (PMS), Alternative Provider Medical Services (APMS) and Specialist Medical Provider Services (SPMS)).
- Other Primary Care Services that are not considered Community Services including General Dental Services, General Ophthalmology Services and Pharmacy Services.
- Social Care and specialist community services where separate data flows exist, e.g. community mental health.
- Admitted Patient Care (including Community Hospitals, General Acute or Mental Health). This data will be in the scope of other data sets, such as the Commissioning Data Sets (CDS).
- Maternity Services depending on local processes, information on Newborn Hearing Screening and Blood Spot Card Investigation Results can be captured by Maternity or Child Health Services (Health Visitors). The remit of this information standard covers results captured within Child Health (as opposed to Maternity) Services.
- Outpatient Care which was previously provided under General Acute or Mental Health contracts. This data will be in the scope of other data sets, such as the Commissioning Data Sets (CDS).
- Non-health service funded activity, e.g. Speech and Language Therapy activity

- which is funded directly by schools.
- Activity reported through the National Drug Treatment Monitoring System (NDTMS) Data Set, Sexual and Reproductive Health Activity Data Set (SRHAD) or Genitourinary Medicine Clinic Activity Dataset (GUMCAD).
- Activity funded through Acute Payment Currencies (formally Payment by Results or PbR), i.e. included in Health Resource Groups (HRGs).
- Prison or secure facility-based health services (however, community-based services visiting a prison or secure facility to deliver healthcare are in scope).

Impact on Existing Data Flows

The following activity will continue to flow via the existing Commissioning Data Sets (CDS):

- Outpatient activity under the responsibility of Consultants or Nurses (and, optionally, Allied Health Professionals), including such activity taking place as part of a Consultant-Led Referral To Treatment (RTT) Pathway.
- Interface service activity which starts a Consultant Led RTT pathway (e.g. musculoskeletal services).
- Admitted Patient Care (APC) activity taking place within a Community Hospital.

In certain circumstances there may be a requirement to flow activity within multiple data sets, e.g. Interface Service activity which starts a Consultant Led RTT pathway should also flow in the Commissioning Data Set (CDS).

The CSDS does not change the existing mandated CDS flows for Admitted Patient Care, Outpatients or A&E. It does not alter the RTT flows covered by ISB 0092 Amd 7/2013 'Allied Health Professional (AHP) Referral To Treatment (RTT)'.

http://content.digital.nhs.uk/isce/publication/isb0092

In addition, the Community Information Data Set (CIDS) standard (ref: SCCI1510), which is for local data collection and extraction only, is being retired as part of this release, eliminating the need for a separate local data flow.

| Applies to | Organisation Types | | | | | | | | |
|-------------------|--|--|--|--|--|--|--|--|--|
| Applies to | Organisation Types | | | | | | | | |
| | The standard includes all organisational forms providing publicly funded Community Services, including those resulting from Transforming Community Services (TCS), and may include the following organisation types (both Foundation Trust and Non-Foundation Trusts): | | | | | | | | |
| | Acute Trusts. | | | | | | | | |
| | Mental Health Trusts. | | | | | | | | |
| | Community Healthcare Trusts. | | | | | | | | |
| | Care Trusts. | | | | | | | | |
| | Social Enterprises. | | | | | | | | |
| | Integrated Care Organisations. | | | | | | | | |
| | Any Qualified Providers (AQPs). | | | | | | | | |
| | Local Authorities. | | | | | | | | |
| | Independent Sector Providers (including Third Sector). | | | | | | | | |
| | The standard also applies to IT systems used by Community Services. | | | | | | | | |
| | <u>Departments</u> | | | | | | | | |
| | The standard must be read and used by all Heads of Community Services, and related clinical and support services that have an active involvement in delivering the community care pathway or the support thereof. | | | | | | | | |
| | Professionals The standard applies to all community care professions working in or supporting Community Services, such as: | | | | | | | | |
| | | | | | | | | | |
| | Nursing, Health Visitors and Midwifery staff; for example Specialist Nurses. Allied Health Professionals; for example Physiotherapists and Dietitians. Other Care Professionals; for example, Counsellors or Play Therapists. IT Systems | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | The standard predominantly, but not exclusively, relates to Community Systems, Patient Administration Systems (PAS) and Electronic Patient Records (EPR). | | | | | | | | |
| Release | | | | | | | | | |
| Release Number | Amd 57/2016 | | | | | | | | |
| Release Title | Version 1.0 | | | | | | | | |
| Description | Changes to the existing CYPHS standard are: | | | | | | | | |
| | Removal of age limit restricting the data set to patients aged 0 up until their nineteenth birthday, so that the CSDS can collect data for people of all ages in receipt of publicly-funded Community Services. | | | | | | | | |
| | Minor changes to data item and group-level descriptions as a result of the removal of the age limit. | | | | | | | | |
| | Renaming of the standard to 'Community Services Data Set', and consequential updates to the message (schema) headers and other supporting documents. | | | | | | | | |
| | In addition, the CIDS standard is being retired, to eliminate the need for a | | | | | | | | |

| | separate local data flow. |
|--------------------------------------|--|
| Implementation Completion Date | From 1st October 2017, providers of publicly-funded Community Services MUST be able to collect information locally, and their systems MUST be fully conformant with this standard. |
| | From 1st November 2017, providers of publicly-funded Community Services <i>MUST</i> begin submitting CSDS submissions in accordance with this standard. |
| | Providers of publicly-funded Community Services may also volunteer to participate in pilot trials ahead of the Implementation Completion Date to test the process ahead of full data collection, upon discussion and agreement with NHS Digital. Pilot data <i>MAY</i> be provided from 1st June 2017 onwards. |
| Full Conformance Date | 1st December 2017 |

1.2 Supporting Documents

This document should be read in conjunction with the following:

| Ref# | Title |
|------|-------------------------------------|
| 1 | CSDS Technical Output Specification |
| 2 | CSDS Data Model |
| 3 | CSDS System Conformance Checklist |
| 4 | CSDS Implementation Guidance |
| 5 | CSDS Change Specification |
| 6 | CSDS User Guidance |
| 7 | CSDS Technical Guidance |
| 8 | CSDS XML Schema (login required) |

Please see section 2.2 of the Implementation Guidance for a full list, descriptions and locations of each related document.

1.3 Related Standards

| Ref# | Reference | Title |
|------|---|--|
| 1 | ISB 1513 Amd 45/2012 | Maternity Services Data Set |
| 2 | SCCI1510 (N.B. retired as part of this release) | Community Information Data Set |
| 3 | ISB 1072 Amd 30/2012 | Child and Adolescent Mental Health Services Data Set |
| 4 | ISB 0149-02 | NHS Number for Secondary Care |
| 5 | ISB 0149-01 | NHS Number for General Practice |
| 6 | ISB 1555 | Birth Notifications |
| 7 | ISB 0092 Amd 16/2010 | Commissioning Data Sets (CDS) version 6.2 |

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Child Protection Information Sharing (CP-IS)

2 Health and Care Organisations

2.1 Requirements

Requirement

The following section describes the care provider requirements of this standard.

Timeframe

- (1.1) From 1st October 2017, providers of Community Services as defined in this Information Standard *MUST* be able to collect the information as defined in the Technical Output Specification for local use.
- (1.2) From 1st November 2017, providers of Community Services as defined in this Information Standard *MUST* begin submitting the monthly CSDS submissions as per the instructions in the CSDS Technical Guidance. The providers *MUST* allow time to review and implement corrections to their submission files within the designated window.

Scoping

- (2.1) With immediate effect, providers of Community Services MUST review the 'In scope' and 'Out of scope' sections of this Specification to establish whether the standard applies to the services they offer.
- (2.2) Providers SHOULD review all related documentation to fully understand the background, objectives and scope of this information standard.

Feasibility Assessment

- (3.1) With immediate effect, providers of Community Services *MUST* review the CSDS Technical Output Specification (TOS) and CSDS User Guidance to understand the scope and definition of each data item.
- (3.2) As an Output Data Set, the CSDS is intended to only define "what should be extracted" from local IT systems, not "what should be captured". A clinical data set will need data items beyond what the CSDS specifies; consequently, providers of Community Services SHOULD NOT use this data set to support their clinical and operational data capture. The whole ethos around the CSDS is to only re-use clinical data and not specify standards for capturing clinical data.
- (3.3) Providers of Community Services **SHOULD** familiarise themselves with the CSDS XML schema and conversion tool² to understand how data items are grouped for the Data Submission File.
- (3.4) Providers of Community Services SHOULD carry out a 'data mapping exercise' to understand how well their existing electronic systems align to the CSDS TOS and take appropriate action to ensure that the standard is fully met. The self-assessment 'System Conformance Checklist' tool is available on the NHS Digital website to support this mapping exercise. The mapping exercise is likely to need the involvement of experienced CSDS leads, the organisation's Information Management Service and the appropriate IT system suppliers.
- (3.5) Providers of Community Services *MUST* make submissions only for those data items defined in the TOS and no additional data items should be included.

Information Governance

(4.1) The CSDS Implementation Guidance explains the Information Governance issues surrounding the data set. Caldicott Guardians and the Heads of Community Services

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¹ The key words MUST, SHOULD and MAY are defined in RFC-2119.

² An XML conversion tool package for the CSDS has been developed by NHS Digital. This enables providers to load or copy their data into the provided table structure. Once complete, a routine can be run that will export the submission into the required XML format ready for submission to the central data repository. Use of the conversion tool is optional. Further information can be found in the CSDS Technical Guidance.

MUST review the Information Governance Guidelines within the CSDS Implementation Guidance to understand:

- How data submission, storage and reporting processes handle identifiable and sensitive data items.
- How consent issues should be best managed.
- (4.2) Providers of Community Services **MUST** make available information and guidance to patients stating that their clinical care data may be re-used for the purpose of data analysis and reporting.
- (4.3) With immediate effect, providers of Community Services SHOULD read the 'NHS Confidentiality Code of Practice', 'Caldicott Report' and subsequent 'Information: To share or not to share?' Information Governance Review (second Caldicott review) for guidance and technical support related to data and information sharing at both operational and secondary use levels.
- (4.4) Providers of Community Services SHOULD also consult and adhere to the good practice advice and guidance set out in the NHS Digital's 'A Guide to Confidentiality in Health and Social Care'.
- (4.5) To prevent breaches of confidentiality, it **MUST** be the sole responsibility of the Providers of Community Services' Caldicott Guardian to ensure the subject information is withheld where appropriate.
- (4.6) Any immediate concerns **SHOULD** be addressed to the standard's developers at NHS Digital, or the Health Research Authority (HRA) Confidentiality Advisory Group (CAG) if the concerns relate to data dissemination.
- (4.7) Providers of Community Services **SHOULD** ensure that local data repositories comply to appropriate data security controls.

Clinical Governance

- (5.1) As an Information Standard that approves a national patient-level CSDS:
 - Governing and audit bodies MAY use the data set to monitor whether providers of Community Services are making year on year improvements.
 - Providers of Community Services **MAY** use the data set to compare and contrast performance to drive service improvements.

It is therefore clear that the data set can be used for clinical governance purposes.

Clinical Risks

- (6.1) Providers of Community Services SHOULD always seek to understand the context of published national reports and be aware that the information presented depends greatly upon the quality of information submitted.
- (6.2) Ongoing efforts **SHOULD** be made to ensure that data quality is of the highest standard before forming judgements about reports and introducing changes.
- (6.3) Where there is a system change in order to meet this standard (e.g. the procurement of a new clinical system from a different supplier), providers of Community Services SHOULD ensure that supplier organisations are compliant with the clinical safety standards SCCI0129 and SCCI0160.

Central Data Submission

- (7.1) Providers of Community Services *MUST* create a monthly data submission as set out in the CSDS Technical Guidance. Therefore, Providers of Community Services *MUST* be able to:
 - Collate and extract data from local IT systems as per the CSDS TOS.
 - Structure the data and create a data submission file as per the CSDS Technical Guidance.
 - Apply the basic validation rules and ensure that the submission file conforms to
 - Ensure the data submission file only contains data for a single month and relates to one provider organisation.

- Submit the data submission file as per the data submission protocol highlighted in the Technical Guidance.
- (7.2) Providers of Community Services **MUST** submit data monthly to the central data repository, based on a schedule that will be published on the NHS Digital website in advance of the Conformance Date.
- (7.3) The schedule outlines the timeframe (Submission Window) within which data relating to a monthly period (Reporting Period) *MUST* be submitted.
- (7.4) Providers of Community Services *MUST* check error reports, correct errors and make resubmissions at the earliest opportunity. Further details on error correction and resubmissions are explained within the Technical Guidance.

Constructing a Data Submission File

The CSDS Technical Guidance document provides information on how to create a monthly submission file. Providers of Community Services *MUST* review this document; however, noted below are key requirements of the technical submission architecture.

- (8.1) A submission MUST:
 - Only contain data for a single provider organisation.
 - Only contain data relating to activities occurring in a single month.
 - Meet the conditions and validation rules explained in the CSDS TOS.
- (8.2) Each Data Submission File MUST consist of a:
 - Header group.
 - Two or more data groups, including CYP001 and CYP002 entries for every record.
- (8.3) Each group consists of one or more data items. The groupings of data items for each table *MUST* be as per the layout specified in the CSDS TOS.
- (8.4) Providers of Community Services **MUST** include in their submission all data groups they can generate from local electronic systems.
- (8.5) The first data submission **MUST** include all data relating to referrals that were open on 1st October 2017 and all subsequent new referrals.
- (8.6) The Information Standard does not stipulate how data should be collected in local electronic systems, so the groups MAY generate data from one or more data sources. It MAY be that providers of Community Services adopt a local data repository to aggregate data from all relevant sources and use this to generate the Data Submission File. A conversion tool has also been provided which MAY be used to collate data from multiple systems and produce a submission file in the correct XML format.

Validation Rules

- (9.1) With immediate effect, providers of Community Services *MUST* review the CSDS TOS to understand the data validation rules that will be applied to each data group on arrival at the central data repository to all incoming Data Submission Files. Any validation rules not adhered to will result in appropriate groups or the entire submission being rejected.
- (9.2) Where error reports are generated due to non-conformance against validation rules, providers of Community Services *MUST* take immediate action and resubmit the corrected file within the submission window. Details of the rejection and error messages contained within the reports are provided within the CSDS TOS.

Data Quality Feedback

- (10.1) With immediate effect, providers of Community Services **MUST** review the CSDS TOS to understand the data quality rules that will be applied to each data group on arrival at the central data repository.
- (10.2) Providers of Community Services SHOULD review reports generated by NHS Digital highlighting issues with data quality to allow them to take further action before the submission window closes.
- (10.3) Providers of Community Services SHOULD make every effort to resolve inherent systemic errors and address recurring data quality issues, as once the submission window closes for a particular reporting period there will not be a further opportunity to resubmit the data.

Monthly Submission

04bii Community Services Dataset

(11.1) A submission **MUST** be made via the central data repository on a monthly basis and as per instructions laid out in the CSDS Technical Guidance.

Issues and Maintenance

(12.1) To support the implementation of this information standard, providers of Community Services SHOULD highlight any persistent issues and feed these back to the standard's developers. Feedback will be used by the developers to improve the implementation and data collection processes for future consideration towards a data set change or, indeed, further implementation phases. Feedback can be sent via enquiries@nhsdigital.nhs.uk.

Requirements of Key Personnel Involved in the Delivery of this Data Set

- (13.1) Heads of Community Services are responsible for capturing the information as part of the on-going care of patients. They MUST:
 - Familiarise themselves with the CSDS TOS to understand what data items are mandated by this Information Standard.
 - Assist their organisation's IT or Information Management service in completing the CSDS System Conformance Checklist to assess what proportion of the CSDS TOS data items are available from the their organisation's local IT systems.
 - Ensure they understand and implement the Information Governance approach adopted for this data set, which can be found in the Information Governance section of the Implementation Guidance.
 - Explain to operational and clinical staff the importance of capturing data for the CSDS.

(13.2) Clinical staff MUST:

- Capture the CSDS TOS data items in an accurate and timely manner.
- Understand the deployed IG approach, especially in relation to the handling of sensitive data.
- (13.3) Informatics staff are responsible for producing extracts that conform to the XML schema and TOS. They MUST:
 - Familiarise themselves with the CSDS TOS and XML schema to understand what data items are mandated by this Information Standard.
 - Configure electronic patient record systems to allow compliance with the standard.
 - Submit the data to the central data repository within the prescribed reporting periods and deadlines.
 - Review and work with clinicians to resolve data quality issues identified in the output reports.
 - Ensure they understand and implement the Information Governance approach adopted for this data set, which can be found in the Information Governance section of the Implementation Guidance.

Informatics staff MAY also be responsible for the collation of information from a range of disparate systems into the CSDS. This will include ensuring completeness and data quality of the information within the data set.

Working Practices

Cascading the Information Standard requirements to operational staff

- (14.1) With immediate effect, all clinicians and operational staff involved in community care need to be made aware of this Information Standard. Providers of Community Services' Chief Executives **MUST** be held accountable to comply with the dates instructed by the mandate. The mandate and an appropriate Project Brief SHOULD, therefore, be cascaded to the commissioned Community Services for the attention of the Community Service leads and other relevant staff.
- (14.2) Instructions **MUST** also be communicated to the organisation's information leads to initiate collaborative work with Informatics Services and Community Services as early as possible.

System upgrades

- (15.1) This Standard looks to re-use clinical and operational data for national analysis and reporting. Providers of Community Services SHOULD conduct a mapping exercise to determine how well local systems map to the CSDS TOS (using the CSDS System Conformance Checklist).
- (15.2) For data items that align to the data set TOS, providers of Community Services **MUST** collate the data locally on a monthly basis.
- (15.3) Where the mapping exercise identifies gaps, providers of Community Services SHOULD plan to undertake development efforts with their IT system suppliers to upgrade existing IT systems.
- (15.4) Providers of Community Services SHOULD consider the provision of adequate resources to make plans for any transcription requirements of paper records to electronic forms which ultimately meet the entire mandated data standard for central returns.

How CSDS providers should look to capture data

- (16.1) This Standard defines the data items that that should be extracted from local electronic systems. Providers of Community Services SHOULD continue to develop their electronic systems to support the clinical data capture which best supports their working practices and business plans.
- (16.2) However, when planning to improve systems and services, consideration *MUST* be made to this Information Standard during the development and implementation stages.

The TOS and User Guidance provide further information on the data items which need to be captured.

How to achieve timely data capture and file submission

(17.1) The data set has been deliberately split into a number of data groups. The data groups are intended to support the business processes of Community Service providers. Providers of Community Services *MUST* make every effort to record clinical information in real time or as a minimum, transcribe information to an electronic form at the earliest opportunity to support clinical interventions and decisions. This procedure will also support seamless data extraction from electronic systems for the required monthly central return.

How to manage data submissions if data is captured across several systems

(18.1) Due to the number of services considered Community Services, each of which MAY use its own dedicated IT system, the CSDS spans several services and systems (e.g. Health Visiting and Child Health). The Information Standard makes it very clear that a submission file can only include data pertaining to one organisation and for reporting periods that are open. Therefore, providers of Community Services MAY wish to consider developing a local data repository to generate the monthly submission files.

Demonstrating readiness

(19.1) During September 2017 a state of readiness questionnaire will be circulated to assess conformance with this standard. This **MUST** be completed by providers of Community Services and returned to NHS Digital within the specified deadline.

2.2 Conformance Criteria

This section describes the tests that can be measured to indicate that the information standard is being used correctly by a provider organisation (conformance criteria). Conformance of provider organisations is also assessed through analysis of the submitted data, once it is received by NHS Digital. In each case, the requirement(s) being measured by each criterion is shown in italics.

Conformance Criteria

- (1.1) All relevant data from the CSDS TOS, i.e. mandatory items and required items that should be reported where they apply, are collected locally from 1st October 2017. This will be measured by assessing the data received by providers from the submissions commencing.
- (1.2, 7.1, 7.2, 7.3, 8.1, 8.2, 8.3, 8.4, 8.5 and 11.1) Submissions to the CSDS, constructed in accordance with the CSDS Technical Guidance and TOS, are made from 1st November 2017 and on a monthly basis thereafter. This will be measured by assessing the data received by providers from the submissions commencing.
- (2.1, 3.1 and 3.5) The CSDS Information Standards Notice, Requirements Specification (this document), and other supporting documents have been reviewed within one month of the publication date of this Information Standard, in order to establish which services are covered by the scope, how the data items within the data set are defined, and what data items should be included in submissions. This will be measured using the state of readiness questionnaire (see 19.1).
- (4.1, 4.2 and 4.5) Prior to the start of local data collection on 1st October 2017, the Information Governance considerations around the CSDS have been reviewed by Caldicott Guardians and the Heads of Community Services, and relevant information communicated to patients about the collection and submission of their data. This will be measured using the state of readiness questionnaire (see 19.1).
- (9.1 and 10.1) By 1st November 2017 the CSDS TOS has been reviewed and the relevant data validation and data quality rules are understood. Any such issues are identified and acted upon after each submission. This will be measured by assessing the data received by providers from the submissions commencing and assessing any improvements in data quality.
- (9.2) From 1st November 2017, all error reports generated due to non-conformance with validation rules are reviewed in a timely manner, allowing for re-submission of a corrected file within the submission window. This will be measured by assessing the data received by providers from the submissions commencing and assessing any improvements in data quality between primary and refresh submissions.
- (13.1, 13.2 and 13.3) Key personnel involved in the delivery of the CSDS understand their obligations in relation to local data capture, the submission of CSDS data, and the required information governance approach, prior to local data collection commencing on 1st October 2017. This will be measured using the state of readiness questionnaire (see 19.1).
- (19.1) The CSDS state of readiness questionnaire is completed and returned to NHS Digital by the communicated deadline (likely to be 29th September 2017). This will be measured by the submission of the completed state of readiness questionnaire.

3 IT Systems

3.1 Requirements

Requirement

The following section describes the care provider requirements to ensure that their IT systems conform to this standard.

Timeframe

- (1.1)From 1st October 2017 systems used by Community Services **MUST** be able to capture and/or derive the data items defined within this standard. This includes mapping of local codes to national codes, and the ability to extract this information as envisaged within this standard, e.g. without interim workarounds. Suppliers MAY assess this against the System Conformance Checklist which can be found on the NHS Digital website.
- (1.2)Changes made to systems **MUST** result in minimal increase on burden for providers in capturing and extracting the information defined in the CSDS TOS, and any additional burden MUST be proportionate.
- (1.3)When considering potential developments, minimising the burden on providers and supporting good data quality **MUST** be prioritised.

Scoping

IT Systems Suppliers **SHOULD** review all related documentation to fully (2.1)understand the background, objectives and scope of this information standard.

Feasibility Assessment

- (3.1)With immediate effect, IT Systems Suppliers SHOULD review the CSDS Technical Output Specification (TOS) and CSDS User Guidance to understand the scope and definition of each data item.
- (3.2)As an Output Data Set, the CSDS is intended to only define "what should be extracted" from local IT systems, not "what should be captured". A clinical data set will need data items beyond what the CSDS specifies.
- (3.3)While IT Systems Suppliers **SHOULD** use this data set to support their system development, they SHOULD NOT use the data set exclusively and SHOULD also consider the full requirements of the care setting where it is used. The whole ethos around the CSDS is to only re-use clinical data, not specify standards for capturing clinical data.
- (3.4)IT Systems Suppliers **SHOULD** familiarise themselves with the CSDS XML schema and conversion tool to understand how data items are grouped for the Data Submission File.
- IT Systems Suppliers **SHOULD** provide tools to enable a 'data mapping exercise' (3.5)to be carried out and where possible complete the mappings to the national codes on behalf of the CSDS providers. A self-assessment 'System Conformance Checklist' is a tool available on the NHS Digital website to support this mapping exercise.

Information Governance

The CSDS Implementation Guidance explains the Information Governance issues surrounding the data set.

IT Systems **MUST** provide a mechanism to allow providers to identify records where patients have objected to the use of their data for secondary purposes or where there is a legal requirement to restrict the flow of identifiable information for a patient.

 $^{^{\}rm 3}$ The key words MUST, SHOULD and MAY are defined in RFC-2119.

Clinical Risks

(5.1) IT System suppliers SHOULD always ensure that any changes resulting from the implementation of the CSDS are compliant with the safety standards SCCI0129 and SCCI0160.

Constructing a data submission file

(6.1) The CSDS Technical Guidance document provides information on how to create a monthly submission file. IT Systems Suppliers SHOULD review this document and the steps outlined in Section 2.1 (Health and Care Organisations -Requirements) above.

Validation rules

(7.1) IT Systems Suppliers SHOULD review the CSDS Technical Guidance and TOS to understand the data validation rules that will be applied at the central data repository to all incoming Data Submission Files. Any validation rules not adhered to will result in appropriate groups or the entire Data Submission File being rejected, depending on the particular validation rule.

Data quality feedback

- (8.1) With immediate effect, IT Systems Suppliers SHOULD review the CSDS TOS to understand the data quality rules that will be applied to each data group on arrival at the central data repository.
- (8.2) From 1st November 2017, all systems used by Community Services *MUST* have the ability to produce data quality reports to support providers in producing their submission files in line with the CSDS TOS.

Demonstrating readiness

(9.1) During September 2017 a state of readiness questionnaire will be circulated to assess conformance with this standard. This **SHOULD** be completed by all suppliers of systems used by Community Services and returned to NHS Digital within the specified deadline.

3.2 Conformance Criteria

This section describes the tests that can be measured to indicate that the information standard is being used correctly within IT systems. In each case, the requirement(s) being measured by each criterion is shown in italics.

Conformance Criteria

- (1.1) All relevant data from the CSDS TOS, i.e. mandatory items and required items that should be recorded where they apply, can be captured by systems used by Community Services from 1st October 2017. Functionality to map local codes/values to national codes/values is included, and the system is able to extract this information as envisaged within this standard. This will be measured using the state of readiness questionnaire (see 9.1) and, later, through provider submissions.
- (1.2) and (1.3) Systems used by Community Services are able to extract data for the CSDS, with minimal additional burden for providers, from 1st October 2017. The format is compatible with the XML schema without a reliance on interim workarounds. This will be measured using the state of readiness questionnaire (see 9.1).
- (1.3) and (8.2) Systems used by Community Services are able to produce data quality reports to support providers in producing their submission files in line with the CSDS TOS, from 1st November 2017. This will be measured using the state of readiness questionnaire (see 9.1) and, later, through assessing the data quality of provider's submissions.
- (4.1) Systems used by Community Services have the required functionality, from 1st November 2017, to allow providers to identify records where patients have objected to the use of their data for secondary

purposes or where there is a legal requirement to restrict the flow of identifiable information for a patient. This will be measured using the state of readiness questionnaire (see 9.1).

(9.1) The CSDS state of readiness questionnaire is completed and returned to NHS Digital by the communicated deadline (likely to be 29th September 2017). This will be measured by the submission of the completed state of readiness questionnaire.

Appendix A: List of Community Services within scope of this Information Standard

- **Appliances Service**
- Arts Therapy Service
- Cancer Service
- Cardiac Service
- Children's Community Nursing Service
- Clinical Psychology Service
- Community Dental Service
- Community Paediatrics Service
- Continence Service
- Counselling Service
- **Dermatology Service**
- **Diabetes Service**
- Diagnostic Service
- **District Nursing Service**
- Ear Nose and Throat Service
- End of Life Care Service
- Family Support Service
- Gastrointestinal Service
- Haematology Service
- Health Visiting Service
- **Hearing Service**
- Integrated Multi-Disciplinary Team
- Intermediate Care Service
- Long Term Conditions Case Management Service
- Musculoskeletal Service
- **Neurology Service**
- **Nutrition and Dietetics Service**
- Occupational Therapy Service
- Orthoptist Service
- Pain Management Service
- Phlebotomy Service
- Physiotherapy Service

- · Podiatry Service
- · Public Health and Lifestyle Service
- · Rehabilitation Service
- · Respiratory Service
- Respite Care Service
- · Rheumatology Service
- · School Nursing Service
- Speech and Language Therapy Service
- · Tissue Viability Service
- · Treatment Room Nursing Service
- Vulnerable Children's Service
- · Vulnerable Adult's Service

Purpose of this document

The CSDS v1.0 Technical Output Specification (TOS) is intended to provide a comprehensive technical view of the provider submission (32 data set tables) and processed Bureau Service Portal (BSP) Extracts.

The 32 data set tables include data item level detail necessary to construct an output data set suitable for submission. The data set tables also include additional information explaining which records should be included in a submission (inclusion rules).

Background

The CSDS Information Standard is the specification of a patient-level data-extraction (output) standard intended for community service providers in England.

This Information Standard has been accepted by the Standardisation Committee for Care Information (SCCI) and has been assigned standard number SCCI1069. This mandates the patient-level CSDS as a national data standard.

The ISN does not directly place any requirement on system suppliers to accommodate the CSDS within their systems. The contractual agreement between data providers and system suppliers will dictate whether system suppliers have to abide by the ISN.

The formal Information Standard can be found at: http://content.digital.nhs.uk/isce/publication/scci1069

Further information and supporting documents can be found at: http://digital.nhs.uk/csds

Related Documents

A comprehensive set of documentation has been developed by the project team. Please see the Implementation Guidance, Section 2.2, for an overview of the documentation available and where they can be found.

This document should be read in conjunction with the following documents:

- CSDS Requirements Specification
- · CSDS Change Request
- CSDS Implementation Guidance
- CSDS User Guidance
- · CSDS Technical Guidance
- NHS Data Model and Dictionary

Please note that a version of the Technical Output Specification (this document) including details of validation rules (rejections/warnings) and derivations generated from the submitted data is also available.

Document Version History

| Version | Date Issued | Brief Summary of Change |
|---------|-------------|-------------------------|
| | | |

Community Services Data Set (CSDS) v1.0

Technical Output Specification

Data item / Group changes

| Change | XML. | Group | Data Item Name | Item Type | Item Amend Type | Previous | New | Change Reason(s) | Date Changed | Version Number | IIPA Ticket No. |
|--------|--------------------|---|--|---|------------------------|--|---|--|--------------|----------------|-----------------|
| Change | | Group | Data Rem Name | пен туре | item America Type | Previous | New | Change Reason(s) | Date Changed | Version Number | (Internal Use) |
| ID | Element | | | | | | | | | | (|
| | C404010 | CVD4044 ocTookToSupportDioTup | ASSISTIVE TECHNOLOGY FINDING (SNOMED CT) | Data Item Format | Amendment | min an6 max an18 | min n6 max n18 | SNOMED codes can only contain numeric values | 03/01/2017 | 101 | N/A |
| 2 | C609910 | CYP404AssTechToSupportDisTyp CYP609CodedAssessmentReferral | CODED ASSESSMENT TOOL TYPE (SNOMED CT) | Data Item Format | Amendment | min and max and 8 | min n6 max n18 | SNOMED codes can only contain numeric values | 03/01/2017 | 1.0.1 | N/A |
| 3 | C612910 | CYP612 Coded Scored Assessment | CODED ASSESSMENT TOOL TYPE (SNOMED CT) | Data Item Format | Amendment | min an6 max an18 | min n6 max n18 | SNOMED codes can only contain numeric values | 03/01/2017 | 1.0.1 | N/A |
| | | (Contact) | · · · | | | | | • | | | |
| 4 | C613910 C403010 | CYP613 Anonymous Self Assessment CYP403 CPP | CODED ASSESSMENT TOOL TYPE (SNOMED CT) CHILD PROTECTION PLAN REASON CODE | Data Item Format Data Item Description | Amendment Amendment | min an6 max an18 The reason the Child or Young Person (Children and Young | min n6 max n18 The reason the Child or Young Person is subject to an active | SNOMED codes can only contain numeric values Remove ambiguity in current description - data item should still be collection in CSDS | 03/01/2017 | 1.0.1 | N/A |
| P | C403010 | CTP403 CPP | CHILD PROTECTION PLAN REASON CODE | Data item Description | Amendment | People's Health Service) is subject to an active Child | Child Protection Plan | Remove ambiguity in current description - data item should still be collection in CSDS | 03/01/2017 | 1.0.1 | N/A |
| | | | | | | Protection Plan. | Office Front Colonia France | | | | |
| 6 | C606010 | CYP606 Provisional Diagnosis | PROVISIONAL DIAGNOSIS (CODED CLINICAL ENTRY) | Data Item Description | Amendment | This is the provisional DIAGNOSIS of the child or young | This is the provisional DIAGNOSIS of the person, from a | This data item applies to both adults and children. Due to the change in scope to | 06/01/2017 | 1.0.2 | N/A |
| | | | | | | person, from a specific classification or clinical terminology, for | specific classification or clinical terminology, for the main | include adults within the CSDS, as opposed to just children in the CYPHS data set, | | | |
| | | | | | | the main condition treated or investigated during the relevant episode of healthcare. | condition treated or investigated during the relevant episode of healthcare. | provisional diagnoses for adults may also be included in this field. | | | |
| 7 | C001110 | CYP001 MPI | PERSON RELATIONSHIP (MAIN CARER) | Data Item Description | Amendment | The relationship between the child/young person and the | The relationship between the child/young person and the | Remove ambiguity in original description - No impact on Data Dictionary | 12/01/2017 | 1.0.3 | N/A |
| | | | (| | | person/s who undertake/s the main caring role for them. | person who undertakes the main caring role for them. | , | | | |
| 8 | C102030 | CYP102 Service Type Referred To | REFERRAL REJECTION DATE | Validation | Amendment | CYP10219 - Record rejected - Referral Rejection Date is after | CYP10219 - Record rejected - Referral Rejection Date is | To ensure consistency with other validations | 12/01/2017 | 1.0.3 | CYPHS-441 |
| | | | | | | the File Creation Date Time. Service Request Identifier= <c102902> Local Patient Identifier</c102902> | after the Date and Time Data Set Created. Service Request Identifier= <c102902> Local Patient Identifier</c102902> | | | | |
| | | | | | | (Extended)= <c101901> Referral Rejection Date=<c102030></c102030></c101901> | (Extended)= <c101901> Referral Rejection Date=<c102030></c102030></c101901> | | | | |
| | | | | | | (Extended)=1010017 National Rejection Date=101020007 | (Exercise)=1010012 Note in the regularity base=101020002 | | | | |
| 9 | C102030 | CYP102 Service Type Referred To | REFERRAL REJECTION DATE | Validation | Amendment | CYP10221 - Record rejected - Referral Rejection Date is after | CYP10221 - Record rejected - Referral Rejection Date is | To ensure consistency with other validations | 12/01/2017 | 1.0.3 | CYPHS-441 |
| | | | | | | the Discharge Date. Service Request Identifier= <c102902></c102902> | after the Service Discharge Date. Service Request | | | | |
| | | | | | | Local Patient Identifier (Extended)= <c101901> Referral Rejection Date=<c102030></c102030></c101901> | Identifier= <c102902> Local Patient Identifier (Extended)=<c101901> Referral Rejection Date=<c102030></c102030></c101901></c102902> | | | | |
| | | | | | | Rejection Date=4C1020309 | (Extended)=CC1019013 Reletial Rejection Date=CC1020303 | | | | |
| 10 | C102020 | CYP102 Service Type Referred To | REFERRAL CLOSURE DATE | Validation | Amendment | CYP10225 - Record rejected - Referral Closure Date is before | CYP10225 - Record rejected - Referral Closure Date is | To ensure consistency with other validations | 12/01/2017 | 1.0.3 | CYPHS-441 |
| | | | | | | the start of the reporting period. Service Request | before the Reporting Period Start Date. Service Request | · | | | |
| | | | | | | Identifier= <c102902> Local Patient Identifier (Extended)=<c101901></c101901></c102902> | Identifier= <c102902> Local Patient Identifier (Extended)=<c101901></c101901></c102902> | | | | |
| 11 | C102020 | CYP102 Service Type Referred To | REFERRAL CLOSURE DATE | Validation | Amendment | CYP10209 - Record rejected - Referral Closure Date is after | CYP10209 - Record rejected - Referral Closure Date is after | To ensure consistency with other validations | 12/01/2017 | 1.0.3 | CYPHS-441 |
| | 0.02020 | OTT TO COTTON TYPE TRAINING TO | THE ENTIRE GEOGRAP DATE | valouson. | Periodicia | the File Creation Date Time. Service Request | the Date and Time Data Set Created. Service Request | TO GRADIE CONSISTENCY WITH CONTROL VARIABLES IS | 12/01/2017 | 1.0.0 | 011110441 |
| | | | | | | Identifier= <c102902> Local Patient Identifier</c102902> | Identifier= <c102902> Local Patient Identifier</c102902> | | | | |
| | | | | | | (Extended)= <c101901></c101901> | (Extended)= <c101901></c101901> | | | | |
| 12 | C102020 | CYP102 Service Type Referred To | REFERRAL CLOSURE DATE | Validation | Amendment | CYP10213 - Record rejected - Referral Closure Date is after the Discharge Date. Service Request Identifier= <c102902></c102902> | CYP10213 - Record rejected - Referral Closure Date is after the Service Discharge Date. Service Request | To ensure consistency with other validations | 12/01/2017 | 1.0.3 | CYPHS-441 |
| | | | | | | Local Patient Identifier (Extended)= <c101901></c101901> | Identifier= <c102902> Local Patient Identifier</c102902> | | | | |
| | | | | | | | (Extended)= <c101901></c101901> | | | | |
| 13 | N/A | CYP201 Care Contact | N/A | Validation | Amendment | CYP20142 - Group rejected - More than one CYP201 provided | CYP20142 - Group rejected - More than one CYP201 | To ensure consistency with other validations | 12/01/2017 | 1.0.3 | CYPHS-596 |
| | | | | | | for this Care Contact Identifier= <c201903></c201903> | provided for this Care Contact Identifier. Care Contact | | | | |
| | | | | | | | Identifier= <c201903> Service Request Identifier=<c201902></c201902></c201903> | | | | |
| 14 | CYPRE-1007 | File-level Rejects | N/A | File-level Reject | Amendment | Validation Failure Message | Validation Failure Message | Remove restriction on adults | 31/01/2017 | 1.0.4 | N/A |
| 100 | | | | | | | CYPREJ007 - Failed Date of Birth Check. File contains | | | | |
| | | | | | | invalid dates of birth. | invalid dates of birth. | | | | |
| | | | | | | | | | | | |
| | | | | | | Help Text | Help Text | | | | |
| | | | | | | Invalid dates of birth corrupt the allocation of the MCDS | Invalid dates of birth corrupt the allocation of the MCDS | | | | |
| | | | | | | pseudo person ID and cannot be accepted. | pseudo person ID and cannot be accepted. | | | | |
| | | | | | | | | | | | |
| | | | | | | Date of Birth, if provided, must not be after the end of the latest reporting period selected. The derived age at | Date of Birth, if provided, must not be after the end of the latest reporting period selected. | | | | |
| | | | | | | start of the earliest reporting period selected. The derived age at | the latest reporting period selected. | | | | |
| | | | | | | 19 years old or greater. | | | | | |
| 15 | CYPREJ000 | File-level Rejects | N/A | File-level Reject | Amendment | Validation Failure Message | Validation Failure Message | Provide further information about XML reserved characters. | 31/01/2017 | 1.0.4 | N/A |
| | | | | | | CYPREJ000 - Failed Submission File Format Check. | CYPREJ000 - Failed Submission File Format Check. | | | | |
| | | | | | | The file is not a valid XML file. | The file is not a valid XML file. | | | | |
| | | | | | | | | | | | |
| | | | | | | Help Text | Help Text | | | | |
| | | | | | | The file you have uploaded has failed format checks, | The file you have uploaded has failed format checks, | | | | |
| | | | | | | and so your submission has been rejected. This could | and so your submission has been rejected. This could | | | | |
| | | | | | | be because of any of the following reasons: | be because of any of the following reasons: | | | | |
| | | | | | | -The file is not an XML file. | -The file is not an XML file. | | | | |
| | l | | | | | The XML file you have uploaded has been checked against the XML schema for this data set and has been | The XML file you have uploaded has been checked against the XML schema for this data set and has been | | | 1 | |
| | | | | | | against the XML schema for this data set and has been found to not be well-formed | against the XML schema for this data set and has been found to not be well-formed. | | | | |
| | l | | | | | -The Bureau Service Portal failed to successfully upload | | | | 1 | |
| | l | | | | | the submission file from the data provider. | upload the submission file from the data provider. | | | | |
| | l | | | | | -A technical issue arose when trying to upload data from | | | | 1 | |
| | l | | | | | the submitted XML file into the database. | from the submitted XML file into the database. | | | 1 | |
| | l | | | | | | -The file contains XML reserved characters. | | | | |
| | l | | | | | Please review the XML file to check it complies with the | | | | 1 | |
| | l | | | | | structure defined by the current XML schema and | Please review the XML file to check it complies with the | | | 1 | |
| | l | | | | | resubmit the file. | structure defined by the current XML schema and resubmit the file. | | | 1 | |
| | l | | | | | | resubmit trie file. | | | 1 | |
| - 1 | l | | | | | | | | | 1 | |
| | l | | | | | | | | | 1 | |
| | | | l . | 1 | l . | I | II | l . | 1 | | |

| 16 | CYPREJ000 | File-level Rejects | N/A | File-level Reject | Amendment | Validation Failure Message CYPREJ000 - Failed Submission File Format Check. The file is not a valid XML file. | Validation Failure Message CYPREJ000 - Failed Submission File Format Check. The file is not a valid XML file. | Provide further information about XML reserved characters. | 31/01/2017 | 1.0.4 | N/A |
|-----|--------------------|--|--|------------------------------|------------|---|--|---|------------|-------|------------|
| | | | | | | | | | | | |
| | | | | | | Notes [previously blank] | Notes The presence of XML reserved characters in any free | | | | |
| | | | | | | | text fields within a submission file could cause this error message, the XML reserved characters being: | | | | |
| | | | | | | | error message, the XWL reserved characters being: | | | | |
| | | | | | | | > | | | | |
| | | | | | | | & | | | | |
| | | | | | | | % | | | | |
| | | | | | | | Any reserved characters can be replaced with the | | | | |
| | | | | | | | appropriate entity reference if these characters genuinely need to be present. | | | | |
| | C611030 | CYP611 Observation | PERSON LENGTH IN CENTIMETRES | National Code | A delica - | | | To align with National Code Definitions in Data Dictionary. | 08/02/2017 | 1.0.4 | 21/2 |
| " | | | | Definitions | Addition | | Added '99.9 - Length unknown' to National Code Definitions | | | | NA |
| 18 | C003020 C003020 | CYP003 Accommodation Type CYP003 Accommodation Type | ACCOMMODATION STATUS RECORDED DATE ACCOMMODATION STATUS RECORDED DATE | Data Item Name | Amendment | ACCOMMODATION STATUS DATE CYP00307 - Record rejected - Accommodation Status | ACCOMMODATION STATUS RECORDED DATE CYP00307 - Record rejected - Accommodation Status | To align correctly with Data Dictionary. To correct data item name following alignment with Data Dictionary. | 09/02/2017 | 1.0.4 | N/A N/A |
| 15 | 0000020 | OTT OUD FOCUSITIONALITY TYPE | ACCOMMODATION CHAIGOTECED DATE | Valuation | Paricinan | Date has incorrect date format. Local Patient Identifier | Recorded Date has incorrect date format. Local Patient | TO COTTLE COLOR NOT TRAINE COLORENS MAN DELLE DICTORING. | 03/02/2017 | 1.0.4 | |
| | | | | | | (Extended)= <c003901></c003901> | Identifier (Extended)= <c003901></c003901> | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | 1 | |
| 20 | C003020 | CYP003 Accommodation Type | ACCOMMODATION STATUS RECORDED DATE | Validation | Amendment | If Accommodation Status Date is after the end of the | If Accommodation Status Recorded Date is after the | To correct data item name following alignment with Data Dictionary. | 09/02/2017 | 1.0.4 | N/A |
| | 5000020 | | THE | | | reporting period, the record will be rejected. | end of the reporting period, the record will be rejected. | | | 1 | |
| | | | | | | CYP00308 - Record rejected - Accommodation Status | CYP00308 - Record rejected - Accommodation Status | | | 1 | |
| 1 | | | | | | Date is after the end date of the reporting period. Local | Recorded Date is after the end date of the reporting | | | 1 | |
| 1 | | | | | | Patient Identifier (Extended)= <c003901> Accommodation Status Date=<c003020></c003020></c003901> | period. Local Patient Identifier (Extended)= <c003901> Accommodation Status Recorded Date=<c003020></c003020></c003901> | | | 1 | |
| 1 | | | | | | Accommodation Status Date= <c003020></c003020> | Accommodation Status Recorded Date= <c003020></c003020> | | | 1 | |
| 21 | C003020 | CYP003 Accommodation Type | ACCOMMODATION STATUS RECORDED DATE | Validation | Amendment | If Accommodation Status Date is before Person Birth | If Accommodation Status Recorded Date is before | To correct data item name following alignment with Data Dictionary. | 09/02/2017 | 1.0.4 | N/A |
| ļ. | 5000020 | | THE | | | Date, the record will be rejected. | Person Birth Date, the record will be rejected. | | | 1 | |
| | | | | | | CYP00310 - Record rejected - Accommodation Status | CYP00310 - Record rejected - Accommodation Status | | | 1 | |
| | | | | | | Date is before Person Birth Date. Local Patient Identifier | Recorded Date is before Person Birth Date. Local | | | | |
| | | | | | | (Extended)= <c003901> Accommodation Status Date=<c003020> Person Birth Date=<c001060></c001060></c003020></c003901> | Patient Identifier (Extended)= <c003901> Accommodation Status Recorded Date=<c003020></c003020></c003901> | | | 1 | |
| L | | | | | | | Person Birth Date= <c001060></c001060> | | | 1 | |
| 22 | C003020 | CYP003 Accommodation Type | ACCOMMODATION STATUS RECORDED DATE | Validation | Amendment | If Person Birth Date is blank AND Accommodation | If Person Birth Date is blank AND Accommodation | To correct data item name following alignment with Data Dictionary. | 09/02/2017 | 1.0.4 | N/A |
| | | | | | | Status Date is before 1 January 1901, the record will be rejected. | Status Recorded Date is before 1 January 1901, the record will be rejected. | | | 1 | |
| | | | | | | · · | | | | | |
| | | | | | | CYP00311 - Record rejected - Person Birth Date is blank AND Accommodation Status Date is before 1 | CYP00311 - Record rejected - Person Birth Date is blank AND Accommodation Status Recorded Date is | | | | |
| | | | | | | January 1901. Local Patient Identifier | before 1 January 1901. Local Patient Identifier | | | | |
| | | | | | | (Extended)= <c003901> Person Birth Date=<c001060>Accommodation Status</c001060></c003901> | (Extended)= <c003901> Person Birth Date=<c001060>Accommodation Status Recorded</c001060></c003901> | | | | |
| | | | | | | Date= <c003020></c003020> | Date= <c003020></c003020> | | | | |
| 23 | C101050 | CYP101 Service or Team Referral | REFERRING CARE PROFESSIONAL STAFF GROUP (MENTAL HEALTH AND COMMUNITY CARE) | National Code Definitions | Amendment | M04 - General Medical Practitioner with Special Interests | M04 - General Medical Practitioner with A Special Interest | To align with National Code Definitions in Data Dictionary. | 09/02/2017 | 1.0.4 | N/A |
| 24 | C101050 | CYP101 Service or Team Referral | REFERRING CARE PROFESSIONAL STAFF GROUP (MENTAL HEALTH AND COMMUNITY CARE) | National Code Definitions | Amendment | Nursing, Health Visitors and Midwifery | Nursing, Health Visiting and Midwifery | To align with National Code Definitions in Data Dictionary. | 09/02/2017 | 1.0.4 | N/A |
| 25 | C001110 | CYP001 MPI | PERSON RELATIONSHIP (MAIN CARER) | Validation | Addition | | If the person was 19 years of age or over at the start of | To prevent this data item flowing for adults as the current national code definition list | 17/02/2017 | 1.0.4 | N/A |
| | | | | | | | the reporting period and the Person Relationship (Main Carer) is populated the record will be rejected. | To prevent this data item flowing for adults as the current national code definition list does not account sufficiently for the relationships of people who have care responsibility of an adult. | | | |
| | | | | | | | , | | | | |
| | | | | | | | CYP00182 - Record rejected - Person was 19 years of | | | | |
| | | | | | | | age or over at the start of the reporting period, but Person Relationship (Main Carer) is populated. Local | | | | |
| | | | | | | | Patient Identifier (Extended)= <c001901> Person</c001901> | | | 1 | |
| 1 | | | | | | | Relationship (Main Carer) = <c001110> Person Birth Date =<c001060> Reporting Period Start Date =</c001060></c001110> | | | 1 | |
| | | | | | | | <c000040></c000040> | | | 1 | |
| | | | | | | | | | | 1 | |
| 26 | C001110 | CYP001 MPI | PERSON RELATIONSHIP (MAIN CARER) | Validation | Addition | | If the Person Birth Date is blank and Person | To prevent this data item flowing for adults (or individuals whose age cannot be determined) as the current national code definition list does not account sufficiently for | 17/02/2017 | 1.0.4 | N/A |
| | | | | | | | Relationship (Main Carer) is populated the record will be rejected. | determined) as the current national code definition list does not account sufficiently for the relationships of people who have care responsibility of an adult. | | 1 | |
| 1 | | | | | | | • | | | 1 | |
| | | | | | | | CYP00183 - Record rejected - Person Birth Date is blank and Person Relationship (Main Carer) is | | | 1 | |
| 1 | | | | | | | populated. Local Patient Identifier | | | 1 | |
| 1 | | | | | | | (Extended)= <c001901> Person Relationship (Main Carer) =<c001110></c001110></c001901> | | | 1 | |
| 27 | N/A | N/A | N/A | Spreadsheet tab | Remove | Release History | Release History tab combined with Data Set Details tab | Remove duplicate information | 17/02/2017 | 1.0.4 | N/A |
| 28 | N/A | N/A | N/A | Spreadsheet tab | Remove | Change Control (Internal) | Change Control (Internal) tab combined with Change | Remove duplicate information | 17/02/2017 | 1.0.4 | N/A |
| 200 | 00044 | CYP001 MPI | HEALTH VISITOR FIRST ANTENATAL VISIT DATE | , | A data | | control (v1.0) tab | To prevent incorrect records from flowing into the dataset. The first antenatal visit date | | | N/A |
| 29 | C001120 | CTPUUT MPI | MEALITY VISITOR PIRST ANTENATAL VISIT DATE | Validation | naation | | If Health Visitor First Antenatal Visit Date is after the Person Birth Date, the record will be rejected. | To prevent incorrect records from flowing into the dataset. The first antenatal visit date must have taken place before the person was born. | 17/02/2017 | 1.0.4 | n/A |
| 1 | | | | | | | | | | 1 | |
| 1 | | | | | | | CYP00184 - Record rejected - Health Visitor First Antenatal Visit Date is after the Person Birth Date. | | | 1 | |
| 1 | | | | | | | Local Patient Identifier (Extended)= <c001901> Health</c001901> | | | 1 | |
| 1 | | | | | | | Visitor First Antenatal Visit Date= <c001120> Person Birth Date=<c001060></c001060></c001120> | | | 1 | |
| 30 | C001120 | CYP001 MPI | HEALTH VISITOR FIRST ANTENATAL VISIT DATE | Validation | Addition | | If Person Birth Date is blank AND Health Visitor First | To prevent incorrect records from flowing into the dataset. The first antenatal visit date | 17/02/2017 | 1.0.4 | N/A |
| | | | | | | | Antenatal Visit Date is populated, the record will be rejected | must have taken place before the person was born. If the person birth date is not know then this cannot be verified. | | 1 | |
| | | | | | | | | | | 1 | |
| | | | | | | | CYP00185 - Record rejected - Person Birth Date is blank AND Health Visitor First Antenatal Visit Date is | | | 1 | |
| 1 | | | | | | | populated, Local Patient Identifier | | | 1 | |
| 1 | | | | | | | (Extended)= <c001901> Health Visitor First Antenatal Visit Date=<c001120></c001120></c001901> | | | 1 | |
| | | | | 1 | 1 | | visit Date= <c001120></c001120> | | | | |

| 31 | C00 | 01120 | CYP001 MPI | HEALTH VISITOR FIRST ANTENATAL VISIT DATE | Validation | Remove | If Health Visitor First Antenatal Visit Date is after the Person Birth Date, a warning will be generated. | | Superseded by CYP00184 | 17/02/2017 | 1.0.4 | N/A |
|-----|-----|-------|------------|--|--------------|----------|---|--|---|------------|-------|-----|
| | | | | | | | CYP00165 - Warning - Health Visitor First Antenatal Visit Date | | | | | |
| | | | | | | | is after the Person Birth Date. Local Patient Identifier | | | | | |
| | | | | | | | (Extended)= <c001901> Health Visitor First Antenatal Visit Date=<c001120> Person Birth Date=<c001060></c001060></c001120></c001901> | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 32 | C00 | 01120 | CYP001 MPI | HEALTH VISITOR FIRST ANTENATAL VISIT DATE | Validation | Remove | If PersonBirthDate is blank AND Health Visitor First Antenatal Visit Date is before 1 January 1901, the record will be rejected. | | Superseded by CYP00185 | 17/02/2017 | 1.0.4 | N/A |
| | | | | | | | CYP00177 - Record rejected - Person Birth Date is blank AND | | | | | |
| | | | | | | | Health Visitor First Antenatal Visit Date is before 1 January 1901. Local Patient Identifier (Extended)= <c001901> Health</c001901> | | | | | |
| | | | | | | | 1901. Local Patient Identifier (Extended)= <c001901> Health Visitor First Antenatal Visit Date=<c001120></c001120></c001901> | | | | | |
| | | | | | | | | | | | | |
| 33 | C00 | 01130 | CYP001 MPI | LOOKED AFTER CHILD INDICATOR | Validation | Addition | | If Person was 19 years of age or over at the start of the | To prevent this data item flowing for adults. | 17/02/2017 | 1.0.4 | N/A |
| | | | | | | | | reporting period and Looked After Child Indicator is | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | CYP00186 - Record rejected - Person was 19 years of age or over at the start of the reporting period, but | | | | |
| | | | | | | | | Looked After Child Indicator is populated. Local Patient | | | | |
| | | | | | | | | Identifier (Extended)= <c001901> Looked After Child Indicator =<c001130> Person Birth Date =<c001060></c001060></c001130></c001901> | | | | |
| | | | | | | | | Reporting Period Start Date = <c000040></c000040> | | | | |
| | | | | | | | | | | | | |
| 34 | C00 | 01130 | CYP001 MPI | LOOKED AFTER CHILD INDICATOR | Validation | Addition | | If Person Birth Date is blank and Looked After Child | To prevent this data item flowing for adults (or individuals whose age cannot be determined) | 17/02/2017 | 1.0.4 | N/A |
| | | | | | | | | Indicator is populated, the record will be rejected. | Getermines). | 1 | | |
| | | | | | | | | CYP00187 - Record rejected - Person Birth Date is blank and Looked After Child Indicator is populated. | | 1 | | |
| | | | | | | | | Local Patient Identifier (Extended)= <c001901> Looked</c001901> | | 1 | | |
| or. | - | 01140 | CVD004 MDI | SAFEGUARDING VULNERABILITY FACTORS INDICATOR | Validation | Addition | | After Child Indicator =< C001130> | To propert this data item flowing for each fir | 20/02/2017 | 1.0.4 | N/A |
| 35 | C00 | 01/40 | CYP001 MPI | GALEGOVERNO A OF SERVICE STATES AND CALOR | Validation | Addition | | If Person was 19 years of age or over at the start of the reporting period and Safeguarding Vulnerability Factors | To prevent this data item flowing for adults. | 20/02/2017 | 1.0.4 | N/A |
| | | | | | | | | Indicator is populated, the record will be rejected. | | 1 | | |
| | | | | | | | | CYP00188 - Record rejected - Person was 19 years of | | 1 | | |
| | | | | | | | | age or over at the start of the reporting period, but Safeguarding Vulnerability Factors Indicator is | | | | |
| | | | | | | | | populated. Local Patient Identifier | | | | |
| | | | | | | | | (Extended)= <c001901> Safeguarding Vulnerability</c001901> | | | | |
| | | | | | | | | Factors Indicator= <c001140> Person Birth Date =<c001060> Reporting Period Start Date =</c001060></c001140> | | 1 | | |
| | | | | | | | | <c000040></c000040> | | 1 | | |
| 36 | C00 | 01140 | CYP001 MPI | SAFEGUARDING VULNERABILITY FACTORS INDICATOR | Validation | Addition | | If Person Birth Date is blank and Safeguarding | To prevent this data item flowing for adults (or individuals whose age cannot be | 20/02/2017 | 1.0.4 | N/A |
| | | | | | | | | Vulnerability Factors Indicator is populated, the record will be rejected. | determined). | 1 | | |
| | | | | | | | | | | 1 | | |
| | | | | | | | | CYP00189 - Record rejected - Person Birth Date is blank and Safeguarding Vulnerability Factors Indicator | | | | |
| | | | | | | | | is populated. Local Patient Identifier | | | | |
| | | | | | | | | (Extended)= <c001901> Safeguarding Vulnerability Factors Indicator=<c001140></c001140></c001901> | | | | |
| 37 | C00 | 01170 | CYP001 MPI | PREFERRED DEATH LOCATION DISCUSSED INDICATOR | Validation | Addition | | If Person was 19 years of age or over at the start of the reporting period and Preferred Death Location | To prevent this data item flowing for adults. | 20/02/2017 | 1.0.4 | N/A |
| | | | | | | | | Discussed Indicator is populated, the record will be | | | | |
| | | | | | | | | rejected. | | | | |
| | | | | | | | | CYP00192 - Record rejected - Person was 19 years of | | | | |
| | | | | | | | | age or over at the start of the reporting period, but Preferred Death Location Discussed Indicator is | | | | |
| | | | | | | | | populated, Local Patient Identifier | | 1 | | |
| | | | | | | | | (Extended)= <c001901> Preferred Death Location Discussed Indicator=<c001170> Person Birth Date</c001170></c001901> | | 1 | | |
| | | | | | | | | = <c001060> Reporting Period Start Date =</c001060> | | 1 | | |
| 38 | C00 | 01170 | CYP001 MPI | PREFERRED DEATH LOCATION DISCUSSED INDICATOR | Validation | Addition | 1 | <c000040> If Person Birth Date is blank and Preferred Death</c000040> | To prevent this data item flowing for adults (or individuals whose age cannot be | 20/02/2017 | 1.0.4 | N/A |
| | | | | | | | | Location Discussed Indicator is populated, the record | determined). | 1 | 1 | |
| | | | | | | | | will be rejected. | | 1 | | |
| | | | | | | | | CYP00193 - Record rejected - Person Birth Date is blank and Preferred Death Location Discussed | | 1 | | |
| | | | | | | | | Indicator is populated. Local Patient Identifier | | 1 | | |
| | | | | | | | | (Extended)= <c001901> Preferred Death Location</c001901> | | 1 | | |
| 39 | C00 | 01180 | CYP001 MPI | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | Validation | Addition | | Discussed Indicator= <c001170> If Person was 19 years of age or over at the start of the</c001170> | To prevent this data item flowing for adults. | 20/02/2017 | 1.0.4 | N/A |
| | | | | | | | | reporting period and Person At Risk Of Unexpected Death Indicator is populated, the record will be | | 1 | | |
| | | | | | | | | rejected. | | 1 | | |
| | | | | | | | | CYP00194 - Record rejected - Person was 19 years of | | 1 | | |
| | | | | | | | | age or over at the start of the reporting period, but | | 1 | | |
| | | | | | | | | Person At Risk Of Unexpected Death Indicator is populated, Local Patient Identifier | | 1 | | |
| | | | | | | 1 | | (Extended)= <c001901> Person At Risk Of Unexpected Death Indicator=<c001180> Person Birth Date</c001180></c001901> | | 1 | 1 | |
| | | | | | | | | | | | | |
| | | | | | | | | = <c001060> Reporting Period Start Date =</c001060> | | | | |
| | | 24400 | OVER A HE | | No. Falorico | Adress | | = <c001060> Reporting Period Start Date = <c000040></c000040></c001060> | | on inner · | | |
| 40 | C00 | 01180 | CYP001 MPI | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | Validation | Addition | | = <c001060> Reporting Period Start Date = <c000040> If Person Birth Date is blank and Person At Risk Of</c000040></c001060> | To prevent this data item flowing for adults (or individuals whose age cannot be determined). | 20/02/2017 | 1.0.4 | N/A |
| 40 | C00 | 01180 | CYP001 MPI | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | Validation | Addition | | = <c001060> Reporting Period Start Date = <c000040></c000040></c001060> | To prevent this data item flowing for adults (or individuals whose age cannot be determined). | 20/02/2017 | 1.0.4 | N/A |
| 40 | C00 | 01180 | CYP001 MPI | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | Validation | Addition | | =<001166/De Reporting Period Start Date = <000040-0 If Person Birth Date is blank and Person At Risk Of Unexpected Death Indicator is populated, the record will be rejected. CYP00195 - Record rejected - Person Birth Date is | To prevent this data item flowing for adults (or individuals whose age cannot be determined). | 20/02/2017 | 1.0.4 | N/A |
| 40 | C00 | 01180 | CYP001 MPI | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | Validation | Addition | | =c00169b. Reporting Period Start Date = c000040b. If Person Birth Date is blank and Person At Risk Of Unexpected Death Indicator is populated, the record will be rejected. CYP00195 - Record rejected - Person Birth Date is blank and Person At Risk Of Unexpected Death | To prevert this data item flowing for adults (or individuals whose age cannot be determined). | 20/02/2017 | 1.0.4 | N/A |
| 40 | C00 | 01180 | CYP001 MPI | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | Validation | Addition | | =<001166/De Reporting Period Start Date = <000040-0 If Person Birth Date is blank and Person At Risk Of Unexpected Death Indicator is populated, the record will be rejected. CYP00195 - Record rejected - Person Birth Date is | To prevent this data item flowing for adults (or individuals whose age carnot be determined). | 20/02/2017 | 1.0.4 | N/A |

| E | Trans | | True | Validation | Te a ma | | | | 22/02/2017 | 1 | Terre 1 |
|----|---------|---|--|-----------------------|------------|--|---|---|-------------|-------|---------|
| 41 | N/A | CYP401 Special Educational Need Identified | N/A | Validation | Addition | | This group will be rejected if patient identified by this Local Patient Identifier (Extended) in the CYP001 table | To prevent this table flowing for adults. | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | is 19 years or older at the start of the reporting period. | | | | |
| | | | | | | | CYP40109 - Group rejected - The patient identified by | | | | |
| | | | | | | | this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | | | | | | | table is 19 years or older at the start of the reporting | | | | |
| | | | | | | | period. Local Patient Identifier (Extended) = <c401901> Person Birth Date =<c001060> Reporting</c001060></c401901> | | | | |
| | | | | | | | Period Start Date = <c000040></c000040> | | | | |
| | | | | | | | | | | | |
| 42 | N/A | CYP401 Special Educational Need Identified | N/A | Validation | Addition | | This group will be rejected if the CYP001 group transmitted for this Local Patient Identifier (Extended) | To prevent this table flowing for adults (or individuals whose age cannot be determined). | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | has a blank Person Birth Date. | | | | |
| | | | | | | | | | | | |
| | | | | | | | CYP40110 - Group rejected - The CYP001 group transmitted for this Local Patient Identifier (Extended) | | | | |
| | | | | | | | has a blank Person Birth Date. Local Patient Identifier | | | | |
| 40 | AT/A | CYP402 Safeguarding Vulnerability Factor | N/A | Verder. | A delica - | | (Extended) = <c401901></c401901> | T | 22/02/2017 | 1.0.4 | N1/A |
| 43 | N/A | CTP402 Sareguarding Vulnerability Factor | NA | Validation | Addition | | This group will be rejected if the patient identified by this Local Patient Identifier (Extended) in the CYP001 | To prevent this table flowing for adults. | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | table is 19 years or older at the start of the reporting | | | | |
| | | | | | | | period. | | | | |
| | | | | | | | CYP40209 - Group rejected - The patient identified by | | | | |
| | | | | | | | this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | | | | | | | table is 19 years or older at the start of the reporting period. Local Patient Identifier (Extended) = | | | | |
| | | | | | | | <c402901> Person Birth Date =<c001060> Reporting</c001060></c402901> | | | | |
| | AT/A | CYP402 Safeguarding Vulnerability Factor | N/A | Validation | A delica - | | Period Start Date = <c000040> This group will be rejected if the CYP001 group</c000040> | To prevent this table flowing for adults (or individuals whose age cannot be | 00.000.0047 | 1.0.4 | N1/A |
| | | 552 Saleguarding voliciability Factor | | runduur | rusans#1 | | transmitted for this Local Patient Identifier (Extended) | determined). | ALIJE/2017 | 1.054 | .4/5 |
| | 1 | | | | | | has a blank Person Birth Date. | | | 1 | |
| | | | | | | | CYP40210 - Group rejected - The CYP001 group | | | 1 | |
| | | | | | | | transmitted for this Local Patient Identifier (Extended) | | | 1 | |
| | | | | | | | has a blank Person Birth Date. Local Patient Identifier | | | | |
| 45 | N/A | CYP403 Child Protection Plan | N/A | Validation | Addition | | (Extended) = <c402901> This group will be rejected if the patient identified by</c402901> | To prevent this table flowing for adults. | 22/02/2017 | 1.0.4 | N/A |
| 1 | | | | | | | this Local Patient Identifier (Extended) in the CYP001 | TO provent this word intrinsity for duties. | 32,2011 | | |
| | | | | | | | table is 19 years or older at the start of the reporting | | | | |
| | 1 | | | | | | period. | | | 1 | |
| | | | | | | | CYP40318 - Group rejected - The patient identified by | | | | |
| | | | | | | | this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | | | | | | | table is 19 years or older at the start of the reporting period. Local Patient Identifier (Extended) = | | | | |
| | | | | | | | <c403901> Person Birth Date =<c001060> Reporting</c001060></c403901> | | | | |
| 46 | N/A | CYP403 Child Protection Plan | N/A | Validation | Addition | | Period Start Date = <c000040> This group will be rejected if the CYP001 group</c000040> | To prevent this table flowing for adults (or individuals whose age cannot be | 22/02/2017 | 1.0.4 | N/A |
| 40 | IVA | CTF403 CING FIGRECION FIAM | NA . | validation | Auditori | | transmitted for this Local Patient Identifier (Extended) | determined). | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | has a blank Person Birth Date. | | | | |
| | | | | | | | CYP40319 - Group rejected - The CYP001 group | | | | |
| | | | | | | | transmitted for this Local Patient Identifier (Extended) | | | | |
| | | | | | | | has a blank Person Birth Date. Local Patient Identifier | | | | |
| 47 | N/A | CYP502 Immunisation | N/A | Validation | Addition | | (Extended) = <c403901> This group will be rejected if the nation identified by</c403901> | To prevent this table flowing for adults. | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | This group will be rejected if the patient identified by this Local Patient Identifier (Extended) in the CYP001 | To prove that the terming for addition. | | | |
| | | | | | | | table is 19 years or older at the start of the reporting period. | | | | |
| | | | | | | | period. | | | | |
| | | | | | | | CYP50215 - Group rejected - The patient identified by | | | | |
| | | | | | | | this Local Patient Identifier (Extended) in the CYP001 table is 19 years or older at the start of the reporting | | | | |
| | | | | | | | period. Local Patient Identifier (Extended) = | | | | |
| | | | | | | | <c502901> Person Birth Date =<c001060> Reporting Period Start Date = <c000040></c000040></c001060></c502901> | | | 1 | |
| 48 | N/A | CYP502 Immunisation | N/A | Validation | Addition | | Period Start Date = <c000040> This group will be rejected if the CYP001 group</c000040> | To prevent this table flowing for adults (or individuals whose age cannot be | 22/02/2017 | 1.0.4 | N/A |
| 1 | 1 | | | | | | transmitted for this Local Patient Identifier (Extended) | determined). | | 1 | |
| | | | | | | | has a blank Person Birth Date. | | | 1 | |
| | | | | | | | CYP50216 - Group rejected - The CYP001 group | | | 1 | |
| | 1 | | | | | | transmitted for this Local Patient Identifier (Extended) | | | 1 | |
| | | | | | | | has a blank Person Birth Date. Local Patient Identifier (Extended) = <c502901></c502901> | | | 1 | |
| 49 | C001230 | | NHS NUMBER (MOTHER) | Validation Rules | Amendment | Recvd Data Item Blank - Warning | Recvd Data Item Blank - N/A | The data item is not expected to flow for adults | 22/02/2017 | 1.0.4 | N/A |
| 50 | C001240 | CYP001 MPI | NHS NUMBER STATUS INDICATOR CODE (MOTHER) | Validation | Remove | This field should be mandatory where the NHS Number (Mother) provided is blank to ensure proper linkage. | | The data item is not expected to flow for adults | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | | | | 1 | |
| | | | | | | CYP00174 - Warning - NHS Number Status Indicator Code (Mother) should be mandatory where the NHS Number | | | | 1 | |
| | | | | | | (Mother) should be mandatory where the NHS Number (Mother) provided is blank. Local Patient Identifier =<001901> | | | | 1 | |
| | 1 | | | | | = <c-001901></c-001901> | | | | 1 | |
| E1 | C001240 | CYP001 MPI | NHS NUMBER STATUS INDICATOR CODE (MOTHER) | Data Item Description | Amendment | The NHS NUMBER STATUS INDICATOR of the mother | NUMBER OF STATUS INDICATOR COST | To allow with developing in NI IC Date Model and Distinct | 22/02/2017 | 104 | N/A |
| D1 | CUU1240 | C I FOUT MPI | INTO NUMBER STATUS INDICATOR CODE (MOTHER) | Dara nem Description | Amenament | THE INFO NUMBER STATUS INDICATOR of the mother | NHS NUMBER STATUS INDICATOR CODE (MOTHER) is the trace status of the NHS NUMBER | To align with description in NHS Data Model and Dictionary | 22/02/2017 | 1.0.4 | N/A |
| | | | | | | | (MOTHER). | | | | |
| 52 | C001230 | CYP001 MPI | NHS NUMBER (MOTHER) | Validation | Remove | CYP00168 - Warning- NHS Number (Mother) is blank. Local Patient Identifier (Extended)= <c001901></c001901> | | The data item is not expected to flow for adults | 22/02/2017 | 1.0.4 | N/A |
| 53 | C001230 | CYP001 MPI | NHS NUMBER (MOTHER) | Validation | Addition | The second secon | If Person was 19 years of age or over at the start of the | The data item is not expected to flow for adults | 22/02/2017 | 1.0.4 | N/A |
| | 1 | | | | | | reporting period and NHS Number (Mother) is | | | 1 | |
| | 1 | | | | | | populated, the record will be rejected. | | | 1 | |
| | | | | | | | CYP00196 - Record rejected - Person was 19 years of | | | 1 | |
| | 1 | | | | | | age or over at the start of the reporting period, but NHS Number (Mother) is populated. Local Patient Identifier | | | 1 | |
| | 1 | | | | | | (Extended)= <c001901> NHS Number</c001901> | | | 1 | |
| | | | | | | | (Mother)= <c001230> Person Birth Date =<c001060></c001060></c001230> | | | 1 | |
| | 1 | | | | | | Reporting Period Start Date = <c000040></c000040> | | | 1 | |
| | - | | 1 | | 1 | 1 | 1 | | · | | |

| 54 | C001230 | CYP001 MPI | NHS NUMBER (MOTHER) | Validation | Addition | | If Person Birth Date is blank and NHS Number (Mother) is populated, the record will be rejected. | The data item is not expected to flow for adults | 22/02/2017 | 1.0.4 | N/A |
|----|---------|--|---|-----------------------|-----------|---|---|--|------------|-------|-----|
| | | | | 1 | 1 | | | | | | |
| | | | | ' | | | CYP00197 - Record rejected - Person Birth Date is | | | | |
| | | | | ' | | | blank and NHS Number (Mother) is populated. Local Patient Identifier (Extended)= <c001901> NHS Number</c001901> | | | | |
| | | | | | | | (Mother)= <c001230></c001230> | | 22/02/2017 | | |
| 55 | N/A | CYP603 Newborn Hearing Screening Audiology Referral | N/A | Validation | Addition | | This group will be rejected if the patient identified by this Local Patient Identifier (Extended) in the CYP001 | To prevent this table flowing for anyone other than newborns. | 22/02/2017 | 1.0.4 | N/A |
| | | | | 1 | 1 | | table is 1 year or older at the start of the reporting | | | | |
| | | | | 1 | 1 | | period. | | | | |
| | | | | 1 | 1 | | CYP60321 - Group rejected - The patient identified by | | | | |
| | | | | 1 | 1 | | this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | | | | 1 | 1 | | table is 1 year or older at the start of the reporting period. Local Patient Identifier (Extended) = | | | | |
| | | | | 1 | 1 | | <c603901> Person Birth Date =<c001060> Reporting</c001060></c603901> | | | | |
| 50 | NI/A | CYP603 Newborn Hearing Screening | N/A | Validation | Addition | | Period Start Date = <c000040> This group will be rejected if the CYP001 group</c000040> | To prevent this table flowing for anyone other than newborns (or individuals | 22/02/2017 | 1.0.4 | N/A |
| 55 | 167 | Audiology Referral | DEC. | Validation | Placement | | transmitted for this Local Patient Identifier (Extended) | whose age cannot be determined). | 22,02,2017 | 1.0.4 | |
| | | | | ' | | | has a blank Person Birth Date. | | | | |
| | | | | 1 | 1 | | CYP60322 - Group rejected - The CYP001 group | | | | |
| | | | | 1 | 1 | | transmitted for this Local Patient Identifier (Extended) | | | | |
| | | | | 1 | 1 | | has a blank Person Birth Date. Local Patient Identifier (Extended) = <c603901></c603901> | | | | |
| 57 | N/A | CYP604 Blood Spot Result | N/A | Validation | Addition | | This group will be rejected if the patient identified by | To prevent this table flowing for anyone other than newborns. | 22/02/2017 | 1.0.4 | N/A |
| | | | | 1 | 1 | | this Local Patient Identifier (Extended) in the CYP001 table is 1 year or older at the start of the reporting | | | | |
| | 1 | | | 1 | I | | period. | | | | |
| | 1 | | | 1 | I | | | | | | |
| | 1 | | | 1 | I | | CYP60442 - Group rejected - The patient identified by this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | 1 | | | 1 | I | | table is 1 year or older at the start of the reporting | | | | |
| 1 | | | | 1 | 1 | | period. Local Patient Identifier (Extended) = <c604901> Person Birth Date =<c001060> Reporting</c001060></c604901> | | | | |
| L | 1 | | | L ' | | <u> </u> | Period Start Date = <c000040></c000040> | | | | |
| 58 | N/A | CYP604 Blood Spot Result | N/A | Validation | Addition | | This group will be rejected if the CYP001 group transmitted for this Local Patient Identifier (Extended) | To prevent this table flowing for anyone other than newborns (or individuals whose age cannot be determined). | 22/02/2017 | 1.0.4 | N/A |
| 1 | | | | 1 | 1 | | transmitted for this Local Patient Identifier (Extended) has a blank Person Birth Date. | wrose age carriot be determined). | | | |
| | | | | 1 | 1 | | | | | | |
| 1 | | | | 1 | 1 | | CYP60443 - Group rejected - The CYP001 group transmitted for this Local Patient Identifier (Extended) | | | | |
| | 1 | | | 1 | I | | has a blank Person Birth Date. Local Patient Identifier | | | | |
| 50 | NI/A | CYP605 Infant Physical Examination (GP | N/A | Validation | Addition | | (Extended) = <c604901></c604901> | To any state while the first of the state of | 22/02/2017 | 1.0.4 | NUM |
| 99 | N/A | CYP605 Infant Physical Examination (GP Delivered) | IWA | vanuation | Piddiloit | | This group will be rejected if the CYP001 group transmitted for this Local Patient Identifier (Extended) | To prevent this table flowing for anyone other than newborns (or individuals whose age cannot be determined). | 22/02/2017 | 1.0.4 | N/A |
| 1 | | | | 1 | 1 | | has a blank Person Birth Date. | | | | |
| 1 | | | | 1 | 1 | | CYP60524 - Group rejected - The CYP001 group | | | | |
| 1 | | | | 1 | 1 | | transmitted for this Local Patient Identifier (Extended) | | | | |
| | 1 | | | 1 | I | | has a blank Person Birth Date. Local Patient Identifier | | | | |
| 60 | N/A | CYP610 Breastfeeding Status | N/A | Validation | Addition | | (Extended) = <c605901> This group will be rejected if the patient identified by</c605901> | To prevent this table flowing for adults. | 22/02/2017 | 1.0.4 | N/A |
| | | | | 1 | 1 | | this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | | | | 1 | 1 | | table is 19 years or older at the start of the reporting period. | | | | |
| | | | | 1 | 1 | | | | | | |
| | | | | 1 | 1 | | CYP61012 - Group rejected - The patient identified by this Local Patient Identifier (Extended) in the CYP001 | | | | |
| | | | | 1 | 1 | | table is 19 years or older at the start of the reporting | | | | |
| 1 | | | | 1 | 1 | | period. Local Patient Identifier (Extended) = <c610901> Person Birth Date =<c001060> Reporting</c001060></c610901> | | | | |
| 1 | | | | 1 | 1 | | Period Start Date = <c000040></c000040> | | | | |
| 61 | N/A | CYP610 Breastfeeding Status | N/A | Validation | Addition | | This group will be rejected if the CYP001 group | To prevent this table flowing for adults (or individuals whose age cannot be | 22/02/2017 | 1.0.4 | N/A |
| | 1 | | | 1 | I | | transmitted for this Local Patient Identifier (Extended) has a blank Person Birth Date. | determined). | | | |
| | 1 | | | 1 | I | | | | | | |
| | 1 | | | 1 | I | | CYP61013 - Group rejected - The CYP001 group transmitted for this Local Patient Identifier (Extended) | | | | |
| | 1 | | | 1 | I | | has a blank Person Birth Date. Local Patient Identifier | | | | |
| 62 | C001050 | CYP001 MPI | NHS NUMBER STATUS INDICATOR CODE | Data Item Description | Amendment | | (Extended) = <c610901> NHS NUMBER STATUS INDICATOR CODE is the</c610901> | To align with description in NHS Data Model and Dictionary | 28/02/2017 | 1.0.4 | N/A |
| | | | | | | THE RESIDENCE STATES INDICATOR OF THE PATIENT | trace status of the NHS NUMBER. | | | | 100 |
| 63 | C001240 | CYP001 MPI | NHS NUMBER STATUS INDICATOR CODE (MOTHER) | Validation | Addition | | The NHS Number Status Indicator Code (Mother) | Updated version of CYP00174 (now retired) to only trigger for children. | 28/02/2017 | 1.0.4 | N/A |
| | 1 | | | 1 | I | | should be mandatory where the NHS Number (Mother) provided is blank and Person was under 19 years of | | | | |
| | 1 | | | 1 | I | | age at the start of the reporting period. | | | | |
| | 1 | | | 1 | I | | CYP00198 - Warning - NHS Number Status Indicator | | | | |
| | 1 | | | 1 | I | | Code (Mother) should be mandatory where the NHS | | | | |
| | 1 | | | 1 | I | | Number (Mother) provided is blank and Person was | | | | |
| | 1 | | | 1 | I | | under 19 years of age at the start of the reporting period, Local Patient Identifier = <c001901> Person</c001901> | | | | |
| 1 | | | | 1 | 1 | | Birth Date = <c001060> Reporting Period Start Date =</c001060> | | | | |
| 64 | C001D18 | CYP001 MPI | LOWER SUPER OUTPUT AREA (RESIDENCE) | Derivation | Amendment | The Lower Layer Super Output Area (Residence) for the | <c000040> The Lower Lover Super Output Area (Residence) for</c000040> | So that the derivation is using the 2011 census information | 28/02/2017 | 1.0.4 | N/A |
| - | 2001210 | | | | | patient, derived from the submitted POSTCODE OF | the patient, derived from the submitted POSTCODE | CO WAN AND GOTT AND IT IS USING THE ZOTT OCHISUS INFORMATION | | 1 | |
| | 1 | | | 1 | I | USUAL ADDRESS. Where a Null postcode is | OF USUAL ADDRESS. Where a Null postcode is | | | | |
| | 1 | | | 1 | I | submitted, Lower Layer Super Output Area (Residence) will appear as Null. | (Residence) will appear as Null. | | | | |
| | 1 | | | 1 | I | | | | | | |
| | 1 | | | 1 | I | Note to providers: the derivation is established through linkage with the Complete Gridlink NHS Postcode File, | Note to providers: the derivation is established through linkage with the Complete Gridlink NHS Postcode File, | | | | |
| | 1 | | | 1 | I | downloaded from | downloaded from | | | | |
| | 1 | | | 1 | I | | http://systems.digital.nhs.uk/data/ods/datadownloads/o | | | | |
| | 1 | | | 1 | I | sdata. The derivation lookup is taken from field name LSOA01 (field 26). The Complete Gridlink NHS | nsdata. The derivation lookup is taken from field name LSOA11 (field 40). The Complete Gridlink NHS | | | | |
| 1 | | | | 1 | 1 | Postcode File in use is updated at the beginning of each | Postcode File in use is updated at the beginning of | | | | |
| 1 | | | | | | month. | each month. | | | 1 | 1 |
| | | | 1 | 1 | 1 | II . | | | | | TI. |
| | | | | - | + | | | | | | |
| | | | | | | | | | | | |

Community Services I

Technical Output Spe

Explanation of Data Set Colur

| | Column/Heading |
|------|--------------------------------------|
| SCCI | Group Name |
| SCCI | Group-level notes for Data Providers |
| SCCI | XML Schema Element Name |
| SCCI | Data Item Name (Data Dict Element) |
| SCCI | Data Item Description |
| SCCI | Format |
| SCCI | National Code |
| SCCI | National Code Definition |
| SCCI | Information Requirements (Purpose) |
| SCCI | Mandatory/ Required/ Optional |

Data Set (CSDS) v1.0

cification

nns

Description

The group name is highlighted in the yellow box at the top. This name (or a truncated version of it) will be used to name the corresponding element structure in the XML Schema

Provides further notes for data providers highlighting important things that will be of interest.

The exact data item name that has been used to describe the field in the XML Schema

The data item name as described in the data dictionary

A full description of the data item

Describes the valid formats that will be accepted in this field. For dates and times it specifically refers to the exact formatting. For other fields it describes the data type required and the max/min field lengths. NB. These formats are described within the XML Schema.

Provides a list of the valid codes that can be accepted in this field (if there are any). For example, a field may only allow values of "Y", "N" and "X", which equate to "Yes", "No", "Don't Know".

Describes the meaning of the code in the previous "National Code" column

Description of the reason the data item was included within the data set. Maps to specific reporting requirement entries.

Shows levels of mandation for the data item as described to ISB.

Mandatory: These data items MUST be reported. Failure to submit these items will result in the rejection of the submission.

Required: These data items SHOULD be reported where they apply. Failure to submit these items will not result in the rejection of the submission but may affect the derivation of national indicators or national analysis. (Please note that the purpose of the data set is not to change clinical practice.)

Optional: These data items MAY be submitted on an optional basis at the submitters discretion.

Derived: These items are derived during pre and/or post deadline processing for inclusion in the extracts made available for download. Please note: these are not for submission to the BSP

Please note that these rules are applied at group level i.e. they only apply where a group is present.

Community Services Data Set (CSDS) v1.0

Technical Output Specification

Explanation of Data Set Columns

The data items listed below marked as linkage items

| Data Item Name | Data Item Description | Format | Mandatory/ Required/ Optional |
|---|--|----------|-------------------------------------|
| LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system | max an20 | М |
| SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | М |
| COMMUNITY CARE CONTACT IDENTIFIER | The COMMUNITY CARE CONTACT IDENTIFIER is used to uniquely identify the CARE CONTACT within the Health Care Provider. It would normally be automatically generated by the local system upon recording a new Care Contact, although could be manually assigned. | max an20 | М |
| CARE ACTIVITY IDENTIFIER | The unique identifier for a CARE ACTIVITY. It would normally be automatically generated by the local system upon recording a new activity, although could be manually assigned. | max an20 | М |
| CARE PROFESSIONAL LOCAL IDENTIFIER | CARE PROFESSIONAL LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL IDENTIFIER within a Health Care Provider and may be assigned automatically by the computer system. | max an20 | М |
| CARE PROFESSIONAL TEAM LOCAL IDENTIFIER | CARE PROFESSIONAL TEAM LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL TEAM IDENTIFIER within a Health Care Provider and may be assigned automatically by the computer system. | max an20 | М |

Note: Above data items will allow data linkage for all the following sections:

LOCAL PATIENT IDENTIFIER

CYP001 Master Patient Index and Risk Indicators

CYP002 GP Practice Registration

CYP003 Accommodation Type

CYP101 Service or Team Referral

CYP401 Special Educational Need Identified

CYP402 Safeguarding Vulnerability Factor

CYP403 Child Protection Plan

CYP404 Assistive Technology to Support Disability Type

CYP501 Coded Immunisation

CYP502 Immunisation

CYP601 Medical History (Previous Diagnosis)

CYP602 Disability Type

CYP603 Newborn Hearing Screening Audiology Referral

CYP604 Blood Spot Result

CYP605 Infant Physical Examination (GP Delivered)

SERVICE REQUEST IDENTIFIER

CYP101 Service or Team Referral

CYP102 Service or Team Type Referred To

CYP103 Other Reason for Referral

CYP104 Referral to Treatment

CYP105 Onward Referral

CYP201 Care Contact

CYP606 Provisional Diagnosis

CYP607 Primary Diagnosis

CYP608 Secondary Diagnosis

CYP609 Coded Scored Assessment (Referral)

CARE CONTACT IDENTIFIER

CYP201 Care Contact

CYP202 Care Activity

CARE ACTIVITY IDENTIFIER

CYP202 Care Activity

CYP610 Breastfeeding Status

CYP611 Observation

CYP612 Coded Scored Assessment (Contact)

CARE PROFESSIONAL LOCAL IDENTIFIER

CYP202 Care Activity

CYP301 Group Session

CYP901 Staff Details

CARE PROFESSIONAL TEAM LOCAL IDENTIFIER

CYP102 Service or Team Type Referred To

CYP201 Care Contact

NO LINKAGE

CYP000 Header

CYP613 Anonymous Self-Assessment

Community Services Data Set (CSDS) v1.0

Technical Output Specification

FORMATTING

| Data Dictionary | Technical Output Specification | Microsoft Access | XSD | SQL | Description | Notes |
|---------------------------------------|--------------------------------|--------------------------|---------------------------------------|-----------------|---|--|
| | string | Memo | string | varchar(max) | A string of ASCII characters | |
| | string | Text | string: max length 255 | varchar(255) | A string of ASCII characters upto 255 characters | |
| | string | | | varchar(1) | A string of ASCII characters of length 1 | |
| | string | Memo | | nvarchar(max) | A string of Unicode characters | Microsoft Access allows formatting |
| | date | Short date | date | date | A date | |
| | | General date | datetime | datetime | | |
| | integer | Long integer | int | int | A number from -2.147.483.648 to 2.147.483.647 | |
| | | | long | bigint | A number from -2^63 to 2^63-1 | |
| | | Integer | integer | smallint | A number from -32,768 to 32,767 | |
| | | Byte | byte | tinyint | A number from 0 to 255 | |
| | | Short time | time | n/a | hh:mm | |
| | | Long time | time | time(0) | hh:mm:ss | |
| an2 | an2 | | string; length 2 | char(2) | A string of ASCII characters (any combination of numbers and/or letters) of length exactly 2 | Usually treated as varchar(2) in SQL. Any character can flow including special characters. |
| max an2 | max an2 | | string; max length 2 | varchar(2) | A string of ASCII characters (any combination of numbers and/or letters) of length 1 to 2 | Any character can flow including special characters. |
| an3 or an5 | an3 or an5 | | string; length 3 or 5 | char(3)/char(5) | A string of ASCII characters (any combination of numbers and/or letters) of length exactly 3 or 5 | Any character can flow including special characters. |
| min an5 max an18 | min an5 max an18 | | string; min length 5 max length 18 | varchar(5-18) | A string of ASCII characters (any combination of numbers and/or letters) of length between 5 and 18 | Any character can flow including special characters. |
| n2.n2 | n2.n2 | Single | iciigiil 10 | float | or rengan between 3 driu 10 | |
| n2.n2 | n2.n2 n2.n2 | Double | 1 | float | <u> </u> | |
| n2.n2 | n2.n2 n2.n2 | Decimal | decimal | decimal | | |
| HE-HE | 114.114 | Decillar | negativeInteger | ucumai | <u> </u> | |
| | | Integer; (with criteria) | nonNegativeInteger | | An integer containing only non-negative values (0,1,2,) | |
| | | integer, (with chiena) | nonPositiveInteger | | An integer containing only non-positive values (,-2,-1,0) | |
| | | | positiveInteger | | An integer containing only positive values (1,2,) | |
| | | | short | | A signed 16-bit integer | |
| | | | unsignedLong | | An unsigned 64-bit integer | |
| | | | unsignedInt | | An unsigned 32-bit integer | |
| | | | unsignedShort | | An unsigned 32-bit integer An unsigned 16-bit integer | |
| | | | unsignedByte | | Arrunsigned 16-bit integer | |
| | | | duration | | | |
| | | | | | D-fi | |
| | | | gDay | | Defines a part of a date - the day (DD) | |
| | | | gMonth -Marth Davi | | Defines a part of a date - the month (MM) | |
| | | | gMonthDay gYear | | Defines a part of a date - the month and day (MM-DD) Defines a part of a date - the year (YYYY) | |
| | | | gYearMonth | | Defines a part of a date - the year (1111) Defines a part of a date - the year and month (YYYY-MM) | |
| | | | token | | | |
| | | | token | | A string that does not contain line feeds, carriage returns, tabs, leading or | |
| | | | 1: 10: : | | trailing spaces, or multiple spaces | |
| | | | normalizedString | | A string that does not contain line feeds, carriage returns, or tabs | |
| | | | float | | | |
| | | | double | | | |
| EXCEPTIONS Null values | 1 | 1 | 1 | T | Null | Den a company of the second se |
| | | | | | | Null values must be allowed to flow provided validation rules for the individual item have been applied. Otherwise, records should not flow. |
| Invalid dates | | | | | A date that is invalid/incorrect as there is no such date in the calendar, e.g. 47/15/2015 | These records will be rejected and an error message returned. |
| Dates/times when clocks change to BST | | | | ļ | The date/time should be submitted as it is recorded in local systems. | |
| Postcode | max an8 | | | | The data item must be submitted with exactly eight characters. The fifth character is always a space and separates the outward and inward parts of the Postcode. In addition, where there are less than four numbers and/or letters in the outward part, this must be space filled to ensure eight characters in total. | Further detail can be found here: http://www.datadictionary.nhs.uk/web_site_content/supporting_information/nhs_post toode_directory.asp?shownav=1 |
| "Live" Organisation | | | | | A "Live" organisation is an organisation that is active on the first day of the reporting period | |
| "Open" Organisation | | | | | An "Open" organisation is one deemed as being active during the | |
| CARDINALITY/OVERARCHING VALIDATI | ON | | | | reporting period | |
| Mandated data items | M | | | | Rejected if blank, Rejected if format error, Warning if national code error (where national codes are present or a look-up table exists) | The rejections relate to all the data for that patient's record within the specific table |
| Required data items | R | | | | N/A if blank, Rejected if format error, Warning if national code error (where national codes are present or a look-up table exists) | The rejections relate to all the data for that patient's record within the specific table. Certain key required data items used for CSDS Person Index Logic (e.g. NHS Number) output a warning if blank. |
| Optional data items | 0 | | | | N/A if blank, Rejected if format error, Warning if national code error (where national codes are present or a look-up table exists) | The rejections relate to all the data for that patient's record within the specific table. |

Community Services Data Set (Technical Output Specification

CSDS Assessment Tool Reference Table

This reference table contains a list of outcome measures (individual, total and tables:

CYP609 Coded Scored Assessment (Referral)

CYP612 Coded Scored Assessment (Contact)

The table presents the equivalent SNOMED CT Concept ID and national cod CT Concept ID that is not in this list will be rejected at the BSP.

Coded Assessment Tool Type (SNOMED CT)

Preferred Term (SNOMED-CT)

ASQ-3 (Ages and Stages Questionnaires Third Edition) 2 month questionnaire - communication score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 2 month questionnaire - fine motor score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 2 month questionnaire - gross motor score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 2 month questionnaire - personal-social score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 2 month questionnaire - problem solving score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 4 month questionnaire - communication score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 4 month questionnaire - fine motor score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 4 month questionnaire - gross motor score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 4 month questionnaire - personal-social score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 4 month questionnaire - problem solving score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 6 month questionnaire - communication score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 6 month questionnaire - fine motor score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 6 month questionnaire - gross motor score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 6 month questionnaire - personal-social score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 6 month questionnaire - problem solving score

- ASQ-3 (Ages and Stages Questionnaires Third Edition) 8 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 8 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 8 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 8 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 8 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 9 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 9 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 9 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 9 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 9 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 10 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 10 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 10 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 10 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 10 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 12 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 12 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 12 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 12 month questionnaire personal-social score
 ASQ-3 (Ages and Stages Questionnaires Third Edition) 12 month questionnaire -
- problem solving score

 ASQ-3 (Ages and Stages Questionnaires Third Edition) 12 month questionnaire
 ASQ-3 (Ages and Stages Questionnaires Third Edition) 14 month questionnaire -
- communication score

 ASQ-3 (Ages and Stages Questionnaires Third Edition) 14 month questionnaire -
- fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 14 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 14 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 14 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 16 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 16 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 16 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 16 month questionnaire personal-social score

- ASQ-3 (Ages and Stages Questionnaires Third Edition) 16 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 18 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 18 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 18 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 18 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 18 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 20 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 20 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 20 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 20 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 20 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 22 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 22 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 22 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 22 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 22 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 24 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 24 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 24 month questionnaire gross motor score
 ASQ-3 (Ages and Stages Questionnaires Third Edition) 24 month questionnaire -
- personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 24 month questionnaire problem solving score
 ASQ-3 (Ages and Stages Questionnaires Third Edition) 27 month questionnaire -
- communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 27 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 27 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 27 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 27 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 30 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 30 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 30 month questionnaire gross motor score

- ASQ-3 (Ages and Stages Questionnaires Third Edition) 30 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 30 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 33 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 33 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 33 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 33 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 33 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 36 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 36 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 36 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 36 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 36 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 42 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 42 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 42 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 42 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 42 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 48 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 48 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 48 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 48 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 48 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 54 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 54 month questionnaire fine motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 54 month questionnaire gross motor score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 54 month questionnaire personal-social score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 54 month questionnaire problem solving score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 60 month questionnaire communication score
- ASQ-3 (Ages and Stages Questionnaires Third Edition) 60 month questionnaire fine motor score

| ASQ-3 (Ages and Stages Questionnaires Third Edition) 60 month questionnaire - | |
|---|--|
| gross motor score | |

ASQ-3 (Ages and Stages Questionnaires Third Edition) 60 month questionnaire - personal-social score

ASQ-3 (Ages and Stages Questionnaires Third Edition) 60 month questionnaire - problem solving score

Ages and Stages Questionnaires: Social-Emotional second edition 2 month questionnaire score

Ages and Stages Questionnaires: Social-Emotional second edition 6 month questionnaire score

Ages and Stages Questionnaires:Social-Emotional second edition 12 month questionnaire score

Ages and Stages Questionnaires: Social-Emotional second edition 18 month questionnaire score

Ages and Stages Questionnaires:Social-Emotional second edition 24 month questionnaire score

Ages and Stages Questionnaires:Social-Emotional second edition 30 month questionnaire score

Ages and Stages Questionnaires:Social-Emotional second edition 36 month questionnaire score

Ages and Stages Questionnaires:Social-Emotional second edition 48 month questionnaire score

Ages and Stages Questionnaires:Social-Emotional second edition 60 month questionnaire score

(CSDS) v1.0

d/or scale scores) that can be submitted as Coded /

les for each measure. Only those measures that app

| | Pe | Person Score | |
|------------------------|--------|----------------------|--|
| Concept ID (SNOMED CT) | Value | Value Description | |
| 952611000000105 | 0 - 60 | | |
| 952621000000104 | 0 - 60 | | |
| 952631000000102 | 0 - 60 | | |
| 952651000000109 | 0 - 60 | | |
| 952641000000106 | 0 - 60 | | |
| 952661000000107 | 0 - 60 | | |
| 952671000000100 | 0 - 60 | | |
| 952681000000103 | 0 - 60 | | |
| 952701000000101 | 0 - 60 | | |
| 952691000000101 | 0 - 60 | | |
| 952711000000104 | 0 - 60 | | |
| 952721000000105 | 0 - 60 | | |
| 952731000000107 | 0 - 60 | | |
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| 952741000000103 | 0 - 60 | | |

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| 952941000000101 | 0 - 60 | |
| 952961000000100 | 0 - 60 | |
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| 952991000000106 | 0 - 60 | |
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| 953631000000106 | 0 - 60 | |
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| 953651000000104 | 0 - 60 | |
| 953641000000102 | 0 - 60 | |
| 1053941000000101 | 0 - 465 | |
| 1053951000000103 | 0 - 465 | |
| 1053971000000107 | 0 - 465 | |
| 1053991000000106 | 0 - 465 | |
| 1054011000000104 | 0 - 465 | |
| 1054021000000105 | 0 - 465 | |
| 1054031000000107 | 0 - 465 | |
| 1054041000000103 | 0 - 465 | |
| 1054051000000100 | 0 - 465 | |
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Assessment Tool Type (SNOMED CT) within the following CSDS

pear in this list can be submitted within the CSDS. Any SNOMED

| Comments |
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| |
| The person score is the 'total score'. There are 6 questions for each dimension, with a possible total score of 60 for each dimension. |
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| The score is a total score for the ASQ:SE assessment, which is not split by 'dimensions'. There are 31 questions, with a possible score of 0 - 15 for each question, giving a possible total score of 465 for each questionnaire. |
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| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|--------------------|------------------|--------------------------|-----------------|--|-------------------------------------|
| CYP00 | eating Group - CYP000 CSI DO CSDS Head | aler | | | | Group-level no | tes for Data Providers: | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C000010 | DATA SET VERSION NUMBER | The version of the CSDS that this submission file is for. | max n2.max n2 | | | Purpose | Generic for all information requirements | М |
| C000020 | ORGANISATION CODE (CODE OF PROVIDER) | This is the ORGANISATION CODE of the ORGANISATION acting as a Health Care Provider. This is the organisation code that will be concatenated with any Local Patient Identifiers to form a unique "Local Patient Identifier" within the national database | an3, an5 or an6 | | | Purpose | Generic for all information requirements | М |
| C000030 | ORGANISATION CODE (CODE OF SUBMITTING ORGANISATION) | This is the ORGANISATION CODE of the ORGANISATION of the ORGANISATION acting as the physical sender of a Data Set submission. This code provides an audit trail where a different organisation is undertaking the submission on behalf of the provider organisation. It will not be carried over into the national database. | max an6 | | | Purpose | Generic for all information requirements | М |
| C000040 | REPORTING PERIOD START DATE | The reporting period start date to which this file refers | an10 CCYY-MM-DD | | | Purpose | | М |
| C000050 | REPORTING PERIOD END DATE | The reporting period end date to which this file refers | an10 CCYY-MM-DD | | | Purpose | | М |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|----------------------------------|------------------|--------------------------|-----------------|-------------------------|-------------------------------------|
| | eating Group - CYP000 CSI 00 CSDS Head | | | | | Group-level no | tes for Data Providers: | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | | Mandatory/ Required/ Optional |
| C000060 | DATE AND TIME DATA SET CREATED | Date/time this upload file was created | an19 YYYY'-MM- DDThh:mm:ss | | | Purpose | | М |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|---|--|-----------------|------------------|--------------------------|---|--|---|
| | | Patient Index and Risk Indicators nt Index and Risk Indic | ators | | | Group-level no | tes for Data Providers: | |
| | | | | | | This group may Providers must at the end of the submission. Do Data providers s | ndex and Risk Indicators: To carry the person associated mother's NHS number (where app be used to identify the person for record links copulate all known data items for the CYP001 reporting period, even if they are unchanged not just provide data for all "changed" data ite should note that CYP001 and CYP002 are maluded whenever any other groups are transmit | ge table as they were since the last ems. |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C001901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C001010 | ORGANISATION CODE (LOCAL PATIENT IDENTIFIER) | The organisation code of the organisation that assigned the local patient identifier. | an3 or an5 | | | All to identify individual | Used to uniquely identify the organisation issuing the LPI | М |
| C001020 | ORGANISATION CODE (RESIDENCE RESPONSIBILITY) | The organisation code derived from the patient's POSTCODE OF USUAL ADDRESS This field can routinely be left blank, however if populated it should contain the organisation code of the commissioner with which the patient is resident. | an3 | | | All to identify individual | Used to identify the organisation of responsibility or residence. To enable the provider to identify the commissioner derived from the patient's postcode. | R |
| C001030 | ORGANISATION CODE (EDUCATIONAL ESTABLISHMENT) | The ORGANISATION CODE of the Educational Establishment, including Schools | min an5 max an8 | 100 | | All to identify individual | Used to identify the educational establishment of a child or young person. | R |

| SCCI | SCCI | SCCI Patient Index and Risk Indicators | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-----------------|-------------------------------------|---|------------|----------|--|----------------------------|---|-----------------------|
| | | nt Index and Risk Indic | ators | | | Group-level no | tes for Data Providers: | |
| | | | | | | | ndex and Risk Indicators: To carry the person associated mother's NHS number (where app | |
| | | | | | | This group may | be used to identify the person for record linka | ge |
| | | | | | | at the end of the | populate all known data items for the CYP001 reporting period, even if they are unchanged not just provide data for all "changed" data it | since the last |
| | | | | | | | hould note that CYP001 and CYP002 are ma luded whenever any other groups are transmi | |
| YMI Schoma | Data Item Name | Data Item Description | Format | National | National Code Definition | Info Req | Information Requirements | Mandatory/ |
| Element Name | (Data Dict Element) | Data item Description | Tormat | Code | National Gode Definition | Ref | (Purpose) | Required/ Optional |
| C001040 | NHS NUMBER | A number used to identify a PATIENT uniquely | n10 | | | All to identify | Used to uniquely identify an individual | R |
| 000.0.0 | | within the NHS in England and Wales | | | | individual | cood to uniquely dentity air marriada. | |
| | | | | | | | | |
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| C001050 | NHS NUMBER STATUS INDICATOR CODE | NHS NUMBER STATUS INDICATOR CODE is the trace status of the NHS NUMBER. | an2 | 01 | Number present and verified | All to identify individual | Used to uniquely identify an individual | R |
| | | | | 02 | Number present but not traced | | | |
| | | | | 03 | Trace required | | | |
| | | | | 04 | Trace attempted - No match or multiple match | <u> </u> | | |
| | | | | 05 | found | | | |
| | | | | 05 | Trace needs to be resolved - (NHS Number or patient detail conflict) | | | |
| | | | | 06 | Trace in progress | | | |
| | | | | 07 | Number not present and trace not required | | | |
| | | | | 08 | Trace postponed (baby under six weeks old) | | | |
| C001060 | PERSON BIRTH DATE | The date on which a PERSON was born or is | an10 | | | All to analyse | Used to calculate age at events | R |
| | | officially deemed to have been born | CCYY-MM-DD | | | by age | | |
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| SCCI | SCCI | SCCI Patient Index and Risk Indicators | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|---------------------------------------|--|-------------|------------------|--|---|--|---|
| | | nt Index and Risk Indicators Note | ators | | | Group-level no | tes for Data Providers: | |
| CIPOUT | Master Fatte | iit iiiuex anu Risk iiiuica | ators | | | Providers must at the end of the submission. Do | Index and Risk Indicators: To carry the perso associated mother's NHS number (where ap be used to identify the person for record link populate all known data items for the CYP00 reporting period, even if they are unchange not just provide data for all "changed" data is should note that CYP001 and CYP002 are muluded whenever any other groups are transmulated. | plicable). age 1 table as they were d since the last tems. andatory groups |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C001070 | POSTCODE OF USUAL ADDRESS | The POSTCODE of the ADDRESS nominated by the PATIENT with ADDRESS ASSOCIATION TYPE 'Main Permanent Residence' or 'Other Permanent Residence' | max an8 | | | 1.2.1.1 | Used to associate an individual with geographical areas, e.g. CCG, Electoral Ward, Sure Start area etc | R |
| C001080 | PERSON STATED | PERSON STATED GENDER CODE is self | an1 | 1 | Male | All to analyse | Used to analyse data for difference by | R |
| | GENDER CODE | declared or inferred by observation for those unable to declare their PERSON STATED | | 2 | Female | by sex | gender | |
| | | GENDER. | | 9 | Indeterminate (Unable to be classified as either male or female) | | | |
| | | | | Х | Not Known (PERSON STATED GENDER CODE not recorded) | | | |
| C001090 | ETHNIC CATEGORY | The ethnicity of a PERSON, as specified by | an2 | | White | 1.2.1.9 | Used to monitor equality or distinctions in | R |
| | | the PERSON. | | Α | British | | service usage by ethnicity | |
| | | | | В | Irish | | | |
| | | | | С | Any other White background Mixed | | | |
| | | | | D | White and Black Caribbean | _ | | |
| | | | | E | White and Black African | - | | |
| | | | | F | White and Asian | = | | |
| | | | | G | Any other mixed background | 7 | | |
| | | | | | Asian or Asian British | | | |
| | | | | Н | Indian | | | |
| | | | | J | Pakistani | _ | | |
| | | | | K | Bangladeshi | _ | | |
| | | | | L | Any other Asian background Black or Black British | 4 | | |
| | | | M Caribbean | | | | | |
| | | | | 1 1 1 1 | | | | |
| | | | | N | African | 7 | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|---------------------------------------|---|--------|------------------|---|--|---|---|
| | | Patient Index and Risk Indicators nt Index and Risk Indicators | ators | | | Group-level no | tes for Data Providers: | |
| | inducer i date | | | | | person and the and This group may Providers must at the end of the submission. Do Data providers s | ndex and Risk Indicators: To carry the pen- associated mother's NHS number (where a be used to identify the person for record lin copulate all known data items for the CYP/ reporting period, even if they are unchang not just provide data for all "changed" data should note that CYP001 and CYP002 are luded whenever any other groups are trans- | applicable). nkage 001 table as they were ged since the last a items. mandatory groups |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | | Other Ethnic Groups | | | |
| | | | | R | Chinese | 1 | | |
| | | | | S | Any other ethnic group | İ | | |
| | | | | Z | Not stated | İ | | |
| | | | | 99 | Not known | İ | | |
| C001100 | LANGUAGE CODE (PREFERRED) | LANGUAGE CODE (PREFERRED) is the language the PATIENT prefers to use for communication with a Health Care Provider. LANGUAGE CODE is based | an2 | | For spoken languages, see ISO 639-1 codes at http://www.loc.gov/standards/iso639-2/php/code_list.php | 3.2.1.1 | Used to monitor variances in service usage/access according to preferred language | R |
| | | on the ISO 639-1 two character language | | | Extensions | İ | | |
| | | codes, see the ISO 639.2 Registration Authority website | | q1 | Braille (for people who are unable to see) | 1 | | |
| | | (http://www.loc.gov/standards/iso639- | | q2 | American Sign Language | İ | | |
| | | 2/php/code_list.php), plus five extensions (q1, | | q3 | Australian Sign Language | İ | | |
| | | q2, q3, q4, q5). | | q4 | British Sign Language | 1 | | |
| | | | | q5 | Makaton (devised for children and adults with a variety of communication and Learning Disabilities) | | | |
| C001110 | PERSON | The relationship between the child/young | an3 | ВРХ | Biological Parent | 1.2.1.10 | Used to monitor usage by main carer. | R |
| | RELATIONSHIP (MAIN | person and the person who undertakes the | | BPM | Biological Mother |] | | |
| | CARER) | main caring role for them. | | BPF | Biological Father | | | |
| | | | | SPX | Step-Parent | | | |
| | | | | SPM | Stepmother |] | | |
| | | | | SPF | Stepfather | | | |
| | | | | GPX | Grandparent | | | |
| | | | | GPM | Grandmother | _ | | |
| | | | | GPF | Grandfather | | | |
| | | | | ORX | Other Relative | | | |
| | | | | ORA | Aunt | | | |
| | | | | ORU | Uncle | 4 | | |
| | | | | ORS | Sister | 1 | | |
| | | | | ORB | Brother | + | | |
| | | | | ORO APX | Other | + | | |
| | 1 | | | APX | Adoptive Parent Adoptive Mother | + | | |
| | | | | | IAGODUVE IVIOLITEI | | | |
| | | | | | | | | |
| | | | | APF | Adoptive Father | | | |
| | | | | | | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|---------------------------------------|--|---------|------------------|--------------------------|--|---|--|
| | | Patient Index and Risk Indicators nt Index and Risk Ind | icators | | | Master Patient It person and the a This group may Providers must at the end of the submission. Do Data providers s | tes for Data Providers: Index and Risk Indicators: To carry the person associated mother's NHS number (where applied used to identify the person for record link propulate all known data items for the CYPO0 reporting period, even if they are unchange not just provide data for all "changed" data should note that CYPO01 and CYPO02 are middled whenever any other groups are transmit | plicable). age If table as they were d since the last items. |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | RCX | Residential Carer | | | |
| | | | | OTX | Other |] | | |
| | | | | NOX | None - Lives Alone | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|---------------------------------------|---|--------------------|------------------|--|--|--|--|
| | | Patient Index and Risk Indicators 1t Index and Risk Indic | ators | | | Group-level not | tes for Data Providers: | |
| | | | | | | person and the a This group may Providers must p at the end of the submission. Do Data providers s | ndex and Risk Indicators: To carry the person associated mother's NHS number (where apple used to identify the person for record linka copulate all known data items for the CYP001 reporting period, even if they are unchanged not just provide data for all "changed" data it hould note that CYP001 and CYP002 are mauded whenever any other groups are transmit | ge table as they were since the last ems. ndatory groups |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C001120 | HEALTH VISITOR FIRST | The date when a Health Visitor has the first | an10 CCYY-MM-DD | | | Analyse by time | Analyse the time between first antenatal | R |
| | | | | | | | | |
| C001130 | LOOKED AFTER CHILD INDICATOR | An indication of whether a PERSON is a Looked After Child. | an1 | N X | Yes (Is a Looked After Child) No (Is not a Looked After Child) Not Known | 1.2.1.2 | To monitor services and outcomes for children and young people who are or have been looked after | R |
| C001140 | SAFEGUARDING VULNERABILITY | To record if there are any safeguarding vulnerability factors | an1 | Y | Yes (child safeguarding vulnerability factors present) | | To monitor details of children with safeguarding concerns | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|--|--|--------|------------------|---|---|--|---|
| | | Patient Index and Risk Indicators nt Index and Risk Indic | ators | | | Group-level no | tes for Data Providers: | |
| 011 001 | master i atter | in maex and reisk male. | ators | | | person and the a This group may Providers must the end of the submission. Do Data providers s | ndex and Risk Indicators: To carry the person associated mother's NHS number (where appl be used to identify the person for record linkar copulate all known data items for the CYP001 reporting period, even if they are unchanged not just provide data for all "changed" data ite hould note that CYP001 and CYP002 are mailuded whenever any other groups are transmit | icable). ge table as they were since the last ems. ndatory groups |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | FACTORS INDICATOR | | | N | No (child safeguarding vulnerability factors not | vulnerability | | |
| | | | | | present) | factors indicator | | _ |
| C001150 | CONSTANT SUPERVISION AND CARE REQUIRED DUE TO DISABILITY | This indicates that a disabled person needs round the clock care and/or supervision for maintenance of their safety and/or wellbeing. | an1 | Y | Yes (person requires round the clock care and/or supervision) | All to analyse by constant supervision due to disability | To monitor details of children which require constant supervision due to disability | R |
| | INDICATOR | | | N | No (person does not require round the clock care and/or supervision) | indicator | | |
| C001160 | EDUCATIONAL ASSESSMENT OUTCOME | The outcome of an educational assessment. | an2 | 01 05 | No Special Educational Needs Subject to Education, Health and Care (EHC) plan | 8.1.3.1 | Used to compare outcomes and provision for children/young people with disabilities or condition | R |
| C001170 | PREFERRED DEATH LOCATION DISCUSSED INDICATOR | An indication of whether the preferred location of death was discussed with a patient or proxy by a clinician, in the event that there is an expected risk of death before the age of 18 for | an1 | Y | Yes (the preferred location was discussed) | All to analyse by field | To monitor volume of people where the preferred death location was discussed | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|--|---|--------|--|---|--|---|--|
| | | Patient Index and Risk Indicators nt Index and Risk Indic | ators | | | Group-level no | tes for Data Providers: | |
| CTPOUT | ent (Data Dict Element) | | | | | person and the and This group may Providers must at the end of the submission. Do Data providers s | ndex and Risk Indicators: To carry the personal associated mother's NHS number (where applied be used to identify the person for record linkage populate all known data items for the CYP001 reporting period, even if they are unchanged not just provide data for all "changed" data ite should note that CYP001 and CYP002 are marked whenever any other groups are transmit | icable). ge table as they were since the last irms. |
| XML Schema Element Name | | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C001180 | PERSON AT RISK OF UNEXPECTED DEATH INDICATOR | An indication of whether a patient is at risk of sudden, unexpected death before the age of 18, as assessed by a clinician. | an1 | Y N | No (the preferred location was not discussed) Yes (person at risk of unexpected death) No (person not at risk of unexpected death) | All to analyse by field | Used to compare outcomes and provision for children/young people with a risk of unexpected death | R |
| C001190 | DEATH LOCATION TYPE CODE (PREFERRED) | The preferred location of death as specified by the PATIENT. | an2 | 10 20 21 22 30 40 41 42 50 | Hospital Private Residence PATIENT's own home Other private residence (e.g. relatives home, carers home) Hospice Care Home Care Home with Nursing Care Home without Nursing Other The CARE PROFESSIONAL did not discuss the preferred LOCATION of death prior to the death of the PATIENT | All to analyse by field | Used to compare outcomes depending on preferred location type and difference between preferred and actual death location | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-----------------|--------------------------------------|--|------------|----------|--|-------------------------|--|-----------------------|
| | | Patient Index and Risk Indicators nt Index and Risk Indic | ators | | | Group-level no | tes for Data Providers: | |
| | | | u | | | | ndex and Risk Indicators: To carry the personassociated mother's NHS number (where appl | |
| | | | | | | This group may | be used to identify the person for record linka | ge |
| | | | | | | at the end of the | populate all known data items for the CYP001 reporting period, even if they are unchanged not just provide data for all "changed" data ite | since the last |
| | | | | | | | should note that CYP001 and CYP002 are ma luded whenever any other groups are transmit | |
| XMI Schema | Data Item Name | Data Item Description | Format | National | National Code Definition | Info Req | Information Requirements | Mandatory/ |
| Element Name | (Data Dict Element) | | | Code | | Ref | (Purpose) | Required/ Optional |
| 001200 | PERSON DEATH DATE | The date on which a person died or is officially | an10 | | | 8.5.15.1 | Used for temporal queries, e.g. individuals | R |
| | | deemed to have died, as recorded on the death certificate. | CCYY-MM-DD | | | | that died between two dates ¯ | |
| | DEATH LOCATION TYPE CODE (ACTUAL) | The actual location where the PATIENT died. | an2 | 10 20 | Hospital Private Residence | All to analyse by field | Used to compare outcomes depending on actual location type and difference between | R |
| | CODE (ACTUAL) | | | 21 | PATIENT's own home | S, noid | preferred and actual death location | |
| | | | | 22 | Other private residence (e.g. relatives home, carers home) | | | |
| | | | | 30 | Hospice | 1 | | |
| | | | | 40 | Care Home | | | |
| | | | | 41 | Care Home with Nursing | | | |
| | | | | 42 | Care Home without Nursing | | | |
| | I | 1 | I | 50 | Other | 1 | | l |

| SCCI | SCCI | SCCI Patient Index and Risk Indicators | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|--|--|--------|--|---|---|--|--|
| | CYP001 Master Patient Index and Risk Indicators ML Schema Data Item Name Data Item Description Format | | | | | Master Patient person and the This group may Providers must at the end of the submission. Do Data providers | tes for Data Providers: index and Risk Indicators: To carry the person associated mother's NHS number (where app be used to identify the person for record links populate all known data items for the CYP001 ereporting period, even if they are unchanged not just provide data for all "changed" data it should note that CYP001 and CYP002 are meduded whenever any other groups are transmit | ge table as they were since the last ems. ndatory groups |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C001220 | DEATH NOT AT PREFERRED LOCATION REASON | This will indicate the reason why the person did not die at their preferred LOCATION of death. | an2 | 01 02 03 04 05 06 07 98 | Family decided to move patient to hospital Patient was moved to hospital for clinical reasons Patient changed their mind Capacity not available at preferred location Transfer delays Social support issues Need for access to adequate pain relief Other Not known | All to analyse by field | For analysis on why the person did not die at the preferred place of death | R |

| SCCI | SCCI eating Group - CYP002 GP Pr | SCCI actice Registration | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------------------|------------------|--------------------------|----------------------------|---|-------------------------------------|
| | 2 GP Practice | | | | | Group-level no | tes for Data Providers: | |
| | | J | | | | GP Practice Reperson. | gistration: To carry details of the GP Practice I | Registration of the |
| | | | | | | | should note that CYP002 is a mandatory group ver any other groups are transmitted that refer | |
| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C002901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C002010 | GENERAL MEDICAL PRACTICE CODE (PATIENT REGISTRATION) | The ORGANISATION CODE of the GP Practice that the PATIENT is registered with. | an6 | | | 1.3.1 | Used to identify CCG and registration with a GP | М |
| C002020 | START DATE (GMP PATIENT REGISTRATION) | Start Date on which the PERSON registered with a General Medical Practitioner Practice. | an10 CCYY-MM-DD | | | 1.3.1 | Used to allow temporal analysis of registration with a GP | R |
| | | | | | | | | |
| C002030 | END DATE (GMP PATIENT REGISTRATION) | The DATE on which the PERSON ceased to be registered with a General Medical Practitioner Practice. | an10 CCYY-MM-DD | | | 1.3.1 | Used to allow temporal analysis of registration with a GP | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|---|--------|------------------|--------------------------|---|--|-------------------------------------|
| | eating Group - CYP002 GP Pro | | | | | | | |
| CYP00 | P002 GP Practice Registration Data Item Name (Data Data Item Description Format | | | | | GP Practice Reperson. Data providers s | tes for Data Providers: gistration: To carry details of the GP Practice I should note that CYP002 is a mandatory group rer any other groups are transmitted that refer | o that must be |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C002040 | PRACTICE RESPONSIBILITY) | The ORGANISATION CODE of the ORGANISATION responsible for the GP Practice where the PATIENT is registered, irrespective of whether they reside within the boundary of the Clinical Commissioning Group. This field can routinely be left blank, however if populated it should contain the organisation code of the commissioner that is associated with the patient's current registered GP Practice. | an3 | | | Used to analyse by commissioner | Required for identifying the Commissioner responsible for payment | R |

| SCCI | SCCI ating Group - CYP003 Accommo | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|----------|---------------------|---|----------------------------|---|-------------------------------------|
| | | | | | | Group-level no | tes for Data Providers: | |
| CTPOO | 3 Accommodation | on Type | | | | 1 | n Type: To carry details of the type of accomm | nodation of the |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C003901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C003010 | ACCOMMODATION STATUS | An indication of the type of accommodation | an4 | MA00 | Mainstream Housing | 1.2.1.3 | Used to monitor settings for people with | М |
| | CODE | that a PATIENT currently has. This should be | | MA01 | Owner occupier | 1.2.1.6 | disabilities, one of the factors in identifying | |
| | | based on the PATIENT's main or permanent residence. | | MA02 | Settled mainstream housing with family/friends | 1.2.1.8 1.2.1.15 | those who are vulnerable, and comparing health and social outcomes for all people | |
| | | | | MA03 | Shared ownership scheme e.g. Social Homebuy Scheme (tenant purchase percentage of home value from landlord) | | health and social outcomes for all people | |
| | | | | MA04 | Tenant - Local Authority/Arms Length Management Organisation/Registered Landlord | | | |
| | | | | MA05 | Tenant - Housing Association | 1 | | |
| | | | | MA06 | Tenant - private landlord | 1 | | |
| | | | | MA09 | Other mainstream housing | | | |
| | | | | HM00 | Homeless | | | |
| | | | | HM01 HM02 | Rough sleeper Squatting | 1 | | |
| | | | | HM03 | Night shelter/emergency hostel/Direct access hostel (temporary accommodation accepting self referrals, no waiting list and relatively frequent vacancies) | | | |
| | | | | HM04 | Sofa surfing (sleeps on different friends floor | 1 | | |
| | | | | HM05 | each night) Placed in temporary accommodation by Local Authority (including Homelessness resettlement service) e.g. Bed and Breakfast | | | |
| | | | | LIEAGO | accommodation | | | |
| | | | | HM06 | Staying with friends/family as a short term guest | | | |
| | 1 | | | HM07 | Other homeless | 1 | | |
| | | | | MH00 | Accommodation with mental health care support | | | |
| | | | | MH01 | Supported accommodation (accommodation supported by staff or resident caretaker) | | | |
| | | | | MH02 | Supported lodgings (lodgings supported by staff or resident caretaker) | | | |
| | | | | MH03 | Supported group home (supported by staff or | 1 | | |
| | | | | resident caretaker) | | | 1 | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------|------------------------------|--|--------|--------------|--|----------------|--|-----------------------|
| | ating Group - CYP003 Accommo | The state of the s | | | | Crown level no | too for Data Providers | |
| CYP00 | 3 Accommodation | on Type | | | | Group-level no | otes for Data Providers: | |
| | | | | | | | Type: To carry details of the type of acco | ommodation of the |
| | | | | | | person. | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| KML | Data Item Name (Data | Data Item Description | Format | National | National Code Definition | Info Req | Information Requirements | Mandatory/ |
| Schema Element | Dict Element) | | | Code | | Ref | (Purpose) | Required/ Optional |
| ziement Name | | | | | | | | Optional |
| laille | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | MH04 | Mental Health Registered Care Home | | | |
| | | | | MH09 | Other accommodation with mental health care | | | |
| | | | | HS00 | and support Acute/long stay healthcare residential | | | |
| | | | | 1300 | facility/hospital | | | |
| | | | | HS01 | NHS acute psychiatric ward | | | |
| | | | | HS02 | Independent hospital/clinic | | | |
| | | | | HS03 | Specialist rehabilitation/recovery | | | |
| | | | | HS04 HS05 | Secure psychiatric unit | | | |
| | | | | HS05 HS09 | Other NHS facilities/hospital Other acute/long stay healthcare residential | | | |
| | | | | 11005 | facility/hospital | | | |
| | | | | CH00 | Accommodation with other (not specialist | | | |
| | | | | | mental health) care support | | | |
| | | | | CH01 | Foyer - accommodation for young people | | | |
| | | | | | aged 16-25 who are homeless or in housing | | | |
| | | | | CH02 | need Refuge | | | |
| | | | | CH02 | Non-Mental Health Registered Care Home | | | 1 |
| | | | | CH09 | Other accommodation with care and support | | | 1 |
| | | | | | (not specialist mental health) | | | |
| | | | | CJ00 | Accommodation with criminal justice support | | | |
| | | | | CJ01 | Bail/Probation hostel | | | |
| | 1 | | | CJ02 | Prison | | | |
| | | | | CJ03 | Young Offenders Institute | | | 1 |
| | | | | CJ04 | Detention Centre | | | 1 |
| | | | | CJ09 | Other accommodation with criminal justice support such as ex-offender support | | | 1 |
| | | | | SH00 | Sheltered Housing (accommodation with a | | | 1 |
| | 1 | | | | scheme manager or warden living on the | | | |
| | | | | | premises or nearby, contactable by an | | | 1 |
| | 1 | | | | alarm system if necessary) | | | |
| | | | | SH01 | Sheltered housing for older persons | | | - 1 |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|--|--------------------|------------------|---|---|--|-------------------------------------|
| | ating Group - CYP003 Accommo | | | | | Group-level no | ites for Data Providers: | |
| CYP00 | 3 Accommodation | on Type | | | | | tes for Data Providers: Type: To carry details of the type of accomm | odation of the |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | | | | | |
| | | | | SH02 | Extra care sheltered housing (also known as Very sheltered housing'. For people who are less able to manage on their own, but who do need an extra level of care. Services offered vary between schemes, but meals and some personal care are often provided.) | | | |
| | | | | SH03 | Nursing Home for older persons | | | |
| | | | | SH09 | Other sheltered housing | | | |
| | | | | ML00 | Mobile accommodation | | | |
| | | | | 0000 | Other | | | |
| | | | | OC96 OC97 | Not elsewhere classified | | | |
| | | | | OC97 OC98 | Not specified Not applicable | ł | | |
| | | | | OC98 OC99 | Not known | | | |
| C003020 | ACCOMMODATION STATUS RECORDED DATE | The PERSON PROPERTY OBSERVED DATE when the ACCOMMODATION STATUS CODE was recorded. | an10 CCYY-MM-DD | | | 1.2.1.3 1.2.1.6 1.2.1.8 1.2.1.15 | Used to monitor settings for people with disabilities, one of the factors in identifying those who are vulnerable, and comparing health and social outcomes for all people | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|---|------------|------------------|--------------------------|---------------------------------|---|-------------------------------------|
| | eating Group - CYP101 Service | | | _ | | Group-level no | tes for Data Providers: | |
| CYP10 | 01 Service or T | eam Referral | | | | Service or Team subject to. | n Referral: To carry details of the referral that s should be provided in each reporting period s been no activity during that reporting period | they remain open, |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C101902 | SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | All to identify referral | Used to uniquely identify a referral | M |
| C101901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | M |
| C101912 | ORGANISATION CODE (CODE OF COMMISSIONER) | ORGANISATION CODE (CODE OF COMMISSIONER) is the ORGANISATION CODE of the Organisation commissioning health care. The NHS England document "Who pays? Determining responsibility for payments to providers" sets out a framework for establishing responsibility for commissioning an individual's care within the NHS, (i.e. determining who pays for a PATIENT's care.) The document includes information on the following: -General Rules -Applying the rules to Clinical Commissioning Group commissioned services -Exceptions to the general rules -Examples to help clarify the boundaries of responsibility between commissioning Organisations. For further information on this document contact NHS England at "Contact us". ORGANISATION CODE (CODE OF COMMISSIONER) will be replaced with ORGANISATION IDENTIFIER (CODE OF COMMISSIONER), when it has been approved for use in national information standards. | an3 or an5 | | | Used to analyse by commissioner | Required for identifying the Commissioner responsible for payment | M |

| SCCI Start of Rene | SCCI eating Group - CYP101 Service | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|--|--------------|------------------|--------------------------|--|---|-------------------------------------|
| | 1 Service or T | | | | | Group-level no | otes for Data Providers: | |
| | | | | | | Service or Team subject to. | n Referral: To carry details of the referral tha | at the person is |
| | | | | | | | Is should be provided in each reporting perions been no activity during that reporting perions. | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C101010 | REFERRAL REQUEST RECEIVED DATE | This is the date the REFERRAL REQUEST was received by the Health Care Provider. The waiting time for a first Out-Patient Appointment should be calculated from the date when the REFERRAL REQUEST is received. For electronic REFERRAL REQUESTS the REFERRAL REQUEST RECEIVED DATE is the date the REFERRAL REQUEST is received electronically by the Health Care Provider. For Choose and Book, the referral is received when the PATIENT's Unique Booking Reference Number (UBRN) is used to book the first outpatient appointment slot (i.e. converted). Where an electronic REFERRAL REQUEST made through Choose and Book is rejected by the chosen provider, the ORIGINAL REFERRAL REQUEST RECEIVED DATE should be used when the PATIENT is subsequently re-referred to another service, so that patients are not unfairly disadvantaged when their waiting time calculations are made. In the circumstance that a PATIENT calls the national Choose and Book Appointments Line and an APPOINTMENT SLOT is not available with the chosen Health Care Provider, the national Choose and Book Appointments Line will electronically forward the REFERRAL REQUEST details to the chosen Health Care Provider so the Health Care Provider can liaise directly with the PATIENT to arrange their Out-Patient Appointment. The REFERRAL REQUEST RECEIVED DATE will be the date that the Health Care Provider coverse electronic notification from the national Choose and Book Appointments Line that the PATIENT has experienced slot unavailability. (Note that this is NOT the date that the Health Care Provider receives electronic notification from the national Choose and Book Appointments Line that the Health Care Provider opens or actions the electronic notification). For written REFERRAL REQUESTs letters must be opened and date stamped on the day of receipt. It is this date that must be entered on any PAS or similar system, not the date on which the information is fed into the system if this is later than the date of receipt. If the REFERRAL REQUEST takes the form of a phone call foll | | | | Used for analysis between field and other events | Required for measuring Quality & Performance - Waiting Times | М |
| C101020 | REFERRAL REQUEST RECEIVED TIME | This records the time the REFERRAL REQUEST was received. This item is only required for 'urgent' priority referrals into services with target waiting times measured in hours e.g. rapid response teams or urgent care. The time should be recorded using the 24 hour clock format in eGIF format i.e. hh:mm:ss. | an8 HH:MM:SS | | | Used for analysis between field and other events | Required for measuring Quality & Performance - Waiting Times and Response Times | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------|------------------|--------------------------|--|---|-------------------------------------|
| | eating Group - CYP101 Servi O1 Service or T | | | | | Service or Team subject to. | tes for Data Providers: Referral: To carry details of the referral that s should be provided in each reporting period been no activity during that reporting period | d they remain open, |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C101905 | NHS SERVICE AGREEMENT LINE NUMBER | A number (alphanumeric) to provide a unique identifier for a line within a NHS SERVICE AGREEMENT. An NHS SERVICE AGREEMENT is a formal agreement between a commissioner ORGANISATION and one or more provider ORGANISATIONS for the provision of PATIENT care services. | an10 | | | All to identify a service agreement line | Used to uniquely identify a service agreement line | 0 |

| SCCI | SCCI eating Group - CYP101 Service | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|---------|--|--|---|--|------------------------------------|
| | 01 Service or To | | | | | Group-level no | tes for Data Providers: | |
| J11 1 | of Service of T | cam Referral | | | | Service or Team subject to. | n Referral: To carry details of the referral that | the person is |
| | | | | | | | s should be provided in each reporting period s been no activity during that reporting period | |
| (ML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory Required/ Optional |
| | | | | | | | | |
| 101030 | SOURCE OF REFERRAL FOR COMMUNITY | A classification which identifies the source of referral to a Community Health Service. Internal Referrals should normally be recorded as 'Community Service' and the Referring Organisation Code will be the same as the Organisation Code (Code of Provider). | an2 | 01 02 03 04 05 06 07 08 09 10 11 11 14 15 16 17 18 19 20 21 22 23 | General Medical Practitioner Practice Self Referral Caren/Relative Employer Accident and Emergency Department Acute Hospital Inpatient/Outpatient Community Health Service (same or other Health Care Provider) Dental Practice National Screening Programme Educational Establishment Local Authority Social Services Hospice Care Home Police Courts Probation Service Prison Health Service Asylum Service Telephone or Electronic Access Service Voluntary Sector Independent Sector Ambulance Service Mental Health Service | Used for analysis of this data item | Required for reporting on Referral Source and to support validation of Referring Organisation Code | R |
| 101040 | REFERRING ORGANISATION CODE | Organisation Code of the referring organisation. This will be applicable only if the request has originated from another organisation. It will not be applicable for a self-referral. | max an6 | 99 | Not Known | Used for analysis of this data item | Required for reporting on Referral Source | R |
| 101050 | REFERRING CARE PROFESSIONAL STAFF GROUP (MENTAL HEALTH AND COMMUNITY CARE) | The staff group of a CARE PROFESSIONAL who referred the PATIENT to a Community Health Service or Mental Health Service. | an3 | A01 A02 A03 A04 A05 A06 A07 A08 | Allied Health Professionals Art Therapist Clinical Psychologist Dietitian Drama Therapist Music Therapist Occupational Therapist Orthotist Physiotherapist | Used for analysis of this data item | Required for reporting on Referral Source | R |

| SCCI Start of Rene | SCCI eating Group - CYP101 Servio | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|-----------------------|--------|------------------|--|-----------------------------|--|-------------------------------------|
| | 01 Service or T | | | | | Group-level no | tes for Data Providers: | |
| | 71 001 1100 01 1 | | | | | Service or Tean subject to. | n Referral: To carry details of the referral | hat the person is |
| | | | | | | | s should be provided in each reporting pe s been no activity during that reporting pe | |
| | | | | | | | | |
| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | | | | | |
| | | | | A09 A10 | Podiatrist Prosthetist | ļ | | |
| | | | | A10 A11 | Psychotherapist | ł | | |
| | | | | A12 | Radiographer | t | | |
| | | | | A13 | Speech and Language Therapist | İ | | |
| | | | | A14 | Orthoptist | Į | | |
| | | | | M01 | Medical/Dental | ļ | | |
| | | | | M01 M02 | Community Dentist Consultant | ł | | |
| | | | | M03 | General Medical Practitioner | t | | |
| | | | | M04 | General Medical Practitioner with A Special Interest | | | |
| | | | | | Nursing, Health Visiting and Midwifery | Ĭ | | |
| | | | | | Midwife | ļ | | |
| | | | | N02 N03 | District Nurse Health Visitor | ł | | |
| | | | | N04 | Macmillan Nurse | t | | |
| | | | | N05 | School Nurse | İ | | |
| | | | | N06 | Specialist Nursing - Active Case Management | [| | |
| | | | | N07 | Specialist Nursing - Arthritis Nursing / Liaison | ļ | | |
| | | | | N08 N09 | Specialist Nursing - Asthma and Respiratory Specialist Nursing - Breast Care Nursing / | ł | | |
| | | | | N10 | Specialist Nursing - Cancer Related | ł | | |
| | | | | N11 | Specialist Nursing - Cardiac Nursing / Liaison | İ | | |
| | | | | N12 | Specialist Nursing - Children's Services | Į | | |
| | | | | N13 | Specialist Nursing - Community Cystic Fibrosis | | | |
| | | | | N14 | Specialist Nursing - Continence Services | ł | | |
| | | | | N15 | Specialist Nursing - Diabetic Nursing / Liaison | İ | | |
| | | | | N16 | Specialist Nursing - Enteral Feeding Nursing | | | |
| | | | | N17 | Specialist Nursing - Haemophilia Nursing | | | |
| | | | | N19 N20 | Specialist Nursing - Infectious Diseases Specialist Nursing - Intensive Care Nursing | | | |
| | | | | N21 | Specialist Nursing - Intensive Care Nursing Specialist Nursing - Palliative / Respite Care | | | |
| | | | | N22 | Specialist Nursing - Parkinson and Alzheimer | | | |
| | | | | N23 | Specialist Nursing - Rehabilitation Nursing | | | |
| | | | | N24 | Specialist Nursing - Stoma Care Services | | | |
| | | | | N25 | Specialist Nursing - Tissue Viability Nursing / | | | |
| | 1 | | | N26 | Specialist Nursing - Transplantation Patients | l | 1 | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|---------------------------|-----------------------------|-------------------------|---------|------------|--|--------------------------------|--|-----------------------|
| Start of Rep | eating Group - CYP101 Servi | ce or Team Referral | | | | | | |
| CYP10 | 01 Service or T | eam Referral | | | | Group-level no | tes for Data Providers: | |
| | | | | | | Service or Team subject to. | n Referral: To carry details of the referral t | hat the person is |
| | | | | | | | Is should be provided in each reporting pe s been no activity during that reporting per | |
| XML | Data Itam Nama (Data | Data Item Description | Format | National | National Code Definition | Info Req | Information Requirements | Mandatory/ |
| Schema Element Name | Dict Element) | Data itelii Description | FUIIIAL | Code | National Code Definition | Ref | (Purpose) | Required/ Optional |
| | | | | | | | | |
| | | | | N28 | Specialist Nursing - Tuberculosis Specialist | 4 | | |
| | | | | N29 N30 | Specialist Nursing - Other Specialist Nursing Specialist Nursing - Safeguarding | 4 | | |
| | | | | N31 | Practice Nursing | + | | |
| | | | | N32 | Staff Nurse | 7 | | |
| | | | | N33 | Other Registered Nurse | _ | | |
| | | | | N34 | Public Health Nurse | | | |
| | | | | 004 | Other Care Professionals | → | | |
| | | | | C01 C02 | Appliances Technician Audiologist | -∤ | | |
| | | | | C02 | Counsellor | 4 | | |
| | | | | C04 | Nursery Nurse | ┥ | | |
| | I | l | 1 | 004 | INGISCIY INGISC | 1 | I | 1 |

| SCCI | SCCI eating Group - CYP101 Servio | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
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| | 01 Service or T | | | | | Group-level no | tes for Data Providers: | |
| | | | | | | Service or Team subject to. | n Referral: To carry details of the referral that | t the person is |
| | | | | | | | s should be provided in each reporting period s been no activity during that reporting period | |
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| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | C06 | Play Therepist | | | |
| | | | | C06 | Play Therapist Social Worker | | | |
| | | | | C08 | Voluntary Care Worker | | | |
| | | | | C09 | Screener (in a National Screening | | | |
| | | | | C10 | Health Trainer (Non Clinical) | | | |
| | | | | C11 | Health Trainer (Clinical) Health Care Assistant | | | |
| | | | | C12 | Health Care Support Worker | | | |
| | | | | C99 | Other Care Professional | | | |
| C101060 | PRIORITY TYPE CODE | This is the priority of a request for services; in the case of services to be provided by a CONSULTANT, it is as assessed by or on behalf of the CONSULTANT. | an1 | 1 | Routine | Used for analysis of this | Required for reporting on Referral Priority and measuring Response Times | R |
| | | Priority Type 'Urgent' should be used where the request for services is defined as clinically urgent, but it does not fall under the criteria for 'Two Week Wait' (see below). | | 2 | Urgent | data item reporting on time between | | |
| | | Priority Type 'Two Week Wait' should be used where either: | | 3 | Two Week Wait | events | | |
| | | | | | | | | |
| | | - the request for services meets the criteria for an urgent GENERAL PRACTITIONER referral for suspected cancer. These referrals should be made in accordance with the National Institute | | | | | | |
| | | for Health and Clinical Excellence (NICE) clinical guidelines on referral for suspected cancer. | | | | | | |
| | | For further information, see the NICE guidance. | | | | | | |
| | | or - the PATIENT has been referred urgently for breast symptoms, but the referral does not meet | | | | | | |
| | | the criteria for urgent GENERAL PRACTITIONER referrals for suspected cancer. | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| C101070 | PRIMARY REASON FOR | The primary presenting condition or symptom for which the patient was referred to a Community | an3 | 001 | Accident/Trauma | Used for | Required for measuring Quality & | R |
| | REFERRAL (COMMUNITY CARE) | Health Service. | | 002 | Alopecia | analysis of this data item | Performance - RTT and Response Times | |
| | | | | 003 004 | Antenatal Care | | | 1 |
| | | | | 004 | Bereavement Bladder Care | | | |
| | | | | 006 | Blood Pressure | | | 1 |
| | | | | 007 | Bowel Problems | | | 1 |
| | | | | 008 | Cancer | | | |
| | | | | 009 | Cardiac Conditions | | | |
| | | | | 010 | Catheter Problems | | | |
| | | | | 011 | Cerebral Palsy | | | |
| | | | | 012 | Cleft Palate | | | |
| 1 | | | | 013 | Cognitive Problems | | 1 | |

| SCCI | SCCI eating Group - CYP101 Service | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|-----------------------|--------|------------------|--|-----------------------------|--|-------------------------------------|
| | 01 Service or T | | | | | Group-level no | tes for Data Providers: | |
| | 01 0011100 01 1 | oun resistrat | | | | Service or Tean subject to. | Referral: To carry details of the referral | hat the person is |
| | | | | | | | s should be provided in each reporting pe s been no activity during that reporting pe | |
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| | | | | | | | | |
| (ML Schema Element Vame | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | 014 | Colostomy Care | | | |
| | | | | 015 | Continence Problems | | | |
| | | | | 017 | Developmental Problems | - | | |
| | | | | 018 | Diabetes | - | | |
| | | | | 019 | Diarrhoea and Vomiting | | | |
| | | | | 020 | Dizziness/Balance Problems | | | |
| | | | | 021 | Downs Syndrome | | | |
| | | | | 022 | Deep Vein Thrombosis | | | |
| | | | | 023 | Ear Infections/Problems | | | |
| | | | | 024 | Eating Disorder | | | |
| | | | | 025 | Emotional/Behavioural Problems | | | |
| | | | | 026 | End of Life Support | | | |
| | | | | 027 | Epilepsy | _ | | |
| | | | | 028 029 | Equipment Provision Eustachian Tube Dysfunction | | | |
| | | | | 030 | Falls Risk | | | |
| | | | | 030 | Family Support | | | |
| | | | | 032 | Feeding/Swallowing Problems | | | |
| | | | | 033 | Foot Care/Problems | | | |
| | | | | 034 | Head Injury | - | | |
| | | | | 035 | Hearing Problems/Loss | | | |
| | | | | 036 | Immunisation | | | |
| | | | | 037 | Laryngectomy | | | |
| | | | | 038 | Leg Ulcer | | | |
| | | | | 039 | Looked After Children | | | |
| | | | 1 | 040 | Low Muscle Tone | _ | | |
| | | | 1 | 041 | Lymphoedema Management | - | | |
| | | | | 042 | Mobility Problems | → | | |
| | | | 1 | 043 | Musculoskeletal Problems | | | |
| | | | | 044 045 | Neurological Problems Healthy Child Pathway | | | |
| | | | | 045 | Nutrition and Dietetics | | | |
| | | | | 046 | Ophthalmic Problems | \dashv | | |
| | | | 1 | 048 | Over 75 Assessment | | | |
| | | | | 049 | Pain/Symptom Control | - | | |
| | | | | 050 | Parkinsons Disease | \dashv | | |
| | | | | 051 | Personal Hygiene | | | |
| | | | | 052 | Post Operative Care | | | ĺ |

| SCCI | SCCI eating Group - CYP101 Service | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|------------------------------|---------------------------------------|-----------------------|--------|------------------|---|-----------------------------|--|-------------------------------------|
| | 01 Service or T | | | | | Group-level no | tes for Data Providers: | |
| ,,,, | or dervice or in | cam recorrai | | | | Service or Tean subject to. | n Referral: To carry details of the referral | hat the person is |
| | | | | | | | s should be provided in each reporting pe s been no activity during that reporting pe | |
| | | | | | | | | |
| ML chema lement ame | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| ame | | | | | | | | |
| | | | | | | | | |
| | | | | 053 | Pressure Ulcer | | | |
| | | | | 054 | Problems with Activities of Daily Living | ľ | | |
| | | | | 055 | Psychological Conditions | 1 | | |
| | | | | 056 | Rehabilitation | t | | |
| | | | | 057 | Respiratory Conditions | <u> </u> | | |
| | | | | 058 | Safeguarding | t | | |
| | | | | 059 | Skin Problems | + | | |
| | | | | | | . | | |
| | | | | 060 | Sleep Problems | . | | |
| | | | | 061 | Smoking Cessation | ļ | | |
| | | | | 062 | Speech and Language Problems | 1 | | |
| | | | | 063 | Stoma Care | <u> </u> | | |
| | | | | 064 | Structural/Functional Impairment | | | |
| | | | | 065 | Substance Misuse | | | |
| | | | | 066 | Trismus/Restricted Mouth Opening | | | |
| | | | | 067 | Tuberculosis | Ĭ | | |
| | | | | 068 | Vascular Problems | Ī | | |
| | | | | 069 | Vomiting/Nausea | Ť | | |
| | | | | 070 | Wound Care | Ť | | |
| | | | | 071 | Multiple Complex Communication Difficulties | Ī | | |
| | | | | 072 | Dental Care/Problems | † | | |
| | | | | 073 | Haematology/Phlebotomy | t | | |
| | | | | 074 | Chronic Fatigue Syndrome/Myalgic | † | | |
| | | | | | Encephalopathy | 1 | | |
| | | | | 075 | Chronic Allergy/Immunological Problem | 1 | | |
| | | | | 076 | Metabolic/Endocrine Disorders | | | |
| | | | | 077 | Renal Problems | | | |
| | | | | 078 | Minor Surgery | 1 | | |
| | | | | 079 | Gastrostomy Management/Care | 1 | | |
| | | | | 080 | Care of the Next Infant (CONI) Pathway | Ī | | |
| | | | | 081 | Failure to Thrive | I | | |
| | | | | 082 | Maternal Mood Problems | Ī | | |
| | | | | 083 | Complex Social Factors | † | | |
| | | | | 084 | Condition(s) Requiring Respite Care | † | | |
| | | | | 085 | Other Congenital Conditions | † | | |
| | | | | 086 | Blood Disorders | t | | |
| | 1 | | | 087 | Genetic Disorders | t | | |
| | | | | | | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|---|-----------------------|------------------|--------------------------|--|--|-------------------------------------|
| | eating Group - CYP101 Service O1 Service or T | | | | | Group-level no | otes for Data Providers: | |
| CYPIC | JI Service or 1 | eam Referral | | | | Service or Tear subject to. All open referra | n Referral: To carry details of the referral that the second second in each reporting period is been no activity during that reporting period. | they remain open, |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| 0404000 | OFFICIAL PROPERTY. | Can in Disabase Date is the date a DATICAL was disabased from a CCDVICE. This would | an10 (CCYY-MM- | 999 | Not known | I lood for | Descriped for managering Overlike 9 | D |
| C101080 | SERVICE DISCHARGE DATE | Service Discharge Date is the date a PATIENT was discharged from a SERVICE. This would occur once all the services or teams (for example as part of a multidisciplinary team) have finished treating a patient under a specific referral. | DD) | | | Used for analysis between field and other events | Required for measuring Quality & Performance | R |
| C101090 | DISCHARGE LETTER ISSUED DATE (MENTAL HEALTH AND COMMUNITY CARE) | The Discharge Letter Issued Date (Mental Health and Community Care) is the date when the Discharge Letter was issued by the provider of Mental Health Services or Community Health Services to the PATIENT. | an10 (CCYY-MM- DD) | | | Used for analysis between field and other events | To support community contract reporting requirements around issuance of Discharge Letters within 24 hours of discharge. | R |

| | 2 Service or | Team Type Referred To |) | | | Group-leve | Group-level notes for Data Providers: | | | | |
|----------------------------------|---|---|----------|------------------|--|---|--|-------------------------------------|--|--|--|
| | | | | | | | e Referred To: To carry details of the servic been referred to. | e or team that a | | | |
| | | | | | | | ers should note that CYP001 and CYP002 a e included whenever any other groups are tr on. | | | | |
| | | | | | | All open referrals should be provided in each reporting period open even if there has been no activity during that reporting p | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional | | | |
| | | | | | | | | | | | |
| C102902 | SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | All to identify professional team | Used to uniquely identify a professional team | М | | | |
| C102905 | CARE PROFESSIONAL TEAM LOCAL IDENTIFIER | CARE PROFESSIONAL TEAM LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL TEAM IDENTIFIER within a Health Care Provider and may be assigned automatically by the computer system. | max an20 | | | All to identify referral | Used to uniquely identify a referral | R | | | |
| C102010 | SERVICE OR TEAM | The type of community service or team that | an2 | 01 | Appliances Service | All to | Required for reporting on the basis of | М | | | |
| | TYPE REFERRED TO | the patient has been referred into. | | 02 | Arts Therapy Service | analyse by | Service Types | | | | |
| | (COMMUNITY CARE) | | | 03 | Cancer Service | data item | | | | | |
| | | | | 04 | Cardiac Service | | | | | | |
| | | | | 05 | Community Dental Service | _ | | Mandatory/ Required/ Optional | | | |
| | | | | 06 | Community Paediatrics Service | 4 | | | | | |
| | | | | 07 09 | Continence Service Counselling Service | - | | | | | |
| | | | | 10 | Dermatology Service | - | | | | | |
| | | | | 11 | Diabetes Service | | | | | | |
| | | | | 12 | District Nursing Service | 1 | | | | | |
| | | | | 13 | Ear Nose and Throat Service | | | | | | |
| | | | | 14 | End of Life Care Service | | | | | | |
| | | | | 15 16 | Gastrointestinal Service Health Visiting Service | 4 | | | | | |
| | | | | 17 | Hearing Service | - | | | | | |
| | ĺ | | | 18 | Intermediate Care Service | 1 | | | | | |
| | | | | 19 | Long Term Conditions Case Management Service | | | | | | |
| | | | | 20 | Musculoskeletal Service | _ | | | | | |
| | I | | | 21 | Neurology Service | _ | | | | | |
| | | | | 22 | Nutrition and Dietetics Service | 1 | 1 | | | | |
| | | | | | | _ | | | | | |
| | | | | 23 | Occupational Therapy Service | | | | | | |
| | | | | 23 24 | Orthoptist Service |] | | | | | |
| | | | | 23 | | | | | | | |

| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory Required/ Optional |
|----------------------------------|--|--|-----------------------|------------------|---|--|---|------------------------------------|
| | | | | | | | | |
| | | | | 28 | Public Health and Lifestyle Service | | | |
| | | | | 29 | Rehabilitation Service | | | |
| | | | | 30 | Respiratory Service | | | |
| | | | | 31 | Rheumatology Service | | | |
| | | | | 32 | School Nursing Service | | | |
| | | | | 33 | Speech and Language Therapy Service | | | |
| | | | | 34 | Vulnerable Children's Service | | | |
| | | | | 35 | Vulnerable Adult's Service | | | |
| | | | | 36 | Respite Care Service | | | |
| | | | | 37 | Clinical Psychology Service | | | |
| | | | | 38 | Children's Community Nursing Service | | | |
| | | | | 39 | Diagnostic Service | | | |
| | | | | 40 | Treatment Room Nursing Service | | | |
| | | | | 41 | Haematology Service | | | |
| | | | | 42 | Phlebotomy Service | | | |
| | | | | 43 | Tissue Viability Service | | | |
| | | | | 44 | Family Support Service | | | |
| | | | | 45 | Integrated Multi-Disciplinary Team (jointly commissioned) | | | |
| c102020 | REFERRAL CLOSURE DATE | The date the Referral Request to a Health Care Provider's Service was closed by the Health Care Provider's Service. The overarching referral may remain open if another service or team involved in the same referral is still actively treating the patient. | an10 (CCYY-MM- DD) | | | All to analyse between data item and other events | To support community contract reporting requirements around issuance of Discharge Letters within 24 hours of discharge. | R |
| 102030 | REFERRAL REJECTION DATE | The date the Referral Request to a Health Care Provider's Service was rejected by the Health Care Provider's Service. The overarching referral may remain open if another service or team involved in the same referral is still actively treating the patient. | an10 (CCYY-MM- DD) | | | All to analyse between data item and other events | To support community contract reporting requirements around issuance of Discharge Letters within 24 hours of discharge. | R |
| 102040 | REFERRAL CLOSURE REASON | The reason that a Referral Request has been closed. A Referral Request can be closed as a result of a Patient being discharged from the | an2 | 01 02 | Admitted elsewhere (at the same or other Health Care Provider) Treatment completed | All to analyse by data item | To analyse on the reason for rejection of a referral. | R |
| | | SERVICE. | | 03 | Moved out of the area | | | |
| | | Cancelled referrals such as those entered | | 04 | No further treatment appropriate | | | 1 |
| | | | | 05 | | | | |

| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
|----------------------------------|--|-----------------------|--------|------------------|--|-----------------|---------------------------------------|-------------------------------------|
| | | | | | | | | |
| | | within the data set. | | 06 | Patient died | | | |
| | | | | 07 | Patient requested discharge | | | |
| | | | | 08 | Referred to other speciality/service (at the same or other Health Care Provider) | | | |
| | | | | 09 | Patient refused to be seen | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|----------|------------------|--|-------------------------------------|---|-------------------------------------|
| | eating Group - CYP103 Otl | son for Referral | | | | Group-level no | tes for Data Providers: | |
| 31F10 | o other Reas | son for Referral | | | | | or Referral: To carry details of additional reas ad to a specific service. | ons why a persor |
| KML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory, Required/ Optional |
| C103902 | SERVICE REQUEST | The unique identifier for a SERVICE | max an20 | | | All to identify | Used to uniquely identify a referral | М |
| | IDENTIFIER | REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | | | | referral | | |
| 103010 | OTHER REASON FOR REFERRAL | The secondary presenting conditions or symptoms for which the patient was referred | an3 | 001 002 | Accident/Trauma Alopecia | Used for analysis of this data item | Required for measuring Quality & Performance - RTT and Response Times | М |
| (C | (COMMUNITY CARE) | to a Community Health Service. | | 003 004 | Antenatal Care Bereavement | uala ileiii | | |
| | | | | 005 | Bladder Care | | | |
| | | | | 006 | Blood Pressure | | | |
| | | | | 007 | Bowel Problems | | | |
| | | | | 008 | Cancer | | | |
| | | | | 009 | Cardiac Conditions | | | |
| | | | | 010 011 | Catheter Problems Cerebral Palsy | | | |
| | | | | 011 | Cleft Palate | | | |
| | | | | 012 | Cognitive Problems | | | |
| | | | | 014 | Colostomy Care | | | |
| | | | | 015 | Continence Problems | | | |
| | | | | 017 | Developmental Problems | | | |
| | | | | 018 | Diabetes | | | |
| | | | | 019 | Diarrhoea and Vomiting | | | |
| | | | | 020 | Dizziness/Balance Problems | | | |
| | | | | 021 | Downs Syndrome | | | |
| | | | | 022 023 | Deep Vein Thrombosis Ear Infections/Problems | | | |
| | | | | 023 | Eating Disorder | | | |
| | | | | 025 | Emotional/Behavioural Problems | | | |
| | | | | 026 | End of Life Support | | | |
| | | | | 027 | Epilepsy | | | |
| | | | | 028 | Equipment Provision | | | |
| | | | | 029 | Eustachian Tube Dysfunction | | | |
| | | | | 030 | Falls Risk | | | |
| | | | | 031 | Family Support | | | |
| | The second secon | l l | | 032 | Feeding/Swallowing Problems | 1 | | 1 |
| | | | | 033 | Foot Care/Problems | | | |

| SCCI | SCCI eating Group - CYP103 Ot | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|-----------------------|--------|--|--|-----------------|--|------------------------------------|
| | | son for Referral | | | | Group-level no | otes for Data Providers: | |
| | oo omer read | son for Referral | | | | | or Referral: To carry details of additional red to a specific service. | asons why a perso |
| KML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory Required/ Optional |
| | | | | | | | | |
| | | | | 035 036 037 | Hearing Problems/Loss Immunisation Laryngectomy | | | |
| | | | | 038 039 040 | Leg Ulcer Looked After Children Low Muscle Tone | | | |
| | | | | 041 042 043 | Lymphoedema Management Mobility Problems Musculoskeletal Problems | | | |
| | | | | 044 045 | Neurological Problems Healthy Child Pathway | | | |
| | | | | 046 047 048 | Nutrition and Dietetics Ophthalmic Problems Over 75 Assessment | | | |
| | | | | 049 050 051 | Pain/Symptom Control Parkinsons Disease Personal Hygiene | | | |
| | | | | 052 053 | Post Operative Care Pressure Ulcer | | | |
| | | | | 054 055 056 | Problems with Activities of Daily Living Psychological Conditions Rehabilitation | | | |
| | | | | 057 058 059 | Respiratory Conditions Safeguarding Skin Problems | | | |
| | | | | 060 061 | Sleep Problems Smoking Cessation | | | |
| | | | | 063 064 | Stoma Care Structural/Functional Impairment | 1 | | |
| | | | | 065 066 067 | Substance Misuse Trismus/Restricted Mouth Opening Tuberculosis | | | |
| | | | | 068 069 | Vascular Problems Vomiting/Nausea | 1 | | |
| | | | | 070 071 | Wound Care Multiple Complex Communication Difficulties | 1 | | |
| | | | | 058 059 060 061 062 063 064 065 066 067 068 069 | Safeguarding Skin Problems Sleep Problems Smoking Cessation Speech and Language Problems Stoma Care Structural/Functional Impairment Substance Misuse Trismus/Restricted Mouth Opening Tuberculosis Vascular Problems Vomiting/Nausea Wound Care | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|-----------------------|--------|------------------|--|-----------------|--|-------------------------------------|
| | eating Group - CYP103 Other Reas | son for Referral | | | | Group-level no | otes for Data Providers: | |
| | | | | | | | or Referral: To carry details of additional ned to a specific service. | easons why a person |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | | | | | |
| | | | | 073 | Haematology/Phlebotomy | | | |
| | | | | 074 | Chronic Fatigue Syndrome/Myalgic Encephalopathy | | | |
| | | | | 075 | Chronic Allergy/Immunological Problem | | | |
| | | | | 076 | Metabolic/Endocrine Disorders | | | |
| | | | | 077 | Renal Problems | | | |
| | | | | 078 | Minor Surgery | | | |
| | | | | 079 | Gastrostomy Management/Care | | | |
| | | | | 080 | Care of the Next Infant (CONI) Pathway | | | |
| | | | | 081 | Failure to Thrive | | | |
| | | | | 082 | Maternal Mood Problems | | | |
| | | | | 083 084 | Complex Social Factors Condition(s) Requiring Respite Care | _ | | |
| | | | | 084 | Other Congenital Conditions | \dashv | | |
| | | | | 086 | Blood Disorders | = | | |
| | | | | 087 | Genetic Disorders | - | | |
| | | | | 088 | Neonatal Abstinence Syndrome | - | | |
| | 1 | | | 999 | Not known | - | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|---|----------|------------------|---|--|---|-------------------------------------|
| | ating Group - CYP104 Red 4 Referral to | | | | | Group-level no | es for Data Providers: | |
| | | | | | | Referral to Treat person's referral | ment: To carry referral to treatment (RTT) de | tails for the |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C104902 | SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | All to identify referral | Used to uniquely identify a referral | М |
| C104010 | UNIQUE BOOKING REFERENCE NUMBER (CONVERTED) | The unique booking reference number assigned by the Choose and Book system when a PATIENT accepts an APPOINTMENT DATE OFFERED of an APPOINTMENT OFFER where the offer was made via the Choose and Book system. When a PATIENT accepts an APPOINTMENT DATE OFFERED, the unique booking reference number issued and used during the booking process is considered to be 'converted' i.e. an APPOINTMENT has been created and recorded; and the PATIENT has been placed on an Out-Patient Waiting List even if subsequently the PATIENT does not attend or cancels the APPOINTMENT. | n12 | | | All to identify a booking | For RTT | R |
| C104020 | PATIENT PATHWAY IDENTIFIER | An identifier, which together with the ORGANISATION CODE of the issuer, uniquely identifies a PATIENT PATHWAY. | an20 | | | All to identify a patient pathway | for RTT | R |
| C104030 | ORGANISATION CODE (PATIENT PATHWAY IDENTIFIER ISSUER) | This is the ORGANISATION CODE of the ORGANISATION issuing the PATIENT PATHWAY IDENTIFIER. Where Choose and Book has been used, the ORGANISATION CODE X09 should be used. | max an5 | | | All to identify individual | for RTT | R |
| C104040 | WAITING TIME MEASUREMENT TYPE | The type of waiting time measurement methodology which may be applied during a PATIENT PATHWAY. The methodology applied may be for one part of a PATIENT PATHWAY, such as the measurement of a REFERRAL TO TREATMENT PERIOD, or other parts of the | an2 | 01 02 09 | Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement Allied Health Professional Referral To Treatment Measurement Other Referral To Treatment Measurement Type | All to analyse this data item | To analyse the reason for rejection of a referral | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|---|--------------------|------------------|---|--|--|-------------------------------------|
| | eating Group - CYP104 Repairs 14 Referral to | | | | | Group-level no | tes for Data Providers: | |
| CIPIC | 4 Referral to | Treatment | | | | Referral to Trea person's referra | tment: To carry referral to treatment (RTT) | details for the |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C104050 | REFERRAL TO TREATMENT PERIOD START DATE | The start date of a REFERRAL TO TREATMENT PERIOD. See NHS Data Dictionary for further details and guidance | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Required for measuring quality and performance - RTT | R |
| C104060 | REFERRAL TO TREATMENT PERIOD END DATE | The end date of a REFERRAL TO TREATMENT PERIOD. See NHS Data Dictionary for further details and guidance | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Required for measuring quality and performance - RTT | R |
| C104070 | REFERRAL TO TREATMENT PERIOD STATUS | The status of an ACTIVITY (or anticipated ACTIVITY) for the REFERRAL TO TREATMENT PERIOD decided by the lead CARE PROFESSIONAL. | an2 | | The first ACTIVITY in a REFERRAL TO TREATMENT PERIOD where the First Definitive Treatment will be a subsequent ACTIVITY | All to analyse between the data item and other events | Required for measuring quality and performance - RTT | R |
| | | | | 10 | first ACTIVITY - first ACTIVITY in a REFERRAL TO TREATMENT PERIOD | | | |
| | | | | 11 | Active Monitoring end - first ACTIVITY at the start of a new REFERRAL TO TREATMENT PERIOD following Active Monitoring | | | |
| | | | | 12 | CONSULTANT or NHS Allied Health Professional Service (Referral To Treatment Measurement) referral - the first ACTIVITY at the start of a new REFERRAL TO TREATMENT PERIOD following a decision to refer directly to the CONSULTANT or NHS Allied Health Professional Service (Referral To Treatment Measurement) for a separate condition | | | |
| | | | | | Subsequent ACTIVITY during a REFERRAL TO | 1 | | |
| | | | | 20 | TREATMENT PERIOD subsequent ACTIVITY during a REFERRAL TO TREATMENT PERIOD - further ACTIVITIES anticipated | • | | |
| | | | | 21 | transfer to another Health Care Provider - subsequent ACTIVITY by another Health Care Provider during a REFERRAL TO TREATMENT PERIOD anticipated | | | |
| | | | | 30 | ACTIVITY that ends the REFERRAL TO TREATMENT PERIOD Start of First Definitive Treatment. | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|-----------------------|--------|------------------|---|-----------------|--|-------------------------------------|
| | eating Group - CYP104 R O Referral to | | | | | Group-level no | tes for Data Providers: | |
| CYP10 | J4 Keferral to | Treatment | | | | | tment: To carry referral to treatment (RTT |) details for the |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | 31 | start of Active Monitoring initiated by the PATIENT | | | |
| | | | | | start of Active Monitoring initiated by the CARE PROFESSIONAL Did not attend - the PATIENT did not attend the first CARE ACTIVITY after the referral | | | |
| | | | | 34 | decision not to treat - decision not to treat made or | | | |
| | | | | 35 | no further contact required PATIENT declined offered treatment | | | |
| | | | | 36 | PATIENT died before treatment ACTIVITY that is not part of a REFERRAL TO TREATMENT PERIOD | | | |
| | | | | 90 | after treatment - First Definitive Treatment occurred previously (e.g. admitted as an emergency from A&E or the activity is after the start of treatment) | | | |
| | | | | 91 | Active Monitoring - CARE ACTIVITY during Active Monitoring | | | |
| | | | | 92 | not yet referred - not yet referred for treatment, undergoing diagnostic tests by GENERAL PRACTITIONER before referral | | | |
| | | | | 98 | not applicable - ACTIVITY not applicable to REFERRAL TO TREATMENT PERIODS ACTIVITY where the REFERRAL TO TREATMENT | | | |
| | | | | | PERIOD STATUS is not yet known | | | |
| | | | | 99 | not yet known | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------------------|----------------------------------|--|--|---|-------------------------------------|
| | eating Group - CYP10 05 Onward | | | | | Group-level no | tes for Data Providers: | |
| | 3 Onward | Keleirai | | | | Onward Referra taken place. | l: To carry details of any onward referral of the | person which has |
| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C105902 | SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | All to identify referral | Used to uniquely identify a referral | М |
| C105010 | ONWARD REFERRAL DATE | This will be the date the patient was referred to another service, which may be in the same or a different organisation. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Required for measuring quality and performance | М |
| C105020 | ONWARD REFERRAL REASON | The reason why the patient was referred to another service, which may be in the same or a different organisation. | an2 | 01 02 03 04 96 98 | Transfer of Clinical Responsibility For Opinion Only For Diagnostic Test Only New Referral (Non Transfer) Other Onward Referral Reason Not Applicable Onward Referral Reason Not Known | All to analyse between the data item and other events | Required for measuring quality and performance | R |
| C105030 | ORGANISATION CODE (RECEIVING) | ORGANISATION CODE (RECEIVING) is the ORGANISATION CODE of the ORGANISATION that is receiving the PATIENT from another Health Care Provider. | an3 or an5 | | | Used for analysis of this data item | Required for reporting on Referral Receiver | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|--------------------------|--|--|--------------------|------------------|--------------------------|-------------------------------------|---|-------------------------------------|
| | 01 Care Contac | | | | | | tes for Data Providers: | |
| | | | | | | Care Contact: T place as part of | o carry details of any contacts with a person a referral. | which have taken |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| XML Schema Element | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| Name | | | | | | | | |
| | | | | | | | | |
| C201903 | CARE CONTACT IDENTIFIER | The CARE CONTACT IDENTIFIER is used to uniquely identify the CARE CONTACT within the Health Care Provider. | max an20 | | | Uniquely identify a care | Required for reporting on Care Activities | М |
| | | It would normally be automatically generated by the local system upon recording a new Care Contact, although could be manually assigned. | | | | contact | | |
| C201902 | SERVICE REQUEST | The unique identifier for a SERVICE REQUEST. | max an20 | | | All to identify referral | Used to uniquely identify a referral | M |
| | | It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | | | | | | |
| C201010 | CARE PROFESSIONAL TEAM LOCAL IDENTIFIER | CARE PROFESSIONAL TEAM LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL TEAM IDENTIFIER within a Health Care Provider and may be | max an20 | | | All to identify professional | Used to uniquely identify a professional team | R |
| | | assigned automatically by the computer system. | | | | team | | |
| C201020 | CARE CONTACT DATE | The date on which a Care Contact took place, or, if cancelled, was scheduled to take place. | an10 CCYY-MM-DD | | | All to analyse between the | Required for reporting on Care Activities, Performance of Care Professionals | М |
| | | This should be recorded in the eGIF Date format CCYY-MM-DD. | | | | data item and other events | | |
| C201030 | CARE CONTACT TIME | The time at which a Care Contact took place. | an8 HH:MM:SS | | | All to analyse between the | To allow measurement waiting times between referral and first appointment for | R |
| | | The time should be recorded using the 24 hour clock format in eGIF format i.e. hh:mm:ss. | | | | data item and other events | Priority/Urgent appointments. | |

| SCCI | SCCI eating Group - CYP201 Care | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|------------|------------------|--|---------------------------------|--|-------------------------------------|
| | 01 Care Conta | | | | | | tes for Data Providers: o carry details of any contacts with a person a referral. | which have taken |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C201912 | ORGANISATION CODE (CODE OF COMMISSIONER) | ORGANISATION CODE (CODE OF COMMISSIONER) is the ORGANISATION CODE of the Organisation commissioning health care. The NHS England document "Who pays? Determining responsibility for payments to providers" sets out a framework for establishing responsibility for commissioning an individual's care within the NHS, (i.e. determining who pays for a PATIENT's care.) The document includes information on the following: "General Rules "Applying the rules to Clinical Commissioning Group commissioned services "Exceptions to the general rules "Examples to help clarify the boundaries of responsibility between commissioning Organisations. For further information on this document contact NHS England at "Contact us". ORGANISATION CODE (CODE OF COMMISSIONER) will be replaced with ORGANISATION IDENTIFIER (CODE OF COMMISSIONER), when it has been approved for use in national information standards. | an3 or an5 | | | Used to analyse by commissioner | Required for identifying the Commissioner responsible for payment | R |
| C201040 | ADMINISTRATIVE CATEGORY CODE | This is recorded for PATIENT ACTIVITY. A PATIENT who is an Overseas Visitor does not qualify for free NHS healthcare and can choose to pay for NHS treatment or for private treatment. If they pay for NHS treatment then they should be recorded as NHS PATIENTS. The PATIENT'S ADMINISTRATIVE CATEGORY CODE may change during an episode or spell. For example, the PATIENT may opt to change from NHS to private health care. In this case, the start and end dates for each new ADMINISTRATIVE CATEGORY PERIOD (episode or spell) should be recorded. If the ADMINISTRATIVE CATEGORY CODE changes during a Hospital Provider Spell the ADMINISTRATIVE CATEGORY CODE (ON ADMISSION) is used to derive the 'Category of PATIENT' for Hospital Episode Statistics (HES). The category 'amenity PATIENT' is only applicable to PATIENTS using a Hospital Bed. | an2 | 01 02 03 04 | NHS PATIENT, including Overseas Visitors charged under the National Health Service (Charges to Overseas Visitors) Regulations 1989 (as amended by Statutory Instrument) Private PATIENT, one who uses accommodation or services authorised under the National Health Service Act 2006 Amenity PATIENT, one who pays for the use of a single room or small ward in accordance with the National Health Service Act 2006 Category II PATIENT, one for whom work is undertaken by hospital medical or dental staff within category II as defined in paragraph 37 of the Terms and Conditions of Service of Hospital Medical and Dental Staff. | category | Used to analyse different outcome depending on administrative category | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|--------|------------------|---|-------------------------------------|--|-------------------------------------|
| | eating Group - CYP201 Care O1 Care Conta | | | | | Group-level no | ites for Data Providers: | |
| 011 20 | or care coma | | | | | Care Contact: T place as part of | o carry details of any contacts with a person v a referral. | vhich have taken |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | 98 | Not applicable | | | |
| | | | | 99 | Not known: a validation error | | | |
| C201050 | CLINICAL CONTACT DURATION OF CARE CONTACT | The total duration of the direct clinical contact at CARE CONTACT in minutes, excluding any administration time prior to or after the CARE CONTACT and the CARE PROFESSIONAL's travelling time to the CARE CONTACT. CLINICAL CONTACT DURATION OF CARE CONTACT includes the time spent on the different CARE ACTIVITIES that may be performed in a single CARE CONTACT. The duration of each CARE ACTIVITY is recorded in CLINICAL CONTACT DURATION OF CARE ACTIVITY. This should be recorded in minutes. | max n4 | | | All to analyse of the data item | Required for reporting on Care Activities, Performance of Care Professionals | R |
| C201060 | CONSULTATION TYPE | This indicates the type of consultation for a SERVICE. | an2 | 01 | Initial Consultation Follow-up Consultation | All to analyse of the data item | Needed for Currency & Pricing and Capacity Planning | R |
| | CARE CONTACT | The person who was the subject of the Care Contact. | an2 | 01 | Patient | All to analyse of | Required for Reporting on Quality and Performance | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|---|--------|--|---|-------------------------------------|--|-------------------------------------|
| | eating Group - CYP201 Care O1 Care Conta | | | | | Group-level no | tes for Data Providers: | |
| | | | | | | Care Contact: T place as part of | o carry details of any contacts with a person a referral. | which have taken |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C201080 | CONSULTATION MEDIUM | Identifies the communication mechanism used to relay information between the CARE PROFESSIONAL and the PERSON who is the subject of the consultation, | an2 | 01 02 | Face to face communication Telephone | All to analyse of the data item | Required for Reporting on Quality and Performance | R |
| | | during a CARE ACTIVITY. The telephone or telemedicine consultation should directly support diagnosis and care planning and must replace a face to face Out-Patient Attendance Consultant, Clinic Attendance Nurse or Clinic Attendance Midwife, types of CARE ACTIVITY. A record of the telephone or telemedicine consultation must be retained in the | | 03 04 05 06 98 | Telemedicine web camera Talk type for a person unable to speak Email Short Message Service (SMS) - Text Messaging Other | | | |
| C201909 | ACTIVITY LOCATION TYPE CODE | The type of physical LOCATION where PATIENTS are seen or where SERVICES are provided or from which requests for services are sent. | an3 | A01 A02 A03 A04 B01 B02 C01 C02 C03 D01 D02 D03 E01 E02 E03 E04 E99 | Patient main residence or related location Patient's Home Carer's Home Patient's Workplace Other Patient Related Location Health Centre premises Primary Care Health Centre Polyclinic General Medical Practitioner and Ophthalmic Medical Practitioner Premises General Medical Practitioner Practice Dental Practice Ophthalmic Medical Practitioner premises Walk In Centres, Out of Hours Premises and Emergency Community Dental Services Walk In Centre Out of Hours Centre Cut of Hours Centre Locations on Hospital Premises Out-Patient Clinic Ward Day Hospital Accident and Emergency or Minor Injuries Departme Other departments | the data item | Required for reporting on Care Activities, Performance and Pricing | R |
| | | | | F01 G01 G02 G03 | Hospice premises Hospice Nursing and Residential Homes Care Home Without Nursing Care Home With Nursing Children's Home | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|-----------------------|--------|-------------------|---|---------------------|---|-------------------------------------|
| | eating Group - CYP201 Care O1 Care Conta | | | 1 | | Group-level no | tes for Data Providers: | |
| CTPZ | of Care Contac | ct | | | | | o carry details of any contacts with a person | on which have taken |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | G04 | Integrated Care Home Without Nursing and Care Home With Nursing | | | |
| | | | | H01 | Day Centre premises Day Centre Resource Centre premises | | | |
| | | | | J01 K01 | Resource Centre Dedicated Facilities for Children and Families Sure Start Children's Centre | - | | |
| | | | | K02 | Child Development Centre Educational, Childcare and Training Establishments School | - | | |
| | | | | L02 L03 L04 | Further Education College University Nursery Premises | - | | |
| | | | | L05 L06 L99 | Other Childcare Premises Training Establishments Other Educational Premises Justice and Home Office premises | - - | | |
| | | | | M01 M02 M03 | Prison Probation Service Premises Police Station / Police Custody Suite | = | | |
| | | | | M04 M05 | Young Offenders Institute Immigration Removal Centre Public locations Street or other public open space | | | |
| | | | | N02 N03 N04 | Other publicly accessible area or building Voluntary or charitable agency premises Dispensing Optician premises | <u> </u> | | |
| | | | | N05 X01 | Dispensing Pharmacy premises Other Locations Other locations not elsewhere classified | | | |

| SCCI | SCCI eating Group - CYP201 Care | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|---|-----------------|-----------------------|---|-------------------------------------|--|-------------------------------------|
| | 01 Care Conta | | | | | Group-level no | tes for Data Providers: | |
| | | | | | | Care Contact: T place as part of | o carry details of any contacts with a person (a referral. | which have taken |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C201906 | SITE CODE (OF TREATMENT) | SITE CODE (OF TREATMENT) is the ORGANISATION SITE CODE for the ORGANISATION SITE where the PATIENT was treated. This identifies the site within the ORGANISATION on which the PATIENT was treated, since facilities may vary on different hospital sites. The code recorded should always be the national code; if the treatment is sub-commissioned to another provider, the site code used should be that of the provider actually carrying out the work. If the Site Code is not available and only the Organisation Code is available then this field should contain the Organisation Code suffixed with '00' as the site code. | min an5 max an9 | | | All to analyse of the data item | Required for reporting on Care Activities, Performance and Pricing | R |
| C201090 | GROUP THERAPY INDICATOR | An indicator of whether a Care Activity was delivered as Group Therapy. Group Therapy is a SESSION where more than one PATIENT attends at the same time, to see one or more CARE PROFESSIONALS. Clinical notes are recorded in each individual PATIENT's casenotes. | an1 | N Z | Care Activity delivered as Group Therapy Care Activity delivered individually Not known if the activity was group therapy | All to analyse of the data item | Required to identify whether activities undertaken for the patient are on a one-to- one basis or delivered as group therapy to multiple patients at the same time. | R |
| C201100 | ATTENDED OR DID NOT ATTEND CODE | Indicates whether an APPOINTMENT for a CARE CONTACT took place and if the APPOINTMENT did not take place it whether advanced warning was given. | an1 | 5 6 7 2 3 | Attended on time or, if late, before the relevant CARE PROFESSIONAL was ready to see the PATIENT Arrived late, after the relevant CARE PROFESSIONA was ready to see the PATIENT, but was seen PATIENT arrived late and could not be seen APPOINTMENT cancelled by, or on behalf of, the PATIENT Did not attend - no advance warning given APPOINTMENT cancelled or postponed by the Health Care Provider | the data item | Required for reporting on number of scheduled activities that did not take place. For reporting on cancellations for clinical and non clinical reasons. For reporting on cancellations by Provider and by Patient. | R |

| SCCI | SCCI eating Group - CYP201 Care | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|--------------------|------------------|--------------------------|--|---|-------------------------------------|
| | 01 Care Conta | | | | | | otes for Data Providers: To carry details of any contacts with a person of a referral. | which have taken |
| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C201110 | EARLIEST REASONABLE OFFER DATE | It is the date of the earliest of the Reasonable Offers made to a PATIENT for an APPOINTMENT or Elective Admission. It should only be included on the Commissioning Data Sets where the PATIENT has declined at least two Reasonable Offers, and a Patient Pause is to be applied to the length of wait calculation performed by the Secondary Uses Service. Patient Cancellations Where, for any reason, a PATIENT cancels or does not attend an APPOINTMENT or an OFFER OF ADMISSION the EARLIEST REASONABLE OFFER DATE for the rearranged APPOINTMENT or OFFER OF ADMISSION will be the EARLIEST REASONABLE OFFER DATE of the cancelled APPOINTMENT or OFFER OF ADMISSION. Provider Cancellations Where, for any reason, any Health Care Provider cancels and re-arranges an APPOINTMENT or an OFFER OF ADMISSION, the EARLIEST REASONABLE OFFER DATE for the re-arranged APPOINTMENT or OFFER OF ADMISSION will be the date of the earliest Reasonable Offer made following the cancellation. Patients who are unavailable Where a PATIENT makes themself unavailable for a longer period of time, for example a PATIENT who is a teacher who wishes to delay their admission until the summer holidays, making a Reasonable Offer may be inappropriate. In these circumstances, so long as the Health Care Provider could have made at least two Reasonable Offers, the EARLIEST REASONABLE OFFER DATE will be the date of the earliest Reasonable Offer that the provider could have offered the PATIENT. This must be communicated to the PATIENT. | an10 ccyy-mm-dd | | | All to analyse between the data item and other events | Required for measuring Quality & Performance - RTT | R |
| C201120 | EARLIEST CLINICALLY APPROPRIATE DATE | The earliest DATE that it was clinically appropriate for an ACTIVITY to take place. | an10 ccyy-mm-dd | | | All to analyse between the data item and other events | For RTT | R |
| C201130 | CARE CONTACT CANCELLATION DATE | The date that a Care Contact was cancelled by the Provider or Patient. | an10 ccyy-mm-dd | | | All to analyse between the data item and other events | Required for reporting on number of scheduled activities that did not take place. | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------------------|------------------|--|--|---|-------------------------------------|
| | eating Group - CYP201 Care O1 Care Contac | | | | | | otes for Data Providers: To carry details of any contacts with a person varieferral. | vhich have taken |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C201140 | CARE CONTACT CANCELLATION REASON | The reason that a Care Contact was cancelled. | an2 | 01 | Cancelled for Clinical Reasons Cancelled for Non-clinical Reasons | All to analyse between the data item and other events | To monitor reasons for rescheduled appointments and for RTT | R |
| C201150 | REPLACEMENT APPOINTMENT DATE OFFERED | The replacement appointment date offered by the provider to the patient following the cancellation of an appointment by the SERVICE. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | This is required to calculate whether a new appointment was offered for a date within 28 calendar days of the cancellation of an appointment for non clinical reasons | R |
| C201160 | REPLACEMENT APPOINTMENT BOOKED DATE | The date that a replacement appointment was booked following the cancellation of an appointment with the patient by the SERVICE. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | This is required to calculate whether a new appointment was offered within 5 working days of the cancellation of an appointment for non clinical reasons | R |

| SCCI | SCCI ating Group - CYP202 Car | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|----------|--|--|---|--|-------------------------------------|
| | | | | | | Group-level no | tes for Data Providers: | |
| CTP20 | 2 Care Activi | ty | | | | | carry details of any activities which have tal | ten place as part of |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C202904 | CARE ACTIVITY IDENTIFIER | The unique identifier for a CARE ACTIVITY. It would normally be automatically generated by the local system upon recording a new activity, although could be manually assigned. | max an20 | | | Uniquely identify a care activity | Required for reporting on Care Activities | М |
| C202903 | CARE CONTACT IDENTIFIER | The CARE CONTACT IDENTIFIER is used to uniquely identify the CARE CONTACT within the Health Care Provider. | max an20 | | | Uniquely identify a care contact | Required for reporting on Care Activities | М |
| | | It would normally be automatically generated by the local system upon recording a new Care Contact, although could be manually assigned. | | | | | | |
| C202010 | COMMUNITY CARE ACTIVITY TYPE CODE | The type of Care Activity performed during a Care Contact by a CARE PROFESSIONAL. | an2 | 01 02 03 04 05 06 07 08 09 10 11 | Administering Tests Assessment Clinical Intervention Counselling, Advice, Support Patient Specific Health Promotion Multidisciplinary Team Review Supporting Another Clinician Health Visitor New Birth Visit Health Visitor Health Review (6-8 weeks) Health Visitor Health Review (1 year) Health Visitor Health Review (2-2.5 years) Health Visitor Formal handover to School Nursing Service (4-5 years) Other | All to analyse of the data item | Required for reporting on Care Activities | М |
| C202020 | CARE PROFESSIONAL LOCAL IDENTIFIER | CARE PROFESSIONAL LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL IDENTIFIER within a Health Care Provider and may be assigned automatically by the computer system. | max an20 | 5. | | Uniquely identify a care professional | Uniquely identify a care professional | R |

| SCCI | SCCI ating Group - CYP202 Car | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|------------------|------------------|--|--|--|-------------------------------------|
| | 2 Care Activi | | | | | Group-level notes for Data Providers: Care Activity: To carry details of any activities which have taken a contact with a person. | | en place as part of |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C202030 | CLINICAL CONTACT DURATION OF CARE ACTIVITY | The duration of a CARE ACTIVITY in minutes, excluding any administration time prior to or after the CARE ACTIVITY and the CARE PROFESSIONAL's travelling time to the LOCATION where the CARE ACTIVITY was provided. This is calculated from the Start Time and End Time of the CARE ACTIVITY. | max n4 | | | | Required for reporting on Care Activities, Performance of Care Professionals | R |
| C202040 | PROCEDURE SCHEME IN USE | The code scheme basis of a procedure. | an2 | 04 05 06 | Read Coded Clinical Terms Version 2 Read Coded Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine | All for analysis of the data item | Required for reporting on data quality differences between coding schemes | R |
| C202050 | CODED PROCEDURE (CLINICAL TERMINOLOGY) | A unique identifier for a procedure from a specific clinical terminology. | min an5 max an18 | | Clinical Terms (SNOMED CT®) | | Required for analysis of the outcomes and activity between different activities or results | R |
| C202060 | FINDING SCHEME IN USE | The code scheme basis of a procedure. | an2 | 01 02 03 | ICD-10 Read Coded Clinical Terms Version 2 Read Coded Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | All for analysis of the data item | Required for analysis of the outcomes and activity between different activities or results | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|---|------------------|------------------|--------------------------|-----------------------------------|--|-------------------------------------|
| | ating Group - CYP202 Ca | | | | | Group-level no | tes for Data Providers: | |
| CYPZU | 2 Care Activ | ity | | | | | carry details of any activities which have take | n place as part o |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | | Mandatory/ Required/ Optional |
| C202070 | CODED FINDING (CODED CLINICAL ENTRY) | A unique identifier for a finding from a specific classification or clinical terminology. | min an4 max an18 | | | All for analysis of the data item | Required for analysis of the outcomes and activity between different activities or results | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|--|--|---|--|--|--|---|--|
| ating Group - CYP202 Ca | re Activity | | | | | | |
| 2 Care Activ | ity | | | | Care Activity: To | carry details of any activities which have take | en place as part of |
| Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| OBSERVATION SCHEME IN USE | The code scheme basis of an observation. | an2 | 01 02 03 | Read Coded Clinical Terms Version 2 Read Coded Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | All for analysis of the data item | Required for analysis of the outcomes and activity between different activities or results | R |
| CODED OBSERVATION (CLINICAL TERMINOLOGY) | A unique identifier for an observation from a specific clinical terminology. | min an5 max an18 | | | All for analysis of the data item | Required for analysis of the outcomes and activity between different activities or results | R |
| OBSERVATION VALUE | The numeric value resulting from a clinical OBSERVATION. | max an10 | | | All for analysis of the data item | Used to compare outcomes between different comparable measurements | R |
| UCUM UNIT OF MEASUREMENT | The unit of measurement used to measure the result of a clinical OBSERVATION. See http://unitsofmeasure.org/trac/. | max an10 | | | All for analysis of the data item | Used to compare outcomes between different comparable measurements | R |
| | Data Item Name (Data Dict Element) OBSERVATION SCHEME IN USE CODED OBSERVATION (CLINICAL TERMINOLOGY) OBSERVATION VALUE | Data Item Name (Data Dict Element) Data Item Description OBSERVATION SCHEME IN USE A unique identifier for an observation from a specific clinical terminology. CODED OBSERVATION (CLINICAL TERMINOLOGY) DBSERVATION VALUE The numeric value resulting from a clinical OBSERVATION. UCUM UNIT OF MEASUREMENT The unit of measurement used to measure the result of a clinical OBSERVATION. See | Data Item Name (Data Item Description Format Data Item Name (Data Dict Element) DBSERVATION SCHEME IN USE A unique identifier for an observation. A unique identifier for an observation from a specific clinical terminology. A unique identifier for an observation from a specific clinical terminology. The numeric value resulting from a clinical OBSERVATION (OBSERVATION) DBSERVATION VALUE The numeric value resulting from a clinical observation. The unit of measurement used to measure the result of a clinical OBSERVATION. See | Data Item Name (Data Dict Element) Data Item Description Data Item Description Format National Code National Code The code scheme basis of an observation. CODED OBSERVATION SCHEME IN USE A unique identifier for an observation from a specific clinical terminology. CODED OBSERVATION Specific clinical terminology. The numeric value resulting from a clinical OBSERVATION. DESCRIPTION VALUE The numeric value resulting from a clinical OBSERVATION. DESCRIPTION OBSERVATION The unit of measurement used to measure the result of a clinical OBSERVATION. See | Data Item Name (Data Item Description Format Code Definition Code Definition (Data Dict Element) Data Item Description Format Code Definition | Data Item Name (Data Item Description Format National Code Definition Info Req Ref Data Item Description Format Code National Code Definition Info Req Ref | 2 Care Activity Data Item Name (Data Item Description Format National Code Definition Info Req (Data Dict Element) The code scheme basis of an observation. All for analysis of the outcomes and of the data item All for analysis outcomes between All for analysis of the outcomes between All for analysis of the outcomes and other activities or results All for analysis outcomes All for analysis outcomes between All for analysis of the outcomes between All for analysis of the outcomes between All for analysis of the outcomes between All for analysis of the outcomes between All for analysis of the outcomes between All for analysis of the outcomes All for analysis of the outcomes All for analysis Outcomes All for analysis Outcomes All for analysis Outcomes All for analysis Outcomes All for analysis Outcomes All for analysis Outcomes All for analysis Outcome |

| - Anti-or Repe | eating Group - CYP301 Grou | | | | | | | |
|---------------------------|--|--|--------------------|----------|----------------------------------|--|---|-----------------------|
| CYP30 | 1 Group Sess | ion | | | | Group-level no | tes for Data Providers: | |
| | or oup coo | | | | | | : To carry details of any group sessions which oup of people during the reporting period. | h have been |
| | | | | | | | should include details of all Group Sessions . Cancelled Group Sessions should NOT be | |
| | | | | | | This data group | is not linked to the rest of the data set at pati | ent level. |
| XML | Data Item Name | Data Item Description | Format | National | National Code Definition | Info Req | Information Requirements | Mandatory/ |
| Schema Element Name | (Data Dict Element) | | | Code | | Ref | (Purpose) | Required/ Optional |
| | | | | | | | | |
| C301010 | GROUP SESSION IDENTIFIER | The GROUP SESSION IDENTIFIER is used to uniquely identify the GROUP SESSION within the Health Care Provider. | max an20 | | | Uniquely identify a group session | Required for reporting on Care Activities | М |
| | | It would normally be automatically generated by the local system upon recording a new Group Session, although could be manually assigned. | | | | | | |
| | | This may be the same as the Community Care Contact Identifier depending upon the local system. | | | | | | |
| | | The date that a Court Court of the last of | 10 | | | All to sook on | Description of Court Authorities | <u> </u> |
| C301020 | GROUP SESSION DATE | The date that a Group Session took place, or, if cancelled, was scheduled to take place. Where a Group Session spans multiple days the | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Required for reporting on Care Activities, Performance of Care Professionals | М |
| | | Start Date should be reported here. | | | | other events | | |
| | | This should be reported in eGIF date format CCYY-MM-DD. | | | | | | |
| C301912 | ORGANISATION CODE (CODE OF COMMISSIONER) | This is the ORGANISATION CODE of the ORGANISATION commissioning health care. | an3 or an5 | | | Used to analyse by commissioner | Required for reporting on Commissioning Organisation | M |
| | , | This should always be the ORGANISATION CODE of the original commissioner for Commissioning Data Sets to support Payment by Results. | | | | | | |
| | | The Department of Health document "Who pays? Establishing the Responsible Commissioner" sets | | | | | | |
| C301030 | CLINICAL CONTACT DURATION OF GROUP SESSION | The duration of a Group Session in minutes, excluding any administration time prior to or after the Group Session and the CARE PROFESSIONAL's travelling time to the LOCATION where the Group Session was provided. | max n4 | | | Used for analysis of data item | Required for reporting on Care Activities, Performance of Care Professionals | R |
| C301040 | GROUP SESSION TYPE | The type of Group Session provided by a | an2 | 01 | Antenatal Session | Used for | Required for reporting on Group Activities | R |
| | CODE (COMMUNITY | Community Health Service. | | 02 | Parent/carer and Child Session | analysis of data | | |
| | CARE) | | | 03 | General Health Promotion Session | item | | |
| | | | | 04 | Screening Programme | | | 1 |
| | į. | 1 | | 05 | Stop Smoking Education Programme | | 1 | I |

| CVD20 | 1 Group Sess | ion | | | | Group-level not | es for Data Providers: | |
|-----------------|---|--|--------|------------------|---|--------------------------------------|--|------------------------|
| CTPSC | ir Group Sess | ion | | | | | | have been |
| | | | | | | | | |
| | | | | | | This data group | is not linked to the rest of the data set at patie | ent level. |
| (ML Schema | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory Required/ |
| Element Name | | | | | | | , , , , , | Optional |
| | | | | | | | | |
| | | | | 06 | Substance Misuse | | | |
| | | | | 07 | Weight Management | İ | | |
| | | | | 08 | Contraception and Sexual Health | | | |
| | | | | 98 | Other | | | |
| 301050 | NUMBER OF GROUP SESSION PARTICIPANTS | The number of persons who participated in the Group Session excluding the care professionals. | max n3 | | | Used for analysis of data item | Required for reporting on Group Activities in terms of population coverage | R |
| 301909 | ACTIVITY LOCATION TYPE CODE | The type of physical LOCATION where PATIENTS are seen or where SERVICES are provided or from | an3 | | Patient main residence or related location | Used for analysis of data | Required for reporting on Care Activities, Performance and Pricing | 0 |
| | | which requests for services are sent. | | A01 | Patient's home | item | | |
| | | | | A02 | Carer's home | | | |
| | | | | A03 | Patient's workplace | | | |
| | | | | A04 | Other patient related location | | | |
| | | | | B04 | Health Centre premises | | | |
| | | | | B01 B02 | Primary Care Health Centre Polyclinic | | Required for reporting on Group Activities in terms of population coverage Required for reporting on Care Activities, | |
| | | | | B02 | General Practitioner and Ophthalmic | • | | |
| | | | | | Medical Practitioner Premises | | | |
| | | | | C01 | General Medical Practitioner Practice | | | |
| | | | | C02 | Dental Practice | İ | | |
| | | | | C03 | Ophthalmic Medical Practitioner premises | | Required for reporting on Group Activities in a terms of population coverage Required for reporting on Care Activities, | |
| | | | | | Walk In Centres, Out of Hours Premises and Emergency Community Dental Services | | | |
| | | | | D01 | Walk In Centre | İ | | 1 |
| | | | | D02 | Out of Hours Centre | 1 | | 1 |
| | | | | D03 | Emergency Community Dental Service | İ | | |
| | | | | | Locations on Hospital Premises | | | |
| | | | | E01 | Out-Patient Clinic | | | |
| | | | | E02 | Ward | | | |
| | | | | E03 E04 | Day Hospital Accident and Emergency or Minor Injuries | | | |
| | | | | | Department | | | |
| | | | | E99 | Other departments | ł | | |
| | | | | F01 | Hospice premises | ł | | |
| | | | | F01 | Hospice | ł | | |
| | | | | G01 | Nursing and Residential Homes Care Home Without Nursing | ł | | 1 |
| | | | | | _ | ł | | |
| | | | | G02 | Care Home With Nursing | | | 1 |

| Group Sessions: To carry details of any group sessions which have be provided to a group of people during the reporting period. This data group should include details of all Group Sessions occurring reporting period. Cancelled Group Sessions should NOT be reported. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. This data group is not linked to the rest of the data set at patient level. | CVDa | Od Cuarin Cara | ion | | | | Group-level no | tes for Data Providers: | |
|--|----------------------------------|----------------|-----------------------|--------|-------|--------------------------|---------------------------------|--|-------------------------------------|
| This data group is not triked to the rest of the data set at patient level. Code Column Code | CYP3 | on Group Sess | ion | | | | Group Sessions provided to a gr | : To carry details of any group sessions woup of people during the reporting period. should include details of all Group Sessic | ns occurring within t |
| Code Ref (Purpose) Requirement Ref (Purpose) Requirement Ref (Purpose) Requirement Ref (Purpose) Requirement Ref (Purpose) Requirement Ref (Purpose) Requirement Ref (Purpose) Requirement Ref (Purpose) Ref (Purpos | | | | | | | 1 | | |
| GO4 Integrated Care Home With Nursing and Care Home With Nursing and Day Centre premises Day Centre premises H01 Day Centre Resource Centre premises J01 Resource Centre premises J01 Resource Centre premises J02 Resource Centre premises K01 Sunt Children and Families K01 Sunt Children's Centre K02 Child Development Centre Educational, Childcare and Training Establishments L01 School L02 Further Education College L03 University L04 Nursary Premises L05 Other Childcare Premises L06 Training Establishments L09 Other Childcare Premises L09 Other Childcare Premises M01 Preson M02 Probation Service premises M01 Preson M03 Police Station Premises M04 Probation Service premises M05 Immigration Removal Centre Public Locational Premises M05 Immigration Removal Centre Public Locational Premises M05 Immigration Removal Centre Public Locational N05 Immigration Removal Centre Public Locational N06 Other public Centre public open space N01 Street or other public open space N01 Street or other public open space N02 Other public contains | (ML Schema Element Name | | Data Item Description | Format | | National Code Definition | | | Mandatory/ Required/ Optional |
| G04 | | | | | | | | | |
| Day Centre premises H01 Day Centre Resource Centre premises J01 Resource Centre premises J02 Resource Centre premises Bedicated Facilities for Children and Families K01 Sure Start Children's Centre K02 Children's Centre Educational, Childcare and Training Establishments L01 School L02 Primber Education College L03 University L04 Nussery Premises L05 Children's Centre Children's Centre Premises L06 Training Establishments L07 Training Establishments L09 Other Educational Premises L09 Other Educational Premises L09 Other Educational Premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Probation Removal Centre Public locations M05 Immigration Removal Centre Public locations N06 Immigration Removal Centre Public locations N01 Street or other public open space N02 Voluntary or charitable agency premises N04 Dispensing Optician premises | | | | | G03 | Children's Home | | | |
| H01 Day Centre Resource Centre premises J01 Resource Centre premises Resource Centre premises R01 Sure Start Children and Families K01 Sure Start Children's Centre K02 Child Development Centre Educational, Childcare and Training Establishments L01 School L02 Further Education College L03 University L04 Nursery Premises L05 Other Childcare Premises Training Establishments L09 Other Childcare Premises Training Establishments L99 Other Educational Premises M01 Prison M02 Probation Service premises M03 Prioson Service premises M04 Young Offenders Institute M05 Immigration Remoral Centre Public locations N01 Street or other public open space N02 Other public open space N03 Voluntary or charitable appency premises N03 Voluntary or charitable appency premises N04 Dispensing Pharmacy premises | | | | | G04 | | 1 | | |
| Resource Centre premises John Resource Centre Dedicated Facilities for Children and Families Kot Sure Start Children's Centre Kt02 Child Development Centre Educational, Childcare and Training Establishments Lot School Lo2 Further Education College Lo3 University Lo4 Nursery Premises Lo5 Other Childcare Premises Lo6 Other Childcare Premises Lo7 Training Establishments Lo9 Other Childcare Premises Aussite and Home Office premises Mo1 Prison M02 Probation Service premises M03 Polico Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other public year season on N03 Voluntary or charitable agency premises N03 Voluntary or charitable agency premises N03 Voluntary or charitable agency premises N04 Dispensing Polician premises N05 Dispensing Polician premises | | | | | | Day Centre premises | | | |
| JO1 Resource Centre Dedicated Facilities for Children and Familles K01 Sure Start Children's Centre K02 Child Development Centre Educational, Childcare and Training Establishments L01 School L02 Further Education College L03 Juniversity L04 Nursery Premises L05 Other Childcare Premises L06 Training Establishments L19 Other Educational Premises L19 Other Educational Premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Immigration Removal Centre Public locations N02 Other public poen space N03 Voluntary or charitable agency premises N04 Dispensing Pharmacy premises N05 Dispensing Pharmacy premises | | | | | H01 | Day Centre |] | | |
| Dedicated Facilities for Children and Families | | | | | | | | | |
| Families | | | | | J01 | |] | | |
| Educational, Childcare and Training | | | | | | Families | | | |
| Educational, Childcare and Training Establishments Lo1 School L02 Further Education College L03 University L04 Nursery Premises L05 Other Childcare Premises L05 Other Childcare Premises L09 Other Educational Premises Justice and Home Office premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicity accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Optician premises | | | | | | | 1 | | |
| Establishments L01 School L02 Further Education College L03 University L04 Nursery Premises L05 Other Childcare Premises L06 Training Establishments L99 Other Educational Premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building Voluntary or charitable agency premises N04 Uspensing Optican premises N05 Dispensing Pharmacy premises | | | | | K02 | | 1 | | |
| L01 School L02 Further Education College L03 University L04 Nursery Premises L05 Other Childcare Premises L05 Other Childcare Premises Training Establishments L99 Other Educational Premises Justice and Home Office premises M01 Prison Probation Service premises M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Optician premises N06 Dispensing Pharmacy premises | | | | | | | | | |
| L02 Further Education College L03 University L04 Nursery Premises L05 Other Childcare Premises L06 Training Establishments L99 Other Educational Premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicity accessible area or building N03 Voluntary or charitable agency premises N04 Obspensing Optician premises N05 Dispensing Optician premises | | | | | L01 | | + | | |
| L03 University L04 Nursery Premises L05 Other Childcare Premises L06 Training Establishments L99 Other Educational Premises Justice and Home Office premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | I. | † | | |
| L05 Other Childcare Premises L06 Training Establishments L99 Other Educational Premises Justice and Home Office premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicity accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | † | | |
| L06 Training Establishments L99 Other Educational Premises Justice and Home Office premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or chartable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | L04 | Nursery Premises | 7 | | |
| L99 Other Educational Premises Justice and Home Office premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicily accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | L05 | Other Childcare Premises | 7 | | 1 |
| Justice and Home Office premises M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicily accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | |] | | 1 |
| M01 Prison M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | L99 | |] | | |
| M02 Probation Service premises M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | 1 | | |
| M03 Police Station / Police Custody Suite M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | 1 | | |
| M04 Young Offenders Institute M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | 4 | | |
| M05 Immigration Removal Centre Public locations N01 Street or other public open space N02 Other publicity accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | - | | |
| Public locations N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | ┥ | | |
| N01 Street or other public open space N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | IVIOS | 9 | + | | 1 |
| N02 Other publicly accessible area or building N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | N01 | | 1 | | |
| N03 Voluntary or charitable agency premises N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | | † | | 1 |
| N04 Dispensing Optician premises N05 Dispensing Pharmacy premises | | | | | | _ | ₫ | | 1 |
| N05 Dispensing Pharmacy premises | | | | | | | † | | 1 |
| | | | | | | | † | | 1 |
| | | | | | | | ₫ | | 1 |

| Start of Repo | eating Group - CYP301 Grou | p Session | | | | | | |
|---------------------------|---|---|----------|----------|--------------------------|--|---|-------------------------------------|
| CYP30 | 01 Group Sess | ion | | | | Group-level no | tes for Data Providers: | |
| | · · · · · · · · · · · · · · · · · · · | | | | | provided to a group This data group reporting period | To carry details of any group sessions which pup of people during the reporting period. should include details of all Group Sessions or Cancelled Group Sessions should NOT be r is not linked to the rest of the data set at patie | occurring within the eported. |
| XML | Data Itam Nama | Data Ham Description | Formet | National | National Code Definition | Info Dog | Information Requirements | Mandataru |
| Schema Element Name | (Data Item Name (Data Dict Element) | Data Item Description | Format | Code | National Code Definition | Info Req Ref | (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C301906 | SITE CODE (OF TREATMENT) | SITE CODE (OF TREATMENT) is the ORGANISATION SITE CODE for the ORGANISATION SITE where the PATIENT was treated. This identifies the site within the ORGANISATION on which the PATIENT was treated, since facilities may vary on different hospital sites. The code recorded should always be the national code; if the treatment is sub-commissioned to another provider, the site code used should be that of the provider actually carrying out the work. If the Site Code is not available and only the Organisation Code is available then this field should contain the Organisation Code suffixed with '00' as the site code. | | | | Used for analysis of data item | | R |
| C301060 | CARE PROFESSIONAL LOCAL IDENTIFIER | CARE PROFESSIONAL LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL IDENTIFIER within a Health Care Provider and may be assigned automatically by the computer system. | max an20 | | | All to identify care professional | Used to uniquely identify a care professional | R |
| C301905 | NHS SERVICE AGREEMENT LINE NUMBER | A number (alphanumeric) to provide a unique identifier for a line within a NHS SERVICE AGREEMENT. An NHS SERVICE AGREEMENT is a formal agreement between a commissioner ORGANISATION and one or more provider ORGANISATIONS for the provision of PATIENT care services. | an10 | | | All to identify a service agreement line | Used to uniquely identify a service agreement line | 0 |

| SCCI | SCCI | SCCI pecial Educational Need Identified | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|----------|--|---|---|--|-------------------------------------|
| | | ucational Need Identifie | ed | | | Special Educati person's Specia This group will I | otes for Data Providers: ional Need Identified: To carry details of the ch al Educational Need. be collected and submitted by a health organis person's education assessment | , , |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C401901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C401010 | SPECIAL EDUCATIONAL NEED TYPE | The type of special educational needs of a person | an2 | 01 02 03 04 05 06 07 08 | Specific Learning Disability Learning Difficulty Emotional and Behavioural Difficulty Speech and Communication Difficulty Hearing Impairment Visual Impairment Physical Disability Other Difficulty / Disability Not Stated (Person asked but declined to | 8.1.3.1 | Used to compare outcomes and provision for children/young people with disabilities or condition | М |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-----------------|---|--|----------|------------------|---|------------------------------|---|-------------------------|
| | | feguarding Vulnerability Factor | | | | Group-level no | tes for Data Providers: | |
| CYP40 | 2 Sareguard | ing Vulnerability Factor | | | | Safeguarding Vu | ulnerability Factor: to carry details of when to any safeguarding concerns | the child or young |
| | | | | | | | a number of Safeguarding Vulnerability Fad for each factor. | actors (SVFs), the |
| | | | | | | | ta may be collected and submitted by an o ld or young person with their service. | rganisation |
| XML Schema | Data Item Name (Data Dict | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ |
| Element Name | Element) | | | | | | | Optional |
| | | | | | | | | |
| C402901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C402010 | SAFEGUARDING VULNERABILITY | The type of Child Safeguarding vulnerability factors identified. | an2 | 01 | Repeat Accident and Emergency Attendances | Used for analysis of data | To monitor details of children with safeguarding concerns | М |
| | FACTORS TYPE | | | 02 | Concerning parent child interaction | item | | |
| | | | | 03 | Worrying parent behaviour / Mental Health | | | |
| | | | | 04 | concerns Worrying child behaviour | - | | |
| | | | | 05 | Self harm | - | | |
| | | | | 06 | Genital injury (excluding Female Genital Mutilation (FGM)) | | | |
| | | | | 07 | Referral from Social Services or Police | 1 | | |
| | | | | 08 | Previously known to Social Services | 1 | | |
| | | | | 09 | Significant injury in child (in the last 12 months) | 1 | | |
| | | | | 10 | Domestic abuse | 1 | | |
| | | | | 11 | History inconsistent with injuries | | | |
| | | | | 12 | Disclosure of abuse |] | | |
| | | | | 13 | Bullying | | | |
| | | | | 14 | Delay in presentation (Children with frequent minor injuries and there is a delay in presentation to medical staff) | equent | | |
| | 1 | | | 40 | | | | |
| | | 1 | | 16 | Female Genital Mutilation (FGM) | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|--------------------|----------------------|---|--|--|--|
| Start of Repea | ating Group - CYP403 Ch | nild Protection Plan | | | | | | |
| CYP40 | 3 Child Prote | ection Plan | | | | Child Protection subject to a child This group of da registering a chill Providers will ter Protection Plan. only, if the plan i Subsequently, a | Plan: to carry details of when the child or you of protection plan ta may be collected and submitted by an orgoid or young person with their service. Indicate the Child Protection Plan Start Date is still in force at the end of the reporting period second record will be provided repeating the and also adding the Child Protection Plan End | anisation placed on a Child will be populated od. |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C403901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | M |
| C403010 | CHILD PROTECTION PLAN REASON CODE | The reason the Child or Young Person is subject to an active Child Protection Plan. | an2 | 01 02 03 04 | Neglect Physical abuse Emotional abuse Sexual abuse | Used for analysis of data item | To monitor details of children on a child protection plan | М |
| C403020 | CHILD PROTECTION PLAN START DATE | The date on which a child / young person is placed on a child protection plan | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | To monitor details of children on a child protection plan | M |
| C403030 | CHILD PROTECTION PLAN END DATE | The date on which a child / young person is removed from a child protection plan | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | To monitor details of children on a child protection plan | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|----------------|------------------|---|--------------------------------------|---|-------------------------------------|
| | | Assistive Technology To Support Disability Ty Technology To Suppor | | у Туре | | Child's or Young technology is us | tes for Data Providers: g Person's assistive technology details: To get to support a disabled child or young personal tamay be collected and submitted by an orlid or young person with their service. | son. |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C404901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C404010 | ASSISTIVE TECHNOLOGY FINDING (SNOMED CT) | The SNOMED CT concept ID which is used to identify the finding relating to the Assistive Technology that a PERSON is dependent on. | min n6 max n18 | | Refer to CSDS User Guidance for recommended codes | Used for analysis of data item | To monitor data quality details of the technology type | М |

| SCCI | SCCI eating Group - CYP501 Imm | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------------------|------------------|--|--|--|-------------------------------------|
| | 11 Coded Imm | | | | | Group-level not | es for Data Providers: | |
| | | | | | | | Person's Immunisation Activity: To carry the citivity for a child or young person. | letails of coded |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C501901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C501907 | IMMUNISATION DATE | The date on which the immunisation was carried out | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | М |
| C501010 | PROCEDURE SCHEME IN USE | The code scheme basis of a procedure. | an2 | 04 05 06 | Read Coded Clinical Terms Version 2 Read Coded Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | All for analysis of the data item | Required for reporting on data quality differences between coding schemes | М |
| C501020 | IMMUNISATION PROCEDURE (CLINICAL TERMINOLOGY) | A unique identifier for an immunisation from a specific clinical terminology | min an5 max an18 | | | All for analysis of the data item | The analyse differences in the outcomes and activity depending on immunisation procedure | М |
| C501908 | ORGANISATION CODE (IMMUNISATION RESPONSIBLE ORGANISATION) | The ORGANISATION CODE of the ORGANISATION carrying out the immunisation. | max an6 | | | Used for analysis of data item | Required for reporting on Care Activities, Performance and Pricing | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|--------------------|---|---|--|--|-------------------------------------|
| | ating Group - CYP502 Im 2 Immunisat | | | | | Child or Young F | tes for Data Providers: Person's Immunisation Activity: To carry the detivity for a child or young person. | etails of |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C502901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C502907 | IMMUNISATION DATE | The date on which the immunisation was carried out | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | М |
| C502010 | CHILDHOOD IMMUNISATION TYPE (CHILDREN AND YOUNG PEOPLE'S HEALTH SERVICES) | Whether or not a child's immunisations are up to date, derived from Red Book 2009 | an3 | 010 020 030 040 050 060 070 090 100 110 120 130 140 | Diphtheria Pertussis Tetanus Polio Haemophilus influenzae type B Measles, Mumps, Rubella (MMR) Meningococcal serogroup C (MenC) Pneumococcal (PCV) Low dose Diphtheria Human papillomavirus (HPV) Rotavirus Hepatitis B (Hep B) Tuberculosis (BCG) Meningococcal serogroup B (MenB) | All for analysis of the data item | The analyse differences in the outcomes and activity depending on immunisation type | М |
| C502908 | ORGANISATION CODE (IMMUNISATION RESPONSIBLE ORGANISATION) | The ORGANISATION CODE of the ORGANISATION carrying out the immunisation. | max an6 | 130 | писти досоская загодногр в (mellb) | Used for analysis of data item | Required for reporting on Care Activities, Performance and Pricing | R |

| SCCI | SCCI | SCCI Medical History (Previous Diagnosis) | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------------------|------------------|--|--|--|-------------------------------------|
| | | History (Previous Diagnosis) | nosis) | | | Group-level not | tes for Data Providers: | |
| | , i modiodi i | nistory (i revious Diagi | 10010) | | | which are stated | To carry the details of any previous diagnoss by the patient or patient proxy or recorded in cessarily have to have been diagnosed by thata. | medical notes. |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C601901 | | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C601913 | DIAGNOSIS | The code scheme basis of the Diagnosis. | an2 | 02 | ICD-10 | Used for | To monitor data quality details of the | M |
| | SCHEME IN USE | , and the second | ï | 04 05 06 | Read Code Version 2 Read Code Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | analysis of data item | | |
| C601010 | | A unique identifier for a CLINICAL DIAGNOSIS from a specific classification or clinical terminology. | min an4 max an18 | | | All for analysis of the data item | The analyse differences in the outcomes and activity depending on previous diagnosis | М |
| C601020 | | DIAGNOSIS DATE is the PERSON PROPERTY OBSERVED DATE for the PATIENT DIAGNOSIS. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|-------------------|--|---|---|--|-------------------------------------|
| | ating Group - CYP602 O Disability | | | | | Group-level not | tes for Data Providers: | |
| 011 00 | z Disability | Турс | | | | | To carry the details of the type of disability af erception or the perception of a patient proxy | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C602901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | M |
| C602010 | the computer system. DISABILITY CODE An indication of whether a PERSON is disabled. | | 01 02 03 | Behaviour and Emotional Hearing Manual Dexterity | Used for analysis of data item | The analyse differences in the outcomes and activity depending on disability code | M | |
| | | | | 04 05 06 | Memory or ability to concentrate, learn or understand (Learning Disability) Mobility and Gross Motor Perception of Physical Danger | | | |
| | | | | 07 08 | Personal, Self Care and Continence Progressive Conditions and Physical Health (such as HIV, cancer, multiple sclerosis, fits etc) Sight | | | |
| | | | | 10 XX NN | Speech Other No Disability | | | |
| | | | | ZZ | Not Stated (Person asked but declined to provide a response) | | | |
| C602020 | DISABILITY IMPACT PERCEPTION | The patient's perception of whether their day- to-day activities are limited because of a health problem or disability which has lasted, or is expected to last, at least 12 months. | an2 | 01 | Yes – limited a lot Yes – limited a little | Used for analysis of data item | The analyse differences in the outcomes and activity depending on impact of disability | R |
| | | | | 03 | No | _ | | |
| | | 04 Prefer not to say | Prefer not to say | | | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|------------|------------------|---|--|--|-------------------------------------|
| | | wborn Hearing Screening Audiology Referral learing Screening Audi | ology Refe | erral | | Group-level no | tes for Data Providers: | |
| | | | | | | | g Screening Audiology Referral: To carry the ong newborn hearing screening are followed up | |
| | | | | | | This group may | need to be compiled from Care Activity and Di | agnosis sections |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C603901 | | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C603010 | NEWBORN HEARING | Outcome of NEWBORN HEARING | an2 | 01 | Clear response, no follow up required | 1.4 | To monitor the outcomes for those babies | R |
| | SCREENING OUTCOME | | | 02 | Clear response, targeted follow-up required | † | referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 | |
| | | | | 03 | No clear response, bilateral referral | 1 | week physical screening | |
| | | | | 04 98 | No clear response, unilateral referral | | | |
| C603020 | SERVICE REQUEST | The date on which a referral for audiology | an10 | 98 | Incomplete | 1.4.1 | Monitor outcomes from newborn hearing | R |
| | DATE (NEWBORN HEARING AUDIOLOGY) | testing was made | CCYY-MM-DD | | | | screening | · |
| C603030 | PROCEDURE DATE | The date that a NEWBORN HEARING | an10 | | | All to analyse | Analysis of date differences | R |
| | (NEWBORN HEARING AUDIOLOGY) | AUDIOLOGY TEST took place. | CCYY-MM-DD | | | between the data item and other events | | |
| C603040 | NEWBORN HEARING | The outcome of audiology testing | an2 | 01 | Hearing satisfactory | 1.4.1 | Monitor outcomes from newborn hearing | R |
| | AUDIOLOGY OUTCOME | | | 02 | Confirmed bilateral hearing loss | | screening | |
| | | | | 03 | Confirmed unilateral hearing loss | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|---|--------|------------------|--------------------------------|-----------------|--|-------------------------------------|
| | | ewborn Hearing Screening Audiology R Hearing Screening A | | erral | | Group-level no | tes for Data Providers: | |
| | | | | | | | ng Screening Audiology Referral: To carry ting newborn hearing screening are followe | |
| | | | | | | This group may | need to be compiled from Care Activity an | d Diagnosis sections |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | 04 | Diagnostic testing in progress | | | |
| | | | | 05 | Diagnostic testing pending | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|--|--------------------|----------------------|--|--|--|-------------------------------------|
| | eating Group - CYP604 Blood Spot 04 Blood Spot Res | | | | | Group-level no | tes for Data Providers: | |
| | or Blood opor no. | | | | | Blood Spot Res tests. | ult Follow up: To carry the details of the results | s of blood spot |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C604901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote number and may be assigned automatically by the computer system. | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| C604010 | BLOOD SPOT CARD COMPLETION DATE | The blood SAMPLE COLLECTION DATE for a Newborn Blood Spot Test for a Neonate. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Used to identify what date blood tests relate to. | R |
| | | | 40 | | | | | |
| C604020 | NEWBORN BLOOD SPOT TEST RESULT RECEIVED DATE | The date that a BLOOD SPOT TEST RESULT was received by a Health Care Provider from the testing laboratory. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of date differences | R |
| C604030 | NEWBORN BLOOD SPOT TEST | Result of screening for PKU | an2 | 01 | Specimen received in laboratory | 1.4 | To monitor the outcomes for those babies | R |
| | OUTCOME STATUS CODE (PHENYLKETONURIA) | | | 02 03 04 07 | Screening declined Repeat / Further sample required Condition not suspected Condition not suspected, other disorders follow up Condition suspected | | referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | |
| | | | | 09 | Not screened/screening incomplete | | | |
| C604040 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (SICKLE CELL DISEASE) | Result of screening for SCD | an2 | 01 02 03 | Specimen received in laboratory Screening declined Repeat / Further sample required | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|-------------------------------|--------|----------------------------|---|--------------------------|---|-------------------------------------|
| | eating Group - CYP604 Blood Spot 14 Blood Spot Res | | | | | Group-level no | tes for Data Providers: | |
| | | | | | | Blood Spot Res tests. | ult Follow up: To carry the details of the result: | s of blood spot |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | 04 05 | Condition not suspected Carrier | | noon proyonal accounting | |
| | | | | 06 | Sickle Cell Disease not suspected, carrier of other haemoglobin Condition not suspected, other disorders |] | | |
| | | | | 08 | follow up Condition suspected Not screened/screening incomplete | | | |
| | | | | 10 | Haemoglobin S not suspected (by DNA) No other haemoglobin/thalassemia excluded | 1 | | |
| C604050 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (CYSTIC FIBROSIS) | ATUS CODE | | 01 02 03 04 05 | Specimen received in laboratory Screening declined Repeat / Further sample required Condition not suspected Carrier | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |
| | | | | 07 | Condition not suspected, other disorders follow up Condition suspected | | | |
| C604060 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (CONGENITAL | Result of screening for CHT | an2 | 09 01 02 | Not screened/screening incomplete Specimen received in laboratory Screening declined | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 | R |
| | HYPOTHYROIDISM) | | | 03 04 07 | Repeat / Further sample required Condition not suspected Condition not suspected, other disorders | - | week physical screening | |
| | | | | 08 09 | follow up Condition suspected Not screened/screening incomplete | _ | | |
| C604070 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (MEDIUM CHAIN ACYL-COA | Result of screening for MCADD | an2 | 01 | Specimen received in laboratory Screening declined | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |
| | DEFICIENCY) | EHYDROGENASE | | 03 | Repeat / Further sample required Condition not suspected | 1 | need, prysical corecinity | |
| | | | | 05 07 | Carrier Condition not suspected, other disorders follow up | | | |

| SCCI | SCCI eating Group - CYP604 Blood Spot | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|-----------------------------|--------|--|---|--------------------------|--|-------------------------------------|
| | 04 Blood Spot Res | | | | | Group-level no | tes for Data Providers: | |
| CIPOC | 74 Blood Spot Res | suit | | | | Blood Spot Res tests. | ult Follow up: To carry the details of the result | s of blood spot |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | 08 | Condition suspected | | | |
| C604080 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (HOMOCYSTINURIA) | Result of screening for HCU | an2 | 09 01 02 03 04 07 08 | Not screened/screening incomplete Specimen received in laboratory Screening declined Repeat / Further sample required Condition not suspected Condition not suspected, other disorders follow up Condition suspected Not screened/screening incomplete | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |

| SCCI | SCCI eating Group - CYP604 Blood Spot | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|------------------------------|--------|--|--|--------------------------|--|-------------------------------------|
| | 04 Blood Spot Res | | | | | Group-level no | tes for Data Providers: | |
| | | 2411 | | | | Blood Spot Res tests. | ult Follow up: To carry the details of the result | s of blood spot |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C604090 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (MAPLE SYRUP URINE DISEASE) | Result of screening for MSUD | an2 | 01 02 03 04 07 08 | Specimen received in laboratory Screening declined Repeat / Further sample required Condition not suspected Condition not suspected, other disorders follow up Condition suspected Not screened/screening incomplete | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |
| C604100 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (GLUTARIC ACIDURIA TYPE 1) | Result of screening for GA1 | an2 | 01 02 03 04 07 08 | Specimen received in laboratory Screening declined Repeat / Further sample required Condition not suspected Condition not suspected, other disorders follow up Condition suspected Not screened/screening incomplete | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |
| C604110 | NEWBORN BLOOD SPOT TEST OUTCOME STATUS CODE (ISOVALERIC ACIDURIA) | Result of screening for IVA | an2 | 01 02 03 04 07 08 09 | Specimen received in laboratory Screening declined Repeat / Further sample required Condition not suspected Condition not suspected, other disorders follow up Condition suspected Not screened/screening incomplete | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and 6-8 week physical screening | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---|---|--------------------|------------------|--------------------------|--|--|-------------------------------------|
| | | Physical Examination (GP Delivered) al Examination (GP Delivered) | livered) | | | Group-level no | tes for Data Providers: | |
| | o illiano i liyolo | | | | | | Examination: To carry the details of the Infant ried out by the GP. | physical |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C605901 | LOCAL PATIENT IDENTIFIER (EXTENDED) | This is a number used to identify a PATIENT uniquely within a Health Care Provider. It may be different from the PATIENT's casenote | max an20 | | | All to identify individual | Used to uniquely identify an individual | М |
| | | number and may be assigned automatically by the computer system. | | | | | | |
| C605010 | INFANT PHYSICAL EXAMINATION DATE | The date that the PHYSICAL EXAMINATION of the INFANT took place | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of date differences | М |
| C605020 | INFANT PHYSICAL EXAMINATION RESULT | Whether or not a problem was detected or suspected with hips | an2 | 01 | Satisfactory | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, | R |
| | (HIPS) | Suspected with hips | | 02 | Problem Identified | | Blood Spot Screening and Newborn and | |
| | | | | 03 | Problem Suspected | | physical screening | |
| | | | | NN | Not examined | | | |
| C605030 | INFANT PHYSICAL EXAMINATION RESULT | Whether or not a problem was detected or suspected with the heart | an2 | 01 | Satisfactory | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, | R |
| | (HEART) | | | 02 | Problem Identified | | Blood Spot Screening and Newborn and | |
| | | | | 03 | Problem Suspected | | physical screening | |
| | | | | NN | Not examined | | | |
| C605040 | INFANT PHYSICAL EXAMINATION RESULT | Whether or not a problem was detected or suspected with the eyes | an2 | 01 | Satisfactory | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, | R |
| | (EYES) | suspected with the eyes | | 02 | Problem Identified | | Blood Spot Screening and Newborn and physical screening | |
| | | | | 03 | Problem Suspected | | priyologi gorooning | |
| | | | | NN | Not examined | | | |
| C605050 | INFANT PHYSICAL EXAMINATION RESULT (TESTES) | Whether or not a problem was detected or suspected with the testes | an2 | 01 | Satisfactory | 1.4 | To monitor the outcomes for those babies referred from Newborn Hearing Screening, Blood Spot Screening and Newborn and | R |
| | | | | 02 | Problem Identified | | physical screening | |
| | | | | 03 | Problem Suspected | | | |
| | 1 | | | | | | | |

| SCCI Start of Rene | SCCI | SCCI Physical Examination (GP Delivered) | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|---------------------------------------|---|------------|------------------|--------------------------|-----------------|--|-------------------------------------|
| | | al Examination (GP | Delivered) | | | Infant Physical | otes for Data Providers: Examination: To carry the details of the In rried out by the GP. | ant physical |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | NN | Not examined | | | |

| SCCI | SCCI Sissional Diagnosis | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|--|--|--------------------|------------------|---|--|---|-------------------------------------|
| Provisional | | | | | Provisional Diag | es for Data Providers: nosis: To carry the details of a provisional dia the service that they were referred to. | ignosis for a |
| Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | Linkage item | Relationship key to allow data linkage between referral and activity (this will normally be the referral identifier). | М |
| DIAGNOSIS SCHEME IN USE | The code scheme basis of a diagnosis. | an2 | 02 04 05 | ICD-10 Read Code Version 2 Read Code Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | Used for analysis of data item | To monitor data quality details of the diagnosis scheme | М |
| PROVISIONAL DIAGNOSIS (CODED CLINICAL ENTRY) | This is the provisional DIAGNOSIS of the person, from a specific classification or clinical terminology, for the main condition treated or investigated during the relevant episode of healthcare. | min an4 max an18 | | | All for analysis of the data item | The analyse differences in the outcomes and activity depending on provisional diagnosis | М |
| PROVISIONAL DIAGNOSIS DATE | The date of diagnosis. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | R |

| SCCI ting Group - CYP607 P | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|--|---|------------------|------------------|---|--------------------------------------|--|-------------------------------------|
| 7 Primary D | | | | | Primary Diagnos | tes for Data Providers: is: To carry the details of the primary diagnosvice that they were referred to. | s for a person |
| Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | Linkage item | Relationship key to allow link data linkage between referral and activity (this will normally be the referral identifier). | M |
| DIAGNOSIS SCHEME IN USE | The code scheme basis of a diagnosis. | an2 | 02 04 05 | ICD-10 Read Code Version 2 Read Code Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | Used for analysis of data item | To monitor data quality details of the diagnosis scheme | М |
| PRIMARY DIAGNOSIS (CODED CLINICAL ENTRY) | This is the primary diagnosis of the patient, from a specific classification or clinical terminology, for the main condition treated or investigated during the relevant episode of healthcare, and where there is no definitive diagnosis, the main symptom, abnormal findings or problem. | min an4 max an18 | | | All for analysis of the data item | The analyse differences in the outcomes and activity depending on primary diagnosis | М |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|--|------------------------------------|--------------------|------------------|--------------------------|--|---|-------------------------------------|
| | | | | | Primary Diagno | stes for Data Providers: sis: To carry the details of the primary dia rvice that they were referred to. | gnosis for a person |
| Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| DIAGNOSIS DATE | The date of the primary diagnosis. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | R |
| | | | | | | | |

| SCCI ting Group - CYP608 S | SCCI econdary Diagnosis | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|--|--|--------------------|------------------|--|--|---|-------------------------------------|
| 8 Secondary | | | | | Group-level no | tes for Data Providers: | |
| o occorridar j | y Diagnosis | | | | | nosis: To carry the details of a secondary diag vice that they were referred to. | nosis for a person |
| Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | |
| SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated | max an20 | | | Linkage item | les for Data Providers: nosis: To carry the details of a secondary diagraphic that they were referred to. Information Requirements (Purpose) | М |
| DIAGNOSIS SCHEME IN USE | The code scheme basis of a diagnosis. | an2 | 02 | ICD-10 | Used for analysis of data item | | М |
| | | | 04 | Read Code Version 2 | | | |
| | | | 05 | Read Code Clinical Terms Version 3 (CTV3) Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®) | | | |
| SECONDARY DIAGNOSIS (CODED CLINICAL ENTRY) | This is any other diagnosis other than the primary diagnosis, from a specific classification or clinical terminology. Multiple Secondary Diagnoses may be recorded. | min an4 max an18 | | | All for analysis of the data item | | M |
| DIAGNOSIS DATE | The date of the secondary diagnosis. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|----------------|------------------|--------------------------|-------------------------------------|---|-------------------------------------|
| | | oded Scored Assessment (Referral) Ored Assessment (Refe | rral) | | | Coded Scored As issued and complete | s for Data Providers: sessment (Referral): To carry details of scored a eted as part of a referral period where a specific person, but do not take place at a specific cont | service or team is |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C609902 | SERVICE REQUEST IDENTIFIER | The unique identifier for a SERVICE REQUEST. It would normally be automatically generated by the local system upon recording a new Referral, although could be manually assigned. | max an20 | | | Linkage item | Relationship key to allow link data linkage between referral and activity (this will normally be the referral identifier). | M |
| C609910 | CODED ASSESSMENT TOOL TYPE (SNOMED CT) | The SNOMED CT concept ID which is used to identify an ASSESSMENT in SNOMED CT. | min n6 max n18 | | | Used for analysis of data item | To monitor outcomes and activities depending on Coded Assessments | М |
| C609911 | PERSON SCORE | The observable value (score) resulting from an ASSESSMENT. | max an5 | | | Used for analysis of data item | To monitor outcomes and activities and quantify | М |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|-------------------------------|---------------------------------------|--|----------|------------------|---|-----------------------------------|--|-------------------------------------|
| | g Group - CYP610 Breastfeeding Sta | | | | | Breastfeeding S recorded at a co | tes for Data Providers: tatus: To carry details of a child's breastfeedintact. be derived from data collected routinely by h | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C610904 | CARE ACTIVITY IDENTIFIER | The unique identifier for a CARE ACTIVITY. It would normally be automatically generated by the local system upon recording a new activity, although could be manually assigned. | max an20 | | | Uniquely identify a care activity | Required for reporting on Care Activities | М |
| C610010 | BREASTFEEDING STATUS | This is the type of feed a baby is receiving | an2 | 01 02 03 | Exclusively Breast Milk Feeding Partially Breast Milk Feeding No Breast Milk Feeding at all | 1.8.1.1 | To monitor breastfeeding rates | М |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|---------------|------------------|--|-----------------------------------|--|-------------------------------------|
| | eating Group - CYP611 11 Observat | | | | | Group-level no | tes for Data Providers: | |
| 0110 | i i Observat | | | | | a contact. | carry the details of observations of a person se collected and submitted as part of the Care | |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C611904 | CARE ACTIVITY IDENTIFIER | The unique identifier for a CARE ACTIVITY. It would normally be automatically generated by the local system upon recording a new activity, although could be manually assigned. | max an20 | | | Uniquely identify a care activity | Required for reporting on Care Activities | М |
| C611010 | PERSON WEIGHT | PERSON WEIGHT is the result of the Clinical Investigation which measures the PATIENT'S Weight, where the UNIT OF MEASUREMENT is 'Kilograms (kg)'. | max n3.max n3 | | | 9.1.3.1 | To monitor whether or not a recent measurement had been taken when prescribing drugs by body weight. Also to monitor obesity | R |
| C611020 | PERSON HEIGHT IN METRES | PERSON HEIGHT IN METRES is the result of the Clinical Investigation which measures the PATIENT's Height, where the UNIT OF MEASUREMENT is 'Metres (m)'. | n1.maxn2 | | | 9.1.3.1 | To monitor growth and obesity | R |
| C611030 | PERSON LENGTH IN CENTIMETRES | PERSON LENGTH IN CENTIMETRES is the Length of the PATIENT, where the UNIT OF MEASUREMENT is 'Centimetres (cm)'. | max n2.n1 | 99.9 | The length of the patient (in centimetres) should be recorded. Default code below: Length unknown | 9.1.3.1 | To monitor growth and obesity | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|----------------|------------------|--------------------------|-----------------------------------|--|-------------------------------------|
| | | Coded Scored Assessment (Contact) CORECT ASSESSMENT (COR | ntact) | | | Coded Scored As | s for Data Providers: sessment: To carry details of scored eted as part of a specific contact. | assessments that are |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| C612904 | CARE ACTIVITY IDENTIFIER | The unique identifier for a CARE ACTIVITY. It would normally be automatically generated by the local system upon recording a new activity, although could be manually assigned. | max an20 | | | Uniquely identify a care activity | Required for reporting on Care Activities | М |
| C612910 | CODED ASSESSMENT TOOL TYPE (SNOMED CT) | The SNOMED CT concept ID which is used to identify an ASSESSMENT in SNOMED CT. | min n6 max n18 | | | Used for analysis of data item | To monitor outcomes and activities depending on Coded Assessments | М |
| C612911 | PERSON SCORE | The observable value (score) resulting from an ASSESSMENT. | max an5 | | | Used for analysis of data item | To monitor outcomes and activities and quantify | M |

| SCCI | SCCI eating Group - CYP613 And | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------------------|------------------|--|--|---|-------------------------------------|
| | | s Self-Assessment | | | | Group-level note | s for Data Providers: | |
| | , | | | | | | Assessment: To carry details o are issued by the community l | |
| | | | | | | This data group is | not linked to the rest of the da | ita set at patient level. |
| | | | | | | There are currentl CYP613AnonSelf. | y no assessment tools in scop Assessment. | e for |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C613010 | ASSESSMENT TOOL COMPLETION DATE | SELF ASSESSMENT COMPLETION DATE is the DATE the completed ASSESSMENT was received. | an10 CCYY-MM-DD | | | All to analyse between the data item and other events | Analysis of times differences | М |
| C613910 | CODED ASSESSMENT TOOL TYPE (SNOMED CT) | The SNOMED CT concept ID which is used to identify an ASSESSMENT in SNOMED CT. | min n6 max n18 | | | Used for analysis of data item | To monitor outcomes and activities depending on Coded Assessments | М |
| C613911 | PERSON SCORE | The observable value (score) resulting from an ASSESSMENT. | max an5 | | | Used for analysis of data item | To monitor outcomes and activities and quantify | М |
| C613909 | ACTIVITY LOCATION | The type of physical LOCATION where | an3 | | Patient main residence or related location | Used for analysis | To monitor self-assessment | R |
| C613909 | TYPE CODE | PATIENTS complete the self assessment. | ans | | | of data item | outcomes and completion | K |
| | | | | A01 A02 | Patient's home Carer's home | 1 | rates depending on location | |
| | | | | A03 | Patient's workplace | 1 | | |
| | | | | A04 | Other patient related location Health Centre premises | 4 | | |
| | | | | B01 | Primary Care Health Centre | | | |
| | | | | B02 | Polyclinic | | | |
| | | | | | General Practitioner and Ophthalmic Medical Practitioner Premises | | | |
| | | | | C01 | General Medical Practitioner Practice | 1 | | |
| | | | | C02 C03 | Dental Practice Ophthalmic Medical Practitioner premises | 1 | | |
| | | | | 000 | Ophthalinic Medical Fractitioner premises | | | |
| | | | | | Walk In Centres, Out of Hours Premises and Emergency Community Dental | | | |
| | | | | | Services | | | 1 |
| | | | | D01 | Walk In Centre | | | |
| | | | | D02 D03 | Out of Hours Centre Emergency Community Dental Service | 4 | | |
| | | | | טטט | Locations on Hospital Premises | 1 | | |
| | | | | E01 | Out-Patient Clinic | 1 | | ĺ |

| Anonymous Self-Assessment Anonymous Self-Assessments that a This data group is n There are currently CYP613AnonSelfAs | for Data Providers: sessment: To carry details are issued by the community | |
|--|--|-----------------------|
| Anonymous Self-As assessments that a This data group is n There are currently CYP613AnonSelfAs | | |
| assessments that a This data group is n There are currently CYP613AnonSelfAs | | |
| This data group is n There are currently CYP613AnonSelfAs | , | |
| There are currently CYP613AnonSelfAs | | |
| CYP613AnonSelfÅs E02 Ward | not linked to the rest of the d | ata set at patient le |
| CYP613AnonSelfÅs E02 Ward | | |
| E02 Ward | | pe for |
| | ssessment. | |
| | | |
| | | |
| E03 Day Hospital | | |
| E04 Accident and Emergency or Minor Injuries | | |
| Department | | |
| E99 Other departments | | |
| Hospice premises | | |
| F01 Hospice | | |
| Nursing and Residential Homes COL Corp. Home Michigan Homes | | |
| G01 Care Home Without Nursing G02 Care Home With Nursing | | |
| G03 Children's Home | | |
| G04 Integrated Care Home Without Nursing and | | |
| Care Home With Nursing | | |
| | | |
| | | |
| Day Centre premises | | |
| H01 Day Centre Resource Centre premises | | |
| J01 Resource Centre J01 Resource Centre | | |
| Dedicated Facilities for Children and | | |
| Families | | |
| K01 Sure Start Children's Centre | | |
| K02 Child Development Centre | | |
| Educational, Childcare and Training | | |
| Establishments | | |
| L01 School L02 Further Education College | | |
| L02 Further Education College L03 University | | 1 |
| LO3 University LO4 Nursery Premises | | 1 |
| L05 Other Childcare Premises | | 1 |
| L06 Training Establishments | | |
| L99 Other Educational Premises | | |
| Justice and Home Office premises | | |
| | | 1 |
| M01 Prison M02 Probation Service premises | | |
| M02 Probation Service premises M03 Police Station / Police Custody Suite | | 1 |
| M04 Young Offenders Institute | | |
| M05 Immigration Removal Centre | | |
| Public locations | | |
| N01 Street or other public open space | | 1 |
| N02 Other publicly accessible area or building | | 1 |
| N03 Voluntary or charitable agency premises | | |
| N04 Dispensing Optician premises | | 1 |
| N05 Dispensing Pharmacy premises Other Locations | | 1 |
| X01 Other Locations of the Volume August 1 Other Locations and the Volume August 1 Other Locations and the Volume August 1 Other Locations and the Volume August 1 Other Locations and Volume August 1 Other Locat | | |

| SCCI | SCCI | SCCI SCCI SCCI SCCI SCI SCI SCI SCI SCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|---------|--|--|------------|------|------|---|--|-----------------|
| | | s Self-Assessment | | | | Anonymous Self- assessments that This data group is | es for Data Providers: Assessment: To carry details of a re issued by the community has not linked to the rest of the daily no assessment tools in scopiassessment. | nealth service. |
| C613912 | ORGANISATION CODE (CODE OF COMMISSIONER) | This is the ORGANISATION CODE of the ORGANISATION commissioning health care. This should always be the ORGANISATION CODE of the original commissioner for Commissioning Data Sets to support Payment by Results. The Department of Health document "Who pays? Establishing the Responsible Commissioner" sets out a framework for establishing responsibility for commissioning an individual's care within the NHS, (i.e. determining who pays for a PATIENT's care.) http://www.dh.gov.uk/en/Publicationsandstatist ics/Publications/PublicationsPolicyAndGuidan ce/DH_078466 Further guidance is available on the NHS Data Dictionary Website: http://www.datadictionary.nhs.uk/data_dictionany/data_field_notes/o/org/organisation_code_(code_of_commissioner)_de.asp?shownav=1 | an3 or an5 | | | Used to analyse by commissioner | Required for identifying the Commissioner responsible for payment | R |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|----------|--|--|--|--|-------------------------------------|
| | eating Group - CYP901 S O1 Staff Deta | | | | | Group-level no | tes for Data Providers: | |
| 011 30 | or Otali Deta | | | | | Staff Details: to person. | carry details of the staff involved in t | he treatment of a |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| C901010 | CARE PROFESSIONAL LOCAL IDENTIFIER | CARE PROFESSIONAL LOCAL IDENTIFIER is a unique local CARE PROFESSIONAL IDENTIFIER within a Health Care Provider and may be assigned automatically by the | max an20 | | | Uniquely identify a care professional | Required for reporting on Care Professionals | М |
| C901020 | PROFESSIONAL REGISTRATION BODY CODE | A code which identifies the PROFESSIONAL REGISTRATION BODY or Representative Body. | an2 | 01 02 03 04 05 08 09 | General Chiropractic Council General Dental Council General Medical Council General Optical Council Care Council for Wales Health and Care Professions Council Nursing and Midwifery Council General Pharmaceutical Council | Used for analysis of data item | To monitor outcomes depending on professional registration | R |
| C901030 | PROFESSIONAL REGISTRATION ENTRY IDENTIFIER | The registration identifier allocated by an ORGANISATION. | max an32 | | | All to confirm status of professional registration body code | Used to uniquely identify an professional registration body | R |
| C901040 | CARE PROFESSIONAL STAFF GROUP (COMMUNITY CARE) | The staff group of a CARE PROFESSIONAL working in a Community Health Service. | an3 | A01 A02 A03 A04 A05 A06 A07 A08 A09 A10 A11 A12 A13 A14 M01 M02 M03 M04 | Allied Health Professionals Art Therapist Clinical Psychologist Dietitian Drama Therapist Music Therapist Occupational Therapist Orthotist Physiotherapist Podiatrist Prosthetist Psychotherapist Radiographer Speech and Language Therapist Orthoptist Medical/Dental Community Dentist Consultant General Medical Practitioner General Medical Practitioner with Special Interest Nursing, Health Visitors and Midwifery Community Midwife | Used for analysis of data item | Required for reporting on Care Activities, Performance of Care Professionals | R |
| | | | | N01 N02 N03 N04 N05 | District Nurse Health Visitor Macmillan Nurse School Nurse | | | |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|-----------------------|--------|------------------|---|---------------------------|--|-------------------------------------|
| | eating Group - CYP901 O1 Staff Deta | | | | | Group-level no | tes for Data Providers: | |
| CIFS | or Stair Deta | alis | | | | Staff Details: to person. | carry details of the staff involved in t | he treatment of a |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | | | | | |
| | | | | N06 | Specialist Nursing - Active Case Management (Community Matrons) | | | |
| | | | | N07 | Specialist Nursing - Arthritis Nursing / Liaison | - | | |
| | | | | N08 | Specialist Nursing - Asthma and Respiratory Nursing / Liaison | 1 | | |
| | | | | N09 | Specialist Nursing - Breast Care Nursing / Liaison | 1 | | |
| | | | | N10 | Specialist Nursing - Cancer Related |] | | |
| | | | | N11 | Specialist Nursing - Cardiac Nursing / Liaison | | | |
| | | | | N12 | Specialist Nursing - Children's Services | † | | |
| | | | | N13 | Specialist Nursing - Community Cystic | Ī | | |
| | | | | N14 | Fibrosis Specialist Nursing - Continence Services | 1 | | |
| | | | | N15 | Specialist Nursing - Diabetic Nursing / Liaison | 1 | | |
| | | | | N16 | Specialist Nursing - Enteral Feeding Nursing Services | | | |
| | | | | N17 | Specialist Nursing - Haemophilia Nursing Services | | | |
| | | | | N19 | Specialist Nursing - Infectious Diseases |] | | |
| | | | | N20 | Specialist Nursing - Intensive Care Nursing | | | |
| | | | | N21 | Specialist Nursing - Palliative / Respite Care | - | | |
| | | | | N22 | Specialist Nursing - Parkinson and Alzheimer Nursing / Liaison | | | |
| | | | | N23 | Specialist Nursing - Rehabilitation Nursing | | | |
| | | | | N24 N25 | Specialist Nursing - Stoma Care Services Specialist Nursing - Tissue Viability Nursing / | - | | |
| | | | | | Liaison |] | | |
| | | | | N26 | Specialist Nursing - Transplantation Patients Nursing Services | | | |
| | | | | N27 | Specialist Nursing - Treatment Room Nursing Services | | | |
| | | | | N28 | Specialist Nursing - Tuberculosis Specialist Nursing | | | |
| | | | | N29 | Specialist Nursing - Other Specialist Nursing |] | | |
| | | | | N30 N32 | Specialist Nursing - Safeguarding Staff Nurse | - | | |
| | | | | N32 N33 | Other Registered Nurse | } | | |
| | | | | N34 | Public Health Nurse | 1 | | |
| | | | | | Other Care Professionals | † | | |
| | | | | C01 | Appliances Technician | 1 | | |
| | | | | C02 | Audiologist | 1 | | |
| | | | | C03 | Counsellor | 1 | | |
| | | | | C04 | Nursery Nurse | 1 | 1 | 1 |

| SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI | SCCI |
|----------------------------------|--|--|--------|------------------|-----------------------------------|--------------------------------------|--|-------------------------------------|
| | eating Group - CYP901 S D1 Staff Deta | | | | | 1 ' | tes for Data Providers: carry details of the staff involved in the | ne treatment of a |
| XML Schema Element Name | Data Item Name (Data Dict Element) | Data Item Description | Format | National Code | National Code Definition | Info Req Ref | Information Requirements (Purpose) | Mandatory/ Required/ Optional |
| | | | | C06 | Play Therapist | | | |
| | | | | C06 | Social Worker | | | |
| | | | | C07 | Voluntary Care Worker | - | | |
| | | | | | Screener (in a National Screening | = | | |
| | | | | | Programme) | | | |
| | | | | C10 | Health Trainer (Non Clinical) | | | |
| | | | | C11 | Health Trainer (Clinical) | | | |
| | | | | C12 | Health Care Assistant | | | |
| | | | | C13 | Health Care Support Worker | | | |
| | | | | C99 | Other Care Professional | | | |
| C901050 | | An NHS OCCUPATION CODE for an EMPLOYEE filling a POSITION. The NHS OCCUPATION CODES are maintained by the Health and Social Care Information Centre, on behalf of the Department of Health and can be viewed in the NHS Occupation Code Manual. | an3 | | | Used for analysis of data item | To monitor outcomes depending on NHS occupation | R |
| C901060 | CARE PROFESSIONAL (JOB ROLE CODE) | A National Code for a POSITION applicable to an EMPLOYEE. | an5 | | | Used for analysis of data item | To monitor outcomes depending on care professional job role | R |

CSDS INPA

Items from

Annexe E: Responses to EMT suggestions

This document provides responses and explanations of EMT feedbacks and suggestions:

Feedback 1:

Martin Severs, Clinical Director and Caldicott Guardian, has asked that we put a clause in the directions so that we are data controller and have the rights over whether we publish or not.

Response:

It has been confirmed between NHS England and NHS Digital Information Governance (IG) that it is not within the remit of directions to determine data controllership. However NHS England will be addressing this issue by other means. NHS England will not be amending directions currently in draft to add in a statement about data controllership.

NHS Digital IG have confirmed this with Martin Severs (email attached).

Feedback 2:

The link to Data Services Platform (DSP) needed to be made.

Response:

The data is currently landed via the Bureau Service Portal (BSP) but we would consider use of the Data Services Platform (DSP) for future versions of the data set. NHS Digital has continued to use the BSP for CSDS because it is already used for CYPHS data set submissions and the CSDS is heavily based on the CYPHS data set with minimal changes introduced.

Feedback 3:

The burden assessment wasn't clear.

The EMT paper does not sufficiently reflect the burden on the NHS, i.e. it does not recognise that the NHS will be taking on additional work. Neither does it sufficiently refer to it being beneficial to collect the additional data.

The Board paper must include sufficient detail that the NHS is taking on an additional burden, but then needs to note the considerable benefits that the NHS will gain from collecting the additional data. It also needs to refer to the cost of collecting the data, and how this will be offset by the benefits outweighing the costs.

Response:

The burden on the NHS created by the Community Services Data Set (CSDS) was assessed by the Burden Advice and Assessment Service (BAAS) as part of gaining acceptance from the Standardisation Committee for Care Information (SCCI) of the CSDS Information Standards Notice. Both the standard's developers and SCCI supported the findings of the BAAS assessment.

The CSDS is based heavily on the existing Children and Young People's Health Services (CYPHS) data set, which shares the same structure and data items but only includes patients aged 0-19. The CSDS removes this age restriction, but otherwise remains almost identical to the CYPHS data set. This approach was deliberately taken in order to minimise changes and, consequently, reduce burden on provider organisations.

The burden assessment found the total cost of the CSDS (including staff, training, IT/system and other costs) to be £2,965k across all applicable providers (around 150 in total). All trusts assessed as part of the burden assessment reported that there would be little to no change in burden between CSDS and the existing CYPHS data set. The actual increase in total burden compared with the CYPHS data set burden assessment in 2014 was £53k, caused by the inclusion of a small number of additional organisations that only provide adult services and will now have to submit CSDS data centrally.

Measures have been taken to reduce the burden on providers, for example through the central development of an XML conversion tool by NHS Digital to allow providers to submit data in the required XML format without the need for accreditation or support from middleware providers. The ongoing support for this tool, or an equivalent solution, is currently being determined at a corporate level.

The readiness/capability of care providers and their system suppliers, and any unanticipated additional burden, will be assessed through the use of a state of readiness questionnaire before the CSDS goes live. The developers have also committed to an early implementation review, planned for April 2018, and the BAAS assessment will be reviewed as part of this to ensure that any additional costs are identified and mitigated.

Benefits:

Considerable benefits will be realised through the collection of the CSDS data, and these were taken into account by SCCI when accepting the change to the existing CYPHS data set Information Standard:

| | | 1 |
|--|--|---|
| National: | Providers/commissioners: | Patients: |
| Support for the delivery of the outcomes of the Five Year Forward View, including the development ar implementation of the New Models Care. Reliable, managed, national, | nd if they are providing high quality care. | Making sure Community Services are available to all patients in all areas by measuring the care that is being delivered. Better care, through monitoring progress to allow future services to be |
| comparable and standardised data about Community Services that are being delivered, which will support intelligent commissioning decisions and service provision and assist withe future development of Commun Services. | Data to support own organisational accountability, for example contributing to outcome measures and to an organisation's quality accounts. Support for provider networks, through provision of information on characteristics of populations they | planned. Improved accountability, making it easier for the public to access comparative information to support them in making decisions about their care. More personalised and better |
| Reduction of local data flows between providers, commissioners and Data Services for Commissioners Region Offices (DSCROs), by retiring the local-only Community Information Eset (CIDS). | serve. The opportunity for organisations with sophisticated reporting requirements and analytical capability to generate their own bespoke reports. Reduced local burden and duplication | organised care for patients through understanding what care is needed nationally, for example finding out how many patients who are discharged from hospitals subsequently need looking after at home. |
| Improved information about service quality, including comparative information about service providers (benchmarking). | data collections/reporting/flows, e.g. retirement of CIDS. Provision of consistent data to support | |
| Support for current national outcom indicators for Community Services. | better planning and evidence based commissioning. | |

- Support for the delivery of integrated care pathways.
- Encouragement to provider organisations to flow data, as indicated in feedback from commissioner and provider engagement.
- Help to improve reference costs for Community Services (through providing activity data on which to base mandatory tariffs) - cost information from Community providers is currently of poor quality and not reported consistently.
- Help in supporting the implementation of new payment approaches for Community Services, through the development of defined currencies for Community Services (and Community Service elements of new care models) which are underpinned by consistent data.
- A nationally consistent clinical record for all patients across England, which can be used to support national research projects (potentially through data linkage) – for example, the ONS have expressed an interest in the data for use in public service productivity estimates.
- Increased transparency of Community Services at local, regional and national levels to improve patient care,

 Recording of outcomes to contribute to clinical risk management and governance to reduce litigation costs.

| ii Community Services | Dataset Direction |
|-----------------------|-------------------|
| 04bii | |

| especially in the context of the shift of | |
|---|--|
| services from acute hospitals to the | |
| 'out of hospital' sector. | |

NHS Digital – Public Board Meeting Forward Business Schedule 2017-18 i

| 03 May 2017 | 31 May 2017 | 06 September 2017 | 08 November 2017 | 21 February 2018 | 21 March 2018 |
|--|---|---|--|---|--|
| Board Businessand Governance | Board Businessand Governance | Board Businessand Governance | Board Businessand Governance | Board Businessand Governance | Board Businessand Governance |
| Register of Interests – for information | Register of Interests – for information | Register of Interests – for information | Register of Interests – for information | Register of Interests – for information | Register of Interests – for information |
| Minutes of previous meeting – to ratify | Minutes of previous meeting – to ratify | Minutes of previous meeting – to ratify | Minutes of previous meeting – to ratify | Minutes of previous meeting – to ratify | Minutes of previous meeting – to ratify |
| Matters Arising – for comment | Matters Arising – for comment | Matters Arising – for comment | Matters Arising – for comment | Matters Arising – for comment | Matters Arising – for comment |
| Progress on Action Points – for information | Progress on Action Points – for information | Progress on Action Points – for information | Progress on Action Points – for information | Progress on Action Points – for information | Progress on Action Points – for information |
| Governance and Assurance | Governance and Assurance | Governance and Assurance | Governance and Assurance | Governance and Assurance | Governance and Assurance |
| Establishment of Finance and Investment Committee (FIC) and Terms of Reference (ToR) Modern Slavery Act – Implication for NHS Digital | Annual Report and Accounts – for approval | Sustainability Development Management Plan (CV) NED Sponsor, Dr Sarah Blackburn | Scheme of Delegated Financial Authorities 2017-18 (update) | Arrangements for the Annual Review of Board Effectiveness 2017-18 | Corporate Governance Manual 2017-18 Scheme of Delegated Financial Authorities 2017-18 (update) |
| Strategic Operational Delivery and Performance | Strategic Operational Delivery and Performance | Strategic Operational Delivery and Performance | Strategic Operational Delivery and Performance | Strategic Operational Delivery and Performance | Strategic Operational Delivery and Performance |
| Board Performance Pack | Update on Cyber Attack | Board Performance Pack | Board Performance Pack | Board Performance Pack | Board Performance Pack |
| Data Release Audit | | Corporate Business Plan 2017-18 (Final) | Mid-year review of Corporate Business Plan 2017-18 | Staff Survey Results 2017-18 Corporate Business Plan 2017-18 (Draft) | Information Assurance and Cyber Security Annual Report 2017-18 Corporate Business Plan 2017-18 (Final) |
| Strategy and Capability | Strategy and Capability | Strategy and Capability | Strategy and Capability | Strategy and Capability | Strategy and Capability |
| GP Centric Deep Dive | | | | | |
| Social Care Centric Deep Dive | | | | | |
| Child Protection Information Sharing | | | | | |
| Workforce Capabilty Planning | | | | | |
| System Wide Support and Engagement | System Wide Support and Engagement | System Wide Support and Engagement | System Wide Support and Engagement | System Wide Support and Engagement | System Wide Support and Engagement |
| | | | | | |
| Governance and Assurance | Governance and Assurance | Governance and Assurance | Governance and Assurance | Governance and Assurance | Governance and Assurance |
| | Reports from Sub-Committees (ARC & IC) | Reports from Sub-Committees (ARC, IACSC & IC) | Reports from Sub-Committees (ARC, IACSC & IC) | Reports from Sub-Committees (ARC, IACSC & IC) | Reports from Sub-Committees (ARC, IACSC & IC) |
| Directions | Directions | Directions | Directions | Directions | Directions |
| • | The HSCIC (Establishment of Information Systems for NHS Services: Emergency Care Data Set Collection) Directions 2017' Community Services Dataset Direction | Client Level Adult Social Care Direction Directions for Hospital Pharmacy Stock Control Proof of Concept Employment Advisors in Improving Access to Psychological Therapies Dataset (for acceptance). | • | • | • |
| Mandatory Request | Mandatory Request | Mandatory Request | Mandatory Request | Mandatory Request | Mandatory Request |
| Client Level Adult Social Care Data Direction (paper) | • | Patient Level Information Costing (PLICS) Mental Health Pilot Mandatory Request' | • | • | • |
| Papers for Information Only | Papers for Information Only | Papers for Information Only | Papers for Information Only | Papers for Information Only | Papers for Information Only |
| Forthcoming Statistical Publications Board Forward Business Schedule 2017-18 | Forthcoming Statistical Publications Board Forward Business Schedule 2017-18 | Information Assurance and Cyber Security Committee (IACSC) ToR (paper) Forthcoming Statistical Publications Board Forward Business Schedule 2017-18 | Forthcoming Statistical Publications Board Forward Business Schedule 2017-18 | Forthcoming Statistical Publications Board Forward Business Schedule 2017-18 Board Forward Business Schedule 2017-18 and 2018-19 | Forthcoming Statistical Publications Board Forward Business Schedule 2017-18 Board Forward Business Schedule 2018-19 |
| April and May 2017 | June and July 2017 | August and September 2017 | October and November 2017 | December 2017 and January 2018 | February and March 2018 |
| Key Meetings | Key Meetings | Key Meetings | Key Meetings | Key Meetings | Key Meetings |
| Board Development day - 05 April 2017 Board Development Day - 02 May 17 Statutory Board - 03 May 17 Assurance & Risk Committee - 10 May 17 Board Development Day - 30 May 17 Board Development Day - 30 May 17 Board Development Day - 30 May 17 Statutory Board - 06 September 17 Assurance & Risk Committee - 13 September 17 Information Assurance and Cyber Security Committee - 13 September 17 | | Board Development Day – 31 October 17 Statutory Board – 01 November 17 Assurance & Risk Committee – 15 November 17 Information Assurance and Cyber Security Committee – 15 November 17 | Board Timeout – 20 December 17 Board Development Day – 30 January 18 Statutory Board – 31 January 18 | Board Development Day – 06 March 18 Statutory Board – 07 March 18 Assurance & Risk Committee – 14 March 18 Information Assurance and Cyber Security Committee – 14 March 18 | |

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Version 0.1 Page 2 of 2

ⁱ This is a living document and is subject to regular updates

Official



Board Meeting – Public Session

| Title of paper: | Forthcoming Statistical Publications |
|---|--|
| Board meeting date: | 31 May 2017 |
| Agenda item no: | NHSD 17 02 06 |
| Paper presented by: | N/A - For information |
| Paper prepared by: | Chris Roebuck Director of Publications and Head of Profession for Statistics |
| Paper approved by: (Sponsor Director) | Prof. David Hughes Director of Information and Analytics. |
| Purpose of the paper: | This paper describes NHS Digital Official (and National) Statistics publications published in April 2017 and planned for June and July 2017, and media and web coverage for publications released in April 2017. |
| Additional Documents and or Supporting Information: | N/A |
| Please specify the key risks and issues: | N/A |
| Patient/public interest: | Overview of NHS Digital Statistical Publications |
| Supplementary papers: | N/A |
| Actions required by the Board: | For information |

Official



Forthcoming Statistical Publications

Author Chris Roebuck

Published 31 May 2017

Information and technology for better health and care

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| Forthcoming and recently released publications | 4 |
| Official and National statistics | 4 |
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Executive Summary

This paper describes:

- NHS Digital Official (and National) Statistics publications released during April 2017 and planned for June and July 2017;
- Media coverage for press released Official Statistics publications during April 2017;
- Web activity for publications released during April 2017.

Background

As at 01 April 2017, NHS Digital is responsible for 95 active (currently published or planned for future release) series of Official Statistics of which 32 are designated as National Statistics, which means that the UK Statistics Authority (UKSA) recognises them as being compliant with the Code of Practice for Official Statistics.

During the 2016/17 financial year (01/04/16 to 31/03/17), NHS Digital published 292 statistical reports.

Official Statistics are expected to evolve and improve over time, to meet the changing needs of our users, to improve their quality and utility and to respond to changes in their administrative and management data sources.

"Experimental statistics" are new Official Statistics that are undergoing evaluation. A key part of this evaluation is user engagement whereby NHS Digital invites readers to comment on the publications, which helps to inform future releases.

Most NHS Digital Official Statistics are published annually or more frequently. Generally, each edition is similar in content to previous versions but any substantial changes are noted below (note: no such changes are yet planned).

National Statistics are identified below with [NS].

Forthcoming and recently released publications Official and National statistics

June 2017

New releases: None planned for June 2017

Biennial

01 June 2017 Dental Working Hours - Motivation and Morale linked to Earnings

2012/13 and 2013/14, Experimental Statistics

Annual

15 June 2017 Statistics on Smoking, England - 2017 [NS]
16 June 2017 NHS Surplus Land - 2016/17 England
29 June 2017 Prescriptions Dispensed in the Community, England - 2006-2016 [NS]
29 June 2017 General Ophthalmic Services activity statistics - England, April 2016 - March 2017 [NS]

Biannual None planned for June 2017

Quarterly

01 June 2017 Learning Disabilities Health Check Scheme - England, Quarter 3, 2016-

17

02 June 2017 CCG Prescribing Data - January to March 2017

08 June 2017 Data on written complaints in the NHS - 2016-17 Quarter 4,

Experimental [NS]

13 June 2017 Numbers of Patients Registered at a GP Practice - June 2017

15 June 2017 Statistics on Women's Smoking Status at Time of Delivery: England -

Quarter 4, January 2017 to March 2017

21 June 2017 NHS Staff Earnings Estimates - to March 2017, Provisional statistics

22 June 2017 Summary Hospital-level Mortality Indicator (SHMI) - Deaths associated

with hospitalisation, England, January 2016 - December 2016 [NS]

22 June 2017 CCG Outcomes Indicator Set - June 2017 release

| Monthly | |
|--------------|---|
| 06 June 2017 | Female Genital Mutilation - January-March 2017, Experimental Statistics, Enhanced Dataset |
| 07 June 2017 | Maternity Services Monthly Statistics - January 2017, Experimental statistics |
| 07 June 2017 | Out of Area Placements in Mental Health Services - April 2017 |
| 09 June 2017 | Recorded Dementia Diagnoses - May 2017 |
| 09 June 2017 | Children and Young People's Health Services Monthly Statistics - February 2017 |
| 20 June 2017 | Mental Health Services Monthly Statistics - Final March 2017 |
| 21 June 2017 | NHS Sickness Absence Rates - February 2017, Provisional Statistics |
| 21 June 2017 | NHS Workforce Statistics - March 2017, Provisional statistics |
| 22 June 2017 | Improving Access to Psychological Therapies Report - March 2017 Final, April 2017 Provisional and most recent quarterly data (Quarter 3 2016-17) |
| 27 June 2017 | Provisional Monthly Hospital Episode Statistics for Admitted Patient Care, Outpatient and Accident and Emergency data - April 2016 - March 2017 (M13) |
| 27 June 2017 | Provisional Accident and Emergency Quality Indicators for England - March 2017, by provider |
| 28 June 2017 | Learning Disability Services Monthly Statistics - Commissioner Census (Assuring Transformation), May 2017, Experimental Statistics |

July 2017

New releases: None planned for June 2017

Biennial: None planned for June 2017

Annual: None planned for June 2017

Biannual: None planned for June 2017

Quarterly

12 July 2017 NICE Technology Appraisals in the NHS in England (Innovation

Scorecard) - to December 2016

14 July 2017 Numbers of Patients Registered at a GP Practice - July 2017; Special

Topic - Practices which have opened or closed within the last year

14 July 2017 NHS Continuing Healthcare Activity - England, Quarter 4, 2016-17

Monthly

04 July 2017 Female Genital Mutilation - April 2016-March 2017 Experimental

Statistics

05 July 2017 Maternity Services Monthly Statistics - February 2017, Experimental

statistics

06 July 2017 Out of Area Placements in Mental Health Services - May 2017

12 July 2017 Children and Young People's Health Services Monthly Statistics - March

2017

14 July 2017 Recorded Dementia Diagnoses - June 2017

20 July 2017 Mental Health Services Monthly Statistics - Final April, Provisional May

2017

25 July 2017 Improving Access to Psychological Therapies Report - April 2017 Final,

May 2017 Provisional + Quarter 4 2016-17

25 July 2017 NHS Workforce Statistics - April 2017, Provisional statistics

25 July 2017 NHS Sickness Absence Rates - January 2017 to March 2017 and

Annual Summary 2010-11 to 2016-17

27 July 2017 Learning Disability Services Monthly Statistics - Commissioner Census

(Assuring Transformation), June 2017, Provisional Statistics

28 July 2017 Provisional Accident and Emergency Quality Indicators for England -

April 2017, by provider

28 July 2017 Provisional Monthly Hospital Episode Statistics for Admitted Patient

Care, Outpatient and Accident and Emergency data - April 2017 - May

2017

Clinical Audits

Clinical Audits are not currently classed as Official Statistics. The Code of Practice for Official Statistics is followed as best practice during the production cycle but the release practises differ.

| J | uı | ne | 20 | 1 | / |
|---|----|----|----|---|---|
| | _ | _ | | _ | _ |

| 13 June 2017 | National Diabetes Audit - National Diabetes Audit Transition |
|----------------------------------|--|
| July 2017 13 July 2017 | National Diabetes Audit - National Diabetes Audit Complications and Mortality 2013-2015 |
| 13 July 2017 | National Diabetes Audit - Insulin Pump Report |
| 26 July 2017 | NHS Vacancy Statistics England - February 2015 - March 2017, Provisional Experimental Statistics |
| 26 July 2017 | National Diabetes Audit - Prevention Programme Pilot |

User and Media activity

The following tables show web and media coverage figures for Official (and National) Statistics released by NHS Digital in April 2017. Clinical Audits are not included.

Unique page views are the number of times the publication page was viewed during the two-week period following its release. Note that one user could generate more than one unique visit.

Media Units are the total articles or other media coverage for example print, online articles or broadcasts for the publication (each is counted separately i.e. an article appearing in both a newspaper's print and online instances will count as two citations). The totals in the table include all media units for the month of publication up to the date of writing this paper (see header).

Bars in the tables below indicate the scale of interest generated by each publication.

April 2016

| Publication | Date | Unique page views | Media units |
|--|---------------|-------------------------|----------------|
| Out of Area Placements in Mental Health Services - February 2017 | 04 April 2017 | 227 | |
| Maternity Services Monthly Statistics - November 2016, Experimental statistics | 05 April 2017 | 340 | |
| Health and Care of People with Learning Disabilities - 2015/16 | 06 April 2017 | 1157 | |
| Learning Disabilities Health Check Scheme - England, Quarters 1 and 2, 2016-17 | 11 April 2017 | 192 | 3 |
| Children and Young People's Health Services Monthly Statistics - December 2016 | 12 April 2017 | 314 | |
| NICE Technology Appraisals in the NHS in England (Innovation Scorecard) - to September 2016 | 12 April 2017 | 663 | |
| NHS Safety Thermometer Report - England March 2016 - March 2017 | 12 April 2017 | 194 | |
| Recorded Dementia Diagnoses - March 2017 | 13 April 2017 | 299 | |
| Provisional Monthly Hospital Episode Statistics for Admitted Patient Care, Outpatient and Accident and Emergency data - April 2016 - February 2017 | 13 April 2017 | 125 | |
| Provisional Accident and Emergency Quality Indicators for England - January 2017, by provider | 13 April 2017 | 107 | |
| Numbers of Patients Registered at a GP Practice - April 2017 | 19 April 2017 | 403 | |
| Mental Health Services Monthly Statistics - Final January, Provisional February 2017 | 20 April 2017 | 653 | |
| NHS Continuing Healthcare Activity - England, Quarter 3, 2016-17 | 20 April 2017 | 399 | |
| Improving Access to Psychological Therapies Report - January 2017 Final, February 2017 Provisional + Quarter 3 2016-17 | 25 April 2017 | 580 | |
| Seven-day Services - England, October 2015 - September 2016, Experimental statistics | 26 April 2017 | 218 | |
| NHS Workforce Statistics - January 2017, Provisional Statistics | 26 April 2017 | 338 | |
| NHS Sickness Absence Rates - October 2016 to December 2016 | 26 April 2017 | 167 | |
| Statistics on NHS Stop Smoking Services in England - April 2016 to December 2016 | 27 April 2017 | 351 | |
| Learning Disability Services Monthly Statistics - Commissioner Census (Assuring Transformation), March 2017, Experimental Statistics | 27 April 2017 | 170 | |

Recommendation

None – for information only.

Implications

Strategy Implications

These publications and their associated media and web coverage results form part of objective five of our strategy, "Making better use of health and care information" whereby we "are part of the Government's Statistical Service and adhere to the UK Statistics Authority's Code of Practice for national statistics. We publish data and statistics in formats that cannot be used to identify individual patients, service users or citizens."

Financial Implications

There are no financial implications of this resolution/proposal.

Stakeholder Implications

This is for information purposes only, for stakeholders to review forthcoming publications and the media and web attention of those previously published..

Handling

There are no handling implications of this resolution/proposal

Risks and Issues

There are no associated risks and issues as this is for information only.

Corporate Governance and Compliance

All Official and National statistics publications adhere to the UK Statistics Authority's Code of Practice for Official Statistics which fulfil our obligations as a producer of Official and National statistics.

Management Responsibility

Professor David Hughes, Executive Director of Information and Analytics is the sponsor director accountable for these publications. The senior manager with overall responsibility is Chris Roebuck, Director of Publications and Head of Profession for Statistics.

Actions Required of the Board

None – for information only.