

Health and Social Care Information Centre

NHS Data Model and Dictionary Service

Type: Data Dictionary Change Notice
Reference: 1372
Version No: 1.0
Subject: Organisations Update: April 2013
Effective Date: Immediate
Reason for Change: Update to Definitions
Publication Date: 24 April 2013

Background:

A number of new Organisations have been added to the NHS Data Model and Dictionary as a result of the Health and Social Care Act 2012, which made changes to the structure of the NHS.

This Data Dictionary Change Notice (DDCN) updates the new and existing organisations to reflect changes in names and responsibilities from April 2013.

To view a demonstration on "How to Read an NHS Data Model and Dictionary Change Request", visit the NHS Data Model and Dictionary help pages at: http://www.datadictionary.nhs.uk/Flash_Files/changerequest.htm.

Note: if the web page does not open, please copy the link and paste into the web browser.

Summary of changes:

Supporting Information

AREA TEAM	Changed Description
CARE QUALITY COMMISSION	Changed Description
CHLAMYDIA TESTING ACTIVITY DATA SET OVERVIEW	Changed Description
CLINICAL COMMISSIONING GROUP	Changed Description
CLINICAL SENATE	Changed Description
COMMISSIONING SUPPORT UNIT	Changed Description
DEPARTMENT OF HEALTH	Changed Description
DIAGNOSTIC IMAGING DATA SET OVERVIEW	Changed Description
GENITOURINARY MEDICINE CLINIC ACTIVITY DATA SET OVERVIEW	Changed Description
GP PRACTICE	Changed Description
HARS DATA SET SUBMISSION REQUIREMENTS	Changed Description
HEALTH AND WELLBEING BOARD	Changed Description
HEALTHCARE RESOURCE GROUP	Changed Description
HEALTH PROTECTION AGENCY (RETIRED) renamed from HEALTH PROTECTION AGENCY	Changed Description, status to Retired, Name
HEALTH RESEARCH AUTHORITY	Changed Description
HEALTHWATCH ENGLAND	Changed Description
HIV AND AIDS REPORTING DATA SET OVERVIEW	Changed Description
LOCAL AUTHORITY	Changed Description
LOCAL HEALTHWATCH	Changed Description
MONITOR	Changed Description
NATIONAL CANCER INTELLIGENCE NETWORK	Changed Description
NATIONAL CASEMIX OFFICE renamed from CASEMIX SERVICE	Changed Description, Name
NHS COMMISSIONING BOARD COMMISSIONING REGION	Changed Description
NHS ENGLAND renamed from NHS COMMISSIONING BOARD	Changed Description, Name

NHS TRUST DEVELOPMENT AUTHORITY	Changed Description
ORGANISATION DATA SERVICE	Changed Description
ORGANISATIONS INTRODUCTION	Changed Description
ORGANISATIONS MENU	Changed Description
PRIMARY CARE TRUST	Changed Description
PUBLIC HEALTH ENGLAND	Changed Description
RESPONSIBLE PRIMARY CARE TRUST	Changed Description
SPECIALISED COMMISSIONING HUB renamed from SPECIALIST COMMISSIONING HUB	Changed Name
STRATEGIC HEALTH AUTHORITY	Changed Description

Attribute Definitions

ANTIRETROVIRAL THERAPY DRUG PRESCRIBED CODE	Changed Description
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Data Elements

CLINIC CODE (NATIONAL CHLAMYDIA SCREENING PROGRAMME)	Changed Description
HARS MESSAGE VERSION IDENTIFIER	Changed Description
HARS SUBMISSION IDENTIFIER	Changed Description
HARS SUBMISSION RECORD COUNT	Changed Description
HARS TEST INDICATOR	Changed Description
HARS UNIQUE IDENTIFIER	Changed Description
ORGANISATION CODE (CODE OF COMMISSIONER)	Changed Description

Date: 24 April 2013

Sponsor: Ken Lunn, Head of Information Standards Delivery, Health and Social Care Information Centre

Note: New text is shown with a blue background. Deleted text is crossed out. Retired text is shown in grey. Within the Diagrams deleted classes and relationships are red, changed items are blue and new items are green.

AREA TEAM

Change to Supporting Information: Changed Description

~~A [Area Team](#) (AT) is an [ORGANISATION](#).~~ An Area Team (AT) is an [ORGANISATION](#).

~~[Area Teams](#) are sub-divisions of the [NHS Commissioning Board](#) ([NHS CB](#)) Operations Directorate.~~ [Area Teams](#) are sub-divisions of [NHS England's](#) Operations' Directorate.

~~[Area Teams](#) are NOT independent [ORGANISATIONS](#) but are an integral part of the [NHS Commissioning Board](#).~~ [Area Teams](#) are NOT independent [ORGANISATIONS](#) but are an integral part of [NHS England](#).

~~The [Area Teams](#) are responsible for:~~ [Area Teams](#) are responsible for:

- ~~Commissioning high quality primary care services~~
- ~~Assessing and assuring the performance of [Clinical Commissioning Groups](#) (CCG) and~~
- ~~Managing the [NHS Commissioning Board](#)'s local partnerships and stakeholder relationships.~~
- [Commissioning high quality primary care SERVICES](#)
- [Assessing and assuring the performance of \[Clinical Commissioning Groups\]\(#\) \(CCGs\) and](#)
- [Managing \[NHS England's\]\(#\) local partnerships and stakeholder relationships.](#)

~~For further information on the [Area Teams](#), see the [NHS Commissioning Board design changes](#) on the [NHS Commissioning Board website](#).~~

CARE QUALITY COMMISSION

Change to Supporting Information: Changed Description

The [Care Quality Commission](#) regulates health and adult social care services in England, whether they're provided by the NHS, local authorities, private companies or voluntary [ORGANISATIONS](#). The [Care Quality Commission](#) is the independent regulator of all health and adult social care services in England, whether provided by the NHS, [Local Authorities](#), private companies or voluntary [ORGANISATIONS](#). It also protects the rights of people detained under the Mental Health Act.

The [Care Quality Commission](#) makes sure that essential common quality standards are being met where care is provided and works towards the improvement of care services. It promotes the rights and interests of people who use services and has a wide range of enforcement powers to take action on their behalf if services are unacceptably poor.

The [Care Quality Commission](#)'s work brings together independent regulation of health, mental health and adult social care. Before 1 April 2009, this work was carried out by the [Healthcare Commission](#), the Mental Health Act Commission and the Commission for Social Care Inspection. ~~These [ORGANISATIONS](#) no longer exist~~ ~~These [ORGANISATIONS](#) no longer exist.~~

The [Care Quality Commission](#)'s main activities are:

- Registration of health and social care providers to ensure they are meeting essential common quality standards;
- Monitoring and inspection of all health and adult social care;
- Using its enforcement powers, such as fines and public warnings or closures, if standards are not being met;
- Improving health and social care services by undertaking regular reviews of how well those who arrange and provide services locally are performing and special reviews on particular care services, pathways of care or themes where there are particular concerns about quality;
- Reporting the outcomes of its work so that people who use services have information about the quality of their local health and adult social care services. It helps those who arrange and provide services to see where improvement is needed and learn from each other about what works best.

For further information on the [Care Quality Commission](#). ~~For further information on the [Care Quality Commission](#), see the:~~

- visit the [Care Quality Commission website](#) or
- call customer services on 03000 61 61 61.
- [Care Quality Commission website](#)
- [Contact us page](#) of the [Care Quality Commission](#) website for contact details.

CHLAMYDIA TESTING ACTIVITY DATA SET OVERVIEW

Change to Supporting Information: Changed Description

The ~~[Health Protection Agency](#) is required to monitor and evaluate the [NHS National Chlamydia Screening Programme \(NCSP\)](#) through the reporting of data. The [Chlamydia Testing Activity Data Set](#) collects information on all chlamydia testing commissioned by the NHS and carried out in all [LABORATORY](#) settings in England. [Public Health England \(PHE\)](#) is required to monitor and evaluate the [NHS National Chlamydia Screening Programme \(NCSP\)](#) through the reporting of data.~~

The [Chlamydia Testing Activity Data Set](#) collects information on all chlamydia testing commissioned by the NHS and carried out in all [LABORATORY](#) settings in England. It includes results taken from all [PATIENTS](#) tested for Chlamydia in all NHS settings, or in non-healthcare settings and as part of the [NHS National Chlamydia Screening Programme](#) in England.

DATA EXTRACT SPECIFICATION

Description: Each [LABORATORY](#) will be required to generate a quarterly disaggregated data extract of all chlamydia tests carried out using Nucleic Acid Amplification Testing (NAAT).

Time period: The extract will cover one calendar quarter, based on the date the [SAMPLE](#) is received at the [LABORATORY](#).

Frequency: Extracts will run quarterly, 6 weeks after the end of the quarter.

Format: Data returned should be formatted to a comma separated variable (CSV) or MS Excel file.

~~**Transmission:** Electronic files will be transmitted to the [Health Protection Agency](#) through the secure Microbiology and Epidemiology of STI's and HIV (MESH) Departments web portal. Connection to the portal requires a login account name and password which are available from the [Health Protection Agency](#).~~**Transmission:** Electronic files will be transmitted to [Public Health England](#) through the secure Microbiology and Epidemiology of STI's and HIV (MESH) Departments web portal. Connection to the portal requires a login account name and password which are available from [Public Health England](#).

CLINICAL COMMISSIONING GROUP

Change to Supporting Information: Changed Description

A [Clinical Commissioning Group \(CCG\)](#) is an [ORGANISATION](#).

~~[Clinical Commissioning Groups](#) will begin to be established as statutory [ORGANISATIONS](#) from April 2013. [Clinical Commissioning Groups](#) are responsible for implementing the commissioning roles as set out in the Health and Social Care Act 2012.~~

~~[Clinical Commissioning Groups](#) will be groups of [GP Practices](#) that will be responsible for buying health and care services for [PATIENTS](#), taking over the role from [Primary Care Trusts](#). They will implement the new commissioning roles as set out in the White Paper [Equity and excellence: Liberating the NHS](#). [Clinical Commissioning Groups](#) are groups of [GP Practices](#) that are responsible for commissioning most health and care [SERVICES](#) for [PATIENTS](#).~~

~~These groups of [GP Practices](#), working with other healthcare professionals and in partnership with local communities and [Local Authorities](#) will commission the majority of NHS Services for [PATIENTS](#) within their local communities. They will have a duty to work with [Local Authorities](#) in relation to health and adult social care, early years services, public health etc. These groups of [GP Practices](#), working with other healthcare professionals and in partnership with local communities and [Local Authorities](#) are responsible for commissioning the majority of NHS [SERVICES](#) for [PATIENTS](#) within their local communities. They have a duty to work with [Local Authorities](#) in relation to health and adult social care, early years services, public health etc.~~

~~The [Clinical Commissioning Groups](#) will not be responsible for commissioning dentistry, community pharmacy, and primary ophthalmic services, or directly be involved in commissioning services that [GP Practices](#) provide. They will have the flexibility to decide which commissioning activities they undertake themselves or choose to buy in commissioning support from external [ORGANISATIONS](#). The [Clinical Commissioning Groups](#) are not responsible for commissioning all [SERVICES](#). They have the flexibility to decide which commissioning activities they undertake themselves or choose to buy in commissioning support from external [ORGANISATIONS](#).~~

The [NHS Commissioning Board](#) will [NHS England](#):

- establish a system of [Clinical Commissioning Groups](#) with the power to assign [GP Practices](#) to [Clinical Commissioning Groups](#) if necessary
- allocate budgets directly to [Clinical Commissioning Groups](#) and will hold [Clinical Commissioning Groups](#) to account and in turn [Clinical Commissioning Groups](#) will hold its constituent [GP Practices](#) to account for stewardship of resources and the outcomes they achieve.
- has established a system of [Clinical Commissioning Groups](#) with the power to assign [GP Practices](#) to [Clinical Commissioning Groups](#) if necessary
- has allocated budgets directly to [Clinical Commissioning Groups](#)
- holds [Clinical Commissioning Groups](#) to account.

For further information on [Clinical Commissioning Groups](#), see the [Department of Health website](#). [Clinical Commissioning Groups](#) hold their constituent [GP Practices](#) to account for stewardship of resources and the outcomes they achieve.

For further information on [Clinical Commissioning Groups](#), see the [NHS England website](#).

CLINICAL SENATE

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~

A [Clinical Senate](#) is an [ORGANISATION](#).

~~[Clinical Senates](#) will aid [Clinical Commissioning Groups \(CCG\)](#), [Health and Wellbeing Boards \(HWB\)](#) and the [NHS Commissioning Board](#) to make the best decisions about healthcare for the populations they represent by providing advice and leadership at a strategic level.~~ [Clinical Senates](#) aid [Clinical Commissioning Groups \(CCG\)](#), [Health and Wellbeing Boards \(HWB\)](#) and [NHS England](#) to make the best decisions about healthcare for the populations they represent by providing advice and leadership at a strategic level.

For further information on [Clinical Senates](#), see the [NHS England website](#).

COMMISSIONING SUPPORT UNIT

Change to Supporting Information: Changed Description

A [Commissioning Support Unit \(CSU\)](#) is an [ORGANISATION](#).

~~[Commissioning Support Units](#) are hosted within the [NHS Commissioning Board \(NHS CB\)](#).~~ [Commissioning Support Units](#) are hosted within [NHS England](#).

~~By April 2016 all [Commissioning Support Units](#) will become independent [ORGANISATIONS](#) and be external from the [NHS Commissioning Board](#).~~ By April 2016 all [Commissioning Support Units](#) will become independent [ORGANISATIONS](#) and be external from [NHS England](#).

[Commissioning Support Units](#) provide [Clinical Commissioning Groups](#) with external support, specialist skills and knowledge to support them in their role as commissioners, for example by providing:

- Business intelligence services
- Clinical procurement services
- Business support services such as Human Resources (HR), payroll, procurement of goods and services and some aspects of informatics.

For further information on the [Commissioning Support Units](#), see the [Resources for CSUs page](#) on the [NHS Commissioning Board website](#). For further information on the [Commissioning Support Units](#), see the [NHS England website](#).

DEPARTMENT OF HEALTH

Change to Supporting Information: Changed Description

The [Department of Health](#) is an [ORGANISATION](#). The [Department of Health \(DH\)](#) is an [ORGANISATION](#).

The [Department of Health](#)'s role is to improve the quality and convenience of care provided by the NHS and social services. Its work includes setting national standards, shaping the direction of health and social care services and promoting healthier living. The [Department of Health](#) helps people to live better for longer. They lead, shape and fund health and care in England, making sure people have the support, care and treatment they need, with the compassion, respect and dignity they deserve.

For further information on the [Department of Health](#), see the [Department of Health website](#). For further information on the [Department of Health](#), see the [Department of Health website](#).

The new health and care system became fully operational from 1 April 2013 to deliver the ambitions set out in the [Health and Social Care Act 2012](#).

To achieve this, the [Department of Health](#) is supported by a number of agencies and public bodies, including:

- [Care Quality Commission](#)
- [Health and Social Care Information Centre](#)
- [Health Education England](#)
- [Health Research Authority](#)
- [Monitor](#)
- [National Institute for Health and Clinical Excellence](#)
- [NHS England](#)
- [NHS Business Services Authority](#)
- [NHS Trust Development Authority](#)
- [Public Health England](#).

For further information on the role of the [Department of Health](#) in the new system, see the [Department of Health website](#).

DIAGNOSTIC IMAGING DATA SET OVERVIEW

Change to Supporting Information: Changed Description

The [Diagnostic Imaging Data Set](#) was introduced by [ISB 1577 Diagnostic Imaging Data Set](#), in response to the lack of detailed data on national data on [Diagnostic Imaging](#) tests for NHS [PATIENTS](#). The original requirement came from the cancer strategy to improve [GP](#) direct access to certain [Diagnostic Imaging](#) tests, as a method was required to monitor implementation of this policy.

The [Diagnostic Imaging Data Set](#), however, has many benefits for example, to:

- Provide NHS data on [GPs](#)' direct access to tests, as well as tests requested via other referral sources. Benchmarking data will be fed back to [GPs](#) and, where appropriate, used to encourage increased use of tests, leading to earlier diagnosis and hence improved outcomes
- Provide more detailed NHS data than is currently available on test type (modality), body site of test and [PATIENT](#) demographics
- Enable analysis of turnaround times for tests
- Enable better analysis of cancer pathways by linking [Cancer Registry](#) data to [Diagnostic Imaging](#) test data for cancer [PATIENTS](#)
- ~~Allow the [Health Protection Agency \(HPA\)](#) to calculate more accurate estimates of the distribution of individual radiation dose estimates from medical exposures.~~
- Allow [Public Health England \(PHE\)](#) to calculate more accurate estimates of the distribution of individual radiation dose estimates from medical exposures.

From April 2012 it became a mandatory requirement that all providers of NHS-funded [Diagnostic Imaging](#) tests for NHS [PATIENTS](#) in England submit the central [Diagnostic Imaging Data Set](#) on a monthly basis.

The [Diagnostic Imaging Data Set](#) facilitates the collection of clinical data and the sharing of such data to underpin the delivery of effective [Diagnostic Imaging](#). It is structured around the clinical processes of local Radiology Information Systems (RISs) used by [NHS Trusts](#). It records administrative data relating to [Diagnostic Imaging](#) test [ACTIVITY](#).

Information is collected relating exclusively to [Diagnostic Imaging](#) test [ACTIVITY](#). The [Diagnostic Imaging Data Set](#) describes [Diagnostic Imaging](#) tests that have taken place as part of a broader [PATIENT PATHWAY](#). This includes [PATIENTS](#) referred from within the [ORGANISATION](#), either as an out-patient, in-patient or from [Accident and Emergency Departments](#), or referred directly from their [GP](#) or another [Health Care Provider](#).

The [Diagnostic Imaging Data Set](#) is collected from NHS funded providers of [Diagnostic Imaging](#) test [SERVICES](#) and submitted via a portal on the [Health and Social Care Information Centre](#) website. ~~The submissions are processed and aggregate extracts are produced for provider and commissioner [ORGANISATIONS](#) and national groups such as the [Department of Health](#), [Health Protection Agency \(HPA\)](#) and National Cancer Intelligence Network. This also allows linkage to Cancer Registries.~~ The submissions are processed and aggregate extracts are produced for provider and commissioner [ORGANISATIONS](#) and national groups such as the [Department of Health](#), [Public Health England](#) and [National Cancer Intelligence Network](#). This also allows linkage to [Cancer Registries](#).

Please note that the collection of the [Diagnostic Imaging Data Set](#) does not replace any other collection of diagnostic data such as the [Diagnostics Waiting Times and Activity Data Set](#) (DM01), which should continue to be collected, however it has been designed so that, in future, it could replace the [KH12](#) data collection.

GENITOURINARY MEDICINE CLINIC ACTIVITY DATA SET OVERVIEW

Change to Supporting Information: Changed Description

Contextual Overview

~~This return replaces KC60 which was retired on 01 April 2010.~~ The [Genitourinary Medicine Clinic Activity Data Set](#) replaced KC60 which was retired on 01 April 2010.

The [Genitourinary Medicine Clinic Activity Data Set](#) provides essential public health information about sexually transmitted infection diagnoses, treatments and services provided by genitourinary medicine services.

Please note: A [PATIENT](#) may have more than one diagnosis, treatment and service per attendance, therefore a row should be transmitted for each [SEXUAL HEALTH AND HIV ACTIVITY PROPERTY](#)

TYPE or DIAGNOSTIC OR PROCEDURE CODING (SEXUAL HEALTH AND HUMAN IMMUNODEFICIENCY VIRUS RELEVANT READ CODES) recorded.

The [Genitourinary Medicine Clinic Activity Data Set](#) is used to:

- To inform public health response and policy formulation for England
- To monitor the effectiveness of the policies introduced as part of the National Strategy for Sexual Health and Human Immunodeficiency Virus (HIV)
- For performance management at [Primary Care Trust](#), [Strategic Health Authority](#) and national level to ensure delivery of the national Public Service Agreement target on sexual health
- For better planning and management of services at local level
- To adapt and refine interventions, as appropriate

DATA EXTRACT SPECIFICATION

~~**Description:** The [Health Protection Agency](#) require services to generate and provide a data extract in accordance with the [Genitourinary Medicine Clinic Activity Data Set](#).~~ **Description:** [Public Health England](#) require services to generate and provide a data extract in accordance with the [Genitourinary Medicine Clinic Activity Data Set](#). These services include:

- NHS providers of specialised services, where the primary function of the specialist clinical multidisciplinary team is concerned with the provision of screening, diagnosis and management of sexually transmissible infections and related genital medical conditions.
- All [Enhanced Sexual Health Services \(ESHS\)](#) commissioned by the NHS who offer testing, diagnostic and/or treatment of Sexually Transmitted Infections.

[Enhanced Sexual Health Services](#) include:

- Enhanced General Practices
- [Sexual and Reproductive Health Services](#)
- Integrated services (joint Genitourinary Medicine and [Sexual and Reproductive Health Services](#))
- Young people clinics such as Brook
- Other NHS commissioned services e.g. community hospitals and outreach programmes

It should be noted that [General Practitioner with a Special Interest \(GPwSI\)](#) will only be included if they operate from a practice that has been commissioned to provide an [Enhanced Sexual Health Service](#).

Time period: The extract will cover one calendar quarter.

Frequency: Reports will be run quarterly, 6 weeks after the end of the quarter.

Format: Data returned should be formatted into a single comma separated variable (csv) file. The data elements should be transmitted in the order specified in the [Genitourinary Medicine Clinic Activity Data Set](#).

~~**Transmission:** Electronic files will be transmitted to the [Health Protection Agency](#) through a secure web portal in the [Health Protection Agency](#) website. This web portal enables [ORGANISATIONS](#) to submit data files in a secure manner to the HIV and STI Department of the [Health Protection Agency](#) across the Internet.~~ **Transmission:** Electronic files will be transmitted to [Public Health England](#) through a secure web portal in the [Public Health England](#) website. This web portal enables [ORGANISATIONS](#) to submit data files in a secure manner to the HIV and STI Department of [Public Health England](#) across the Internet. The web portal can be found at [HIV & STI web portal](#).

~~Connection to the web portal requires a login account name and password, which will be available from the project administrator at the [Health Protection Agency](#).~~ Connection to the web portal requires a login account name and password, which will be available from the project administrator at [Public Health England](#). Please contact gumcad@hpa.org.uk for access or more information.

GP PRACTICE

Change to Supporting Information: Changed Description

~~GP Practice is an ORGANISATION.~~ A GP Practice is an ORGANISATION.

~~A single GENERAL PRACTITIONER practising otherwise than in partnership, or two or more GENERAL PRACTITIONERS practising in partnership.~~ A GP Practice may be either:

- a single GENERAL PRACTITIONER not practising in partnership, or
- two or more GENERAL PRACTITIONERS practising in partnership.

GP Practices may operate from multiple ORGANISATION SITES.

All GP Practices belong to a Clinical Commissioning Group which commission SERVICES on behalf of PATIENTS.

HARS DATA SET SUBMISSION REQUIREMENTS

Change to Supporting Information: Changed Description

~~The HIV and AIDS Reporting Data Set is submitted to the Health Protection Agency (HPA) using the HARS Data Set Message.~~ The HIV and AIDS Reporting Data Set is submitted to Public Health England (PHE) using the HARS Data Set Message.

Supporting documentation for each version of the message is available as a downloadable zip file from the [HIV and AIDS Reporting Data Set Message Versions](#) page.

~~In addition, further guidance for submissions is provided by the Health Protection Agency on the Health Protection Agency website.~~ In addition, further guidance for submissions is provided by Public Health England on the Public Health England website.

A [HIV and AIDS Reporting Data Set](#) submission must only contain data relating to one [ORGANISATION CODE \(CODE OF PROVIDER\)](#) for one [REPORTING PERIOD](#).

HARS Submission Header

~~The HARS submission header contains data items which are used by the Health Protection Agency to manage data upon receipt.~~ The HARS submission header contains data items which are used by Public Health England to manage data upon receipt.

The Mandatory, Required or Optional (M/R/O) column indicates the requirements for inclusion of data:

- M = this data element is mandatory and the technical process (e.g. submission of the data set, production of output etc) cannot be completed without this data element being present.

For guidance on the XML Schema constraints, see the [HIV and AIDS Reporting Data Set XML Schema Constraints](#).

HARS SUBMISSION HEADER	
M/R/O	Data Set Data Elements
M	HARS SUBMISSION IDENTIFIER

M	HARS SUBMISSION RECORD COUNT
M	REPORTING PERIOD START DATE
M	REPORTING PERIOD END DATE
M	HARS MESSAGE VERSION IDENTIFIER
M	ORGANISATION CODE (CODE OF SUBMITTING ORGANISATION)
M	DATE AND TIME DATA SET CREATED
M	HARS TEST INDICATOR

HARS Record Identity

Each record within a [HIV and AIDS Reporting Data Set](#) submission must contain a unique identifier, to support data management and error reporting within the [Health Protection Agency](#) systems. Each record within a [HIV and AIDS Reporting Data Set](#) submission must contain a unique identifier, to support data management and error reporting within [Public Health England](#) systems.

The Mandatory, Required or Optional (M/R/O) column indicates the requirements for inclusion of data:

- M = this data element is mandatory and the technical process (e.g. submission of the data set, production of output etc) cannot be completed without this data element being present.

HARS RECORD IDENTIFIER

M/R/O	Data Set Data Elements
M	HARS UNIQUE IDENTIFIER

HEALTH AND WELLBEING BOARD

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~

A [Health and Wellbeing Board](#) is an [ORGANISATION](#).

A [Health and Wellbeing Board](#) (HWB) is a forum where key leaders from the health and care system work together to improve the health and wellbeing of their local population and reduce health inequalities.

From April 2013, each [Local Authority](#) in England has a fully operational [Health and Wellbeing Board](#). Each [Local Authority](#) in England has a fully operational [Health and Wellbeing Board](#).

For further information on [Health and Wellbeing Boards](#), see the [Department of Health website](#).

HEALTHCARE RESOURCE GROUP

Change to Supporting Information: Changed Description

Developed by [The Casemix Service](#), [Healthcare Resource Groups](#) (HRGs) are standard groupings of clinically similar treatments which use common levels of healthcare resource. Developed by the [National Casemix Office](#), [Healthcare Resource Groups](#) (HRGs) are standard groupings of clinically similar treatments which use common levels of healthcare resource.

[Healthcare Resource Groups](#) offer [ORGANISATIONS](#) the ability to understand their [ACTIVITY](#) in terms of the types of [PATIENTS](#) they care for and the treatments they undertake. They enable the comparison of [ACTIVITY](#) within and between different [ORGANISATIONS](#) and provide an opportunity to benchmark treatments and services to support trend analysis over time.

[Healthcare Resource Groups](#) are currently used as a means of determining fair and equitable reimbursement for care services delivered by [Health Care Providers](#). Their use as consistent 'units of currency' supports standardised healthcare commissioning across the NHS. They improve the flow of finances within - and sometimes beyond - the NHS. [HRG4](#) has been in use for [Reference Costs](#) since April 2007 (for financial year 2006/7 onwards) and for [Payment by Results \(PbR\)](#) since April 2009 (for financial year 2009 onwards).

[HRG4](#) was a major revision that introduced [Healthcare Resource Groups](#) to new clinical areas, to support the [Department of Health](#)'s policy of [Payment by Results](#). It includes a portfolio of new and updated [HRG](#) groupings that accurately record [PATIENTS](#) treatment to reflect current practice and anticipated trends in healthcare.

~~For further information on [Healthcare Resource Groups](#), see the [Health and Social Care Information Centre website](#).~~ For further information on [Healthcare Resource Groups](#), see the [Health and Social Care Information Centre website](#).

HEALTH PROTECTION AGENCY (RETIRED)__ renamed from HEALTH PROTECTION AGENCY

Change to Supporting Information: Changed Description, status to Retired, Name

~~The [Health Protection Agency](#) is an [ORGANISATION](#).~~ **This item has been retired from the NHS Data Model and Dictionary as the Health Protection Agency closed on 1 April 2013 and [Public Health England](#) took on their responsibilities.**

~~The [Health Protection Agency \(HPA\)](#) is an independent body that protects the health and well-being of the population. The [Health Protection Agency](#) plays a critical role in protecting people from infectious diseases and in preventing harm when hazards involving chemicals, poisons or radiation occur. The [Health Protection Agency](#) also prepares for new and emerging threats, such as a bio-terrorist attack or virulent new strain of disease.~~ **The last live version of this item is available in the March 2013 release of the NHS Data Model and Dictionary.**

~~From April 2013 the [Health Protection Agency](#) will close and become part of [Public Health England](#).~~ **Access to this version can be obtained by emailing information.standards@hscic.gov.uk with "NHS Data Model and Dictionary - Archive Request" in the email subject line.**

~~For further information on the [Health Protection Agency](#), see the [Health Protection Agency website](#).~~

HEALTH PROTECTION AGENCY (RETIRED)__ renamed from HEALTH PROTECTION AGENCY

Change to Supporting Information: Changed Description, status to Retired, Name

- Changed Description
- Retired Health Protection Agency
- Changed Name from Data_Dictionary.NHS_Business_Definitions.H.Health_Protection_Agency to Retired.Data_Dictionary.NHS_Business_Definitions.H.Health_Protection_Agency

HEALTH RESEARCH AUTHORITY

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~

The [Health Research Authority](#) is an [ORGANISATION](#).

~~The [Health Research Authority](#) (HRA) was established on 01 December 2011 as a [Special Health Authority](#). The [Health Research Authority](#) (HRA) is a [Special Health Authority](#).~~

The purpose of the [Health Research Authority](#) is to protect and promote the interests of [PATIENTS](#) and the public in health research.

For further information on the [Health Research Authority](#), see the [Health Research Authority website](#).

HEALTHWATCH ENGLAND

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~

[Healthwatch England](#) is an [ORGANISATION](#).

[Healthwatch England](#) is the independent consumer champion for health and social care in England.

[Healthwatch England](#) works with [Local Healthwatch](#) and:

- ~~advises the [NHS Commissioning Board](#), English [Local Authorities](#), [Monitor](#) and the Secretary of State for health.~~
- ~~advises [NHS England](#), English [Local Authorities](#), [Monitor](#) and the Secretary of State for health.~~
- has the power to recommend that action is taken by the [Care Quality Commission](#) (CQC) when there are concerns about health and social care services.

For further information on [Healthwatch England](#), see the:

- [Care Quality Commission website](#)
- [Healthwatch website](#).

HIV AND AIDS REPORTING DATA SET OVERVIEW

Change to Supporting Information: Changed Description

Background:

The scope of the [HIV and AIDS Reporting Data Set](#) is all [PATIENTS](#) who are newly diagnosed with Human Immunodeficiency Virus (HIV) or newly transferred to other [Health Care Providers](#).

NHS [Health Care Providers](#) are required to generate the [HIV and AIDS Reporting Data Set](#).

- The [HIV and AIDS Reporting Data Set](#) is used to:
- Identify the groups at risk of HIV infection in England
- Monitor the short and long term clinical outcomes of people living with HIV infection
- Monitor the effectiveness of the national policies and guidance
- Adapt and refine interventions, as appropriate.

Secondary analyses of aggregate outputs from the [HIV and AIDS Reporting Data Set](#) will be used to:

- Support the commissioning of [HIV Services](#) through collation of data to inform the national HIV outpatient tariff for [Payment by Results](#)
- Conduct performance management at the [Local Authority](#) and national level.

~~For further information on Acquired Immune Deficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV), see the [Health Protection Agency website](#).~~ For further information on Acquired Immune Deficiency Syndrome (AIDS) and Human Immunodeficiency Virus (HIV), see the [Public Health England website](#).

Time period:

The extract covers one calendar quarter.

Frequency:

The [HIV and AIDS Reporting Data Set](#) is attendance based and should be submitted quarterly, 6 weeks after the end of the quarter.

Format:

Data for submission will be formatted into an xml file as per the [HIV and AIDS Reporting Data Set](#) Message.

Transmission:

~~Submissions are transmitted to the [Health Protection Agency](#) through a secure web portal on the [Health Protection Agency website](#).~~ Submissions are transmitted to [Public Health England](#) through a secure web portal on the [Public Health England website](#).

~~The web portal enables [ORGANISATIONS](#) to submit data files in a secure manner to the HIV and STI Department of the [Health Protection Agency](#) across the internet and can be found at [HIV & STI web portal](#).~~ The web portal enables [ORGANISATIONS](#) to submit data files in a secure manner to the HIV and STI Department of [Public Health England](#) across the internet and can be found at [HIV & STI web portal](#).

~~For further information on the [HIV and AIDS Reporting Data Set](#), see the [Health Protection Agency website](#).~~ For further information on the [HIV and AIDS Reporting Data Set](#), see the [Public Health England website](#).

LOCAL AUTHORITY

Change to Supporting Information: Changed Description

A [Local Authority](#) is an [ORGANISATION](#).

The structure of local government varies from area to area in England. In some areas there are two layers or tiers:

1. a [County](#) or Shire Council as the upper tier and
2. a [District](#), Borough or City Council as the lower tier.

In other areas there is just a single tier made up of a '[Unitary Authority](#)'. [Unitary Authorities](#) may have adopted any of these names. In London each borough is a Unitary Administration with a status similar to that of [Metropolitan Districts](#), with the London Assembly providing strategic, city-wide government.

A [Local Authority](#) is responsible for a range of services for both individuals and business which include:

- Health Services
- Social Services
- Education
- Planning
- Waste disposal, recycling and collection
- Trading standards
- Roads, highways and transportation
- Housing
- Environmental Health
- Approving planning applications
- Enforcing health, safety, environment and trading standards requirements etc

From April 2013:

- each [Local Authority](#) in England has a fully operational [Health and Wellbeing Board](#)
- [Local Authorities](#) in partnership with [Clinical Commissioning Groups](#) are responsible for commissioning the majority of NHS [SERVICES](#) for [PATIENTS](#) within their local communities
- [Local Authorities](#) are responsible for protecting and improving health and wellbeing.

For the purposes of the [Organisation Data Service](#), the definition for a '[Local Authority](#)' [ORGANISATION](#) is based on (but is not exactly the same as) the definition given within the Local Government Act, as follows:

A "[Local Authority](#)", in relation to England is:

- a County Council
- a District Council
- a [London Borough](#) Council
- the Common Council of the City of London in its capacity as a [Local Authority](#)
- the Council of the Isles of Scilly
- a [Unitary Authority](#)

Across Wales, there is a single tier system of [Unitary Authorities](#) (Councils).

Note that the Scotland Councils and Northern Ireland Councils are not included within the [Organisation Data Service](#) data set.

Please Note: The [Local Authority](#) codes are not available for general use but must only be used to facilitate Spine Smartcard and Endpoint Registration.

LOCAL HEALTHWATCH

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~

A [Local Healthwatch](#) is an [ORGANISATION](#).

A [Local Healthwatch](#) covers every [Local Authority](#) area in England.

A [Local Healthwatch](#):

- represents the views of:
 - people who use [SERVICES](#)
 - carers and
 - the public
- on the [Health and Wellbeing Boards](#) set up by [Local Authorities](#)
- provides a complaints advocacy service to support people who make a complaint about [SERVICES](#)
- reports concerns about the quality of health care to [Healthwatch England](#), which can then recommend that the [Care Quality Commission](#) take action.

For further information on [Local Healthwatch](#), see the:

- [Care Quality Commission website](#)
- [Healthwatch website](#).

MONITOR

Change to Supporting Information: Changed Description

[Monitor](#) is an [ORGANISATION](#).

[Monitor](#) is the independent regulator of [NHS Foundation Trusts](#).

[Monitor](#):

- ~~is the sector regulator for health care, i.e. regulates all providers of NHS funded [SERVICES](#) in England, except those that are exempt under secondary legislation~~
- is the sector regulator for health care, with a duty to protect and promote the interests of [PATIENTS](#) i.e. regulates all providers of NHS funded [SERVICES](#) in England, except those that are exempt under secondary legislation
- also set the tariffs for [Payment by Results \(PbR\)](#).

[Monitor](#)'s main duty is to:

protect and promote the interests of people who use health care [SERVICES](#) by promoting the provision of [SERVICES](#) which are economic, efficient and effective, and maintains or improves the quality of the [SERVICES](#).

[Monitor](#) has an ongoing role in assessing [NHS Trusts](#) for [NHS Foundation Trust](#) status, and for ensuring that [NHS Foundation Trust](#) are well-led, in terms of both quality and finances.

For further information on [Monitor](#), see the [Monitor website](#).

NATIONAL CANCER INTELLIGENCE NETWORK

Change to Supporting Information: Changed Description

The [National Cancer Intelligence Network \(NCIN\)](#) is an [ORGANISATION](#).

The [National Cancer Intelligence Network](#) is part of [Public Health England](#).

The [National Cancer Intelligence Network](#) is a UK-wide initiative, working to drive improvements in standards of cancer care and clinical outcomes by improving and using the information collected about cancer [PATIENTS](#) for analysis, publication and research.

For further information on the [National Cancer Intelligence Network](#), see the [National Cancer Intelligence Network website](#).

NATIONAL CASEMIX OFFICE_ renamed from CASEMIX SERVICE

Change to Supporting Information: Changed Description, Name

~~The Casemix Service~~ is delivered by the ~~Health and Social Care Information Centre~~. The [National Casemix Office \(NCO\)](#) is an [ORGANISATION](#).

~~The Casemix Service~~ designs and refines classifications that are used by the English NHS to describe healthcare [ACTIVITY](#). These classifications underpin [Payment by Results](#) from costing through to payment, and support local commissioning and performance management. The [National Casemix Office](#) designs and refines classifications that are used by the English NHS to describe healthcare [ACTIVITY](#). These classifications underpin the [Payment by Results](#) system from costing through to payment, and support local commissioning and performance management.

~~The Casemix Service~~ enables the NHS to: The [National Casemix Office](#) enables the NHS to:

- **support [ACTIVITY](#) costing:** to inform the national tariff setting processes
- ~~report [PATIENT ACTIVITY](#) information:~~ to ensure that providers are paid for the [SERVICES](#) they deliver
- ~~provide information:~~ to support epidemiological studies and service planning.
- **report on [PATIENT ACTIVITY](#) information:** to ensure that providers are paid for the [SERVICES](#) they deliver
- **provide information:** to support epidemiological studies and service planning
- **enable providers and commissioners to use HRGs to benchmark and performance manage.**

~~For further information on [The Casemix Service](#), see the [Health and Social Care Information Centre website](#).~~ For further information on the [National Casemix Office](#), see the [Health and Social Care Information Centre website](#).

NATIONAL CASEMIX OFFICE_ renamed from CASEMIX SERVICE

Change to Supporting Information: Changed Description, Name

- Changed Description
- Changed Name from `Data_Dictionary.NHS_Business_Definitions.C.Casemix_Service` to `Data_Dictionary.NHS_Business_Definitions.N.National_Casemix_Office`

NHS COMMISSIONING BOARD COMMISSIONING REGION

Change to Supporting Information: Changed Description

A [NHS Commissioning Board Commissioning Region \(NHS CB CR\)](#) is an [ORGANISATION](#).

~~[NHS Commissioning Board Commissioning Regions](#) are sub-divisions of the [NHS Commissioning Board \(NHS CB\) Operations Directorate](#).~~ [NHS Commissioning Board Commissioning Regions](#) are sub-divisions of [NHS England's Operations Directorate](#).

~~[NHS Commissioning Board Commissioning Regions](#) are NOT independent [ORGANISATIONS](#) but are an integral part of the [NHS Commissioning Board](#).~~ [NHS Commissioning Board Commissioning Regions](#) are NOT independent [ORGANISATIONS](#) but are an integral part of [NHS England](#).

[NHS Commissioning Board Commissioning Regions](#) are responsible for:

- Providing clinical and professional leadership at sub-national level
- Co-ordinating planning, operational management and emergency preparedness where a sub-national focus is required and
- Undertaking direct commissioning functions and processes within the single operating model.

~~For further information on the [NHS Commissioning Board Commissioning Regions](#), see the [NHS Commissioning Board design changes](#) on the [NHS Commissioning Board website](#).~~

NHS ENGLAND_ renamed from NHS COMMISSIONING BOARD

Change to Supporting Information: Changed Description, Name

The ~~[NHS Commissioning Board \(NHS CB\)](#) is an [ORGANISATION](#).~~ [NHS England](#) (known as the [NHS Commissioning Board](#) in the Health and Social Care Act 2012) is an [ORGANISATION](#).

~~The [NHS Commissioning Board](#) was established as an independent body, at arm's length to the Government, from October 2012.~~ [The NHS Commissioning Board](#) was established as an independent body, at arm's length to the Government, from October 2012 and took on its full range of responsibilities once it became established on 1 April 2013.

~~The [NHS Commissioning Board](#) is responsible for designing the proposed commissioning landscape and developing its business functions. This includes agreeing the method for establishing, authorising and running [Clinical Commissioning Groups](#).~~ [The NHS Commissioning Board](#) has adopted the name [NHS England](#).

~~Note: it is intended that the [NHS Commissioning Board](#) will take on its full range of responsibilities once it is fully established from April 2013.~~ [The main aim of NHS England](#) is to improve the health outcomes for people in [England](#).

~~For further information on the [NHS Commissioning Board](#), see the [NHS Commissioning Board website](#).~~ [NHS England](#) empowers and supports clinical leaders at every level of the NHS through [Clinical Commissioning Groups \(CCGs\)](#), [Clinical Networks](#) and [Clinical Senates](#) and helps [Health Care Providers](#) make genuinely informed decisions to provide high quality [SERVICES](#).

[For further information on NHS England](#), see the [NHS England website](#).

NHS ENGLAND_ renamed from NHS COMMISSIONING BOARD

Change to Supporting Information: Changed Description, Name

- Changed Description
- Changed Name from Data_Dictionary.NHS_Business_Definitions.N.NHS_Commissioning_Board to Data_Dictionary.NHS_Business_Definitions.N.NHS_England

NHS TRUST DEVELOPMENT AUTHORITY

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~ The [NHS Trust Development Authority](#) (NHS TDA) is an [ORGANISATION](#).

The ~~NHS Trust Development Authority~~ is an [ORGANISATION](#). The [NHS Trust Development Authority](#) is responsible for overseeing the performance management and governance of [NHS Trusts](#), including clinical quality, and managing their progress towards [NHS Foundation Trust](#) status.

~~Following the abolition of [Strategic Health Authorities](#) (SHA), the [NHS Trust Development Authority](#) (NHS TDA) is responsible for overseeing the performance management and governance of [NHS Trusts](#), including clinical quality, and managing their progress towards [NHS Foundation Trust](#) status.~~

The [NHS Trust Development Authority](#) plays its part in safeguarding the core values of the NHS, ensuring a fair and comprehensive service across the country and promoting the NHS Constitution.

For further information on the [NHS Trust Development Authority](#), see the [NHS Trust Development Authority website](#).

ORGANISATION DATA SERVICE

Change to Supporting Information: Changed Description

The [Organisation Data Service](#) (ODS) is an [ORGANISATION](#).

The [Organisation Data Service](#) is provided by the [Health and Social Care Information Centre](#) (HSCIC). It is responsible for the publication of all [ORGANISATION](#) and practitioner codes and for the national policy and standards with regard to the majority of [ORGANISATION CODES](#).

These code standards form part of the NHS data standards. The [Health and Social Care Information Centre](#) is also responsible for the day-to-day operation of the [Organisation Data Service](#) and for its overall development.

The [Organisation Data Service](#) is supported by a number of agencies throughout the UK; for instance, the [NHS Business Services Authority](#), [NHS Prescription Services](#) and the [NHS Dental Services](#).

The [Organisation Data Service](#) is also responsible for the ongoing maintenance of [ORGANISATION](#) and practitioner information on to the [ORGANISATION](#) and [PERSON](#) nodes of the Spine Directory Service (SDS), the central repository of data for use within the various systems and services.

The products the [Organisation Data Service](#) maintain includes:

- the authoritative national lists for a wide range of NHS [ORGANISATIONS](#) and medical practitioners of interest to the NHS;
- the allocation of the NHS standard identification codes for these [ORGANISATIONS](#) and practitioners;
- a change history record for these [ORGANISATIONS](#) and certain of these practitioners;
- additional reference data about each of the [ORGANISATIONS](#) and practitioners;
- details of the relationships between these [ORGANISATIONS](#) and practitioners;

- details of the [GEOGRAPHIC AREAS](#) covered by some of these [ORGANISATIONS](#), defined in terms of [POSTCODES](#);
- all [ORGANISATION](#) and Health [CARE PROFESSIONAL](#) codes on the Spine Directory Service.

The [Organisation Data Service](#) distributes:

- ~~[Organisation Codes Data:](#)~~
- [Organisation Codes Data:](#)

A set of files mostly in standard formats, holding national reference data of [ORGANISATIONS](#), practitioners and [POSTCODES](#) for use in NHS administrative functions: especially in processing central returns, [PATIENT](#) administration, commissioning and message handling. These are published:

- on the [Organisation Data Service website](#)
- to named recipients both inside the NHS and to others licensed to use this data in support of the NHS, through the online [Technology Reference Data Update Distribution Service \(TRUD\)](#)
- as a subset of the data on the [NHS Choices website](#).

- ~~[The ODS Access Database:](#)~~
- [The ODS Access Database:](#)

A Microsoft Access database containing frequently used data and a number of pre-defined enquiries. The database is available for download from the NHSnet and from [Technology Reference Data Update Distribution Service \(TRUD\)](#) and is updated monthly.

- ~~[The ODS Newsletter:](#)~~
- [The ODS Newsletter:](#)

A document distributed with each quarterly data issue through both the NHSnet pages and the [Technology Reference Data Update Distribution Service \(TRUD\)](#), describing developments and issues related to the [Organisation Data Service](#).

- ~~[The NHS Safe Haven Directory:](#)~~
- [The NHS Safe Haven Directory:](#)

A directory distributed with each monthly data issue through both the NHSnet pages and the [Technology Reference Data Update Distribution Service \(TRUD\)](#), that lists all the Safe Haven contacts and addresses set up to receive and hold confidential [PATIENT](#) data in the NHS, updated monthly.

- ~~[Postcode and related data supplied by the Office for National statistics:](#)~~
- [Postcode and related data supplied by the Office for National statistics:](#)

The ~~[Office for National Statistics](#)~~ supplies files containing all [POSTCODES](#) in the UK with details of their ~~[GEOGRAPHIC AREA](#)~~ information, such as map reference, ~~[Local Authority](#)~~ and ~~[Strategic Health Authority](#)~~. The [Office for National Statistics](#) supplies files containing all [POSTCODES](#) in the UK with details of their [GEOGRAPHIC AREA](#) information, such as map reference and [Local Authority](#). The [Organisation Data Service](#) makes these files available on a quarterly basis from the NHSnet and [Technology Reference Data Update Distribution Service \(TRUD\)](#).

The [Organisation Data Service](#) provides:

- Central allocation of new or revised codes;

- Help, advice and query resolution on the content and use of the national reference data;
- Development of the NHS standards in this area;
- Further development of the range of national reference data.

For further information on the [Organisation Data Service](#), see the [Organisation Data Service website](#).

ORGANISATIONS INTRODUCTION

Change to Supporting Information: Changed Description

[ORGANISATIONS](#) such as the [Health and Social Care Information Centre](#), [General Medical Council](#) etc which are included in the NHS Data Model and Dictionary.

Referenced Organisations:

- [American Joint Committee on Cancer](#)
- [British Association for Paediatric Nephrology](#)
- [British Psychological Society](#)
- [British Renal Society](#)
- [British Transplantation Society](#)
- [Care Quality Commission](#)
- [Community Health Partnership \(Scotland\)](#)
- [Department for Education](#)
- [Department for Work and Pensions](#)
- [Department for Work and Pensions Overseas Healthcare Team](#)
- [Department of Health](#)
- [European Renal Association \(European Dialysis and Transplant Association\)](#)
- [Faculty of General Dental Practice \(UK\)](#)
- [GSI](#)
- [Health and Social Care Information Centre](#)
- [Health and Wellbeing Board](#)
- [Health Education England](#)
- [Health Protection Agency](#)
- [Health Research Authority](#)
- [Healthwatch England](#)
- [Information Standards Board for Health and Social Care](#)
- [International Federation of Gynecology and Obstetrics](#)
- [International Health Terminology Standards Development Organisation](#)
- [International Society of Paediatric Oncology](#)
- [Local Health Board \(Wales\)](#)
- [Local Healthwatch](#)
- [Northern Ireland Local Commissioning Group](#)
- [Monitor](#)
- [National Cancer Intelligence Network](#)
- [National Commissioning Group](#)
- [National Institute for Health and Clinical Excellence](#)
- [National Joint Registry](#)
- [National Kidney Federation](#)
- [National Specialised Commissioning Group](#)
- [NHS Business Services Authority](#)
- [NHS Commissioning Board](#)
- [NHS Dental Services](#)
- [NHS Prescription Services](#)
- [NHS Trust Development Authority](#)
- [NHS Wales Informatics Service](#)
- [Office for National Statistics](#)
- [Ofsted](#)

Regulatory Bodies:

- [General Chiropractic Council](#)
- [General Dental Council](#)
- [General Medical Council](#)
- [General Optical Council](#)
- [General Osteopathic Council](#)
- [General Pharmaceutical Council](#)
- [Health and Care Professions Council](#)
- [Nursing and Midwifery Council](#)
- [Ophthalmic Qualifications Committee](#)

- [Organisation Data Service](#)
- [Public Health England](#)
- [Royal College of General Practitioners](#)
- [Royal Pharmaceutical Society](#)
- [The Casemix Service](#)
- [The Renal Association](#)
- [UK National Screening Committee](#)
- [The Royal Marsden](#)
- [UK Renal Registry](#)
- [UK Terminology Centre](#)
- [World Health Organisation](#)
- [Union for International Cancer Control](#)
- [United Kingdom Association of Cancer Registries](#)
- [World Health Organisation](#)

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- [Department of Health](#)
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- [Faculty of General Dental Practice \(UK\)](#)
- [GS1](#)
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- [UK Renal Registry](#)
- [UK Terminology Centre](#)
- [World Health Organisation](#)
- [Union for International Cancer Control](#)
- [United Kingdom Association of Cancer Registries](#)
- [World Health Organisation](#)

ORGANISATIONS MENU

Change to Supporting Information: Changed Description

- **Referenced Organisations:**

- [American Joint Committee on Cancer](#)
- [British Association for Paediatric Nephrology](#)
- [British Psychological Society](#)
- [British Renal Society](#)
- [British Transplantation Society](#)
- [Care Quality Commission](#)
- [Community Health Partnership \(Scotland\)](#)
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- [NHS Commissioning Board](#)
- [NHS Dental Services](#)
- [NHS Prescription Services](#)
- [NHS Trust Development Authority](#)
- [NHS Wales Informatics Service](#)
- [Office for National Statistics](#)
- [Ofsted](#)
- [Organisation Data Service](#)

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- [Royal College of General Practitioners](#)
- [Royal Pharmaceutical Society](#)
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- [The Royal Marsden](#)
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- [UK Terminology Centre](#)
- [World Health Organisation](#)
- [Union for International Cancer Control](#)
- [United Kingdom Association of Cancer Registries](#)
- [World Health Organisation](#)
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 - [British Renal Society](#)
 - [British Transplantation Society](#)
 - [Care Quality Commission](#)
 - [Community Health Partnership \(Scotland\)](#)
 - [Department for Education](#)
 - [Department for Work and Pensions](#)
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 - [European Renal Association \(European Dialysis and Transplant Association\)](#)
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 - [Healthwatch England](#)
 - [Information Standards Board for Health and Social Care](#)
 - [International Federation of Gynecology and Obstetrics](#)
 - [International Health Terminology Standards Development Organisation](#)
 - [International Society of Paediatric Oncology](#)
 - [Local Health Board \(Wales\)](#)
 - [Local Healthwatch](#)
 - [Northern Ireland Local Commissioning Group](#)
 - [Monitor](#)
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 - [National Casemix Office](#)
 - [National Commissioning Group](#)
 - [National Institute for Health and Clinical Excellence](#)
 - [National Joint Registry](#)
 - [National Kidney Federation](#)
 - [National Specialised Commissioning Group](#)
 - [NHS Business Services Authority](#)
 - [NHS England](#)
 - [NHS Dental Services](#)
 - [NHS Prescription Services](#)
 - [NHS Trust Development Authority](#)
 - [NHS Wales Informatics Service](#)
 - [Office for National Statistics](#)
 - [Ofsted](#)
 - [Organisation Data Service](#)

- [Public Health England](#)
- [Royal College of General Practitioners](#)
- [Royal Pharmaceutical Society](#)
- [The Renal Association](#)
- [The Royal Marsden](#)
- [UK National Screening Committee](#)
- [UK Renal Registry](#)
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- [Union for International Cancer Control](#)
- [United Kingdom Association of Cancer Registries](#)
- [World Health Organisation](#)

- **Regulatory Bodies:**

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- [General Osteopathic Council](#)
- [General Pharmaceutical Council](#)
- [Health and Care Professions Council](#)
- [Nursing and Midwifery Council](#)
- [Ophthalmic Qualifications Committee](#)

PRIMARY CARE TRUST

Change to Supporting Information: Changed Description

All [Primary Care Trusts](#) closed 31 March 2013

A ~~Primary Care Trust~~ is an ~~ORGANISATION~~. Primary Care Trust's functions have been taken over by other ~~ORGANISATIONS~~.

A ~~Primary Care Trust (PCT)~~ is a legal entity, set up by order of the Secretary of State. It is a free-standing NHS body, performance managed by a ~~Strategic Health Authority~~. The definition has been retained for historical reporting.

~~Primary Care Trusts~~ work with ~~Local Authorities~~ and other agencies that provide health and social care locally to make sure that local community's needs are being met. A Primary Care Trust is an ~~ORGANISATION~~.

The ~~Primary Care Trust's~~ responsible population comprises. A Primary Care Trust (PCT) is a legal entity, set up by order of the Secretary of State. It is a free-standing NHS body, performance managed by a Strategic Health Authority.

Primary Care Trusts work with Local Authorities and other agencies that provide health and social care locally to make sure that local community's needs are being met.

The Primary Care Trust's responsible population comprises:

- all ~~PERSONS~~ registered with a ~~General Medical Practitioner Practice~~ whose practice forms part of the ~~Primary Care Trust~~, regardless of where the ~~PERSON~~ is resident, plus
- any ~~PERSONS~~ not registered with a ~~General Medical Practitioner Practice~~ who are resident within the ~~Primary Care Trust's~~ statutory ~~GEOGRAPHIC AREA~~.
- all ~~PERSONS~~ registered with a ~~General Medical Practitioner Practice~~ whose practice forms part of the ~~Primary Care Trust~~, regardless of where the ~~PERSON~~ is resident, plus

- any PERSONS not registered with a General Medical Practitioner Practice who are resident within the Primary Care Trust's statutory GEOGRAPHIC AREA.

Note: PERSONS resident within the Primary Care Trust GEOGRAPHIC AREA, but registered with a General Medical Practitioner Practice belonging to another Primary Care Trust, are the responsibility of that other Primary Care Trust. Note: PERSONS resident within the Primary Care Trust GEOGRAPHIC AREA, but registered with a General Medical Practitioner Practice belonging to another Primary Care Trust, are the responsibility of the second Primary Care Trust.

PUBLIC HEALTH ENGLAND

Change to Supporting Information: Changed Description

~~This NHS Business Definition is for information regarding organisations that will be in existence from April 2013. The definition will be updated with the current position after April 2013.~~ Public Health England (PHE) is an ORGANISATION.

~~Public Health England is an ORGANISATION.~~ Public Health England is an executive agency of the Department of Health

~~Public Health England (PHE) took up its full powers on 1 April 2013.~~ Public Health England is responsible for protecting and improving the nation's health and wellbeing, and reducing inequalities.

~~Public Health England was established to protect and improve the nation's health and wellbeing, and to reduce inequalities.~~ Note: from 1 April 2013 Public Health England took on the responsibilities previously undertaken by the Health Protection Agency (HPA), Public Health Observatories (PHOs), Cancer Registries, the National Treatment Agency (NTA) and a number of other ORGANISATIONS.

~~For further information on Public Health England, see the Department of Health website.~~ For further information on Public Health England, see the Public Health England website.

RESPONSIBLE PRIMARY CARE TRUST

Change to Supporting Information: Changed Description

All Primary Care Trusts closed 31 March 2013

~~The Responsible Primary Care Trust is responsible for a population which comprises:~~ Primary Care Trust's functions have been taken over by other ORGANISATIONS.

- those PERSONS registered with a GP Practice within the Primary Care Trust, irrespective of whether they reside within the boundary of the Primary Care Trust, plus
- those PERSONS who are not registered with any GP Practice but who reside in the Primary Care Trust's geographic area.

The definition has been retained for historical reporting.

The Responsible Primary Care Trust is responsible for a population which comprises:

- PERSONS registered with a GP Practice within the Primary Care Trust, irrespective of whether they reside within the boundary of the Primary Care Trust, plus
- those PERSONS who are not registered with any GP Practice but who reside in the Primary Care Trust's geographic area.

SPECIALISED COMMISSIONING HUB_ renamed from SPECIALIST COMMISSIONING HUB

Change to Supporting Information: Changed Name

- Changed Name from Data_Dictionary.NHS_Business_Definitions.S.Specialist_Commissioning_Hub to Data_Dictionary.NHS_Business_Definitions.S.Specialised_Commissioning_Hub
-

STRATEGIC HEALTH AUTHORITY

Change to Supporting Information: Changed Description

All [Strategic Health Authorities](#) closed 31 March 2013

~~Strategic Health Authority is an ORGANISATION. Strategic Health Authority's responsibilities have been taken over by other ORGANISATIONS.~~

~~An NHS organisation established to lead the strategic development of the local health service and manage [Primary Care Trusts](#) and [NHS Trusts](#) on the basis of local accountability agreements. The definition has been retained for historical reporting.~~

~~The main responsibilities of [Strategic Health Authorities](#) are:~~ A Strategic Health Authority is an ORGANISATION.

- ~~– Creating a coherent strategic framework for services development across the full range of local NHS ORGANISATIONS.~~
- ~~– Performance management of local [NHS Trusts](#) and [Primary Care Trusts](#).~~
- ~~– Together with [Primary Care Trusts](#) and [NHS Trusts](#), enhance the involvement of [PATIENTS](#), the public and health and social care profession in developing services.~~

~~References:~~

~~Shifting the Balance of Power publications~~ A Strategic Health Authority is an NHS ORGANISATION established to lead the strategic development of the local health service and manage Primary Care Trusts and NHS Trusts on the basis of local accountability agreements.

~~The main responsibilities of Strategic Health Authorities are:~~

- Creating a coherent strategic framework for services development across the full range of local NHS ORGANISATIONS
- Performance management of local NHS Trusts and Primary Care Trusts
- Together with Primary Care Trusts and NHS Trusts, enhance the involvement of PATIENTS, the public and health and social care profession in developing services.

~~References:~~

~~Shifting the Balance of Power publications~~

ANTIRETROVIRAL THERAPY DRUG PRESCRIBED CODE

Change to Attribute: Changed Description

The [Antiretroviral Therapy Drug Regimen](#) prescribed to a [PATIENT](#) at the [HIV Clinic Attendance](#).

~~The codes are provided by the [Health Protection Agency \(HPA\)](#) and can be found on the [Health Protection Agency website](#). The codes are provided by [Public Health England \(PHE\)](#) and can be found on the [Public Health England](#)~~

[website](#).

CLINIC CODE (NATIONAL CHLAMYDIA SCREENING PROGRAMME)

Change to Data Element: Changed Description

Format/Length:	Maximum length an10
HES Item:	
National Codes:	
National Codes:	
Default Codes:	

Notes:

[CLINIC CODE \(NATIONAL CHLAMYDIA SCREENING PROGRAMME\)](#) is the same as attribute [CLINIC OR FACILITY CODE](#).

~~This is the [CLINIC OR FACILITY CODE](#) of the clinic performing the chlamydia test and is allocated and managed by the [Health Protection Agency](#).~~ [CLINIC CODE \(NATIONAL CHLAMYDIA SCREENING PROGRAMME\)](#) is the [CLINIC OR FACILITY CODE](#) (allocated by [Public Health England](#)) of the clinic performing the chlamydia test.

HARS MESSAGE VERSION IDENTIFIER

Change to Data Element: Changed Description

Format/Length:	max an10
HES Item:	
National Codes:	
Default Codes:	

Notes:

~~The [HARS MESSAGE VERSION IDENTIFIER](#) identifies the version number of the [HIV and AIDS Reporting Data Set](#) Message which is being used to submit data to the [Health Protection Agency \(HPA\)](#).~~ The [HARS MESSAGE VERSION IDENTIFIER](#) identifies the version number of the [HIV and AIDS Reporting Data Set](#) Message which is being used to submit data to [Public Health England \(PHE\)](#).

~~The [HARS MESSAGE VERSION IDENTIFIER](#) must be populated for each record, in the HARS Record Identifier group within the [HIV and AIDS Reporting Data Set](#) Message, by the sender of the data set submission prior to transmission of the data to the [Health Protection Agency](#).~~ The [HARS MESSAGE VERSION IDENTIFIER](#) must be populated for each record, in the HARS Record Identifier group within the [HIV and AIDS Reporting Data Set](#) Message, by the sender of the data set submission prior to transmission of the data to [Public Health England](#).

~~See [HARS Data Set Message Versions](#) for details of the version number of each release.~~ See [HIV and AIDS Reporting Data Set Message Versions](#) for details of the version number of each release.

HARS SUBMISSION IDENTIFIER

Change to Data Element: Changed Description

Format/Length:	max an36
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HES Item:
National Codes:
Default Codes:

Notes:

The ~~HARS SUBMISSION IDENTIFIER~~ provides a unique identifier (per ~~ORGANISATION CODE (CODE OF PROVIDER)~~ of ~~HIV Services~~) to identify each ~~HIV and AIDS Reporting Data Set~~ submission to the ~~Health Protection Agency (HPA)~~. The ~~HARS SUBMISSION IDENTIFIER~~ provides a unique identifier (per ~~ORGANISATION CODE (CODE OF PROVIDER)~~ of ~~HIV Services~~) to identify each ~~HIV and AIDS Reporting Data Set~~ submission to ~~Public Health England (PHE)~~.

The ~~HARS SUBMISSION IDENTIFIER~~ is used to uniquely identify and, if necessary, to sequence check the ~~HIV and AIDS Reporting Data Set~~ submissions.

For each submission, the ~~HARS SUBMISSION IDENTIFIER~~ should be incremented by 1.

The ~~HARS SUBMISSION IDENTIFIER~~ may appear on data quality reports, error reports, and audit logs exchanged between the ~~Health Protection Agency~~ and the submitting ~~ORGANISATION CODE (CODE OF PROVIDER)~~. The ~~HARS SUBMISSION IDENTIFIER~~ may appear on data quality reports, error reports, and audit logs exchanged between ~~Public Health England~~ and the submitting ~~ORGANISATION CODE (CODE OF PROVIDER)~~.

The ~~HARS SUBMISSION IDENTIFIER~~ must be populated in the HARS Submission Identifier group within the HARS Message, by the sender of the data set submission, prior to transmission of the data to the ~~Health Protection Agency~~. The ~~HARS SUBMISSION IDENTIFIER~~ must be populated in the HARS Submission Identifier group within the HARS Message, by the sender of the data set submission, prior to transmission of the data to ~~Public Health England~~.

HARS SUBMISSION RECORD COUNT

Change to Data Element: Changed Description

Format/Length: min n1 max n7
HES Item:
National Codes:
Default Codes:

Notes:

The ~~HARS SUBMISSION RECORD COUNT~~ provides a count of records contained within a ~~HIV and AIDS Reporting Data Set~~ submission to the ~~Health Protection Agency (HPA)~~. The ~~HARS SUBMISSION RECORD COUNT~~ provides a count of records contained within a ~~HIV and AIDS Reporting Data Set~~ submission to ~~Public Health England (PHE)~~. This information is used to ensure files are complete upon receipt, and to maintain accurate file processing.

The ~~HARS SUBMISSION RECORD COUNT~~ must be populated in the HARS Submission Identifier group within the ~~HIV and AIDS Reporting Data Set~~ Message by the sender of the data set submission, prior to transmission of the data to the ~~Health Protection Agency~~. The ~~HARS SUBMISSION RECORD COUNT~~ must be populated in the HARS Submission Identifier group within the ~~HIV and AIDS Reporting Data Set~~ Message by the sender of the data set submission, prior to transmission of the data to ~~Public Health England~~.

HARS TEST INDICATOR

Change to Data Element: Changed Description

Format/Length:	an1
HES Item:	
National Codes:	
Default Codes:	

Notes:

The ~~HARS TEST INDICATOR~~ identifies whether the data within a ~~HIV and AIDS Reporting Data Set~~ submission to the ~~Health Protection Agency (HPA)~~ has been submitted for test purposes, or is a live submission. The ~~HARS TEST INDICATOR~~ identifies whether the data within a ~~HIV and AIDS Reporting Data Set~~ submission to ~~Public Health England (PHE)~~ has been submitted for test purposes, or is a live submission.

Permitted National Codes:

T	Test submission
L	Live submission

HARS UNIQUE IDENTIFIER

Change to Data Element: Changed Description

Format/Length:	max an36
HES Item:	
National Codes:	
Default Codes:	

Notes:

The ~~HARS UNIQUE IDENTIFIER~~ is used in conjunction with the ~~ORGANISATION CODE (CODE OF PROVIDER)~~ to uniquely identify a record within a ~~HIV and AIDS Reporting Data Set~~ submission to the ~~Health Protection Agency (HPA)~~. The ~~HARS UNIQUE IDENTIFIER~~ is used in conjunction with the ~~ORGANISATION CODE (CODE OF PROVIDER)~~ to uniquely identify a record within a ~~HIV and AIDS Reporting Data Set~~ submission to ~~Public Health England (PHE)~~.

The ~~HARS UNIQUE IDENTIFIER~~ may appear on data quality reports, error reports, and audit logs exchanged between the ~~Health Protection Agency~~ and the submitting ~~ORGANISATION CODE (CODE OF PROVIDER)~~. The ~~HARS UNIQUE IDENTIFIER~~ may appear on data quality reports, error reports, and audit logs exchanged between ~~Public Health England~~ and the submitting ~~ORGANISATION CODE (CODE OF PROVIDER)~~.

The ~~HARS UNIQUE IDENTIFIER~~ must be populated for each record, in the ~~HARS Record Identifier~~ group within the ~~HIV and AIDS Reporting Data Set~~ Message, by the sender of the data set submission prior to transmission of the data to the ~~Health Protection Agency~~. The ~~HARS UNIQUE IDENTIFIER~~ must be populated for each record, in the ~~HARS Record Identifier~~ group within the ~~HIV and AIDS Reporting Data Set~~ Message, by the sender of the data set submission prior to transmission of the data to ~~Public Health England~~.

ORGANISATION CODE (CODE OF COMMISSIONER)

Change to Data Element: Changed Description

Format/Length:	an3 or an5
HES Item:	PURCODE
National Codes:	
ODS Default Codes:	VPP00 - Private PATIENTS / Overseas Visitor liable for charge XMD00 - Commissioner Code for Ministry of Defence (MoD) Healthcare YDD82 - Episodes funded directly by the National Commissioning Group for England

Notes:

[ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) is the same as attribute [ORGANISATION CODE](#).

[ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) is the [ORGANISATION CODE](#) of the [ORGANISATION](#) commissioning health care.

For [Commissioning Data Sets](#), [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) should always be the [ORGANISATION CODE](#) of the original commissioner to support [Payment by Results](#). For [Commissioning Data Sets](#), the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) should always be the [ORGANISATION CODE](#) of the original commissioner 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.) The guidance is set out in three sections. 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.)

1. Section 1: Establishing who pays - sets out the key principles
2. Section 2: Applying the key principles - gives further details about a number of services and situations where further clarification of how the key principles are applied may be helpful
3. Section 3: Exceptions to the key principles - outlines the exceptions to the key principles e.g. prisoners, continuing care arrangements.

Note: There is no obligation for a [PERSON](#) to state their place of residence (particularly where an issue of security arises).

Enquiries relating to this document should be directed to the [Department of Health](#), see the [Department of Health website](#) for contact details. The document includes information on the following:

The following sections, provide guidance as to which code(s) should be used as the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#):

[General Medical Practitioner Practice Registration \(England\)](#):

- Where the [PATIENT](#) is registered with a [General Medical Practitioner Practice](#), the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) will be the 3 digit [ORGANISATION CODE](#) of the [Primary Care Trust](#) or [Care Trust](#) that holds the contract with that [General Medical Practitioner Practice](#).
- If a [PATIENT](#) is not registered with a [General Medical Practitioner Practice](#), the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) is derived from the [PATIENT](#)'s [POSTCODE OF USUAL ADDRESS](#), where they reside within the boundary of a:
 - [Primary Care Trust](#)
 - [Care Trust](#)
 - [Local Health Board \(Wales\)](#)
 - [Scottish Health Board](#)
 - [Northern Ireland Local Commissioning Group](#) *Guidance on the use of Northern Ireland codes can be found in [Data Set Change Notice 19/2009](#)*
 - [Primary Healthcare Directorate \(Isle of Man\)](#).
- If a [PATIENT](#) is not registered with a [General Medical Practitioner Practice](#) and is unable to give an [ADDRESS](#), the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) will be the [ORGANISATION CODE](#) of the [ORGANISATION](#) where the unit providing the treatment is located.
- [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.](#)

[General Medical Practitioner Practice Registration \(Wales, Scotland and Northern Ireland\)](#): For further information on this document contact [NHS England](#) at "[Contact us](#)".

- For PATIENTS who are resident in England but registered with a General Medical Practitioner Practice in Wales, Scotland or Northern Ireland, the ORGANISATION CODE (CODE OF COMMISSIONER) is the English Primary Care Trust or Care Trust in whose area the PATIENT is resident.

PATIENTS from the Channel Islands:

- The bilateral healthcare agreement between the United Kingdom and the Channel Islands terminated on 31st March 2009.
- Channel Islands visitors to England are therefore liable for the same NHS charges as visitors from any other non-European Economic Area (EEA) country that the United Kingdom has no bilateral agreement with.
- As with all PATIENTS who are Overseas Visitors seeking NHS hospital care in England, they are identified by the OVERSEAS VISITOR STATUS CLASSIFICATION to establish whether they are exempt from payment or liable for fees.
- The Department of Health document Termination of bilateral healthcare agreement with the Channel Islands details these changes.

Overseas PATIENTS: charge exempt:

- PATIENTS are identified by the OVERSEAS VISITOR STATUS CLASSIFICATION where the National Code is either 1 'Exempt from payment - subject to reciprocal health agreement' or 2 'Exempt from payment - other'.
- PATIENT ACTIVITY is funded via the main (host) commissioner - normally the Primary Care Trust or Care Trust with the highest value of NHS SERVICE AGREEMENTS with the ORGANISATION providing the treatment.
- National Commissioning Group is also responsible for charge exempt Overseas Visitors who require services covered by the National Commissioning Group commissioning arrangements and funded through the National Commissioning Group central budget.

PATIENTS - liable for charges (Overseas and Private):

- PATIENTS who are Overseas Visitors are identified by the OVERSEAS VISITOR STATUS CLASSIFICATION where the National Code is 4 'To pay all fees'.
- Private PATIENTS are identified by the ADMINISTRATIVE CATEGORY CODE 02 'Private patient, one who uses accommodation or services authorised under section 65 and/or section 66 of the NHS Act 1977 (Section 7(10) of Health and Medicine Act 1988 refers) as amended by section 26 of the National Health Service and Community Care Act 1990'.

VPP00 'Private PATIENTS / Overseas Visitor liable for charge' should be used as the ORGANISATION CODE (CODE OF COMMISSIONER) for these PATIENTS.

Prisoners:

- Since April 2003, GP Practice registration (if any) is disregarded for PERSONS who are detained in prison in England. The Primary Care Trust or Care Trust in which the prison is located is responsible for commissioning NHS services for those prisoners, including NHS dental services.
- For those usually resident outside the United Kingdom, the responsible commissioner will be the Primary Care Trust or Care Trust in which the prison is located.
- PERSONS usually resident overseas held in English prisons are exempt from charges for NHS hospital treatment. There is no centrally held budget for this group and costs should be borne by the Primary Care Trust or Care Trust in which the prison is located.

Ministry of Defence:

- Upon enlistment, Primary Care Trusts and Care Trusts are required to de-register members of the British Armed Forces from their General Medical Practitioner Practice registration list and they should not be able

~~to re-register until they have been discharged. During this time, the Ministry of Defence is responsible for their primary medical services which has specific contractual and entitlement arrangements with the NHS.~~

- ~~• This does not apply to dependants of British Armed Forces members, who can remain registered with a [General Medical Practitioner Practice](#).~~
- ~~• XMD00 'Commissioner Code for Ministry of Defence (MoD) Healthcare' should be used as the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#) for members of British Armed Forces (not dependants).~~

~~Specialised Commissioning (England):~~

- ~~• For episodes funded directly by the [National Commissioning Group \(NCG\)](#), code YDD82 'Episodes funded directly by the [National Commissioning Group for England](#)' should be used as the [ORGANISATION CODE \(CODE OF COMMISSIONER\)](#).~~
- ~~• Charge-exempt [Overseas Visitors](#) who require [SERVICES](#) covered by the [National Commissioning Group](#) arrangements are funded through the [National Commissioning Group](#).~~

For enquiries about this Change Request, please email information.standards@hscic.gov.uk