

## Health and Social Care Information Centre

### NHS Data Model and Dictionary Service

**Type:** Data Dictionary Change Notice  
**Reference:** 1465  
**Version No:** 1.0  
**Subject:** Primary Care Trusts and NHS Trusts  
**Effective Date:** Immediate  
**Reason for Change:** Change of definitions  
**Publication Date:** 4 June 2014

#### Background:

The Health and Social Care Act 2012 set out a new organisational structure within the NHS. This included the closure of Primary Care Trusts and the requirement for NHS Trusts to migrate to NHS Foundation Trust status.

This Data Dictionary Change Notice (DDCN) updates the definitions to in the NHS Data Model and Dictionary to:

- Replace Primary Care Trust with the appropriate Organisation
- Add NHS Foundation Trust where appropriate and
- Update references to other organisations and correct website links.

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](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**

<a href="#">APPLICATION IDENTIFIER (GS1)</a>	Changed Description
<a href="#">CDS V6-1 TYPE 020 OVERVIEW</a>	Changed Description
<a href="#">CDS V6-1 TYPE 021 OVERVIEW</a>	Changed Description
<a href="#">CDS V6-1 TYPE 130 OVERVIEW</a>	Changed Description
<a href="#">CDS V6-1 TYPE 190 OVERVIEW</a>	Changed Description
<a href="#">CDS V6-2 TYPE 020 - OUTPATIENT CDS OVERVIEW</a>	Changed Description
<a href="#">CDS V6-2 TYPE 021 - FUTURE OUTPATIENT CDS OVERVIEW</a>	Changed Description
<a href="#">CDS V6-2 TYPE 130 - ADMITTED PATIENT CARE - FINISHED GENERAL EPISODE CDS OVERVIEW</a>	Changed Description
<a href="#">CDS V6-2 TYPE 190 - ADMITTED PATIENT CARE - UNFINISHED GENERAL EPISODE CDS OVERVIEW</a>	Changed Description
<a href="#">COMMISSIONING DATA SETS OVERVIEW</a>	Changed Description
<a href="#">COMMISSIONING DATA SET SUBMISSION AND ORGANISATION MERGERS</a>	Changed Description
<a href="#">COMMISSIONING DATA SET SUBMISSION PROTOCOL</a>	Changed Description
<a href="#">DEPARTMENT FOR WORK AND PENSIONS OVERSEAS HEALTHCARE TEAM</a>	Changed Description
<a href="#">DIAGNOSTIC IMAGING DATA SET OVERVIEW</a>	Changed Description
<a href="#">HEALTH CARE PROVIDER</a>	Changed Description
<a href="#">HOSPITAL PROVIDER</a>	Changed Description
<a href="#">NATIONAL NEONATAL DATA SET OVERVIEW</a>	Changed Description
<a href="#">NHS FOUNDATION TRUST</a>	Changed Description
<a href="#">NHS TRUST</a>	Changed Description

<a href="#">ORGANISATION CODES</a>	Changed Description
<a href="#">ORGANISATION MERGERS</a> renamed from <a href="#">NHS TRUST MERGERS</a>	Changed Description, Name
<a href="#">SPECIALIST COMMUNITY PUBLIC HEALTH NURSE</a>	Changed Description
<a href="#">SPECIALIST COMMUNITY PUBLIC HEALTH NURSE: SCHOOL NURSE</a>	Changed Description
<a href="#">SUPPORTING INFORMATION INTRODUCTION</a>	Changed Description
<a href="#">SUPPORTING INFORMATION MENU</a>	Changed Description
<a href="#">SYSTEMIC ANTI-CANCER THERAPY DATA SET OVERVIEW</a>	Changed Description

### **Class Definitions**

<a href="#">GENERAL DENTAL PRACTITIONER</a>	Changed Description
<a href="#">PATIENT ORGANISATION</a>	Changed Description

### **Attribute Definitions**

<a href="#">ACTIVITY LOCATION TYPE CODE</a>	Changed Description
<a href="#">DISCHARGE DESTINATION</a>	Changed Description
<a href="#">PRIVATE CONTROLLED DRUG PRESCRIBER CODE</a>	Changed Description
<a href="#">REFERRAL TO TREATMENT PERIOD START DATE</a>	Changed Description

### **Data Elements**

<a href="#">CDS PRIME RECIPIENT IDENTITY</a>	Changed Description
<a href="#">COMMISSIONING SERIAL NUMBER</a>	Changed Description
<a href="#">ORGANISATION CODE (PCT OF RESIDENCE)</a>	Changed Description
<a href="#">ORGANISATION CODE (RECEIVING)</a>	Changed Description
<a href="#">REFERRER CODE</a>	Changed Description
<a href="#">REFERRING ORGANISATION CODE</a>	Changed Description
<a href="#">SITE CODE (RECEIVING)</a>	Changed Description

**Date:** 4 June 2014

**Sponsor:** Dr K. Lunn, Director 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.

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## **APPLICATION IDENTIFIER (GS1)**

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Change to Supporting Information: Changed Description

An [Application Identifier \(GS1\) \(AI\)](#) is a 2,3 or 4 digit number, that indicates the meaning (or status) of the data, which immediately follows the [Application Identifier \(GS1\)](#). It is only used with [GS1](#) data carriers, such as GS1-128 and CS1 DataMatrix bar codes.

An [Application Identifier \(GS1\)](#) identifies the type of data used for the purposes of [Automatic Identification and Data Capture](#) using [GS1](#) standards.

A set of national (2 digit) numbers are issued for use in the NHS. These are:

- 91 ~~Hospital Identifiers.~~  
Identifies that the data immediately following the [Application Identifier](#) relates to local hospital identifiers, typically [ORGANISATION CODE \(CODE OF PROVIDER\)](#), [PATIENT](#) hospital/Patient Administration System (PAS) number and the ~~[NHS Trust](#) [GS1](#) Unique Organisation Prefix.~~
- 91 Hospital Identifiers.  
Identifies that the data immediately following the [Application Identifier](#) relates to local hospital identifiers, typically [ORGANISATION CODE \(CODE OF PROVIDER\)](#), [PATIENT](#) hospital/Patient Administration System (PAS) number and the [ORGANISATION](#) [GS1](#) Unique Organisation Prefix.
- 92 Baby Details.  
Identifies that the data immediately following the [Application Identifier](#) relates to baby details,

typically [NUMBER OF BABIES IDENTIFIER \(PATIENT IDENTIFICATION\)](#), [PERSON FAMILY NAME \(MOTHER OF BABY\)](#) and [PERSON GIVEN NAME \(MOTHER OF BABY\)](#).

- 93 Patient Descriptive Data.  
Identifies that the data immediately following the [Application Identifier](#) relates to [PATIENT](#) descriptive data, typically [PERSON FAMILY NAME](#), [PERSON GIVEN NAME](#), [DATE OF BIRTH \(PATIENT IDENTIFICATION\)](#) and [TIME OF BIRTH \(PATIENT IDENTIFICATION\)](#).

**Notes:**

Codes 94-97 have been reserved for national use only, and are not to be allocated by the NHS locally. Codes 98 and 99 can be allocated by the NHS for local use.

**CDS V6-1 TYPE 020 OVERVIEW**

Change to Supporting Information: Changed Description

The [CDS V6-1 Type 020 - Outpatient Commissioning Data Set](#) carries the data for an Outpatient Attendance or a cancelled/missed [APPOINTMENT](#).

It covers all NHS and private Outpatient [ACTIVITY](#) taking place in any:

- acute, community or mental health [NHS Trust](#)
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

Where the Care Activity data relates to a [Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement](#), the CDS DATA GROUP : PATIENT PATHWAY data elements must be completed where appropriate.

This [CDS TYPE](#) may also be used to submit [Referral To Treatment Clock Stop Administrative Events](#).

This [CDS TYPE](#) must not be used for "Future Outpatients" - for this the [CDS V6-1 Type 021 - Future Outpatient Commissioning Data Set](#) must be used.

*Note: [CDS V6-1 Type 020 - Outpatient Commissioning Data Set](#) is called Care Activity in the Commissioning Data Set XML Message Schema version 6-1-1.*

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

**Data Group Overview**

A high-level view of the Data Groups carried in the [CDS V6-1 Type 020 - Outpatient Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

Notation		DATA GROUP OVERVIEW: CDS V6-1 TYPE 020 - OUTPATIENT COMMISSIONING DATA SET
Group Status	Group Repeats	FUNCTION: To support the details of an Outpatient Attendance, or a missed Appointment.
M	1..1	

		<b>DATA GROUP: CDS V6-1 Type 001 - Commissioning Data Set Interchange Header</b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: CDS V6-1 Type 003 - Commissioning Data Set Message Header</b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-1 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-1 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>

O	0..1	DATA GROUP: PATIENT PATHWAY
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>
		<b>M 1..1 DATA GROUP: PATIENT IDENTITY</b>
		R 0..1 DATA GROUP: PATIENT CHARACTERISTICS (CARE ACTIVITY)
R	0..1	DATA GROUP: CARE EPISODE
		R 0..1 DATA GROUP: PERSON GROUP (CONSULTANT)
		O 0..1 DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
		O 0..1 DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CARE ATTENDANCE</b>
		<b>M 1..1 DATA GROUP: ACTIVITY CHARACTERISTICS</b>
		R 0..1 DATA GROUP: SERVICE AGREEMENT DETAILS
		O 0..1 DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
		O 0..1 DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
		R 0..1 DATA GROUP: LOCATION GROUP-ATTENDANCE
R	0..1	DATA GROUP: GP REGISTRATION
R	0..1	DATA GROUP: CARE ACTIVITY REFERRAL
		R 0..1 DATA GROUP: ACTIVITY CHARACTERISTICS - REFERRAL
		O 0..1 DATA GROUP: REFERRER
R	0..1	DATA GROUP: MISSED APPOINTMENT OCCURRENCE
O	0..1	DATA GROUP: HEALTHCARE RESOURCE GROUP

<b>M</b>	<b>1..*</b>	<b>DATA GROUP: CDS V6-1 Type 004 - Commissioning Data Set Message Trailer</b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS V6-1 Type 002 - Commissioning Data Set Interchange Trailer</b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.

#### CDS V6-1 TYPE 021 OVERVIEW

Change to Supporting Information: Changed Description

The [CDS V6-1 Type 021 - Future Outpatient Commissioning Data Set](#) carries the data for a Future Outpatient Attendance or a future cancelled [APPOINTMENT](#).

This [CDS TYPE](#) has not been approved by the [Information Standards Board for Health and Social Care](#) and submissions to support local activities and commissioning will be supported for piloting purposes only.

It covers all NHS and private Outpatient [ACTIVITY](#) taking place in any:

- acute, community or mental health [NHS Trust](#)
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

This [CDS TYPE](#) must not be used for "Outpatients" - for this the [CDS V6-1 Type 020 - Outpatient Commissioning Data Set](#) must be used.

Note: [CDS V6-1 Type 021 - Future Outpatient Commissioning Data Set](#) is called Future Care Activity in the Commissioning Data Set XML Message Schema version 6-1-1.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

#### Data Group Overview

A high-level view of the Data Groups carried in the [CDS V6-1 Type 021 - Future Outpatient Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

<a href="#">Notation</a>		<b>DATA GROUP OVERVIEW: CDS V6-1 TYPE 021 - FUTURE OUTPATIENT COMMISSIONING DATA SET</b>
Group Status	Group Repeats	<b>FUNCTION: To support the details of a Future or Planned Outpatient Attendance (Care Attendance).</b>
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-1 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-1 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>
<b>O</b>	<b>0..1</b>	DATA GROUP: PATIENT PATHWAY
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: PATIENT IDENTITY
	<b>R</b>	<b>0..1</b> DATA GROUP: PATIENT CHARACTERISTICS (CARE ACTIVITY)
<b>R</b>	<b>0..1</b>	DATA GROUP: CARE EPISODE
	<b>R</b>	<b>0..1</b> DATA GROUP: PERSON GROUP (CONSULTANT)
	<b>O</b>	<b>0..1</b> DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
	<b>O</b>	<b>0..1</b> DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CARE ATTENDANCE</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: ACTIVITY CHARACTERISTICS
	<b>R</b>	<b>0..1</b> DATA GROUP: SERVICE AGREEMENT DETAILS

		O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
		O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
		R	0..1	DATA GROUP: LOCATION GROUP-ATTENDANCE
R	0..1	DATA GROUP: GP REGISTRATION		
R	0..1	DATA GROUP: CARE ACTIVITY REFERRAL		
		R	0..1	DATA GROUP: ACTIVITY CHARACTERISTICS - REFERRAL
		O	0..1	DATA GROUP: REFERRER
R	0..1	DATA GROUP: MISSED APPOINTMENT OCCURRENCE		
O	0..1	DATA GROUP: HEALTHCARE RESOURCE GROUP		

<b>M</b>	<b>1..*</b>	<b>DATA GROUP: CDS V6-1 Type 004 - Commissioning Data Set Message Trailer</b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		
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<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS V6-1 Type 002 - Commissioning Data Set Interchange Trailer</b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		
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## CDS V6-1 TYPE 130 OVERVIEW

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Change to Supporting Information: Changed Description

[CDS V6-1 Type 130 - Admitted Patient Care - Finished General Episode Commissioning Data Set](#) carries the data for a Finished General Episode.

It covers all NHS and private Admitted Patient Care (day case and inpatient) [ACTIVITY](#) taking place in any:

- ~~acute, community or mental health~~ [NHS Trust](#)
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

Where the Care Activity data relates to a [Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement](#), the CDS DATA GROUP : PATIENT PATHWAY data elements must be completed where appropriate.

An Unfinished General Episode Commissioning Data Set record is required for all Unfinished General Episodes as at midnight on 31 March each year and for all unfinished short-stay informal psychiatric [PATIENTS](#) who are resident in hospital or on leave of absence ([Home Leave](#)) on 31 March and who have been in hospital for less than 12 months.

[CDS V6-1 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) should be used for the submission of this Unfinished General Episode Commissioning Data Set.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

## Data Group Overview

A high-level view of the Data Groups carried in the [CDS V6-1 Type 130 - Admitted Patient Care - Finished General Episode Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

Notation		DATA GROUP OVERVIEW: CDS V6-1 TYPE 130 - APC FINISHED GENERAL EPISODE COMMISSIONING DATA SET		
Group Status	Group Repeats	FUNCTION: To support the details of a Finished General Episode.		
M	1..1	<b>DATA GROUP: <a href="#">CDS V6-1 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		
M	1..*	<b>DATA GROUP: <a href="#">CDS V6-1 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .		
M	1..1	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-1 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-1 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>		
O	0..1	DATA GROUP: PATIENT PATHWAY		
M	1..1	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>		
		M	1..1	DATA GROUP: PATIENT IDENTITY
		R	0..1	DATA GROUP: PATIENT CHARACTERISTICS
M	1..1	<b>DATA GROUP: HOSPITAL PROVIDER SPELL</b>		
		M	1..1	DATA GROUP: ADMISSION CHARACTERISTICS
		R	0..1	DATA GROUP: DISCHARGE CHARACTERISTICS
M	1..1	<b>DATA GROUP: CONSULTANT EPISODE</b>		
		M	1..1	DATA GROUP: ACTIVITY CHARACTERISTICS
		R	0..1	DATA GROUP: SERVICE AGREEMENT DETAILS
		R	0..1	DATA GROUP: PERSON GROUP (CONSULTANT)
		R	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
		O	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
		R	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
		O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
		R	0..1	DATA GROUP: LOCATION GROUP (AT START OF EPISODE)
		R	0..97	DATA GROUP: LOCATION GROUP (AT WARD STAY)
		R	0..1	DATA GROUP: LOCATION GROUP (AT END OF EPISODE)
R	0..1	DATA GROUP: CRITICAL CARE PERIOD		
		R	0..9	DATA GROUP: NEONATAL CRITICAL CARE PERIOD
		R	0..9	DATA GROUP: PAEDIATRIC CRITICAL CARE PERIOD
		R	0..9	DATA GROUP: ADULT CRITICAL CARE PERIOD
R	0..1	DATA GROUP: GP REGISTRATION		
R	0..1	DATA GROUP: REFERRER		
R	0..1	DATA GROUP: ELECTIVE ADMISSION LIST ENTRY		
R	0..1	DATA GROUP: HEALTHCARE RESOURCE GROUP		
M	1..*	<b>DATA GROUP: <a href="#">CDS V6-1 Type 004 - Commissioning Data Set Message Trailer</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .		

		Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 002 - Commissioning Data Set Interchange Trailer</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.

## CDS V6-1 TYPE 190 OVERVIEW

Change to Supporting Information: Changed Description

[CDS V6-1 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) carries the data for an Unfinished General Episode.

It covers all NHS and private Admitted Patient Care (day case and inpatient) [ACTIVITY](#) taking place in any:

- acute, community or mental health [NHS Trust](#)
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

Where the Care Activity data relates to a [Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement](#), the CDS DATA GROUP : PATIENT PATHWAY data elements must be completed where appropriate.

An Unfinished General Episode Commissioning Data Set record is required for all Unfinished General Episodes as at midnight on 31 March each year and for all unfinished short-stay informal psychiatric [PATIENTS](#) who are resident in hospital or on leave of absence ([Home Leave](#)) on 31 March and who have been in hospital for less than 12 months.

[CDS V6-1 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) may optionally be sent more regularly, usually monthly.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

### Data Group Overview

A high-level view of the Data Groups carried in the [CDS V6-1 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

<b>Notation</b>		<b>DATA GROUP OVERVIEW: CDS V6-1 TYPE 190 - APC UNFINISHED DELIVERY EPISODE COMMISSIONING DATA SET</b>
<b>Group Status</b>	<b>Group Repeats</b>	<b>FUNCTION: To support the details of a Finished Delivery Episode.</b>
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.



<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-1 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-1 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>

<b>O</b>	<b>0..1</b>	DATA GROUP: PATIENT PATHWAY
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: PATIENT IDENTITY
	<b>R</b>	<b>0..1</b> DATA GROUP: PATIENT CHARACTERISTICS
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: HOSPITAL PROVIDER SPELL</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: ADMISSION CHARACTERISTICS
	<b>R</b>	<b>0..1</b> DATA GROUP: DISCHARGE CHARACTERISTICS
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CONSULTANT EPISODE</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: ACTIVITY CHARACTERISTICS
	<b>R</b>	<b>0..1</b> DATA GROUP: SERVICE AGREEMENT DETAILS
	<b>R</b>	<b>0..1</b> DATA GROUP: PERSON GROUP (CONSULTANT)
	<b>R</b>	<b>0..1</b> DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
	<b>O</b>	<b>0..1</b> DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
	<b>R</b>	<b>0..1</b> DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
	<b>O</b>	<b>0..1</b> DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
	<b>R</b>	<b>0..1</b> DATA GROUP: LOCATION GROUP (AT START OF EPISODE)
	<b>O</b>	<b>0..97</b> DATA GROUP: LOCATION GROUP (AT WARD STAY)
	<b>O</b>	<b>0..1</b> DATA GROUP: LOCATION GROUP (AT END OF EPISODE)
<b>R</b>	<b>0..1</b>	DATA GROUP: CRITICAL CARE PERIOD
	<b>R</b>	<b>0..9</b> DATA GROUP: PAEDIATRIC CRITICAL CARE PERIOD
	<b>R</b>	<b>0..9</b> DATA GROUP: ADULT CRITICAL CARE PERIOD
<b>R</b>	<b>0..1</b>	DATA GROUP: GP REGISTRATION
<b>R</b>	<b>0..1</b>	DATA GROUP: REFERRER
<b>R</b>	<b>0..1</b>	DATA GROUP: ELECTIVE ADMISSION LIST ENTRY
<b>O</b>	<b>0..1</b>	DATA GROUP: HEALTHCARE RESOURCE GROUP

<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 004 - Commissioning Data Set Message Trailer</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-1 Type 002 - Commissioning Data Set Interchange Trailer</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.

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#### CDS V6-2 TYPE 020 - OUTPATIENT CDS OVERVIEW

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Change to Supporting Information: Changed Description

The [CDS V6-2 Type 020 - Outpatient Commissioning Data Set](#) carries the data for an Outpatient Attendance or a cancelled/missed [APPOINTMENT](#).

It covers all NHS and private Outpatient [ACTIVITY](#) taking place in any:

- acute, community or mental health [NHS Trust](#)
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#), unless the [ACTIVITY](#) falls under the [Allied Health Professional Referral To Treatment Measurement](#) standard. In this case, an out-patient record for the Allied Health Professional [ACTIVITY](#) must be submitted, with the CDS DATA GROUP : PATIENT PATHWAY data elements completed as necessary.

Where the Outpatient data relates to a [Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement](#), the CDS DATA GROUP : PATIENT PATHWAY data elements must be completed where appropriate.

This [CDS TYPE](#) may also be used to submit [Referral To Treatment Clock Stop Administrative Events](#).

This [CDS TYPE](#) must not be used for "Future Outpatients" - for this the [CDS V6-2 Type 021 - Future Outpatient Commissioning Data Set](#) must be used.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

#### Data Group Overview

A high-level view of the Data Groups carried in the [CDS V6-2 Type 020 - Outpatient Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

<a href="#">Notation</a>		<b>DATA GROUP OVERVIEW: CDS V6-2 TYPE 020 - OUTPATIENT COMMISSIONING DATA SET</b>
Group Status	Group Repeats	<b>FUNCTION: To support the details of an Outpatient Attendance, or a missed Appointment.</b>
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-2 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-2 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>

O	0..1	DATA GROUP: PATIENT PATHWAY
M	1..1	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>
		M 1..1 DATA GROUP: PATIENT IDENTITY
		R 0..1 DATA GROUP: PATIENT CHARACTERISTICS (CARE ACTIVITY)
R	0..1	DATA GROUP: CARE EPISODE
		R 0..1 DATA GROUP: PERSON GROUP (CONSULTANT)

		O	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
		O	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CARE ATTENDANCE</b>		
		<b>M</b>	<b>1..1</b>	<b>DATA GROUP: ACTIVITY CHARACTERISTICS</b>
		<b>M</b>	<b>1..1</b>	<b>DATA GROUP: SERVICE AGREEMENT DETAILS</b>
		O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
		O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
		R	0..1	DATA GROUP: LOCATION GROUP-ATTENDANCE
R	0..1	DATA GROUP: GP REGISTRATION		
R	0..1	DATA GROUP: CARE ACTIVITY REFERRAL		
		R	0..1	DATA GROUP: ACTIVITY CHARACTERISTICS - REFERRAL
		O	0..1	DATA GROUP: REFERRER
R	0..1	DATA GROUP: MISSED APPOINTMENT OCCURRENCE		
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 004 - Commissioning Data Set Message Trailer</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 002 - Commissioning Data Set Interchange Trailer</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		

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#### CDS V6-2 TYPE 021 - FUTURE OUTPATIENT CDS OVERVIEW

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Change to Supporting Information: Changed Description

The [CDS V6-2 Type 021 - Future Outpatient Commissioning Data Set](#) carries the data for a Future Outpatient Attendance or a future cancelled [APPOINTMENT](#).

This [CDS TYPE](#) has not been approved by the [Information Standards Board for Health and Social Care](#) and submissions to support local activities and commissioning will be supported for piloting purposes only.

It covers all NHS and private Outpatient [ACTIVITY](#) taking place in any:

- ~~acute, community or mental health~~ [NHS Trust](#)
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

This [CDS TYPE](#) must not be used for "Outpatients" - for this the [CDS V6-2 Type 020 - Outpatient Commissioning Data Set](#) must be used.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

**Data Group Overview**

A high-level view of the Data Groups carried in the [CDS V6-2 Type 021 - Future Outpatient Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

<a href="#">Notation</a>		<b>DATA GROUP OVERVIEW: CDS V6-2 TYPE 021 - FUTURE OUTPATIENT COMMISSIONING DATA SET</b>
<b>Group Status</b>	<b>Group Repeats</b>	<b>FUNCTION: To support the details of a Future or Planned Outpatient Attendance (Care Attendance).</b>
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-2 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-2 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>
O	0..1	DATA GROUP: PATIENT PATHWAY
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: PATIENT IDENTITY
	R	0..1 DATA GROUP: PATIENT CHARACTERISTICS (CARE ACTIVITY)
R	0..1	DATA GROUP: CARE EPISODE
	R	0..1 DATA GROUP: PERSON GROUP (CONSULTANT)
	O	0..1 DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
	O	0..1 DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CARE ATTENDANCE</b>
	<b>M</b>	<b>1..1</b> DATA GROUP: ACTIVITY CHARACTERISTICS
	<b>M</b>	<b>1..1</b> DATA GROUP: SERVICE AGREEMENT DETAILS
	O	0..1 DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
	O	0..1 DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
	R	0..1 DATA GROUP: LOCATION GROUP-ATTENDANCE
R	0..1	DATA GROUP: GP REGISTRATION
R	0..1	DATA GROUP: CARE ACTIVITY REFERRAL
	R	0..1 DATA GROUP: ACTIVITY CHARACTERISTICS - REFERRAL
	O	0..1 DATA GROUP: REFERRER
R	0..1	DATA GROUP: MISSED APPOINTMENT OCCURRENCE
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 004 - Commissioning Data Set Message Trailer</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 002 - Commissioning Data Set Interchange Trailer</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.

**CDS V6-2 TYPE 130 - ADMITTED PATIENT CARE - FINISHED GENERAL EPISODE CDS OVERVIEW**

Change to Supporting Information: Changed Description

[CDS V6-2 Type 130 - Admitted Patient Care - Finished General Episode Commissioning Data Set](#) carries the data for a Finished General Episode.

It covers all NHS and private Admitted Patient Care (day case and inpatient) [ACTIVITY](#) taking place in any:

- ~~acute, community or mental health NHS Trust~~
- acute, community, mental health [NHS Trust](#) or [NHS Foundation Trust](#)
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

Where the Care Activity data relates to a [Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement](#), the CDS DATA GROUP : PATIENT PATHWAY data elements must be completed where appropriate.

An Unfinished General Episode Commissioning Data Set record is required for all Unfinished General Episodes as at midnight on 31 March each year and for all unfinished short-stay informal psychiatric [PATIENTS](#) who are resident in hospital or on leave of absence ([Home Leave](#)) on 31 March and who have been in hospital for less than 12 months.

[CDS V6-2 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) should be used for the submission of this Unfinished General Episode Commissioning Data Set.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

#### Data Group Overview

A high-level view of the Data Groups carried in the [CDS V6-2 Type 130 - Admitted Patient Care - Finished General Episode Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

<a href="#">Notation</a>		<b>DATA GROUP OVERVIEW: CDS V6-2 TYPE 130 - APC FINISHED GENERAL EPISODE COMMISSIONING DATA SET</b>
<b>Group Status</b>	<b>Group Repeats</b>	<b>FUNCTION: To support the details of a Finished General Episode.</b>
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-2 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-2 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>
<b>O</b>	<b>0..1</b>	DATA GROUP: PATIENT PATHWAY
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>

		M	1..1	DATA GROUP: PATIENT IDENTITY
		R	0..1	DATA GROUP: PATIENT CHARACTERISTICS
M	1..1	DATA GROUP: HOSPITAL PROVIDER SPELL		
		M	1..1	DATA GROUP: ADMISSION CHARACTERISTICS
		R	0..1	DATA GROUP: DISCHARGE CHARACTERISTICS
M	1..1	DATA GROUP: CONSULTANT EPISODE		
		M	1..1	DATA GROUP: ACTIVITY CHARACTERISTICS
		O	0..1	DATA GROUP: LENGTH OF STAY ADJUSTMENT
		O	0..5	DATA GROUP: OVERSEAS VISITOR STATUS
		M	1..1	DATA GROUP: SERVICE AGREEMENT DETAILS
		R	0..1	DATA GROUP: PERSON GROUP (CONSULTANT)
		R	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
		O	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
		R	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
		O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
		R	0..1	DATA GROUP: LOCATION GROUP (AT START OF EPISODE)
		R	0..97	DATA GROUP: LOCATION GROUP (AT WARD STAY)
		R	0..1	DATA GROUP: LOCATION GROUP (AT END OF EPISODE)
R	0..1	DATA GROUP: CRITICAL CARE PERIOD		
		R	0..9	DATA GROUP: NEONATAL CRITICAL CARE PERIOD
		R	0..9	DATA GROUP: PAEDIATRIC CRITICAL CARE PERIOD
		R	0..9	DATA GROUP: ADULT CRITICAL CARE PERIOD
R	0..1	DATA GROUP: GP REGISTRATION		
R	0..1	DATA GROUP: REFERRER		
O	0..1	DATA GROUP: REFERRAL		
R	0..1	DATA GROUP: ELECTIVE ADMISSION LIST ENTRY		
M	1..*	<b>DATA GROUP: <a href="#">CDS V6-2 Type 004 - Commissioning Data Set Message Trailer</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		
M	1..1	<b>DATA GROUP: <a href="#">CDS V6-2 Type 002 - Commissioning Data Set Interchange Trailer</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.		

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#### CDS V6-2 TYPE 190 - ADMITTED PATIENT CARE - UNFINISHED GENERAL EPISODE CDS OVERVIEW

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Change to Supporting Information: Changed Description

[CDS V6-2 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) carries the data for an Unfinished General Episode.

It covers all NHS and private Admitted Patient Care (day case and inpatient) [ACTIVITY](#) taking place in any:

- ~~acute, community or mental health NHS Trust~~
- acute, community, mental health NHS Trust or NHS Foundation Trust
- other NHS hospital
- non-NHS hospitals or institutions where the care delivered is NHS-funded.

under the care of a [CONSULTANT](#), [MIDWIFE](#) or [NURSE](#), where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists.

[ACTIVITY](#) taking place under the care of Allied Health Professionals, other [Biomedical Scientists](#) and [Clinical Scientists](#) may also be carried (where an appropriate [MAIN SPECIALTY CODE](#) and [TREATMENT FUNCTION CODE](#) exists) if required although this is not a [Commissioning Data Set Mandated Data Flow](#).

Where the Care Activity data relates to a [Referral To Treatment Period Included In Referral To Treatment Consultant-Led Waiting Times Measurement](#), the CDS DATA GROUP : PATIENT PATHWAY data elements must be completed where appropriate.

An Unfinished General Episode Commissioning Data Set record is required for all Unfinished General Episodes as at midnight on 31 March each year and for all unfinished short-stay informal psychiatric [PATIENTS](#) who are resident in hospital or on leave of absence ([Home Leave](#)) on 31 March and who have been in hospital for less than 12 months.

[CDS V6-2 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) may optionally be sent more regularly, usually monthly.

**To access more detailed information on the Commissioning Data Sets, see the [Commissioning Data Sets Introduction](#).**

#### Data Group Overview

A high-level view of the Data Groups carried in the [CDS V6-2 Type 190 - Admitted Patient Care - Unfinished General Episode Commissioning Data Set](#) is shown below.

See [Commissioning Data Set Notation](#) for an explanation of Group Status and Group Repeats.

Notation		DATA GROUP OVERVIEW: CDS V6-2 TYPE 190 - APC UNFINISHED DELIVERY EPISODE COMMISSIONING DATA SET	
Group Status	Group Repeats	FUNCTION: To support the details of a Finished Delivery Episode.	
M	1..1	<b>DATA GROUP: <a href="#">CDS V6-2 Type 001 - Commissioning Data Set Interchange Header</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.	
M	1..*	<b>DATA GROUP: <a href="#">CDS V6-2 Type 003 - Commissioning Data Set Message Header</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> .	
M	1..1	<b>DATA GROUP: CDS TRANSACTION HEADER GROUP</b> Dependent upon the <a href="#">Commissioning Data Set Submission Protocol</a> being used, one of the following must be used per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> : <a href="#">CDS V6-2 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol</a> Or <a href="#">CDS V6-2 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol</a>	
O	0..1	DATA GROUP: PATIENT PATHWAY	
M	1..1	<b>DATA GROUP: PERSON GROUP (PATIENT)</b>	
		M 1..1	DATA GROUP: PATIENT IDENTITY
		R 0..1	DATA GROUP: PATIENT CHARACTERISTICS
M	1..1	<b>DATA GROUP: HOSPITAL PROVIDER SPELL</b>	
		M 1..1	DATA GROUP: ADMISSION CHARACTERISTICS
		R 0..1	DATA GROUP: DISCHARGE CHARACTERISTICS
M	1..1	<b>DATA GROUP: CONSULTANT EPISODE</b>	
		M 1..1	DATA GROUP: ACTIVITY CHARACTERISTICS
		O 0..1	LENGTH OF STAY ADJUSTMENT
		O 0..5	OVERSEAS VISITOR STATUS
		M 1..1	DATA GROUP: SERVICE AGREEMENT DETAILS
		R 0..1	DATA GROUP: PERSON GROUP (CONSULTANT)

	R	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (ICD)
	O	0..1	DATA GROUP: CLINICAL DIAGNOSIS GROUP (READ)
	R	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (OPCS)
	O	0..1	DATA GROUP: CLINICAL ACTIVITY GROUP (READ)
	R	0..1	DATA GROUP: LOCATION GROUP (AT START OF EPISODE)
	R	0..97	DATA GROUP: LOCATION GROUP (AT WARD STAY)
	R	0..1	DATA GROUP: LOCATION GROUP (AT END OF EPISODE)
R	0..1	DATA GROUP: CRITICAL CARE PERIOD	
	R	0..9	DATA GROUP: NEONATAL CRITICAL CARE PERIOD
	R	0..9	DATA GROUP: PAEDIATRIC CRITICAL CARE PERIOD
	R	0..9	DATA GROUP: ADULT CRITICAL CARE PERIOD
R	0..1	DATA GROUP: GP REGISTRATION	
R	0..1	DATA GROUP: REFERRER	
O	0..1	DATA GROUP: REFERRAL	
R	0..1	DATA GROUP: ELECTIVE ADMISSION LIST ENTRY	
<b>M</b>	<b>1..*</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 004 - Commissioning Data Set Message Trailer</a></b> One per Commissioning Data Set Message submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.	
<b>M</b>	<b>1..1</b>	<b>DATA GROUP: <a href="#">CDS V6-2 Type 002 - Commissioning Data Set Interchange Trailer</a></b> One per Interchange submitted to the <a href="#">Secondary Uses Service</a> . Multiple Commissioning Data Set Messages may be submitted in a single Commissioning Data Set Interchange.	

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## COMMISSIONING DATA SETS OVERVIEW

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Change to Supporting Information: Changed Description

The purpose of the [Commissioning Data Sets](#) is to enable conformant health [ACTIVITY](#) information to be generated, independent of the [ORGANISATION](#) or system that maintains it. This enables health [CARE PROFESSIONALS](#) to measure and compare the delivery and quality of care provided and to support them in sharing information with other health professionals and [ORGANISATIONS](#).

[Commissioning Data Sets](#) currently support the following [ACTIVITIES](#):

- monitoring and managing [NHS SERVICE AGREEMENTS](#)
- developing commissioning plans
- supporting the [Payment by Results](#) processes
- underpinning clinical governance
- understanding the health needs of the population
- reporting waiting time measurement

Information on care provided for all [PATIENTS](#) by [Health Care Providers](#) (both [NHS Trusts](#) and [Independent Sector Healthcare Providers](#) for NHS [PATIENTS](#) only) must be submitted to the [Secondary Uses Service](#) according to the [Commissioning Data Set Mandated Data Flows](#) guidelines. Information on care provided for all [PATIENTS](#) by [Health Care Providers](#) (both NHS and [Independent Sector Healthcare Providers](#) for NHS [PATIENTS](#) only) must be submitted to the [Secondary Uses Service](#) according to the [Commissioning Data Set Mandated Data Flows](#) guidelines.

Commissioning [ORGANISATIONS](#) need access to data to monitor [Non-Contract Activity](#) as part of the management of their [NHS SERVICE AGREEMENTS](#), and to monitor in-year [REFERRAL REQUESTS](#) to investigate the sources and reasons for [Non-Contract Activity](#).



The [Department of Health](#) requires accurate data for all [PATIENTS](#) admitted treated as out-patients or treated as an [Accident and Emergency Attendance](#) by [Health Care Providers](#), including [PATIENTS](#) receiving private treatment. The [Commissioning Data Sets](#) also includes NHS [PATIENTS](#) treated electively in the independent sector and overseas.

[Referral To Treatment Clock Stop Administrative Events](#) may also flow using the [CDS V6-1 Type 020 - Outpatient Commissioning Data Set/CDS V6-2 Type 020 - Outpatient Commissioning Data Set](#). This allows the [Secondary Uses Service](#) to build accurate [PATIENT PATHWAYS](#) for the reporting of waiting time measurement.

## **CDS TYPES**

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

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### **COMMISSIONING DATA SET SUBMISSION AND ORGANISATION MERGERS**

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Change to Supporting Information: Changed Description

~~[ORGANISATIONS](#) can function as independent senders of [Commissioning Data Sets](#) and have service level agreements with Acute, Community or Mental Health [NHS Trusts](#) for the submission of this data.~~ [ORGANISATIONS](#) can function as independent senders of [Commissioning Data Sets](#) and have service level agreements with Acute, Community or Mental Health [ORGANISATIONS](#) for the submission of this data. These agreements usually relate to clinical services that are subcontracted to that provider or where clinical services are facilitated on that site but owned by the commissioner of the agreement.

~~Organisational mergers of [NHS Trusts](#) do not always result in an immediate merger of IT facilities and their often disparate systems to enable a single flow of commissioning data to the [Secondary Uses Service](#).~~ [ORGANISATION](#) mergers do not always result in an immediate merger of IT facilities and their often disparate systems to enable a single flow of commissioning data to the [Secondary Uses Service](#). In this case, data flows to the [Secondary Uses Service](#) for multiple sites from multiple senders must be very carefully managed in order to avoid inadvertent deletion or duplication of records in the [Secondary Uses Service](#).

In these cases, Senders are strongly advised to only use the Net Change Update Mechanism of the [Commissioning Data Set Submission Protocol](#) as data integrity is more manageable using the Net Change process rather than the Bulk Replacement process.

#### **CDS Net Change**

When using the Net Change process, multiple data flows from different sites or systems using the same [CDS INTERCHANGE SENDER IDENTITY](#) must ensure that each Commissioning Data Set record has a properly maintained [CDS UNIQUE IDENTIFIER](#).

If not, these submissions will most likely conflict and overwrite each other causing substantial data corruption in the [Secondary Uses Service](#) data base. It is recommended that wherever possible, individual sites or systems use a uniquely allocated [CDS INTERCHANGE SENDER IDENTITY](#) for submissions to the [Secondary Uses Service](#).

#### **CDS Bulk Replacement**

When using the Bulk Replacement process, a sender must not make multiple data flows from different organisation sites or systems using the same [CDS SENDER IDENTITY](#) and provider site code or the interchanges will conflict and overwrite each other causing substantial data corruption in the [Secondary Uses Service](#) data base.

To prevent this happening, individual sites and systems within an organisation must use a unique [CDS SENDER IDENTITY](#) and provider site code combination for Commissioning Data Set submissions to the [Secondary Uses Service](#). This can be achieved by utilising Provider and Site Codes already registered with the [Organisation Data](#)

[Service](#) which will then differentiate multiple Commissioning Data Set flows for the same provider by using the last 2 digits of the [ORGANISATION CODE](#).

### End Of Year Considerations

It may be necessary to avoid changes to systems processes for multiple flows at the end of the financial year, and retain the ability to use the previously used [Commissioning Data Set Submission Protocol](#) for data submitted earlier in the year, until the organisation has completed any refresh of data for that year. This would then ensure a complete set of commissioning data for that year for [Payment by Results](#) and [Hospital Episode Statistics](#) purposes.

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### COMMISSIONING DATA SET SUBMISSION PROTOCOL

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Change to Supporting Information: Changed Description

The [Commissioning Data Sets](#) submitted by providers carry information to determine the update method to be used by the [Secondary Uses Service](#) in order to update the national database.

These update rules are known as the [Commissioning Data Set Submission Protocol](#) and the set of data controls used to indicate this are carried in the Commissioning Data Set Transaction Header Group which must be present and correct in every [CDS TYPE](#) submitted to the [Secondary Uses Service](#).

Two Update Mechanisms are available:

- **Net Change** - to support the management of an individual [CDS TYPE](#) in the [Secondary Uses Service](#) database and enables Commissioning data to be inserted/ updated or deleted.  
***CDS Senders are expected to use the Net Change Update Mechanism wherever possible.***
- **Bulk Replacement** - to support the management of bulk commissioning data for an identified [CDS BULK REPLACEMENT GROUP](#) of data for a specified time period and for a specified [CDS PRIME RECIPIENT IDENTITY](#).  
***CDS Senders should only use the Bulk Replacement Update Mechanism in exceptional circumstances.***

~~It is strongly advised that all [NHS Trusts](#) should, as a minimum process, commence migration to use the CDS-XML Version 6 Message for weekly Net Change submissions by March 2009.~~ It is strongly advised that all [ORGANISATIONS](#) should, as a minimum process, commence migration to use the CDS-XML Version 6 Message for weekly Net Change submissions by March 2009.

### Net Change:

Net Change processes are managed by specific data settings as defined in the [CDS V6-1 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol](#) / [CDS V6-2 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol](#) option of the CDS Transaction Header Group. The [Secondary Uses Service](#) uses the following data to manage the database:

- [CDS SENDER IDENTITY](#)
- [CDS UNIQUE IDENTIFIER](#)
- [CDS APPLICABLE DATE](#)
- [CDS APPLICABLE TIME](#)

Each [CDS TYPE](#) must have a [CDS UNIQUE IDENTIFIER](#) which must be uniquely maintained for the life of that Commissioning Data Set record. This is a particular consideration where mergers and/or healthcare systems are changed or upgraded, see [Commissioning Data Set Submission and Organisation Mergers](#). Any change to the [CDS UNIQUE IDENTIFIER](#) during the "lifetime" of a Commissioning Data Set record will almost certainly result in a duplicate record being lodged in the [Secondary Uses Service](#) database.

A Commissioning Data Set record delete transaction must be sent to the [Secondary Uses Service](#) database when any previously sent Commissioning Data Set record requires deletion/removal, for example to reflect Commissioner changes etc.

From Commissioning Data Set version 6-2 onwards, the process for submitting Net Change records carrying a [CDS UPDATE TYPE](#) 1 (to indicate a CDS deletion or cancellation) changes. In previous CDS versions, it was necessary to send the original mandatory content of the deleted record in the [CDS TYPE](#) attached to the [CDS V6-1 Type 005N - Commissioning Data Set Transaction Header Group - Net Change Protocol](#). From Commissioning Data Set version 6-2, an empty XML element called 'Delete Transaction' can be used instead of the original [CDS TYPE](#), after the [CDS V6-2 Type 005N - CDS Transaction Header Group - Net Change Protocol](#). Note that [CDS UPDATE TYPE](#) code 1 should still be used to indicate a delete/cancellation when this mechanism is used.

The [CDS APPLICABLE DATE](#) and [CDS APPLICABLE TIME](#) must be used to ensure that all Commissioning data is updated in the [Secondary Uses Service](#) database in the correct chronological order.

The [CDS SENDER IDENTITY](#) **must not change during the lifetime of the CDS data.**

~~This is particularly significant for multiple and/or merged organisations, and for those services who submit data on behalf of another [Primary Care Trust](#) or [NHS Trust](#).~~ This is particularly significant for multiple and/or merged organisations, and for those services who submit data on behalf of another [NHS Trust](#), [NHS Foundation Trust](#) or [Independent Sector Healthcare Provider](#).

### **Bulk Replacement**

Bulk Replacement processes are managed by specific data settings as defined in the [CDS V6-1 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol](#) / [CDS V6-2 Type 005B - Commissioning Data Set Transaction Header Group - Bulk Update Protocol](#) option of the CDS Transaction Header Group. The [Secondary Uses Service](#) uses the following data to manage the database:

- [CDS SENDER IDENTITY](#)
- [CDS BULK REPLACEMENT GROUP](#) (CDS-XML schema version 6-1-1) / [CDS BULK REPLACEMENT GROUP CODE](#) (CDS-XML schema version 6-2)
- [CDS EXTRACT DATE](#)
- [CDS EXTRACT TIME](#)
- [CDS REPORT PERIOD START DATE](#)
- [CDS REPORT PERIOD END DATE](#)
- [CDS PRIME RECIPIENT IDENTITY](#)

Every [CDS TYPE](#) must be submitted using the correct [CDS BULK REPLACEMENT GROUP](#) (CDS-XML schema version 6-1-1) / [CDS BULK REPLACEMENT GROUP CODE](#) (CDS-XML schema version 6-2).

The [CDS REPORT PERIOD START DATE](#) and the [CDS REPORT PERIOD END DATE](#), (i.e. the effective date period), must be valid and consistent, and reflect the dates relevant to the Commissioning data contained in the interchange.

The [CDS SENDER IDENTITY](#) must not change during the lifetime of the Commissioning Data Set record. This is particularly significant for multiple and/or merged organisations, and for those services who submit data on behalf of another [ORGANISATION](#).

The [CDS PRIME RECIPIENT IDENTITY](#) must be identified in each Commissioning Data Set and must not be changed during the lifetime of the Commissioning Data Set record otherwise the data stored in the [Secondary Uses Service](#) database may lose its integrity (e.g. duplicate Commissioning data may be stored).

**For this reason it is advised that the [ORGANISATION CODE \(PCT OF RESIDENCE\)](#) (CDS-XML schema version 6-1-1) or [ORGANISATION CODE \(RESIDENCE RESPONSIBILITY\)](#) (CDS-XML schema version 6-2) should always be used to determine the [CDS PRIME RECIPIENT IDENTITY](#) as detailed in the [Commissioning Data Set Addressing Grid](#). Senders must also be aware that if the [ORGANISATION CODE \(PCT OF RESIDENCE\)](#) or [ORGANISATION CODE \(RESIDENCE RESPONSIBILITY\)](#) is itself derived**

from the [PATIENT's POSTCODE OF USUAL ADDRESS](#) then great care must be taken to manage all elements of this relationship.

If it is necessary to change any of this data during the lifetime of a Commissioning Data Set record, then the [Secondary Uses Service](#) help desk should be contacted for advice.

It is strongly advised that users of the Bulk Replacement Mechanism maintain a correctly generated [CDS UNIQUE IDENTIFIER](#) within the Commissioning data. This will establish a migration path towards the use of the Net Change Mechanism and will also then minimise the risk of creating duplicate Commissioning Data Set data.

### Sub contracting

If a [Health Care Provider](#) sub-contracts healthcare provision and its associated Commissioning Data Set submission to a second [ORGANISATION](#) (eg a different [Health Care Provider](#) or a Shared Services Organisation), arrangements to submit the Commissioning Data Set data must be made locally to ensure that only one [ORGANISATION](#) sends the Commissioning Data Set data to the [Secondary Uses Service](#).

If the second [ORGANISATION](#) wishes to add other Commissioning data to the [Secondary Uses Service](#) database to that already submitted by the first [ORGANISATION](#), both parties need to ensure that a different [CDS SENDER IDENTITY](#) is used. Often this is done by changing the last 2 digits of the 5 digit code (the Site element of the [ORGANISATION CODE](#)).

**Note:** Data sent using the same [CDS SENDER IDENTITY](#) by two different parties will most likely overwrite each other's data in the [Secondary Uses Service](#) database. Further advice can be obtained from the [Secondary Uses Service](#) helpdesk.

Users should be aware of how the 15 character code of their [CDS INTERCHANGE SENDER IDENTITY](#) (also known as the EDI Address) is created. This may depend on how their XML interface solution has been set up. It may not be possible to rely on a change to the [ORGANISATION CODE \(CODE OF PROVIDER\)](#) in order to change the [CDS INTERCHANGE SENDER IDENTITY](#) should this become necessary.

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### DEPARTMENT FOR WORK AND PENSIONS OVERSEAS HEALTHCARE TEAM

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Change to Supporting Information: Changed Description

The [Department for Work and Pensions Overseas Healthcare Team](#) (DWP OHT) is a team within the [Department for Work and Pensions](#), which acts on behalf of the [Department of Health](#).

One of the [Department for Work and Pensions Overseas Healthcare Team's](#) duties is to secure reimbursement for the cost of healthcare of [Overseas Visitors](#) from the [European Economic Area](#) and Switzerland under European Union regulations for the [Department of Health](#).

From 12 October 2009, the [Department for Work and Pensions Overseas Healthcare Team](#) are responsible for collecting information on [European Economic Area](#) residents and those from Switzerland who require NHS hospital treatment. ~~This is done via the [Overseas Visitor Treatment Portal](#) (OVT Portal) which every [NHS Trust](#) can access.~~ This is done via the [Overseas Visitor Treatment Portal](#) (OVT Portal) which every [NHS Trust](#) and [NHS Foundation Trust](#) can access.

For contact details for the [Department for Work and Pensions Overseas Healthcare Team](#), see the:

- [Department for Work and Pensions](#) website at: [Addresses for enquiries about contributions and benefits](#)
- [Department of Health](#) part of the gov.uk website at: [Useful Contacts](#).

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### DIAGNOSTIC IMAGING DATA SET OVERVIEW

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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 [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 is structured around the clinical processes of local Radiology Information Systems (RISs) used by [NHS Trusts](#) and [NHS Foundation 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](#), [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.

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#### HEALTH CARE PROVIDER

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Change to Supporting Information: Changed Description

A [Health Care Provider](#) is an [ORGANISATION](#).

~~A [Health Care Provider](#) is an [ORGANISATION](#) acting as a direct provider of health care services.~~ A [Health Care Provider](#) is an [ORGANISATION](#) acting as a direct provider of health care [SERVICES](#).

A [Health Care Provider](#) is a legal entity, or a sub-set of a legal entity, which may provide health care under [NHS SERVICE AGREEMENTS](#); it may operate on one or more sites within and outside hospitals.

~~This definition covers councils with social care responsibilities working in cooperation with an NHS [Health Care Provider](#) on nationally targeted and prioritised care as delivered within [Care Spells](#). This definition covers [Local Authorities](#) with social care responsibilities working in cooperation with an NHS [Health Care Provider](#) on nationally targeted and prioritised care as delivered within [Care Spells](#). Lead responsibility for such care may be solely led by one [Health Care Provider](#) or jointly shared by two or more [Health Care Providers](#) each of which must share equal responsibility.~~

The following [ORGANISATIONS](#) may act as [Health Care Providers](#):

- [GP Practice](#)
- [NHS Trust](#)
- [NHS Foundation Trust](#)
- Registered non-NHS Provider (e.g. [Independent Provider](#), [Independent Sector Healthcare Provider](#) etc)
- Unregistered non-NHS Provider
- [Care Trust](#)
- ~~Councils with social care responsibilities~~
- [Local Authorities](#) with social care responsibilities
- Other agencies

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## HOSPITAL PROVIDER

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Change to Supporting Information: Changed Description

~~A [Health Care Provider](#) providing services from a [Hospital Provider](#) is an ORGANISATION.~~

A [Hospital Provider](#) is a [Health Care Provider](#) providing [SERVICES](#) from a:

- [Care Home](#)
- ~~separately managed unit (including [NHS Trusts](#))~~
- ~~separately managed unit (including [NHS Trusts](#) and [NHS Foundation Trusts](#)).~~

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## NATIONAL NEONATAL DATA SET OVERVIEW

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Change to Supporting Information: Changed Description

### Contextual Overview

The [National Neonatal Data Set](#) consists of a defined list of data items that are extracted from electronic clinical records created by clinical staff on all admissions to Neonatal Critical Care Units in England.

The [National Neonatal Data Set](#) is in two parts:

- The [National Neonatal Data Set - Episodic and Daily Care](#) covers the period of time a baby is cared for in Neonatal Critical Care, Transitional Care, or other non-standard critical care settings
- ~~The [National Neonatal Data Set - Two Year Neonatal Outcomes Assessment](#), carries data relating to a [Two Year Neonatal Outcomes Assessment](#) carried out on the same child approximately two years after their treatment. The [Two Year Neonatal Outcomes Assessment](#) may be carried out by the same [NHS Trust](#) who was responsible for the neonatal [CRITICAL CARE PERIOD](#), or by a different [NHS Trust](#).~~
- The [National Neonatal Data Set - Two Year Neonatal Outcomes Assessment](#), carries data relating to a [Two Year Neonatal Outcomes Assessment](#) carried out on the same child approximately two years after their treatment. The [Two Year Neonatal Outcomes Assessment](#) may be carried out by the same [ORGANISATION](#) who was responsible for the neonatal [CRITICAL CARE PERIOD](#), or by a different [ORGANISATION](#).

The two neonatal data sets comprise data items relating to [PATIENT](#) demographics, [CLINICAL INTERVENTIONS](#), outcomes, and [PATIENT DIAGNOSES](#). Each data item is mapped where possible to existing [ISB](#) standards (such as the [Neonatal Critical Care Minimum Data Set](#) and [Maternity Services Secondary Uses Data Set](#)) as well as to [SNOMED CT](#) and [ICD](#) codes.

The aim of the [National Neonatal Data Set](#) is to extract data items from electronic clinical records, create a database of these items, and make this available as a national resource to serve a variety of needs, so avoiding duplicate data collections for different purposes, minimising the burden placed upon clinical teams, and promoting data quality and completeness.

~~[NHS Trusts](#) involved in the collection may choose whether to allow identifiable or unidentifiable (anonymised) information to flow to the [Neonatal Data Analysis Unit](#).~~ [ORGANISATIONS](#) involved in the collection may choose whether to allow identifiable or unidentifiable (anonymised) information to flow to the [Neonatal Data Analysis Unit](#). Where anonymised data is to flow, the appropriate 'withheld' patient and parents demographic structures should be used (i.e. those with no [PERSON IDENTIFIERS](#), such as [NHS NUMBER](#) or [PERSON BIRTH DATE](#)).

In addition, where anonymisation is required, the [DATES AND TIMES](#) of events carried throughout the data set (such as [PROCEDURE DATE \(SCREENING NEWBORN HEARING\)](#), [SAMPLE COLLECTION DATE AND TIME](#), [PROCEDURE DATE AND TIME \(ABDOMINAL X-RAY\)](#)) should be replaced with the specific relevant [YEAR AND MONTH](#) of the event **and** the [NUMBER OF MINUTES \(BIRTH TO EVENT\)](#). The [National Neonatal Data Set](#) structure allows an either/or choice for these event items throughout the data set.

## Data Collection

The [National Neonatal Data Set](#) consists of a defined list of data items that are extracted from electronic clinical records created by clinical staff relating to all neonatal critical care delivered in England. The [Neonatal Data Analysis Unit](#) has established a database, the National Neonatal Research Database (NNRD) to hold data comprising the [National Neonatal Data Set](#), as a national resource.

## Submission Information

For submission information, see the [NDAU website](#). Note that all [DATE AND TIME](#) fields in the [National Neonatal Data Set](#) should be in Co-ordinated Universal Time (UTC) for submission purposes.

## Further Guidance

Further guidance has been produced by the [Neonatal Data Analysis Unit](#) and is available on their website at: [NDAU website](#).

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## NHS FOUNDATION TRUST

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Change to Supporting Information: Changed Description

~~An [NHS Foundation Trust](#) is a type of [NHS Trust](#) which is an [ORGANISATION](#).~~ An [NHS Foundation Trust](#) is an [ORGANISATION](#).

An [NHS Foundation Trust](#) is a not-for-profit, public benefit corporation.

[NHS Foundation Trusts](#) were established by section 30 of, and Schedule 7 to, the [National Health Service Act 2006](#).

An [NHS Foundation Trust](#) provides goods and services for the purposes of the health service in England, in accordance with Chapter 5 of the [National Health Service Act 2006](#).

[NHS Foundation Trusts](#):

- ~~are not for profit, public benefit corporations~~

- provide over half of all NHS hospital, mental health and [Ambulance Services](#)
- were created to devolve decision making from central government to local [ORGANISATION](#) and communities
- provide over half of all NHS hospital, mental health, [Ambulance Services](#) and community care [SERVICES](#)
- were created to devolve decision making from central government to local communities
- provide and develop healthcare according to core NHS principles - free care, based on need and not ability to pay.

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

For further information on [NHS Foundation Trusts](#), see the:

- [Monitor website](#)
- [Monitor website at: What are NHS foundation trusts?](#)
- [NHS Choices website](#).

## NHS TRUST

Change to Supporting Information: Changed Description

~~[NHS Trust](#) is an [ORGANISATION](#).~~ An [NHS Trust](#) is an [ORGANISATION](#).

~~An [NHS Trust](#) is a legal entity, set up by order of the Secretary of State under section 5 of 'The National Health Service and Community Care Act 1990' and performance managed by a [Strategic Health Authority](#).~~ An [NHS Trust](#) is a legal entity, set up by order of the Secretary of State under section 25 of, and Schedule 4 to, the [National Health Service Act 2006](#), to provide goods and services for the purposes of the health service.

~~[NHS Trusts](#) may act as [Health Care Providers](#) and provide hospital services, community services and/or other aspects of patient care, such as patient transport facilities. They may also act as commissioners when sub-contracting patient care services to other providers of health care.~~ [NHS Trusts](#) may act as [Health Care Providers](#) and provide hospital services, community services and/or other aspects of [PATIENT](#) care, such as [PATIENT](#) transport facilities.

~~An [NHS Trust](#) may be approved to provide high security psychiatric services in high security accommodation for [PATIENTS](#) liable to be detained in hospital under provisions of the Mental Health Act 1983, who require treatment under conditions of special security on account of their dangerous, violent or criminal propensities. The services will be provided at one or more [Hospital Sites](#) of the [NHS Trusts](#).~~ They may also act as commissioners when sub-contracting [PATIENT](#) care [SERVICES](#) to other providers of health care.

~~To provide such services, the [NHS Trust](#) must be approved by the Secretary of State under paragraph 10(2) and (3) of Schedule 2 to the "National Health Service and Community Care Act 1990".~~

References:

~~Statutory Instrument 2000 No. 267; The National Health Service (Functions of Health Authorities and Administration Arrangements) Amendment Regulations 2000~~

## ORGANISATION CODES

Change to Supporting Information: Changed Description

The [Organisation Data Service](#) is responsible for allocating codes to a wide range of [ORGANISATIONS](#) in England and Wales, including but not limited to:

- [Care Trusts](#) (CTs)



- [Clinical Commissioning Groups \(CCGs\)](#)
- [Independent Providers \(IPs\)](#)
- [NHS Trusts](#)
- [NHS Foundation Trusts](#)
- [Pathology Laboratories](#)
- [Special Health Authorities \(SpHAs\)](#).

Several other UK agencies are responsible for issuing or publishing codes (to NHS standards) for the following healthcare [ORGANISATIONS](#) and [CARE PROFESSIONALS](#) and for maintaining their details.

- **[NHS Prescription Services:](#)**
  - [GENERAL MEDICAL PRACTITIONERS](#) in England, Wales, Isle of Man and Channel Islands
  - [GP Practices](#) in England, Isle of Man and Channel Islands
  - Pharmacy and appliance dispensers in England, Isle of Man and Channel Islands
- **[NHS Dental Services:](#)**
  - [GENERAL DENTAL PRACTITIONERS](#) in England, Wales and Isle of Man
  - General Dental Practices in England, Wales and Isle of Man
- **[NHS Wales Informatics Service \(NWIS\):](#)**
  - The Prescription Pricing Unit maintain [GP Practice](#) details by way of receiving notification from the Business Service Centre of a new [GP Practice](#) and then generating an internal code and passing on to the [NHS Prescription Services](#) for allocation of the W (Welsh) [GP Practice](#)
- **[NHS in Scotland:](#)**
  - All healthcare [ORGANISATIONS](#) and practitioners in Scotland
- **[Department of Health, Services and Public Safety \(DHSSPS\), Northern Ireland:](#)**
  - All healthcare [ORGANISATIONS](#) and practitioners in Northern Ireland
- **[Office for National Statistics \(ONS\):](#)**
  - Responsible for the formal definition of key health geographies in the UK, in terms of their component postcodes.

[ORGANISATION CODES](#) are used for the identification of:

- information returned to the [Department of Health](#);
- the [ORGANISATIONS](#) involved in the electronic exchange of information within the NHS;
- the parties involved in the commissioning and administration of an episode of care.

Where a valid [ORGANISATION CODE](#) is required for a message but is not available or not known for some reason, an [Organisation Data Service Default Code](#) can be used to provide a substitute value: These codes are maintained by the [Organisation Data Service](#).

The current coding standards were introduced in 1996 by the Organisation Codes Service (OCS), now the [Organisation Data Service](#). Subsequent revisions to the structure and format of [ORGANISATION CODES](#) have given these codes a consistent and stable format. This both reflects the organisational changes in the NHS and protects the codes against future changes to the structure of the NHS.

The [ORGANISATION CODES](#) are available in the [Organisation Data Service](#) data set, issued quarterly to NHS users via the online distribution service, [Technology Reference Data Update Distribution Service \(TRUD\)](#) and through the [Organisation Data Service website](#).

For contact details for [ORGANISATIONS](#) responsible for issuing or publishing codes, see the [Organisation Data Service website](#).

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#### **ORGANISATION MERGERS\_ renamed from NHS TRUST MERGERS**

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Change to Supporting Information: Changed Description, Name

#### **Introduction**

1. This guidance explains the circumstances under which [Hospital Provider Spells](#) should close and reopen as a result of a merger or demerger, in terms of NHS data standards. It specifies which codes should be used for those [Hospital Provider Spells](#) which must be closed and reopened,
  - for [DISCHARGE DESTINATION](#) etc, for the closing [Hospital Provider Spell](#) and
  - for [SOURCE OF ADMISSION](#) etc, for the new [Hospital Provider Spell](#).

**When [Hospital Provider Spells](#) Should be Closed and Reopened**

- A [Hospital Provider Spell](#) is provided by one [ORGANISATION](#) acting as a [Health Care Provider](#).
  - This guidance explains the circumstances under which [Hospital Provider Spells](#) should close and reopen as a result of a merger or demerger, in terms of NHS data standards. It specifies which codes should be used for those [Hospital Provider Spells](#) which must be closed and reopened for:
    - [DISCHARGE DESTINATION](#) etc, for the closing [Hospital Provider Spell](#) and
    - [SOURCE OF ADMISSION](#) etc, for the new [Hospital Provider Spell](#).

**When [Hospital Provider Spells](#) Should be Closed and Reopened**

- A [Hospital Provider Spell](#) is provided by one [ORGANISATION](#) acting as a [Health Care Provider](#). This means that the spell is linked to the [ORGANISATION CODE](#) of the provider. If the [ORGANISATION CODE](#) changes, the spell must end and another begin with the new [ORGANISATION CODE](#). If the spell does end, the [Consultant Episode \(Hospital Provider\)](#) within the spell must also end.

The following scenarios explain what this means in terms of [NHS Trust](#) mergers or demergers. Note that these assume that nothing changes other than the fact that the [NHS Trusts](#) merge or demerge, e.g. the [CONSULTANT](#) stays the same, etc. The following scenarios explain what this means in terms of [ORGANISATION](#) mergers or demergers. Note that these assume that nothing changes other than the fact that the [ORGANISATIONS](#) merge or demerge, e.g. the [CONSULTANT](#) stays the same, etc.

**Mergers**

- ~~Trust A merges with Trust B to produce Trust C, which has a new [ORGANISATION CODE](#).~~

**Mergers**

- [Trust A merges with Trust B to produce Trust C, which has a new \[ORGANISATION CODE\]\(#\)](#). The [ORGANISATION CODE](#) will change for both Trust A and B. Therefore [Hospital Provider Spells](#) in both Trust A and B should close, and new spells should be opened using the new [ORGANISATION CODE](#) for Trust C.
- [Trust A merges with Trust B to produce an \[ORGANISATION\]\(#\) which uses Trust A's \[ORGANISATION CODE\]\(#\)](#). For those [Hospital Provider Spells](#) in Trust A, the [ORGANISATION CODE](#) will not change. Therefore Trust A's [Hospital Provider Spells](#) should not be closed just as a result of the merger. However, for Trust B the [ORGANISATION CODE](#) will change. Therefore [Hospital Provider Spells](#) in Trust B should close, and new spells should be opened using the new [ORGANISATION CODE](#) for Trust A.

**Demergers**

- ~~Trust A splits into Trust B and Trust C, both of which have a new [ORGANISATION CODE](#).~~
  - [Trust A splits into Trust B and Trust C, both of which have a new \[ORGANISATION CODE\]\(#\)](#). The [ORGANISATION CODE](#) will change for both Trust B and C. Therefore all [Hospital Provider Spells](#) in Trust A should close, and new spells should be opened in Trust B and C using the new [ORGANISATION CODES](#) for each.
  - [Trust A splits into Trust B and C. Trust B retains Trust A's \[ORGANISATION CODE\]\(#\) and Trust C is issued with a new one](#). The [ORGANISATION CODE](#) for [Hospital Provider Spells](#) in Trust A which are taken over by Trust B will not change. Therefore they should not be closed just as a result of the merger. However, Trust A's [Hospital Provider Spells](#) which are taken over by Trust C should close, and new spells should be opened using the new [ORGANISATION CODE](#) for Trust C.

**The Codes Used when [Hospital Provider Spells](#) are Closed and Reopened**

- If [Hospital Provider Spells](#) are to be closed and reopened only as a result of [NHS Trust Mergers](#) or demergers, for most cases the codes below should be used.

#### **The CLOSED [Hospital Provider Spell](#)**

#### **The Codes Used when [Hospital Provider Spells](#) are Closed and Reopened**

- If [Hospital Provider Spells](#) are to be closed and reopened only as a result of [Organisation Mergers](#) or demergers, for most cases the codes below should be used.

#### **The CLOSED [Hospital Provider Spell](#)**

#### DISCHARGE DESTINATION

This depends on the type of [WARD](#) the [PATIENT](#) is in, but will be either:

- ~~51 NHS [Hospital Provider](#) - [WARD](#) for general [PATIENTS](#) or the younger physically disabled~~
- ~~52 NHS [Hospital Provider](#) - [WARD](#) for maternity [PATIENTS](#) or neonates~~
- ~~53 NHS [Hospital Provider](#) - [WARD](#) for [PATIENTS](#) who are mentally ill or have learning disabilities~~
- 51 NHS other [Hospital Provider](#) - [WARD](#) for general [PATIENTS](#) or the younger physically disabled
- 52 NHS other [Hospital Provider](#) - [WARD](#) for maternity [PATIENTS](#) or Neonates
- 53 NHS other [Hospital Provider](#) - [WARD](#) for [PATIENTS](#) who are mentally ill or have learning disabilities

#### DISCHARGE METHOD

- 1 [PATIENT](#) discharged on clinical advice or with clinical consent

#### **The REOPENED [Hospital Provider Spell](#)**

#### **The REOPENED [Hospital Provider Spell](#)**

#### ADMISSION METHOD

- 81 Transfer of any admitted [PATIENT](#) from other [Hospital Provider](#) other than in an emergency

Note that this [ADMISSION METHOD](#) is classed under "Other Admission". It is not elective and the [PATIENT](#) does therefore not have an entry on an [Elective Admission List](#).

#### SOURCE OF ADMISSION

Again, this depends on the type of [WARD](#) the [PATIENT](#) is in, but will be either:

- ~~51 NHS [Hospital Provider](#) - [WARD](#) for general [PATIENTS](#) or the younger physically disabled or [Accident and Emergency Department](#)~~
- ~~52 NHS [Hospital Provider](#) - [WARD](#) for maternity [PATIENTS](#) or neonates~~
- ~~53 NHS [Hospital Provider](#) - [WARD](#) for [PATIENTS](#) who are mentally ill or have learning disabilities~~
- 51 NHS other [Hospital Provider](#) - [WARD](#) for general [PATIENTS](#) or the younger physically disabled or [Accident and Emergency Department](#)
- 52 NHS other [Hospital Provider](#) - [WARD](#) for maternity [PATIENTS](#) or Neonates
- 53 NHS other [Hospital Provider](#) - [WARD](#) for [PATIENTS](#) who are mentally ill or have learning disabilities

#### REFERRER CODE

This will be the referrer to the [Hospital Provider Spell](#) within which the [PATIENT](#) was receiving care before the merger, i.e. the "original" [Hospital Provider Spell](#).

#### **Guidance for Merging Organisations to support Sending of Commissioning Data Sets to the [Secondary Uses Service](#)**

The [Secondary Uses Service](#) have published information regarding issues that may affect the approach to submitting data to the [Secondary Uses Service](#). The guidance is available in the section "*How do I send data to SUS?*" at: [Guidance and other useful documents](#).

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## ORGANISATION MERGERS\_ renamed from NHS TRUST MERGERS

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Change to Supporting Information: Changed Description, Name

- Changed Description
  - Changed Name from Web\_Site\_Content.Supporting\_Information.NHS\_Trust\_Mergers to Web\_Site\_Content.Supporting\_Information.Organisation\_Mergers
- 

## SPECIALIST COMMUNITY PUBLIC HEALTH NURSE

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Change to Supporting Information: Changed Description

A [Specialist Community Public Health Nurse](#) is a [CARE PROFESSIONAL](#).

A [Specialist Community Public Health Nurse](#) is a [PERSON](#) whose name is registered in the [Specialist Community Public Health Nurse's](#) part of the [Nursing and Midwifery Council Register](#) maintained by the [Nursing and Midwifery Council](#).

The Specialist Community Public Health Nursing Committee's definition of Specialist Community Public Health Nursing is:

There are currently four types of [Specialist Community Public Health Nurses](#) listed on the [Nursing and Midwifery Council Register](#):

*"Specialist Community Public Health Nursing aims to reduce health inequalities by working with individuals, families, and communities promoting health, preventing ill health and in the protection of health. The emphasis is on partnership working that cuts across disciplinary, professional and organisational boundaries that impact on organised social and political policy to influence the determinants of health and promote the health of whole populations".*

For further information on the Specialist Community Public Health Nursing Committee, see the [Nursing and Midwifery Council website](#).

There are currently four types of [Specialist Community Public Health Nurses](#) listed on the [Nursing and Midwifery Council Register](#):

- [Specialist Community Public Health Nurse - Family Health Nurse](#)
  - [Specialist Community Public Health Nurse - Health Visitor](#)
  - [Specialist Community Public Health Nurse - Occupational Health Nurse](#)
  - [Specialist Community Public Health Nurse - School Nurse](#)
- 

## SPECIALIST COMMUNITY PUBLIC HEALTH NURSE: SCHOOL NURSE

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Change to Supporting Information: Changed Description

A [Specialist Community Public Health Nurse: School Nurse](#) is a [CARE PROFESSIONAL](#).

[Specialist Community Public Health Nurse - School Nurses](#) provide a variety of services such as:

- providing health and sex education within [Schools](#)
- carrying out developmental screening
- undertaking health interviews, administering immunisation programmes etc.

[Specialist Community Public Health Nurse - School Nurses](#) can be employed either by the Local Health Authority, [Primary Care Trust](#), [NHS Trust](#) or sometimes by the [School](#) directly. [Specialist Community Public Health Nurse -](#)

School Nurses can be employed either by the Local Authority, Clinical Commissioning Group, NHS Trust, NHS Foundation Trust or by the School directly.

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## **SUPPORTING INFORMATION INTRODUCTION**

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Change to Supporting Information: Changed Description

Supporting Information provides information to help users understand and use the NHS Data Model and Dictionary.



For more

information on Supporting Information, see [Supporting Information Help](#).

Use the links below to access more detailed information:

### Coding and Classifications:

- [Clinical Coding](#)
- [Main Specialty and Treatment Function Codes](#)
- [Mental Health Act Table](#)

- [Clinical Coding](#)
- [Main Specialty and Treatment Function Codes](#)
- [Mental Health Act Table](#)

### NHS Data Model and Dictionary Information:

- [About the NHS Data Model and Dictionary Version 3](#)
- [Change Request Log](#)
- [Disclaimer](#)
- [Glossary of Terms](#)
- [Meta Model](#)

### Organisation Information:

- [NHS Postcode Directory](#)
- [NHS Trust Mergers](#)
- [Organisation Codes](#)
- [Organisation Data Service Default Codes](#)
- [Organisations](#)
- [NHS Postcode Directory](#)
- [Organisation Codes](#)
- [Organisation Data Service Default Codes](#)
- [Organisation Mergers](#)
- [Organisations](#)

### Contacts / Links:

- [Contact Details](#)
- [Information Standards Notices \(ISNs\)](#)
- [NHS Data Model and Dictionary Service Website](#)

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## SUPPORTING INFORMATION MENU

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Change to Supporting Information: Changed Description

- **Coding and Classifications**
- [Clinical Coding](#)
- [Main Specialty and Treatment Function Codes](#)
- [Mental Health Act Table](#)
- **Organisation Information**
- [NHS Postcode Directory](#)
- [NHS Trust Mergers](#)
- [ODS Default Codes](#)
- [Organisation Codes](#)
- [Organisation Mergers](#)
- [Organisations](#)
- **NHS Data Model and Dictionary Information**
- [About Version 3](#)
- [Change Request Log](#)
- [Disclaimer](#)
- [Glossary of Terms](#)
- [Meta Model](#)
- **Contacts/ Links**
- [Contact Details](#)
- [Information Standards Notices](#)
- [NHS Data Model and Dictionary Service Website](#)

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## SYSTEMIC ANTI-CANCER THERAPY DATA SET OVERVIEW

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Change to Supporting Information: Changed Description

### Introduction:

The [Systemic Anti-Cancer Therapy Data Set](#) collects clinical management information on [PATIENTS](#) undergoing [Chemotherapy](#) in (or funded by) the NHS in England.

In the clinical setting its primary use will be in prescribing and administering [Chemotherapy](#). The standard also specifies secondary uses information about systemic anti-cancer therapy ([Chemotherapy](#)) which is required to assist in achieving, supporting and monitoring the NHS Operating Framework, specialist commissioning and related policy.

Note: the term "[Chemotherapy](#)" is used synonymously with [Systemic Anti-Cancer Therapy](#) as it is the term in common usage.

#### **Details of Standard:**

The [Systemic Anti-Cancer Therapy Data Set](#) relates to all cancer [PATIENTS](#), both adult and paediatric, in both admitted [PATIENT](#) care and outpatient and community settings, who are receiving [Chemotherapy](#) treatment for all solid tumour and haematological malignancies, including those treated in clinical trials.

The [Systemic Anti-Cancer Therapy Data Set](#) covers the period from the [Start Date](#) of the [Systemic Anti-Cancer Drug Programme](#) to the [Start Date](#) of the last [Systemic Anti-Cancer Drug Cycle](#).

Note: [PATIENTS](#) may end their treatment with an oral or other component taken at home. Although the dispensing of this will be recorded in the final [Systemic Anti-Cancer Drug Cycle](#), it is not possible to confirm that the [PATIENT](#) has taken the medication.

#### **Data Set Structure and Transmission:**

[Chemotherapy](#) is given over a prolonged period of time, often months or years, comprising repeating and sequential elements. The [PATIENT](#) may attend two or more [Health Care Providers](#) during the course of treatment.

In order to track the [PATIENT](#) during treatment, the data set must be capable of linking all the elements of care in a consistent and ordered way. In order to achieve this, the [Systemic Anti-Cancer Therapy Data Set](#) has a branching structure which links the initial data fields, which will remain constant during the treatment, with detail of each [Systemic Anti-Cancer Drug Regimen](#), [Systemic Anti-Cancer Drug Cycle](#) and drug administration. At the completion or cessation of a [Systemic Anti-Cancer Drug Regimen](#), the outcome section must link back to all previous fields. It must be possible to reconstitute details of each [PATIENT](#)'s sequential management from the serial downloads received.

~~All [NHS Trusts](#) providing cancer [Chemotherapy SERVICES](#) are required to submit monthly data downloads to an agreed timetable, one month in arrears.~~ All [NHS Trusts](#) and [NHS Foundation Trusts](#) providing cancer [Chemotherapy SERVICES](#) are required to submit monthly data downloads to an agreed timetable, one month in arrears. These data must represent all treatment activity in the month period, including [Systemic Anti-Cancer Drug Regimens](#) started and completed or ceased in that time period.

The data repository is hosted by the National Cancer Registration Service (NCRS) Oxford, (formerly the Oxford Cancer Intelligence Unit), and the data is held under their section 251 of the [National Health Service Act 2006](#).

Data downloads will be either the csv or XML format and will uniquely identify the provider.

Data for submission will be formatted as an XML file as per the [Systemic Anti-Cancer Therapy Data Set Message Versions](#) page.

#### **Further Guidance:**

Detailed technical guidance on the processes required, and any required updates from time to time, is available from the [Chemotherapy Intelligence Unit \(CIU\)](#) in the [Technical Guidance documents](#) supporting the programme.

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#### **GENERAL DENTAL PRACTITIONER**

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Change to Class: Changed Description

A subtype of [GENERAL PRACTITIONER](#) which is a type of [CARE PROFESSIONAL](#).

A qualified dental practitioner, registered with the [General Dental Council](#) and on the dental list of a [Primary Care Trust](#) for the provision of general dental services. A qualified dental practitioner, registered with the [General Dental Council](#) and on the dental list of an [Area Team](#) for the provision of general dental services.

A [GENERAL DENTAL PRACTITIONER](#), also known as a [Dentist](#), may be abbreviated to [GDP](#).

#### PATIENT ORGANISATION

Change to Class: Changed Description

The identification of a [PATIENT](#) having a relationship with a particular [ORGANISATION](#) such as a [PATIENT](#) having been registered with a [NHS Trust](#) for [SERVICES](#). The identification of a [PATIENT](#) having a relationship with a particular [ORGANISATION](#) such as a [PATIENT](#) having been registered with a [NHS Trust](#) or [NHS Foundation Trust](#) for [SERVICES](#).

#### ACTIVITY LOCATION TYPE CODE

Change to Attribute: Changed Description

The type of [LOCATION](#) for an [ACTIVITY](#):

- where [PATIENTS](#) are seen
- where [SERVICES](#) are provided or
- from which requests for [SERVICES](#) are sent.

**[ACTIVITY LOCATION TYPE CODE](#) replaces [LOCATION TYPE CODE](#) and should be used for all new and developing data sets and for XML messages.**

National Codes:

CODE	VALUE	NOTES
	<b><a href="#">PATIENT</a> Main Residence or Related Location</b>	
A01	<a href="#">PATIENT</a> 's Home	
A02	Carer's Home	
A03	<a href="#">PATIENT</a> 's Workplace	
A04	Other <a href="#">PATIENT</a> Related Location	e.g. temporary address
	<b>Health Centre Premises</b>	
<del>B01</del>	<del>Primary Care Health Centre</del>	<del>Primary Care Health Centre with or without <a href="#">GP Practice</a> (s) based in it, providing community-based healthcare services such as podiatry, community dentistry, ophthalmology, minor injuries nursing etc, <a href="#">Sexual and Reproductive Health Service</a>, health promotion etc, and sometimes hosting outreach services from <a href="#">NHS Trusts</a></del>
B01	Primary Care Health Centre	Primary Care Health Centre with or without <a href="#">GP Practice</a> (s) based in it, providing community-based healthcare services such as podiatry, community dentistry, ophthalmology, minor injuries nursing etc, <a href="#">Sexual and Reproductive Health Service</a> , health promotion etc, and sometimes hosting outreach services from <a href="#">NHS Trusts</a> and <a href="#">NHS Foundation Trusts</a>
B02	Polyclinic	Provide similar services to Primary Care Health Centre but also additional services such as diagnostics, minor procedures, <a href="#">Out-Patient Appointments</a> , urgent care etc. and also co-located services with <a href="#">Local Authority</a>



		Social Care. May also provide extended/out of hours services.
<b>GENERAL PRACTITIONER and OPHTHALMIC MEDICAL PRACTITIONER</b>		
C01	<a href="#">General Medical Practitioner Practice</a>	Stand-alone <a href="#">GP Practice</a> premises, not part of a Primary Care Health Centre
C02	<a href="#">Dental Practice</a>	Stand-alone <a href="#">GP Practice</a> premises, not part of a Primary Care Health Centre
C03	<a href="#">OPHTHALMIC MEDICAL PRACTITIONER Premises</a>	
<b>Walk In Centres, Out of Hours Premises and Emergency Community Dental Services</b>		
D01	Walk In Centre	May be NHS <a href="#">GENERAL PRACTITIONER</a> Led, <a href="#">NURSE</a> led, or provided by private company. May be sited in different areas – <a href="#">Primary Care Trust</a> premises, on hospital sites, in retail premises etc
D02	Out of Hours Centre	May be NHS <a href="#">GENERAL PRACTITIONER</a> Led, <a href="#">NURSE</a> led, or provided by private company. May be sited in different areas – <a href="#">Primary Care Trust</a> premises, on hospital sites, in retail premises etc
D01	Walk In Centre	May be NHS <a href="#">GENERAL PRACTITIONER</a> Led, <a href="#">NURSE</a> -led, or provided by private company. May be sited in different areas - health care premises, in retail premises etc
D02	Out of Hours Centre	May be NHS <a href="#">GENERAL PRACTITIONER</a> -Led, <a href="#">NURSE</a> -led, or provided by private company. May be sited in different areas - health care premises, in retail premises etc
D03	Emergency Community Dental Service	Run by Community Dental Services not <a href="#">GENERAL DENTAL PRACTITIONERS</a>
<b>Locations on Hospital Premises</b>		
E01	<a href="#">Out-Patient Clinic</a>	
E02	<a href="#">WARD</a>	
E03	Day Hospital	
E04	Accident and Emergency or Minor Injuries Department	
E99	Other Departments	e.g. <a href="#">Pathology Laboratories</a> , physiotherapy, diagnostic imaging, Occupational Therapy, <a href="#">Pharmacy Premises</a> etc
<b>Hospice Premises</b>		
F01	Hospice	
<b>Nursing and Residential Homes</b>		
G01	Residential <a href="#">Care Home</a>	
G02	Nursing Home	See appropriate section of <a href="#">Care Home</a>
G03	<a href="#">Children's Home</a>	
<b>Day Centre Premises</b>		
H01	Day Centre	Facilities operated by the NHS, Social Services or private or voluntary bodies, providing day care and respite care for elderly or disabled people
<b>Resource Centre Premises</b>		
J01	Resource Centre	Premises where information and support for <a href="#">PATIENTS</a> and their families/carers is provided.
<b>Dedicated Facilities for Children and Families</b>		
K01	Sure Start Children's Centre	Children's centres are service hubs where children under five years old and their families can receive seamless integrated services and information. Services vary according to centre but may include: <ul style="list-style-type: none"> <li>• Integrated early education and childcare</li> </ul>

		<ul style="list-style-type: none"> <li>• Support for parents including advice on parenting, local childcare options and access to specialist services for families</li> <li>• Child and family health services</li> <li>• Helping parents into work</li> </ul>
K02	Child Development Centre	
<b>Educational, Childcare and Training Establishments</b>		
L01	<a href="#">School</a>	Including Extended Services, where provided on <a href="#">School</a> premises (where provided off <a href="#">School</a> premises, use other appropriate location)
L02	Further Education <a href="#">College</a>	
L03	University	
L04	Nursery Premises	Pre-school Nurseries attached to <a href="#">Schools</a> would be classed as <a href="#">Schools</a> in their own right
L05	Other Childcare Premises	e.g. Childminder
L06	Training Establishments	
L99	Other Educational Premises	Such as Teenage Pregnancy Units, School Preparation Units (for toddlers), Pupil Referral Units (excluded older children and young people), units providing specialist education e.g. deaf children, autistic children etc
<b>Justice and Home Office Premises</b>		
M01	Prison	
M02	Probation Service Premises	
M03	Police Station	
M04	Young Offenders Institution	
M05	Immigration Centre	
<b>Public Locations</b>		
N01	Street or other public open space	Public areas such as streets, parks, outdoor sports facilities etc
N02	Other publicly accessible area or building	Publicly accessible premises such as Youth Centres, supermarkets, shops and other retail locations such as shopping centres, community facilities such as libraries, church halls, community centres etc
N03	Voluntary or charitable agency premises	
N04	<a href="#">Dispensing Optician</a> Premises	
N05	Dispensing <a href="#">Pharmacy Premises</a>	Where it is not on a <a href="#">Hospital Site</a>
<b>Other Locations</b>		
X01	Other locations not elsewhere classified	

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## DISCHARGE DESTINATION

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Change to Attribute: Changed Description

The destination of a [PATIENT](#) on completion of a [Hospital Provider Spell](#), or a note that the [PATIENT](#) died or was a still birth.

*National Codes:*

- 19 Usual place of residence unless listed below, for example, a private dwelling whether owner occupied or owned by [Local Authority](#), housing association or other landlord. This includes wardened accommodation but not residential accommodation where health care is provided. It also includes [PATIENTS](#) with no fixed abode.
- 29 Temporary place of residence when usually resident elsewhere (includes hotel, residential educational establishment)
- 30 ~~Repatriation from high security psychiatric accommodation in an NHS [Hospital Provider](#) ([NHS Trust](#))~~

- 30 [Repatriation from high security psychiatric accommodation in an NHS Hospital Provider \(NHS Trust or NHS Foundation Trust\)](#)
- 37 Court
- 38 Penal establishment or police station
- 48 High Security Psychiatric Hospital, Scotland
- 49 NHS other hospital provider - high security psychiatric accommodation
- 50 NHS other hospital provider - medium secure unit
- 51 NHS other hospital provider - ward for general [PATIENTS](#) or the younger physically disabled
- 52 NHS other hospital provider - ward for maternity [PATIENTS](#) or [Neonates](#)
- 53 NHS other hospital provider - ward for [PATIENTS](#) who are mentally ill or have learning disabilities
- 54 NHS run [Care Home](#)
- 65 [Local Authority](#) residential accommodation i.e. where care is provided
- 66 [Local Authority](#) foster care
- 79 Not applicable - [PATIENT](#) died or still birth
- 84 Non-NHS run hospital - medium secure unit
- 85 Non-NHS (other than [Local Authority](#)) run [Care Home](#)
- 87 Non-NHS run hospital
- 88 Non-NHS (other than [Local Authority](#)) run Hospice

**PRIVATE CONTROLLED DRUG PRESCRIBER CODE**

Change to Attribute: Changed Description

A [PRIVATE CONTROLLED DRUG PRESCRIBER CODE](#) is allocated by the [NHS Prescription Services](#) to private prescribers who prescribe schedule 2 and 3 controlled drugs that are intended to be dispensed by registered pharmacies.

*Note: A registered pharmacy means [Pharmacy Premises](#) registered with the [General Pharmaceutical Council](#) and listed on the [General Pharmaceutical Council Register](#).*

For information on Controlled Drugs, see the [NHS Business Services Authority Prescription Pricing Division website](#).

Private Controlled Drug Prescribers fall into one of the following types:

- Private General Practitioners
- Private Nurses
- Private Pharmacists
- Private Optometrists
- Private Physiotherapists
- Private Radiographers
- Private Podiatrists

~~Each Private Controlled Drug Prescriber is linked to one [Primary Care Trust](#). This is the responsible [Primary Care Trust](#) which will not necessarily be the geographic [Primary Care Trust](#).~~ Each Private Controlled Drug Prescriber is linked to one [Area Team](#). This is the [Area Team](#) that is responsible for the Private Controlled Drug Prescriber and may not necessarily be the geographic [Area Team](#).

**Private Controlled Drug Prescriber Code format**

Practitioner Code Type	Character Position								Allocated By	Allocated To	Known As	Notes
	1	2	3	4	5	6	7	8				
	Q	0-9	0-9	0-9	0-9	0-9	0-9	0-9			PCDP	

<a href="#">PRIVATE CONTROLLED DRUG PRESCRIBER CODE</a>									<a href="#">NHS Prescription Services</a>	Private Prescribers of Controlled Drugs in England and Wales		Last character is a check digit
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#### REFERRAL TO TREATMENT PERIOD START DATE

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Change to Attribute: Changed Description

The start date of a [REFERRAL TO TREATMENT PERIOD](#).

This is a specific type of the attribute [ACTIVITY DATE](#).

A [REFERRAL TO TREATMENT PERIOD START DATE](#) will be one of the following:

- **Initial Referral:**
  - the [REFERRAL REQUEST RECEIVED DATE](#) of a [SERVICE REQUEST](#) for a particular condition.
  - This will include a [PATIENT](#) being re-referred in to a [Consultant Led Service](#) or an [Interface Service](#) or an [NHS Allied Health Professional Service \(Referral To Treatment Measurement\)](#) as a new referral including after a [Discharge After Patient Did Not Attend](#). The [REFERRAL TO TREATMENT PERIOD STATUS](#) is '*National Code 10 - first activity*'
- **Following an [APPOINTMENT](#) that the [PATIENT](#) did not attend:**
  - the [APPOINTMENT ACCEPTED DATE](#) (or the [INVITATION OFFER DATE SENT](#) of the first [APPOINTMENT OFFER](#) where the [APPOINTMENT OFFER](#) is sent) for the first [APPOINTMENT](#) following the [PATIENT](#) not attending an [APPOINTMENT](#) or elective admission. See [REFERRAL TO TREATMENT PERIOD](#) and [Discharge After Patient Did Not Attend](#) for guidance on [PATIENTS](#) who do not attend
  - The [APPOINTMENT DATE](#) of the [APPOINTMENT](#) that the [PATIENT](#) did not attend should be used where it is not possible to identify the [APPOINTMENT ACCEPTED DATE](#) or the [INVITATION OFFER DATE SENT](#). The [REFERRAL TO TREATMENT PERIOD STATUS](#) is '*National Code 10 - first activity*'
- **Following active monitoring:**
  - the [ACTIVITY DATE](#) of a [CARE ACTIVITY](#) when a decision to treat was made following [Active Monitoring](#) and the [REFERRAL TO TREATMENT PERIOD STATUS](#) is '*National Code 11 - active monitoring end*'
  - This will include a decision to start a substantively new or different treatment that does not already form part of that [PATIENT](#)'s agreed [CARE PLAN](#).
- **On identifying a separate condition:**
  - the [REFERRAL REQUEST RECEIVED DATE](#) of a [SERVICE REQUEST](#) when a decision has been made to refer the [PATIENT](#) directly to a [Consultant Led Service](#) or an [NHS Allied Health Professional Service \(Referral To Treatment Measurement\)](#) for a separate condition (the [REFERRAL TO TREATMENT PERIOD STATUS](#) for the first [CARE ACTIVITY](#) with the new [CONSULTANT](#) or [NHS Allied Health Professional Service \(Referral To Treatment Measurement\)](#) is '*National Code 12 - consultant or NHS Allied Health Professional Service (Referral To Treatment) referral*').

#### Referral To Treatment Consultant Led Waiting Times:

For most [PATIENTS](#), the start of the [REFERRAL TO TREATMENT PERIOD](#) begins with a [SERVICE REQUEST](#) from a [GENERAL MEDICAL PRACTITIONER](#) to a [CONSULTANT](#).

~~[SERVICE REQUESTS](#) to [CONSULTANTS](#) who provide care services in community settings (for example in outreach clinics, directly employed by a [Primary Care Trust](#) or working in a community hospital) also start [REFERRAL TO TREATMENT PERIODS](#) and the [REFERRAL REQUEST RECEIVED DATE](#) will be the start of the [REFERRAL TO TREATMENT PERIOD](#).~~ [SERVICE REQUESTS](#) to [CONSULTANTS](#) who provide care [SERVICES](#) in community settings also start [REFERRAL TO TREATMENT PERIODS](#) and the [REFERRAL REQUEST RECEIVED DATE](#) will be the start of the [REFERRAL TO TREATMENT PERIOD](#).

~~A [REFERRAL TO TREATMENT PERIOD](#) may also start from [SERVICE REQUESTS](#) to [CONSULTANTS](#) from [GENERAL DENTAL PRACTITIONERS](#), [Practitioners with Special Interests](#), [OPTOMETRISTS](#) and [Orthoptists](#), [National Screening Programmes](#), [Specialist NURSES](#), other [CARE PROFESSIONALS](#) where [Primary Care Trusts](#) have approved these mechanisms locally.~~  
A [REFERRAL TO TREATMENT PERIOD](#) may also start from [SERVICE REQUESTS](#) to [CONSULTANTS](#) from [GENERAL DENTAL PRACTITIONERS](#), [Practitioners with Special Interests](#), [OPTOMETRISTS](#) and [Orthoptists](#), [National Screening Programmes](#), [Specialist NURSES](#), other [CARE PROFESSIONALS](#) where commissioning [ORGANISATIONS](#) have approved these mechanisms locally.

An 18-week clock also starts upon a self referral by a [PATIENT](#) to the above services, where these pathways have been agreed locally by commissioners and providers and once the referral is ratified by a [CARE PROFESSIONAL](#).

A [REFERRAL TO TREATMENT PERIOD](#) will also start where [PATIENTS](#) are transferred to an elective [Consultant Led Service](#) through [SERVICE REQUESTS](#) from [Accident and Emergency Departments](#) including Minor injuries units and Walk In Centres.

### Allied Health Professional Referral To Treatment Measurement:

Further guidance relating to the Allied Health Professional Referral To Treatment can be found on the [Department of Health](#) part of the gov.uk website at: [Allied health professional referral to treatment revised guide](#).

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#### CDS PRIME RECIPIENT IDENTITY

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Change to Data Element: Changed Description

Format/Length:	an3 or an5
HES Item:	
National Codes:	
ODS Default Codes:	TDH00 - <a href="#">Overseas Visitor</a> exempt from charges

#### Notes:

[CDS PRIME RECIPIENT IDENTITY](#) is the mandatory NHS [ORGANISATION CODE](#) (or valid [Organisation Data Service Default Code](#)) representing the [ORGANISATION](#) determined to be the Commissioning Data Set Prime Recipient of the Commissioning Data Set Message as indicated in the [Commissioning Data Set Addressing Grid](#).

#### Usage:

~~The [CDS PRIME RECIPIENT IDENTITY](#) must be allocated on the first creation and submission of a [CDS TYPE](#) for a [PATIENT](#) and **must not change even if the [ADDRESS](#) or [Primary Care Trust](#) of the [PATIENT](#) changes during the lifetime of the Commissioning Data Set record** otherwise duplicate Commissioning Data Set data may be lodged in the [Secondary Uses Service](#) database.~~  
The [CDS PRIME RECIPIENT IDENTITY](#) must be allocated on the first creation and submission of a [CDS TYPE](#) for a [PATIENT](#) and **must not change even if the [ADDRESS](#) or [ORGANISATION CODE \(RESIDENCE RESPONSIBILITY\)](#) of the [PATIENT](#) changes during the lifetime of the Commissioning Data Set record** otherwise duplicate Commissioning Data Set data may be lodged in the [Secondary Uses Service](#) database.

[CDS PRIME RECIPIENT IDENTITY](#) is a mandatory data item crucial for the correct indexing of the database and must not be changed during the life of the associated Commissioning Data Set. It does not identify the first or most important recipient of data, i.e. there is no inference of primacy of one recipient over another.

[Organisation Data Service Default Codes](#) for [CDS PRIME RECIPIENT IDENTITIES](#) are detailed in the [Commissioning Data Set Addressing Grid](#).

Please note that the following [Organisation Data Service Default Codes](#) must not be used in the Commissioning Data Set (CDS) header because they are not default Commissioner codes:

- Q99 - High Level Health Geography/Primary Care Organisation of Residence Not Known
  - for the [CDS PRIME RECIPIENT IDENTITY](#), a valid [ORGANISATION CODE \(PCT OF RESIDENCE\)](#) must be reported
- X98 - Primary Care Organisation Not Applicable ([Overseas Visitors](#))
  - for the [CDS PRIME RECIPIENT IDENTITY](#), the [Commissioning Data Set Addressing Grid](#) confirms the correct code that should be reported for [Overseas Visitors](#) who are exempt from charges.

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#### COMMISSIONING SERIAL NUMBER

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Change to Data Element: Changed Description

Format/Length:	an6
HES Item:	CSNUM
National Codes:	
Default Codes:	

#### Notes:

[COMMISSIONING SERIAL NUMBER](#) is the same as attribute [NHS SERVICE AGREEMENT NUMBER](#).

From 01/04/2001 this data item will be used to identify [PATIENTS](#) treated under [Non-Contract Activities](#). [NHS Trusts](#) are required to insert the letters 'OAT' (mandated input as capitals) in the first three characters of the [COMMISSIONING SERIAL NUMBER](#) field of the Admitted Patient Care Commissioning Data Set. [NHS Trusts](#) and [NHS Foundation Trusts](#) are required to insert the letters 'OAT' (mandated input as capitals) in the first three characters of the [COMMISSIONING SERIAL NUMBER](#) field of the Admitted Patient Care Commissioning Data Set. The remaining three characters will continue to be defined locally, see [DSCN 17/2000](#).

From 01/04/2005 an '=' (equals) as the last significant character in this six character field will indicate an episode that should be excluded from the [Payment by Results](#) tariff. The position of the last character depends on any preceding characters eg 1st character if field is otherwise blank, 4th character if following 'OAT', up to a maximum of 6th position. This provides a general exclusion facility for unusual circumstances or where more specific rules regarding coding in other fields cannot be implemented due to local software restrictions.

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#### ORGANISATION CODE (PCT OF RESIDENCE)

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Change to Data Element: Changed Description

Format/Length:	an3
HES Item:	PCTR
National Codes:	
<a href="#">ODS Default Codes</a> :	Q99 - High Level Health Geography/Primary Care <a href="#">ORGANISATION</a> of Residence Not Known Note: this code must not be used in the Commissioning Data Set (CDS) header. It is not a default Commissioner code. X98 - Primary Care <a href="#">ORGANISATION</a> Not Applicable ( <a href="#">Overseas Visitors</a> ) Note: this code must not be used in the Commissioning Data Set (CDS) header. It is not a default Commissioner code.

#### Notes:

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

[ORGANISATION CODE \(PCT OF RESIDENCE\)](#) is the [ORGANISATION CODE](#) derived from the [PATIENT's POSTCODE OF USUAL ADDRESS](#), where they reside within the boundary of a:

- [Primary Care Trust](#)
- [Primary Care Trust](#) (until 31 March 2013)
- [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 \(Isle of Man\)](#).

[ORGANISATION CODES](#) can be downloaded from the [Organisation Data Service website](#) or through the online [Technology Reference Data Update Distribution Service \(TRUD\)](#). For further information, see [Organisation Data Service](#).

For [PATIENTS](#) who are [Overseas Visitors](#): [Organisation Data Service Default Code](#) X98 'Primary Care Organisation Not Applicable ([Overseas Visitors](#)) should be reported.

*Note: A review of [Organisation Data Service Default Codes](#) is planned to be carried out and this default code will be updated as part of that.*

For the purposes of sending Commissioning Data Set messages to the [Secondary Uses Service](#) (regardless of how local systems hold the data), it is essential at present to continue using a 3 character field, using the first 3 characters of the [ORGANISATION CODE \(PCT OF RESIDENCE\)](#) and following the same update rules relating to Prime Recipient as are currently in place. This is necessary, primarily to preserve the integrity of the current Commissioning Data Set message and the [CDS PRIME RECIPIENT IDENTITY](#) which is derived from the [ORGANISATION CODE \(PCT OF RESIDENCE\)](#).

At April 2013, [Primary Care Trusts](#) will no longer exist. [Health Care Providers](#) still using Commissioning Data Set version 6-1 (CDS-XML schema 6-1-1) at this point must complete the [ORGANISATION CODE \(PCT OF RESIDENCE\)](#) field in the PATIENT IDENTITY group structures, with the data which is carried in [ORGANISATION CODE \(RESIDENCE RESPONSIBILITY\)](#) in Commissioning Data Set version 6-2 (generally, this will be the [Clinical Commissioning Group \(CCG\)](#) of Residence, where the [CCG](#) has taken over the responsibilities of the [Primary Care Trust](#)).

The [Organisation Data Service](#) provides postcode files which link postcodes to the [Primary Care Trust](#). See [NHS Postcode Directory](#).

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#### **ORGANISATION CODE (RECEIVING)**

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Change to Data Element: Changed Description

Format/Length:	an3 or an5
HES Item:	
National Codes:	
Default Codes:	ZZ201 - Not applicable (not discharged to another <a href="#">ORGANISATION</a> ) *

#### **Notes:**

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

[ORGANISATION CODE \(RECEIVING\)](#) is the [ORGANISATION CODE](#) of the [ORGANISATION](#) that is receiving the [PATIENT](#) from another [Health Care Provider](#).

~~For the [National Neonatal Data Set - Episodic and Daily Care](#), this is the [ORGANISATION CODE](#) of the [NHS Trust](#) where a baby is transferred to on discharge from the neonatal critical care. For the [National Neonatal Data](#)~~

Set - Episodic and Daily Care, this is the ORGANISATION CODE of the ORGANISATION where a baby is transferred to on discharge from the neonatal critical care.

\* Note: default code ZZ201 is ONLY valid for the [National Neonatal Data Set - Episodic and Daily Care](#).

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#### REFERRER CODE

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Change to Data Element: Changed Description

Format/Length:	an8
HES Item:	REFERRER
National Codes:	
<a href="#">ODS Default Codes:</a>	A9999998 - Ministry of Defence Doctor C9999998 - <a href="#">CONSULTANT GENERAL MEDICAL COUNCIL REFERENCE NUMBER</a> not known CD999998 - Dental <a href="#">CONSULTANT: GENERAL MEDICAL COUNCIL REFERENCE NUMBER / GENERAL DENTAL COUNCIL REGISTRATION NUMBER</a> not known D9999998 - Dentist, <a href="#">GENERAL DENTAL PRACTITIONER CODE</a> not known R9999981 - Referrer other than <a href="#">GENERAL MEDICAL PRACTITIONER</a> , <a href="#">GENERAL DENTAL PRACTITIONER</a> or <a href="#">CONSULTANT</a> X9999998 - Not applicable, e.g. <a href="#">PATIENT</a> has self-presented or not known

#### Notes:

[REFERRER CODE](#) is the code of the [PERSON](#) making the [REFERRAL REQUEST](#). This will normally be a [CARE PROFESSIONAL](#), [GENERAL MEDICAL PRACTITIONER](#) or [CONSULTANT](#).

The intention is for this item to reflect the actual (true) referrer. For example, following a [GENERAL MEDICAL PRACTITIONER](#) referral, a [CONSULTANT](#) may subsequently refer the [PATIENT](#) to another [CONSULTANT](#) within the [Hospital Provider Spell](#). The code of the [CONSULTANT](#) making the referral and the [CONSULTANTS ORGANISATION](#) should be recorded in the Commissioning Data Set (CDS) rather than the code of the [GENERAL MEDICAL PRACTITIONER](#) referrer. ~~This also applies where a [CONSULTANT](#) refers an NHS [PATIENT](#) to another doctor for NHS-commissioned treatment at another [NHS Trust](#), a non-NHS provider, or an overseas provider.~~ This also applies where a [CONSULTANT](#) refers an NHS [PATIENT](#) to another doctor for NHS-commissioned treatment at another NHS / non-NHS provider, or an overseas provider. Where the [CONSULTANT CODE](#) is not known, the [Organisation Data Service Default Code](#) C9999998 should be used.

In all other cases, the code of the referring [GENERAL MEDICAL PRACTITIONER](#) should be recorded, if applicable. When a locum refers, use the [GENERAL MEDICAL PRACTITIONER PPD CODE](#) of the [GENERAL PRACTITIONER](#) for whom the locum is acting.

See [CONSULTANT CODE](#) and [GENERAL MEDICAL PRACTITIONER \(SPECIFIED\)](#) for the codes available for [CONSULTANTS](#) and [GENERAL MEDICAL PRACTITIONERS](#) and [GENERAL DENTAL PRACTITIONERS](#).

If the [REFERRER CODE](#) is not known or not applicable e.g. the [PATIENT](#) has self-presented, the [Organisation Data Service Default Code](#) (X9999998) should be used.

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#### REFERRING ORGANISATION CODE

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Change to Data Element: Changed Description

Format/Length:	max an6
HES Item:	
National Codes:	
<a href="#">ODS Default Codes:</a>	X99998 - Referring <a href="#">ORGANISATION CODE</a> not applicable X99999 - Referring <a href="#">ORGANISATION CODE</a> not known



**Notes:**

[REFERRING ORGANISATION CODE](#) is the same as attribute [ORGANISATION CODE](#).

[REFERRING ORGANISATION CODE](#) is the [ORGANISATION CODE](#) of the [ORGANISATION](#) from which the referral is made, such as a [GP Practice](#) or [NHS Trust](#). This information is essential for managing service agreements which are based on patterns of referral. [REFERRING ORGANISATION CODE](#) is the [ORGANISATION CODE](#) of the [ORGANISATION](#) from which the referral is made, such as a [GP Practice](#), [NHS Trust](#) or [NHS Foundation Trust](#).

This information is essential for managing service agreements which are based on patterns of referral.

**SITE CODE (RECEIVING)**

Change to Data Element: Changed Description

Format/Length:	min an5 max an9
HES Item:	
National Codes:	
Default Codes:	ZZ201 - Not applicable (not discharged to another <a href="#">ORGANISATION</a> ) *

**Notes:**

[SITE CODE \(RECEIVING\)](#) is the same as the attribute [ORGANISATION SITE CODE](#).

[SITE CODE \(RECEIVING\)](#) is the [ORGANISATION SITE CODE](#) of the [ORGANISATION](#) that is receiving the [PATIENT](#) from another [Health Care Provider](#).

~~For the [National Neonatal Data Set - Episodic and Daily Care](#), [SITE CODE \(RECEIVING\)](#) is the [ORGANISATION SITE CODE](#) of the [NHS Trust](#) where a baby is transferred to on discharge from the Neonatal Critical Care Unit.~~ For the [National Neonatal Data Set - Episodic and Daily Care](#), [SITE CODE \(RECEIVING\)](#) is the [ORGANISATION SITE CODE](#) of the [ORGANISATION](#) where a baby is transferred to on discharge from the Neonatal Critical Care Unit.

\* Note: default code ZZ201 is ONLY valid for the [National Neonatal Data Set - Episodic and Daily Care](#).

For enquiries about this Change Request, please email [information.standards@hscic.gov.uk](mailto:information.standards@hscic.gov.uk)