

# Data Provision Notice (NHS Digital)

## For NHS 111 Pathways NHS Number Collection

Information Asset Owner: Mandy Williams

Version: 1.0

Published: 16 June 2017



**Information and technology**  
**for better health and care**

---

# Contents

<b>Background</b>	<b>3</b>
<b>Purpose of the collection</b>	<b>3</b>
<b>Benefits of the collection here</b>	<b>3</b>
<b>Legal basis for the collection, analysis, publication and dissemination</b>	<b>4</b>
<b>Persons consulted</b>	<b>4</b>
<b>Scope of the collection</b>	<b>4</b>
<b>Form of the collection</b>	<b>5</b>
<b>Manner of the collection</b>	<b>5</b>
<b>Period of the collection</b>	<b>5</b>
<b>Data Quality</b>	<b>6</b>
<b>Burden of the collection</b>	<b>6</b>
<b>Steps taken by NHS Digital to minimise the burden of collection</b>	<b>6</b>
<b>Detailed burden assessment findings</b>	<b>7</b>
<b>Assessed costs</b>	<b>7</b>
<b>Help us to identify inappropriate collections</b>	<b>7</b>
<b>Appendix A – Intelligent Data Tool Specification</b>	<b>8</b>
<b>Appendix B – Fair Processing/Privacy Notice</b>	<b>8</b>

---

## Background

The Health and Social Care Act 2012 (the Act) gives the Health and Social Care Information Centre now trading as [NHS Digital](#) and hereafter referred to by this name, statutory powers, under section 259(1), to require data from health or social care bodies, or organisations who provide health or adult social care in England, where it has been Directed to establish an information system by the Department of Health (DH) (on behalf of the Secretary of State) or NHS England.

The data, as specified by NHS Digital in this published Data Provision Notice, is required to support a direction from NHS England to NHS Digital. Therefore, organisations that are listed in the 'Scope of the collection' section of the notice are legally required, under section 259(5) of the Act, to provide the data in the form and manner specified below.

## Purpose of the collection

- The addition of the NHS number to the existing NHS Pathways Data Collection has been requested to enable linking of the 111/999 service data with the clinical outcomes of the patients using the service.
- The NHS number is a unique identifier that allows us to map the NHS Pathways data to the outcome datasets from healthcare services that would be expected to receive patients via NHS 111 or 999, e.g. A&E, GP Out of hours etc.
- The inclusion of the NHS number as a data item in the Pathways dataset will enable data to be linked with outcome datasets. Analysis of the integrated datasets will provide detailed information about the accuracy of the clinical triage and patients' compliance.
- This information will be used to inform a new intelligent Clinical Decision Support System (CDSS) which is being delivered as part of the overall improvement of Urgent & Emergency Care Services.
- The retrospective collection from Q4 2016 was included in the legal direction to provide insight and learning from the busiest period of the 2016/17, widely regarded as the winter crisis period, that will be used to make improvements to the NHS Pathways content that supplies the 111 and urgent care system before the onset of the winter period 2017/18.
- Once the linked datasets are collected as part of a business as usual process, NHS Digital would release aggregated findings as a regular statistical publication.

## Benefits of the collection

- The collection of the NHS number will help facilitate a responsive system that can utilise data and technology for continuous triage improvement, delivering updates into the live environment in the shortest time possible. This will enable service efficiency and productivity gains across all urgent and emergency care services.
- The clinical safety of the NHS 111 service will be further enhanced by identifying and modifying the parts of the system that are most likely to lead to under-triage.
- Aggregate data will be shared in a timely manner with commissioners and providers to help them improve the service and provide a better quality of service to patients.
-

## Legal basis for the collection, analysis, publication and dissemination

NHS Digital has been directed by NHS England under section 254 of the Health and Social Care Act 2012; to establish and operate a system for the collection and analysis of the information specified for this service. A copy of the direction is available [here](#)

This information is required by NHS Digital under section 259(1) of the Health and Social Care Act 2012.

In line with section 259(5) of the Act, all NHS 111 and 999 service providers in England must comply with the requirement and provide information to NHS Digital in the form, manner and period specified in this Data Provision Notice.

This Notice is issued in accordance with the procedure published as part of NHS Digital duty under section 259(8).

Additional information can be found the Appendix B: Privacy Notice

## Persons consulted

Following receipt of a direction to establish a system to collect Data Provision Notice (NHS Digital), NHS Digital has, as required under section 258 of the Health and Social Care Act 2012, consulted with the following persons:

- (a) NHS England strategic, operational and clinical leads
- (b) Internal stakeholders: Pathways Development Team, Information Governance teams, Technical Architects, Information Security, Data Collections Data Access Request Service, Data Management, HES and General Practices Extract System (GPES) teams.
- (c) Representatives of 111 Providers
- (d) Representatives from North of England Commissioning Support who have experience of linking NHS 111 service data and outcome data at a local level.
- (e) The Standardisation Committee for Care Information (SCCI), which included representatives from the UK Data Standards Panel, TechUK and NHS Digital

## Scope of the collection

Under section 259(1) of the Health and Social Care Act 2012, this Notice is served in accordance with the procedure published as part of the NHS Digital duty under section 259(8) on the following persons:

**All NHS 111 and 999 Service Providers using Pathways system**

Under section 259(5) of the Health and Social Care Act 2012 the organisation types specified in the above Scope must comply with the Form, Manner and Period requirements below:

## Form of the collection

NHS 111/999 service providers will only be required to submit one additional data item into IDT as part of their NHS Pathways submission – the NHS number (if obtained). This data item is already collected by the providers for the majority of calls; therefore, the process for data collection remains unchanged.

For the IDT automated data submission, the NHS number field can be provided in a ten-digit format without hyphens or with hyphens in the format of xxx-xxx-xxxx.

The retrospective data collection for the period from 1 October 2016 to 18 June 2017 will be an extract that includes only two fields: NHS Number and the local system call ID. If the local system uses two local ID's, please submit the shorter numeric or alpha-numeric one rather than the long alpha-numeric unique ID.

## Manner of the collection

NHS Number information, which is already collected by 111 and 999 providers, will be added to the existing Pathways collection. Small technical changes will be implemented by the suppliers of the respective systems, who will add an additional field for collecting and sending NHS Number information to NHS Digital. The NHS Digital team will also make changes to the IDT to receive the information. This process is fully automated and will not require any additional input from providers.

For the retrospective data collection, as described above, a one-off extract per provider (or supplier) is required to complete the dataset for the collection period. The extract should be in standard comma-separated-value (CSV) format and consist of two columns. The first column should be the suppliers own human-readable Call ID. The more complex 30+ character supplier Call ID's should not be used in this column. The second column should be the patient's NHS Number (if known). As long as the Call ID does not repeat within the timeframe, then one full extract would be preferable, but it would be understood if there was a need to break the extract up into smaller files to ensure Call ID does not repeat. Closing date for this extract is specified in the "Period of Collection" section.

## Period of the collection

- Collection start date: 19 June 2017
- First submission date: N/A – the first data extract will be conducted by the NHS Digital staff from Pathways IDT tool. This initial extract will be used for testing purposes and will be based on data from the 19<sup>th</sup> - 29<sup>th</sup> June 2017.
- Subsequent submission dates: The data will be collected on the NHS Digital IDT server. All data will be subsequently collected via an established automated process.

- Providers will be required to submit an extract of the retrospective data from the start of 1 October 2016 to the end of 18 June 2017, as per NHS England Directions by **31<sup>st</sup> July 2017**
- Publication dates: the findings will be shared with the stakeholders following the completion of the analysis for each respective integrated dataset. A&E/Pathways linked dataset analysis is currently due for completion in September 2017. Further dates of publication will depend on the availability of the clinical outcome data from other services. Current high level plan is attached in the appendix.
- Collection end date: The need for further collection will be assessed in June 2020.

## Data Quality

There are several stages of data validation and verification conducted by NHS Digital. The data that comes into the IDT web service has to initially pass a basic level of validation on core components of the data, such as some mandatory fields as well as basic logic checking. For example, a call end time value cannot be earlier than a call start time value. If the validation fails, the supplier is sent a rejection reason.

The second stage of validation comes from a large suite of tests that run automatically on new data every hour on the NHS Pathways database servers. Failed data is marked with a rejection reason.

Verification happens at different points, such as when the NHS Pathways Training Facilitators visit the site and compare call records against IDT call volume.

To pass the data validation and verification stages, the NHS number field must be submitted in the form specified on page 5 (“Form of the collection”).

## Burden of the collection

### Steps taken by NHS Digital to minimise the burden of collection

In discharging its statutory duty to seek to minimise the burden it imposes on others, NHS Digital has taken the following steps:

- Suggested the use of the existing automated process with the addition of one extra field (NHS Number) to the message being sent to IDT. Providers already collect NHS Number in their current system, so no additional effort will be required from them in relation to the ongoing real-time data collection.
- To complete the dataset for the collection period specified by the Direction, NHS Digital requires a retrospective extract of data. To keep the burden on providers as low as possible, NHS Digital are asking for a standard comma-separated-value (CSV) extract with two simple columns of data for the stated time period. To streamline the process even further, NHS Digital are will work directly with suppliers, if individual providers approve.

In seeking to minimise the burden it imposes on others, in line with sections 253 (2a) and 265(3) of the Health and Social Care Act 2012, NHS Digital has an assessment process to validate and challenge the level of burden incurred through introducing new information standards, collections and extractions.

This assessment is carried out by the Burden Advice and Assessment Service (BAAS), which carries out a Detailed Burden Assessment (DBA) and reports findings and recommendations, as part of the overarching SCCI process. The Committee oversees the development, assurance and acceptance of information standards, data collections and data extractions for the health and social care system in England.

## Detailed burden assessment findings

Recommendation to the collection owner (NHS England):

Integrate the duplicate collection that has been identified in one workflow within six months.

## Assessed costs

The associated burden of the data collection is:

Burden on providers	£0.00	This process is automated, so no action is required from providers.
Set up costs for the data collection	£0.00	NHS Digital Resource costs are absorbed within the CTP budget and suppliers confirmed that as the change is minimal no charge will be applied
Other costs of the data collection	N/A	

## Help us to identify inappropriate collections

NHS Digital's Burden Advice and Assessment Service (BAAS) offers a Collection Referral Service, which is a simple and confidential way to allow data providers to refer data collections they feel would benefit from further scrutiny.

For more details and information on how to refer a collection, please visit:  
<http://www.digital.nhs.uk/article/6183/Collection-Referral-Service>

More about the Burden Advice and Assessment Service can be found at:  
<http://digital.nhs.uk/baas>

## Appendix A – Intelligent Data Tool Specification



IDT Dataset  
Specification\_v1.5.dc

## Appendix B – Fair Processing/Privacy Notice



NHS Pathways  
Privacy Notice 15061.

**For further information**

**[www.digital.nhs.uk](http://www.digital.nhs.uk)**

**0300 303 5678**

Under the Open Government Licence you are encouraged to use and re-use the publicly accessible information in this notice free of charge. Re-use includes copying, issuing copies to the public, publishing, broadcasting and translating into other languages and its subsequent use in commercial or non-commercial enterprise.